

## NOTICE OF PUBLIC HEARING

Chapter DHS 10  
Clearinghouse Rule Number 21-081

NOTICE IS HEREBY GIVEN that the Department of Health Services (“the Department”) will hold a public hearing on a permanent rule to consider amendments to ch. DHS 10, relating to adult long-term care requirements.

### HEARING INFORMATION

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#### Date and Time

December 9, 2021  
10:00 AM to 11:00 AM

#### Location

Join from a PC, Mac, iPad, iPhone or Android device:  
Please click this URL to join.  
<https://dhs.wi.zoomgov.com/join/1604263901?pwd=a2swK3BMQWc3L3N2bkpiWm9uUzdDdz09>  
Passcode: 158286  
Or join by phone: Dial (for higher quality, dial a number based on your current location):  
US: +1 669 254 5252 or +1 646 828 7666 or +1 669 216 1590 or +1 551 285 1373  
Webinar ID: 160 426 3901

### ANALYSIS AND TEXT OF THE RULE

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Analysis of the rule and the proposed rule text may be accessed at:  
[https://docs.legis.wisconsin.gov/code/misc/chr/lc\\_ruletext/cr\\_21\\_081\\_rule\\_text\\_filed\\_with\\_lc\\_clearinghouse.pdf](https://docs.legis.wisconsin.gov/code/misc/chr/lc_ruletext/cr_21_081_rule_text_filed_with_lc_clearinghouse.pdf)

PLEASE NOTE: The proposed rule text may also be obtained by accessing:

Active Rulemaking Projects: <https://www.dhs.wisconsin.gov/rules/active-rulemaking-projects.htm>

### ACCESSIBILITY

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#### English

The Department of Health Services is an equal opportunity employer and service provider. If you need accommodations because of a disability or need an interpreter or translator, or if you need this material in another language or in an alternate format, you may request assistance to participate by contacting Mark Thompson at 1-608-266-1279. You must make your request at least 7 days before the activity.

#### Spanish

The Department of Health Services es una agencia que ofrece igualdad en las oportunidades de empleo y servicios. Si necesita algún tipo de acomodaciones debido a incapacidad o si necesita un interprete, traductor o esta información en su propio idioma o en un formato alterno, usted puede pedir asistencia para participar en los programas comunicándose con Mark Thompson al número 1-608-266-1279. Debe someter su petición por lo menos 7 días de antes de la actividad.

#### Hmong

The Department of Health Services yog ib tus tswv hauj lwm thiab yog ib qhov chaw pab cuam uas muab vaj huam sib luag rau sawv daws. Yog koj xav tau kev pab vim muaj mob xiam oob qhab los yog xav tau ib tus neeg pab txhais lus los yog txhais ntaub ntawv, los yog koj xav tau cov ntaub ntawv no ua lwm hom lus los yog lwm hom ntawv, koj yuav tau thov kev pab uas yog hu rau Mark Thompson ntawm 1-608-266-1279. Koj yuav tsum thov qhov kev pab yam tsawg kawg 7 hnub ua ntej qhov hauj lwm ntawd.

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**FISCAL ESTIMATE-ECONOMIC IMPACT ANALYSIS**

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The fiscal estimate and economic impact analysis for the rule is available at:

[https://docs.legis.wisconsin.gov/code/misc/chr/lc\\_ruletext/cr\\_21\\_081\\_fiscal\\_estimate\\_and\\_economic\\_impact\\_analysis.pdf](https://docs.legis.wisconsin.gov/code/misc/chr/lc_ruletext/cr_21_081_fiscal_estimate_and_economic_impact_analysis.pdf)

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**PUBLIC COMMENTS AND DEADLINE FOR SUBMISSION**

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Comments may be provide at the hearing, or submitted to the Department until the end of business December 9, 2021 by:

1. Accessing the Department's Administrative Rules website:

Active Rulemaking Projects: <https://www.dhs.wisconsin.gov/rules/active-rulemaking-projects.htm>

2. Submitting a comment through the Wisconsin State Legislature's website:

[https://docs.legis.wisconsin.gov/code/chr/all/cr\\_21\\_081](https://docs.legis.wisconsin.gov/code/chr/all/cr_21_081).

3. Mailing written comments to:

Mark Thompson

Office of Legal Counsel

P.O. Box 7850

Madison, WI 53707-7850

[Mark.Thompson@dhs.wisconsin.gov](mailto:Mark.Thompson@dhs.wisconsin.gov)

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**INITIAL REGULATORY FLEXIBILITY ANALYSIS**

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The proposed rule will not have an effect on small businesses, as defined under s. 227.114 (1), Stats.

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**SMALL BUSINESS REGULATORY REVIEW COORDINATOR**

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Jackson Keuler

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P.O. Box 7850

Madison, WI 53707-7850

1-608-266-0387

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**AGENCY CONTACT PERSON**

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