

OASIS Alert

Assessment: Look for these OASIS Items to Disappear in OASIS-C1

Say your final farewell to inpatient procedures.

Your future will hold fewer "M" items if the **Centers for Medicare & Medicaid Services** gets its way with the proposed OASIS-C1 changes.

Here are the items that the **Centers for Medicare & Medicaid Services** wants to eliminate from the form, or at least certain collection timepoints:

- M1012, inpatient procedures
 Start and Resumption of Care (SOC and ROC). "Home health agencies have reported that this item is time-consuming and burdensome as this information may not be readily available at the time of home health intake," CMS notes in its Paperwork Reduction Act supporting statement. CMS told agencies in April 2011 the item isn't used for payment or outcomes and they could just answer "unknown" if the info isn't readily available, but many HHAs still complete the item. "The deletion of M1012 from the OASIS will result in a decrease in burden to all OASIS users (in that a response will no longer be required) and will provide an even greater decrease in burden for those users who have continued to collect and report the information on inpatient procedures to complete the item," CMS maintains.
- M1310, M1312 and M1314, pressure ulcer length, width and depth ☐ SOC, ROC, Discharge. "The intention of including these items in OASIS was to provide data for a measure reporting on improvement in the patient's pressure ulcer status between start/resumption of care and discharge," CMS says. "However, the information is not currently being used for that purpose and analysis of 2010 and 2011 data indicate problems with the validity (accuracy) of the data being reported."
- M2440, reason for transfer to SNF [] collected at and deleted from Transfer only. The deletions of M1012, M1310, M1312, M1314 and M2440 should be "received with jubilation," Adams says. Agencies should welcome this "lessening of items that were not serving any useful purpose," she says.
- M1350, skin lesion or open wound receiving intervention from the HHA; M1410, types of respiratory treatments received at home; and M2110, how frequently the patient receives assistance with ADLs from caregivers other than the HHA [] deleted from discharge only, but retained for SOC and ROC. Medicare uses these items for risk adjustment of quality measures.