HOME HEALTH POCKET GUIDE TO OASIS-C1

A REFERENCE FOR FIELD STAFF



MELINDA A. GABOURY, COS-C

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Home Health Pocket Guide to OASIS-C1: A Reference for Field Staff is published by HCPro, a division of BLR.

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ISBN: 978-1-55645-474-5

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SECTION 1

OASIS Overview: Introduction to OASIS-C1

What Is OASIS-C1?

The Outcome and Assessment Information Set (OASIS) is a set of data items that were originally developed for monitoring outcomes. Beginning October 1, 2000, the OASIS data set became a key factor in determining reimbursement for a home health episode under the Medicare prospective payment system (PPS). The data set was updated to OASIS-C effective January 1, 2010, and was updated yet again to OASIS-C1 effective January 1, 2015. Further revisions, for implementation of ICD-10-CM, are set to be effective October 1, 2015, or when ICD-10-CM is fully implemented. The OASIS-C1 data set is not a complete, comprehensive assessment instrument, but it must be fully integrated into the agency's comprehensive assessment forms (discussed further in Section 2 of this guide).

Outcomes derived from OASIS-C1 data are defined as measuring changes in a patient's health status between points in time. An example of OASIS-based outcomes would be comparing a patient's dyspneic state at the point of admission to home health to the patient's dyspneic state at the point of discharge from home health. OASIS-based outcomes are the foundation for an Outcome-Based Quality Improvement system (discussed further in Section 4 of this guide).

Home health Medicare PPS reimbursement is based on the calculation of one of 153 Home Health Resource Groups (HHRG), which are the result of the responses to 21 key questions from

OASIS-C1. Numerous types of adjustments can cause the reimbursement to be less or more than the HHRG calculation, but the foundation is the HHRG (discussed further in Section 3 of this guide). The HHRG is converted to a HIPPS (Health Insurance Prospective Payment System) code that is reflected on the claim for payment.

Why OASIS?

OASIS was chosen to be the basis for home health outcomes and reimbursement following a five-year national research program. The OASIS data set was also tested in two demonstration projects nationally with 50 agencies and with 22 agencies in New York state. Nearly 200 agencies across the country tested and contributed to the refinement of the data, which began with the original report from The Research Center at the University of Colorado in 1994 and has been reviewed, revised, and expanded as a result of recommendations by the Centers for Medicare & Medicaid Services (CMS) and the outcomes of the demonstration projects.

Who Collects OASIS-C1 Data?

The clinician who performs the visit collects the OASIS data. He or she can be an RN, a registered physical therapist, or a speechlanguage pathologist. These clinicians can complete any type of OASIS assessment. A registered occupational therapist (OT) can collect the data for any assessment type except the start-of-care

assessment, which requires performing care in the home when OT is referred. This OT restriction is for patients with Medicare as the payer. Licensed practical/vocational nurses, therapy assistants, social workers, and home health aides are all prohibited from completing the OASIS documents.

On Whom Are OASIS-C1 Data Collected?

OASIS-C1 data are collected on any patient who is receiving skilled care from a Medicare-certified home health agency and whose payer for the services is Medicare Traditional, Medicare Advantage Managed Care Plan, or a Skilled Medicaid program. Effective December 2003, if the patient's services payment will be made by a non-Medicare payer, the OASIS (C1) data collection is not required. If the patient has a non-Medicare Primary Payer and the patient is also covered by Medicare Secondary Benefits, OASIS-C1 data must be collected. The OASIS-C1 data are collected only on adult nonmaternity patients who are 18 years of age and older. Patients who are receiving personal care, homemaker, or chore services only are excluded from the OASIS-C1 data collection requirements.

When Are OASIS-C1 Data Collected?

OASIS-C1 data collection is required at different intervals throughout the patient's care. Depending on the type of assessment, data collection takes place during different time frames, as shown in Table 1.1.

Table 1.1

Assessment time frames

Type of assessment	When to complete	Time frame to complete	Reason for assessment (RFA)
Start of care (SOC)	Admission of patient	Initiated within 48 hours of referral and completed within five days of the SOC date (M0030)	1
Resumption of care	Following inpatient stay of 24 hours or more, for care other than diagnostic tests	Within 48 hours of patient's return home from inpatient facility	3
Recertification— follow-up	Every 60 days— when patient is continuing care	Within the past five days of the current episode (days 56–60)	4
Other follow-up	Any time a patient experiences a change in condition as defined in agency policy	Within 48 hours of the change in condition	5

Table 1.1

Assessment time frames (cont'd.)

Type of assessment	When to complete	Time frame to complete	Reason for assessment (RFA)
Transfer to inpatient facility— not discharged from agency	Following a transfer to an inpatient facility and placing patient on hold for home health	Within 48 hours of transfer date (M0906)	6
Transfer to inpatient facility— discharged from agency	Following a transfer to inpatient facility, and patient is discharged from home health	Within 48 hours of transfer date (M0906)	7
Death at home	Following patient's death at home	Within 48 hours of the death date (M0906)	8
Discharged from agency— not to an inpatient facility	Following patient's discharge from home health	Within 48 hours of the discharge date (M0906)	9

How Are OASIS-C1 Data Collected?

OASIS-C1 data are to be collected in the patient's home as a combination of interaction/interviews with the patient/caregivers, observation, and measurement.

Observation through sight, sound, smell, and touch will allow additional data collection. Measurement of those data is also necessary, when warranted. Examples include:

- Height
- Weight
- Joint range of motion

Observing the patient is imperative when addressing certain parts of the assessment, such as functional status. Asking a patient to ambulate to the kitchen to measure his or her ability to ambulate independently, and for what distance, would be an example of combining observation and measurement. Be very clear that interview/interaction should supplement observation/ measurement, not replace it.

Where Are OASIS-C1 Data Collected?

OASIS data are collected in the place where the patient is receiving care (including the home). The OASIS-C1 documents should not be an afterthought. Interaction, interview, observation, and measurement should all be part of the process. It is extremely

important that the data are collected during the visits and are therefore a true reflection of the patient's health status.

What's New in OASIS-C1?

The OASIS-C1 represents one of the most comprehensive revisions to OASIS since its original release. A summary of the types of revisions made to OASIS is provided below in Table 1.2. An "X" in a column indicates that a change has been made to the OASIS-C1/ICD-9 Data Set and/or the OASIS-C1/ICD-9 Guidance Manual.

Table 1.2

OASIS-C1 Revisions

ce Manual	Data	Sources/	Resources																							
OASIS-C1/ICD-9 Guidance Manual	Response-	Specific	Instructions		×		×		×	×	×		×		×		×			×	×	×	×			×
:-C1/IC	Time	Points																								
OASIS	ltem	Intent						×			×									×	×					×
	Skip	Pattern	Change																	×						
ata Set	ltem	Wording	Change										×													×
/ICD-9 D	New	ltem	Number																							
OASIS-C1/ICD-9 Data Set	New or	Deleted	ltem																							
	OASIS-C1/	ICD-9 Item	Number	MM0010	MM0014	M0016	M0018	M0020	M0030	M0032	M0040	M0050	0900W	M0063	M0064	M0065	M0066	M0069	M0080	M0090	M0100	M0102	M0104	M0110	M0140	M0150
	OASIS-C	ltem	Number	MM0010	MM0014	MM0016	MM0018	M0020	M0030	M0032	M0040	M0050	0900W	M0063	M0064	M0065	M0066	M0069	M0080	0600M	M0100	M0102	M0104	M0110	M0140	M0150

Table 1.2

OASIS-C1 Revisions (cont'd.)

		OASIS-C1	OASIS-C1/ICD-9 Data Set	ata Set		OASIS	:-C1/IC	OASIS-C1/ICD-9 Guidance Manua	ce Manual
OASIS-C	OASIS-C1/	New or	New	ltem	Skip	ltem	Time	Response-	Data
ltem	ICD-9 Item	Deleted	ltem	Wording	Pattern	Intent	Points		Sources/
Number	Number	ltem	Number	Change	Change			Instructions	Resources
0903	0903							×	
9060	0906							Х	
1000	1000			×	×	×		×	
1005	1005							Х	
M1010	M1010								
M1012	M1012	DELETED							
M1016	M1016								
M1018	M1018					×		×	
M1020	M1020					×		×	
M1022	M1022					×		×	
M1024	M1024					×		Х	
M1030	M1030							×	
M1032	M1032		×	Х		×		Х	
M1034	M1034								
M1036	M1036							Х	
M1040	M1041		×	Х	×	×		Х	×
M1045	M1046		×	Х		×		Х	×
M1050	M1051		×	Х		×		Х	
M1055	M1056		×	×		×		×	
M1100	M1100			Х				×	
M1200	M1200							Х	
M1210	M1210					×		×	×
M1220	M1220								×

Table 1.2

OASIS-C1 Revisions (cont'd.)

		OASIS-C1/ICD-9 Data Set	/ICD-9 D	ata Set		OASIS	-C1/IC	OASIS-C1/ICD-9 Guidance Manual	ce Manual
OASIS-C	OASIS-C1/	New or	New	ltem	Skip	ltem	Time	Response-	Data
ltem	ICD-9 Item	Deleted	ltem	Wording	Pattern	Intent	Points	Specific	Sources/
Number	Number	ltem	Number	Change	Change			Instructions	Resources
M1230	M1230			×				Х	×
M1240	M1240			×		×		Х	
M1242	M1242							×	×
M1 300	M1300			×		×		X	
M1 302	M1302					×		×	
M1 306	M1306			×		×		×	
M1 307	M1307			×		×		Х	
M1 308	M1308			×			×	×	
	M1309	NEW		×					
M1310		DELETED							
M1312		DELETED							
M1314		DELETED							
M1 320	M1320			×		×		×	×
M1 322	M1322					×		X	
M1 324	M1324			×		×		×	
M1 330	M1330			×		×		×	
M1 332	M1332			×				×	
M1 334	M1334			×				×	
M1 340	M1340			×	×	×		X	×
M1342	M1342			×				×	×
M1 350	M1350						Х	Х	
M1400	M1400			×					
M1410	M1410						×	×	

Table 1.2

OASIS-C1 Revisions (cont'd.)

OASIS-C OASIS-C1/ Item ICD-9 Item Number Number M1500 M1500 M1510 M1510 M1610 M1610 M1615 M1615 M1610 M1615 M1610 M1615 M1600 M1615	1/ New or	No.		clin				-+
<u> </u>		NDN-	ltem	220	ltem	ime	Response-	Lata
<u> </u>	em Deleted	ltem	Wording	Pattern	Intent	Points	Specific	Sources/
	Item	Number	Change	Change			Instructions	Resources
			×		×		×	×
			×	×			×	×
			×				×	
F					×		×	
							×	
M1700 M1700			×				×	
M1710 M1710							Х	×
M1720 M1720							×	
M1730 M1730			×		×		×	
M1740 M1740			×					
M1745 M1745								
M1750 M1750								
M1800 M1800			×		×		Х	
M1810 M1810					×		Х	
M1820 M1820					×		×	
M1830 M1830			×		×		Х	
M1840 M1840					×		×	
M1845 M1845					×		×	
M1850 M1850					×		×	
M1860 M1860			×		×		×	

Table 1.2

OASIS-C1 Revisions (cont'd.)

C C ASIS-C1/ New or Item New or Wording Rep Time Response- Iterutions ICD-91tem Number Item Wording Pattern Wording Pattern Inteructions M1870 ICD-91tem Number Number Farm Wording Pattern Number Number<			OASIS-C1	OASIS-C1/ICD-9 Data Set	ata Set		OASIS	-C1/IC	OASIS-C1/ICD-9 Guidance Manual	ce Manual
ICD-9 tem Deleted tem Wording Pattern Internt Points Specific M1800 tem Number Number Number X X X X M1800 tem X X X X X X M1800 X X X X X X X M1910 X X X X X X X M2000 X X X X X X X M2010 X X X X X X X X X <td< td=""><td>SIS-C</td><td>OASIS-C1/</td><td>New or</td><td></td><td>ltem</td><td>Skip</td><td>ltem</td><td>Time</td><td>Response-</td><td>Data</td></td<>	SIS-C	OASIS-C1/	New or		ltem	Skip	ltem	Time	Response-	Data
Immber Immber Immber Number Change Change Imstructions M1870 M1880 X X X X X M1880 X X X X X X M19100 X X X X X X M19100 X X X X X X M2010 X X X X X	F	ICD-9 Item	Deleted		Wording	Pattern		Points	Specific	Sources/
MI870 MI870 M X X X X M1880 X X X X X X M1880 X X X X X X M1910 X X X X X X M2010 X X X X X X M2001 X X X X X X M2001 X X X X X X M2010 X X X X X X M2011 X X X X X X M2010 X X X X X X	mber	Number	ltem	_	Change	Change			Instructions	Resources
M1800 M1810 X X X X M1890 X X X X X M1890 X X X X X M1910 X X X X X M2000 X X X X X M2001 X X X X X M2002 X X X X X M2003 Y X X X X M2010 Y X X X X<	1870	M1870					×		×	
M1890 M1890 X X X X X M1910 X X X X X X M1910 X X X X X X M2000 X X X X X X M2001 X X X X X X M2010 X X X X X X	880	M1880			×		×		×	
M1900 M1910 X	890	M1890			×		×		×	
M1910 X X X X X M2000 X X X X X M2001 X X X X X M2002 X X X X X M2010 X X X X X M2102 X X X X X M2100 X X X X X M2102 X X X X X M2102 X X X X X M2103 X X X X X	900	M1900			×		×			
M2000 M2000 X X X X M2001 N N N N N N M2004 N N X N X X M2010 N N X N X X M2010 N X X X X X M2102	1910	M1910			×		×		×	
M2002 M2002 M2004 M2 M2004 M2 M2004 M2	2000	M2000			×				×	×
M2004 X X X X X M2010 X X X X X M2015 X X X X X M2020 X X X X X M2030 X X X X X M2030 X X X X X M2030 X X X X X M2040 X X X X X M2030 X X X X X M210 X X X X X <	2002	M2002							×	
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M2030 M2030 M2 <	2020	M2020					×		×	×
M2040 X X X X X X M2102 X X X X X X X M2102 X X X X X X X M2102 X X X X X X X M210 Y X X X X X X M2200 Y X X X X X X M2200 Y X X X X X X M2300 Y X X X X X X M2410 Y X X X X X X M2410 Y X X X X X X M2410 Y X X X X X X M2420 Y X X X X	030	M2030					×		X	X
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M2420 M2430 X X N N N N N N N N N N N N N N N N N	2410	M2410				×			×	
M2430 X X DELETED	2420	M2420							X	
	430	M2430			X				Х	
	M2440		DELETED							

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Help your home health agency maintain regulatory compliance by implementing the OASIS data set transitions with convenience and ease using the *Home Health Pocket Guide to OASIS-C1: A Reference for Field Staff.* This updated book supplies homecare providers with the latest information they need to know about the revised OASIS-C1 data set implementation requirements for January and October 2015. Designed to enable field staff to bring along and complete the OASIS-C1 assessments at a patient's bedside, the book provides helpful guidance for each assessment type and M item change to ensure documentation standards are upheld and proper reimbursement is obtained for every patient.

This handy pocket guide provides:

- \cdot Convenient access to OASIS guidance; use this travel-sized pocket guide while filling out the assessment at the bedside
- Plain English guidance with step-by-step instructions for filling out each OASIS-C1 item to help staff easily improve their OASIS documentation
- \cdot An explanation of how OASIS items fit into various assessments
- \cdot A breakdown of how the data collection affects reimbursement
- \cdot Troubleshooting tips to avoid incorrect payment, denials, and fines
- Compliance at any time—our pocket guide offers information about the revised implementation requirements for January *and* October 2015





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