

Home Health ICD-9/ICD-10 Alert

CODING UPDATE: Get The Latest Details on the OASIS Chapter 8 Changes

Check M0245 to be sure you're using the most up-to-date version.

Make sure you're keeping up with the latest revision to OASIS instructions, or prepare to pay the price with your outcomes and finances. Take a moment to analyze these changes and you may gain insight into future changes that will impact OASIS coding.

More than two months after releasing a flawed OASIS revision, the **Centers for Medicare & Medicaid Services** posted a new copy Oct. 24.

"Chapter 8 has been corrected since the June 2006 release [actually posted in mid-August]. We apologize for any inconvenience," CMS says on its Web site. The information in the revised manual is effective immediately, CMS says.

"All home health agencies need to keep up-to-date on the official information and guidance on OASIS items," urges consultant **Judy Adams, RN, BSN, HCS-D**, with **Larson-Allen** in Charlotte, NC.

Note These Changes

One of the more obvious errors was the severity ratings inserted in M0245 (Payment diagnosis). The new release removes them.

Although the placing of severity ratings was an error, it's probably a precursor to changes to the actual data items to come, says consultant **Lisa Selman-Holman, JD, BSN, RN, HCS-D, COS-C**, with **Selman-Holman & Associates** in Denton, TX. Severity ratings are part of risk adjustment, and risk adjustment is important for the diagnoses placed in M0245, she says.

The latest version also revises the case mix code definition, requiring the diagnosis in M0245 to appear on the plan of care. There are times that the diagnoses placed in M0245 are not also in M0240, says Selman-Holman. This means the diagnoses in M0245 that aren't repeated in M0240 need to appear on the plan of care, she says. This was a recommendation prior to the change, but at least one intermediary downcoded folks when the code in M0245 wasn't also on the POC.

Tip: If you have an incorrect and a corrected copy of the revisions, one way to be sure you are looking at the corrected copy is to go to M0245. If you see severity ratings, you are using an incorrect copy.

Another error in the July version was that CMS removed from M0190 and M0210 the HIPAA-compliant language about coding specificity (inpatient diagnoses and ICD-9-CM code categories). CMS corrected this problem, Selman-Holman notes.

Don't miss: This inadvertent change is also probably a precursor to future changes to OASIS, Selman-Holman says. The diagnoses codes in M0190 and M0210 are for risk adjustment, and only the first three digits are used for this purpose. There is really no need for coding to the highest specificity here, she says. The change posted in October moved the instructions back to being HIPAA-compliant, an important distinction for codes that are placed on the claim.

And in M0450 (Current number of pressure ulcers at each stage), CMS removed language discussing healed Stage 2 pressure ulcers with and without scar formation.

The statement "was just plain wrong," says OASIS expert **Linda Krulish** of Redmond, WA-based **OASIS Answers**. A healed Stage 2 pressure ulcer is no longer a pressure ulcer, whether or not it heals with scar tissue, she explains.

"If a person who previously had a Stage 1 or 2 pressure ulcer develops a new pressure ulcer, it will be staged at whatever stage it is," Adams adds.

CMS Adds Better Explanations

Other CMS corrections clarify confusing language or provide additional explanation. These include:

- **M0460 (Stage of most problematic [observable] pressure ulcer)**. Refers clinicians to the Wound Ostomy and Continence Nurses' Web site for access to specific guidance on staging pressure ulcers.
- **M0484 (Current number of [observable] surgical wounds)**. More clearly explains when a single surgical wound can become multiple surgical wounds.
- **M0670 (Bathing)**. Clarifies that this item does not assess the patient's ability to transfer into and out of the tub or shower.
- **M0830 (Emergent care)**. Elaborates on how to treat a "hold" after which the patient may or may not be admitted to the hospital at the end of the hold period. "The new wording is a bit clearer," Adams observes.

Do this: "Reviewing the manual for changes provides a good opportunity for the overall review of the OASIS items and instructions," Adams offers. And providers "need to update their books since there are always new staff coming to the agency."