

## OASIS Alert

### Assessment: Get Down to OASIS Basics for Most Accurate Reimbursement

**One tip yields improved case mix scores and better reporting.**

Understanding each OASIS item is important for accurate reporting, but establishing a consistent process overall can also have a positive impact on your bottom line. Try this refresher on the ABCs of OASIS assessment and see immediate improvement.

#### Capture Case Mix Points

The way you approach each OASIS assessment can determine how accurately you report each patient's condition. The following six techniques will help you capture the allowed case mix points your patient deserves for each episode, says **Judy Adams, RN, BSN, HCS-D, COS-C** with **Adams Home Care Consulting** in Chapel Hill, N.C.

1. Reverse your thinking. Read the responses for each OASIS item from bottom to top to select the most accurate score for each item, Adams says. Reading from the bottom shows you the most impaired responses first. Follow this one tip alone and you'll see improved case mix scores and better capture the acuity of your patients, she says.

2. Assess before interventions. Score the patient without considering changes in her abilities due to any interventions you provide during the assessment visit, Adams says. Capture your patient's baseline abilities on the initial assessment, not how he is functioning after you provide teaching or adaptive equipment, for example.

3. Score for safety. Even if the patient lives alone, score each OASIS item based on whether he can complete the required task safely. Accurate scoring for safety involves considering physical impairments, sensory impairments, behavioral/emotional or cognitive impairments, environmental barriers, and physician ordered limitations that define what a patient can safely do.

4. Avoid assumptions. For each OASIS item, be sure you understand what the item is asking, what is included, and what time frame to use. Refer to the OASIS-C Guidance Manual and the **Centers for Medicare & Medicaid Services'** OASIS Q&As if you have questions about an item's intent.

CMS is continually updating and clarifying these essential documents, so make sure you're referencing the most current versions, Adams advises. You'll find the most up-to-date OASIS-C Guidance Manual here: [www.cms.gov/HomeHealthQualityInits/14\\_HHQIOASISUserManual.asp](http://www.cms.gov/HomeHealthQualityInits/14_HHQIOASISUserManual.asp). CMS compiles all current OASIS Q&As once a year, and answers new questions quarterly. Find the current answers under the heading "OASIS Q&A's" here: [www.qtso.com/hhdownload.html](http://www.qtso.com/hhdownload.html).

5. Collaborate. To determine the most accurate responses, collaborate with other disciplines, Adams recommends. But be careful that you're truly collaborating and not simply accepting the viewpoint of another discipline.

Only one person can actually complete the comprehensive assessment. That person must see the same things as those that they collaborate with and not just change scores because "another discipline said the score would be different," Adams cautions. True collaboration involves what each person saw and why they scored the way they did. Often when this discussion occurs, the parties realize that they both actually saw the same thing, but did not interpret it the same way. When differences in interpretation occur, refer back to the official guidance for support in selecting the correct score.

6. Take your time. Take advantage of the full time period allowed for the assessment time point to score all of the OASIS

items, Adams says.

For example, it's not uncommon to find that a wound has a dressing that cannot be removed for a few days by physician's order, Adams points out. If the OASIS is locked after that first day, your agency could lose important case mix points related to healing status because the wound cannot be visualized on that first day.

Also: Your agency will need some or all of the five days allowed at start of care (SOC) to obtain physician orders for interventions related to process items at M2250 -- Plan of care synopsis. Otherwise you risk losing an opportunity to garner a positive score for these process items reported on Home Health Compare and the Process Based Quality Improvement reports.

### **Follow These 7 Rules for OASIS Completion**

Adams offers seven rules for completing the OASIS that will guide your way to accurate reimbursement.

1. Complete each OASIS assessment independently without referring to any prior assessments.
2. Use the response N/A (not applicable) only when no other response is possible.
3. Concentrate on direct observation rather than interviewing. "Interviewing will get you some information, but it really won't get you accurate scoring in OASIS," Adams warns.
4. Know which questions require you to mark all the answers that apply, rather than selecting just one response.
5. Understand the assessment timeframe. Unless the question directs otherwise, look at the 24 hours preceding the assessment and include the assessment visit itself, Adams says.
6. Recognize that "most of the time" means greater than 50 percent of the time. And when assessing multiple tasks within the same item (such as for activities of daily living items) see if the patient can do more than 50 percent of the tasks.
7. Pay attention to skip patterns to save time in completing the assessment. These patterns allow you to move quickly through the sections of the OASIS that do not apply to a particular patient. For example, if you answer M1340 -- Does the patient have a surgical wound? with 0 -- No, you can skip directly to M1350.