

## ADMINISTRATIVE RULES Fiscal Estimate & Economic Impact Analysis

1. Type of Estimate and Analysis <input checked="" type="checkbox"/> Original <input type="checkbox"/> Updated <input type="checkbox"/> Corrected	2. Date 1/19/2018
3. Administrative Rule Chapter, Title and Number (and Clearinghouse Number if applicable) DHS 140, Required Services of Local Health Departments	
4. Subject Required Services of Local Health Departments	
5. Fund Sources Affected <input type="checkbox"/> GPR <input type="checkbox"/> FED <input type="checkbox"/> PRO <input type="checkbox"/> PRS <input type="checkbox"/> SEG <input type="checkbox"/> SEG-S	6. Chapter 20, Stats. Appropriations Affected N/A
7. Fiscal Effect of Implementing the Rule <input checked="" type="checkbox"/> No Fiscal Effect <input type="checkbox"/> Increase Existing Revenues <input type="checkbox"/> Increase Costs <input type="checkbox"/> Decrease Costs <input type="checkbox"/> Indeterminate <input type="checkbox"/> Decrease Existing Revenues <input type="checkbox"/> Could Absorb Within Agency's Budget	
8. The Rule Will Impact the Following (Check All That Apply) <input type="checkbox"/> State's Economy <input type="checkbox"/> Specific Businesses/Sectors <input checked="" type="checkbox"/> Local Government Units <input type="checkbox"/> Public Utility Rate Payers <input type="checkbox"/> Small Businesses (if checked, complete Attachment A)	
9. Estimate of Implementation and Compliance to Businesses, Local Governmental Units and Individuals, per s. 227.137(3)(b)(1). \$0	
10. Would Implementation and Compliance Costs Businesses, Local Governmental Units and Individuals Be \$10 Million or more Over Any 2-year Period, per s. 227.137(3)(b)(2)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
11. Policy Problem Addressed by the Rule Chapter DHS 140 specifies the required services of Levels I, II, and III local health departments. Additional required services for Level II and Level III local health departments are contained in s. 251.20, Stats. As of January 2018, there were two Level I, 49 Level II and 35 Level III local health department designations in Wisconsin. The levels determine the allocation of certain funds from the Department, with higher-level local health departments receiving proportionately more funding to compensate for additional services provided.  Chapter DHS 140 has not been updated since the rule was created in 1998. As the public health field and related Wisconsin statutes have evolved, the rule has become outdated. The Department proposes revisions to clarify the rule, align it with current statute, remove duplications, and reflect current public health trends and practices. The objective of the proposed rulemaking is to revise and clarify the required services of Levels I, II, and III local health departments, addressing outdated rule provisions and redundancy.  Under the current rule, required services include surveillance, investigation, control and prevention of communicable disease, other disease prevention, health promotion, and human health hazard and control. The field and science of public health have evolved, which has led to local health departments modifying services presently provided within their jurisdictions. The proposed changes in required services are based on the Foundational Public Health Services Model, nationally recognized for modernizing public health practice to include: assessment, hazard preparedness and response, communications, policy development and support, community partnership development, organizational competencies, communicable disease control, chronic disease and injury prevention, environmental public health, maternal child and family health and access and linkage with clinical healthcare. This lays a solid foundation of the minimum level of services for local health departments to protect and promote the health and safety of the people of Wisconsin.  In addition to modernizing required services for local health departments, the proposed language aligns the rule with current Wisconsin statute. The food safety and recreational licensing program was transferred from the Department of	

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Health Services to the Department of Agriculture, Trade, and Consumer Protection. This transfer necessitated the removal of the Level III food safety and recreational licensing requirement from Chapter DHS 140.

The department also proposes to incorporate updated references, including the most recent public health agenda. Chapter DHS 140 includes numerous citations to a previous version of the state public health agenda, which are now outdated. It also incorporates concepts that align with national voluntary public health accreditation requirements.

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12. Summary of the Businesses, Business Sectors, Associations Representing Business, Local Governmental Units, and Individuals that may be Affected by the Proposed Rule that were Contacted for Comments.

The department formed an advisory committee to obtain the viewpoint and recommendations of interested agencies with respect to the contemplated rule making. Advisory Committee members were representatives of the Wisconsin Counties Association and ten local health departments of different levels, from rural, suburban, and urban areas throughout Wisconsin. The following local health departments were represented on the Committee: Adams County, Cudahy, Eau Claire City-County, Madison Dane County, Marinette County, Vilas County, Winnebago County, Wood County, West Allis, and City of Milwaukee Health Department. All Advisory Committee meetings were held as open meetings.

The department also published a solicitation in the Administrative Register, requesting information and advice from businesses, associations representing businesses, local governmental units, and individuals who may be affected by the proposed rules. All comments received by the department, were used to analyze and determine the economic impact that the rules would have on businesses, individuals, public utility rate payers, local governmental units, and the state's economy as a whole. The department also requested and received specific input from local health departments throughout rule drafting, leading to further revisions to the rule.

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13. Identify the Local Governmental Units that Participated in the Development of this EIA.  
See 12., above.

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14. Summary of Rule's Economic and Fiscal Impact on Specific Businesses, Business Sectors, Public Utility Rate Payers, Local Governmental Units and the State's Economy as a Whole (Include Implementation and Compliance Costs Expected to be Incurred)

There are no implementation costs associated with the rule promulgation. Revisions to chapter DHS 140 are expected to have no net fiscal or economic impact on the public health system in Wisconsin and on the Department. As local health departments change levels in response to the proposed designations, total funding provided from the state will remain constant, but reallocated proportionally among Level I, II, and III departments.

The Advisory Committee, comprised of Local Health Officers, discussed the impact the proposed rule would have local health departments changing levels and thought that it would be minimal. Level I minimum services in proposed rule are either statute or current rule requirements or are services that local health departments in Wisconsin are already providing in their communities. The proposed rule does not burden Level I local health departments with additional requirements. The proposed rule incorporates language about voluntary public health accreditation but does not mandate it. Success in implementing proposed chapter DHS 140 is not dependent on or related to a local health department being accredited. Any costs associated with accreditation are, therefore, a decision of the local health department and their governing board and not attributable to the proposed rule.

In addition to modernizing required services for local health departments, the proposed language seeks to align the rule with current Wisconsin statute. The food safety and recreational licensing program was transferred from the Department of Health Services to the Department of Agriculture Trade and Consumer Protection. This transfer necessitated the removal of the Level III food safety and recreational licensing requirement from chapter DHS 140. With this program change, health departments who meet Level III qualifications, per statute, may continue to provide services for a Level III health department and health departments who previously did not meet Level III requirements are now eligible. Therefore, there could be a slight increase in the number of local health departments providing Level III services but the

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net impact on the public health system as a whole would be minimal.

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### 15. Benefits of Implementing the Rule and Alternative(s) to Implementing the Rule

There are no reasonable alternatives to the rulemaking. The department is required under s. 251.20, Stats., to establish required services of local health departments. Without proposed revisions to chapter DHS 140, the rule would remain outdated.

The proposed rule is expected to simplify the 140 local health department review process and increase efficiency by removing redundancies and clarifying requirements in the rule. Reduction in review workload is likely for both the Department and local health departments. The proposed changes to the administrative rule are expected to reduce time burden during the review process resulting in less time and resources spent during this process.

Local health departments applying for accreditation may find their 140 review process easier to navigate and less time-consuming. Accredited local health departments or those undergoing accreditation are still subject to the chapter DHS 140 review process; however, they may already have a lot of required materials ready and requirements met. This decreases duplicative efforts for the local and state health departments. The inclusion of voluntary public health accreditation within the rule demonstrates support and recognition of local health departments achieving national standards.

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### 16. Long Range Implications of Implementing the Rule

Proposed changes to the rule will lead to better functioning, more skilled and effective health departments across the state of Wisconsin. Consequently, the rule will benefit Wisconsin residents by ensuring the provision of appropriate and improved public health services.

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### 17. Compare With Approaches Being Used by Federal Government

There are no known federal approaches that address the activities to be regulated by the proposed rules.

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### 18. Compare With Approaches Being Used by Neighboring States (Illinois, Iowa, Michigan and Minnesota)

Level of services designation for local health departments, as mandated by Chapter 251, is unique to Wisconsin. DPH staff corresponded with the Public Health Law Network regarding a leveling system for local health departments. The Public Health Law Network was unaware of any other state which levels local health departments.

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<h3>19. Contact Name</h3> <p>Melanie Johnson Director, Office of Policy and Practice Alignment Division of Public Health Wisconsin Department of Health Services</p>	<h3>20. Contact Phone Number</h3> <p>608-266-1348</p>
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**ATTACHMENT A**

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1. Summary of Rule's Economic and Fiscal Impact on Small Businesses (Separately for each Small Business Sector, Include Implementation and Compliance Costs Expected to be Incurred)

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2. Summary of the data sources used to measure the Rule's impact on Small Businesses

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3. Did the agency consider the following methods to reduce the impact of the Rule on Small Businesses?

- Less Stringent Compliance or Reporting Requirements
- Less Stringent Schedules or Deadlines for Compliance or Reporting
- Consolidation or Simplification of Reporting Requirements
- Establishment of performance standards in lieu of Design or Operational Standards
- Exemption of Small Businesses from some or all requirements
- Other, describe:

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4. Describe the methods incorporated into the Rule that will reduce its impact on Small Businesses

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5. Describe the Rule's Enforcement Provisions

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6. Did the Agency prepare a Cost Benefit Analysis (if Yes, attach to form)

- Yes    No
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