Public Comments received for
SPA 25-0023 - Paid Supervisory Visits Nursing Agencies

Comments have been incorporated into an accessible format in order to comply with the U.S. Department of Justice rule requiring state websites to meet the World Wide Web Consortium's Web Content Accessibility Guidelines (WCAG) 2.1 Level AA (28 CFR Part 35). The comments have been copied, and the content remains unaltered.

Public Comment #1

Received via email from:

Lindsey Howard
Regional Director of Government Affairs Maxim Healthcare

01/29/2026

Electronically submitted to HFS.BPPC@illinois.gov

Bureau of Program and Policy Coordination
Division of Medical Programs
Healthcare and Family Services
201 South Grand Avenue East
Springfield, IL 62763-0001

RE: Adding coverage of a billing code for supervisory visits made by registered nurses working for home nursing agencies

Maxim Healthcare Services ("Maxim") is a national provider of home healthcare, homecare, and additional in-home service options. We provide care throughout Illinois via five offices and employ nurses primarily offering private duty nursing (PDN) services. PDN is continuous skilled nursing care provided in the home for medically-complex and vulnerable pediatric and adult patient populations under Medicaid, many of whom require assistive technology such as ventilators and a tracheostomy tube to sustain life.

Maxim's nurses specifically care for medically fragile individuals — including children with complex chronic conditions (CCC), along with adult patients who require similar services. These individuals require skilled nursing services performed in the home by a registered nurse (RN) or licensed practical nurse (LPN) under the supervision of an RN between 4 to 24 hours per day every day, in order to manage their chronic condition safely in their homes and communities. Our goal is to keep these individuals in the setting that promotes their highest quality of life and that allows them to remain engaged in their respective communities.

We appreciate efforts made by the Illinois Department of Healthcare and Family Services (HFS) to support increased availability of high-quality Home- and Community-Based Services (HCBS) and commend HFS as well as the state legislature for their continuous support of PDN families and providers. We appreciate the partnership we have established over the years as well as the opportunity to provide comment on enhancing home nursing rates specifically for paid supervisory visits made by a registered nurse. As you consider reimbursement options to help improve the health and welfare of the individuals receiving care under home nursing, Maxim respectfully offers comments in regard to the proposed provisions outlined by HFS.

Maxim commends HFS's continuous support of private duty nursing and the additional resources given to PDN providers, including rate increases for the program. The proposed paid supervisory visits will continue to improve Maxim's ability to provide care to the medically fragile community in their home. We believe that these supervisory nursing rates should include travel time, as most of our clients live in rural areas. In addition, we want to ensure our families' monthly allocations are not impacted and request that families also receive increases so that service hours are not impacted by this change.

The incremental rate increases in the past years have been beneficial to recruiting and retaining nurses to ensure the continuity of these essential services. Maxim has seen an increase in year-over-year growth in weekly hours billed. While these incremental rate increases have made a difference, there is

still a dire need for more support. PDN reimbursement rates in Illinois are still behind surrounding states making it difficult to ensure medically fragile persons in Illinois receive the essential level of attention and care they need. We urge HFS to continue to review the current rates and explore opportunities to provide further increases to ensure the medically fragile community in Illinois receives the essential levels of care they require.

We appreciate the opportunity to comment on the proposed regulations. Thank you for your support of home health care and PDN services in Illinois, and we hope that the department will consider our comments to strengthen the services that Maxim provides. We look forward to continuing our work with you to promote a better lifestyle for children and adults with medically complex healthcare needs.

Lindsey Howard
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Public Comment #2
Received via email from:
Beth Albert
Director of Grassroots Advocacy & Government Affairs
Family First Homecare

FAMILY FIRST HOMECARE
www.myfamilyfirsthc.com

Provider of Pediatric Private Duty Nursing services in Florida, Illinois, Iowa, North Carolina, Pennsylvania, South Dakota & Texas.

Beth Albert | Family First Homecare
2203 N. Lois Ave., Suite 700, Tampa, FL 33607 10 Glen Ed Professional Park, Glen Carbon, IL 62034

January 14, 2026

Bureau of Program and Policy Coordination | Division of Medical Programs | Healthcare and Family Services
201 South Grand Avenue East, Springfield, IL 62763-0001

RE: Proposed Changes In Methods And Standards For Establishing Medical Assistance Payment Rates

My name is Beth Albert, and I represent Family First Homecare, a home nursing agency that provides nursing services to pediatric patients throughout all of Central & Southern Illinois. I am writing to strongly urge support for the proposed changes for addition of a billing code for supervisory visits made by registered nurses working for home nursing agencies.

The current Illinois reimbursement rates for nursing services provided by RNs and LPNs are considerably lower than neighboring states as well as many other states across the country. The established reimbursement rates must not only fund the agency's basic payroll expenses for the nurse to provide care but also cover many other operational expenses that are crucial to safe provision of services. These operational expenses include things such as but not limited to: employee benefits including Illinois State mandated Paid Time Of (PTO) hours, nurse training and education on specialized equipment and procedures to care for medically fragile and technology dependent children in the home setting, time and mileage for all RN Supervisors to make visits to the patient's home for required supervisory visits, technology needs (tablets, charging accessories, data plans & monthly software fees) for each patient home in order to comply with mandated Electronic Visit Verification (EVV) requirements, nursing Personal Protective Equipment (PPE) such as gloves, hand sanitizer, face masks, etc., as well as a fraction of all internal ofice expenses (rent, utilities, etc.).

Approving legislation to allow home nursing agencies to be reimbursed for the mandated supervisory visits that vary in frequency from every 14 days for CNA supervision to every 60 days for RN/LPN supervision would help us to reallocate more of the total reimbursement dollars to direct care workers so that we can recruit and retain more nursing staf through better base pay rates as well as cost of living and merit increases.

Beth Albert
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