

Home Health ICD-9/ICD-10 Alert

Coding Processes: Got OASIS Software Coding Questions? Get Proactive With Your Vendor

Always look to coding guidelines for backup.

OASIS data collection software may help make your workflow smoother, but it can't replace the skills of a trained home care coder. Follow these expert tips to be sure your software system works for you -- not against you.

Voice Your Concerns To The Vendor

ICD-9 coding accuracy probably isn't the number one concern of decision makers selecting OASIS data collection software, but if you have an opportunity to be part of the process, be sure to take it. Ask the software vendor to help you understand the logic that goes into the coding piece of its software, suggests **Karen Vance**, supervising consultant with **BKD** in Springfield, MO.

For example: When you type in congestive heart failure (CHF), does the software let you select the fourth digit, or does it automatically select a diagnosis code?

Some software is built with "cheat sheet"-like logic, Vance says. These short cuts in coding logic may save you time, but they won't increase accuracy.

The sales representative may not have the answers to your coding questions at hand, but he should be willing to research them, Vance says.

Hidden perk: Coding software can be helpful in establishing a patient record, Vance points out. When the clinician enters the data, the software can populate codes and save the record in a pending form, so that the patient is entered into the system. Not only does this make an informal patient record, but it allows the expert coder to access the record to make corrections before the record is finalized.

Know How To Suggest Corrections

Even if you find a software package that uses the logic you're looking for, you know all too well that you can still encounter hang-ups of a different sort -- your software behaving in a way contrary to coding guidelines.

For example: Software packages have a variety of ways of dealing with M0246. Some will instantly add any code you list there to M0240. Other products will only allow you to list codes from the **Centers for Medicare & Medicaid Services** case mix list in M0246, while still others force you to put something in M0246 anytime you list a V code in M0240.

Not only are you setting yourself up for incorrect claims, but inaccurate codes reported in OASIS will taint home care data, says **Sparkle Sparks, MPT, HCS-D, COS-C**, with Redmond, WA-based **OASIS Answers**. CMS uses this data to tweak the home health prospective payment system, and it's also used to tabulate health care statistics.

If you find that your software is programmed to behave in a way that runs contrary to the coding guidelines or to CMS guidance, find that guidance in writing, and share it with your vendor, Sparks says.

Keep in mind: Vendors faced a monumental task preparing their programs during the short window of time between CMS' announcement of the PPS revisions and the final implementation date on Jan. 1, Sparks says. It's a hideously complex process, and software designers also had to deal with many updates from CMS. So be sure to take a positive approach when working with your vendor to fine-tune coding intricacies.

Bottom line: Nothing replaces checking your ICD-9 coding manual for the correct codes, Vance says. An expert coder should always review diagnosis codes to verify that they are correct and at the highest level of specificity before a patient record is locked and transmitted.