



# HHA Survey Trends Report

April 2025

*A LeadingAge Iowa Publication to help Home Health Agencies track deficiency data from the Iowa Department of Inspections, Appeals and Licensing and utilize the information for performance improvement.*

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# April Home Health Agency Survey Report

by Kellie Van Ree, Director of Clinical Services

Based on member request, LeadingAge Iowa is pleased to offer a new Home Health Agency (HHA) Survey Trends Report, in cooperation with the Department of Inspections, Appeals, & Licensing (DIAL) as they provide monthly reports to LAI on HHA survey activity.

According to the DIAL [Health Care Facilities Database](#) there are 133 Medicare and Medicaid certified HHAs in the state. [CMS expects](#) that HHA will receive recertification surveys at least every 36 months. These may be completed by an accreditation agency or the state survey agency.

Of the 133 HHAs identified on the DIAL website, 44 are currently accredited and 89 are surveyed by the state survey agency. There are 8 HHAs as of April that exceed this time frame. DIAL previously indicated that they were up to date with their HHA workload and would be working on HHA recertification for select providers within 24.9 months. I've reached out to DIAL to inquire about the 8 providers that exceed the 36 months.

During the month of April, only 2 compliant investigations were completed for HHA providers resulting in one deficiency for one provider. This deficiency was not a condition level deficiency.

Additionally, the [CMS QCOR](#) website which hosts a list of reports by provider type does not have current information on survey activity (last updated in 2021).



## Deficiencies Cited in April

**G0598** During an interview, patient #3 reported they were being discharged from the agency at the end of April due to the agency being unable to meet their needs. However, the patient had not received a discharge date or any assistance in securing another agency's services as of April 7. (This patient had been a long-term patient with the agency.) During record review, the agency documented in the SN visit notes that the patient expressed frustration due to not having communication with the SW on the visit. The SW notes included a missed visit and then notes indicating that a visit is not necessary because the patient's discharge needs have been met. Staff indicated that they identified a different HHA that would be assuming care, but this was not documented in the patient's notes.