

OASIS Alert

Diagnosis Coding: REMOVE ANY CONFUSION FROM INPATIENT PROCEDURE CODES

Look no further for clarity on what the 14-day rule actually measures.

OASIS C has been around awhile, but that doesn't mean you feel any more at ease with the diagnosis code "M" items. Settle comfortably into completing M1012 (Inpatient procedure) with this expert advice:

Report All Plan-of-Care-Related Procedures

While inpatient surgical procedures have long been reported on the 485 (Home Health Certification and Plan of Care), the difference with M1012 is that you now need to report key inpatient procedures related to the plan of care on the OASIS, says consultant **Rhonda Will** with **Fazzi Associates** in Northampton, Mass. This includes not just surgical procedures, but medical and diagnostic procedures as well.

Key: All of the procedures you report in M1012 must be relevant to the care you plan to furnish your patient.

Don't list a procedure from the hospital that doesn't have an impact on the care you will be providing, agrees consultant **Lynda Laff** with **Laff Associates** in Hilton Head Island, S.C.

The clinician should pick and choose the procedure codes that are relevant to the plan of care from the list of procedures the hospital provides, Will says.

Example: Your patient went into the hospital for congestive heart failure and had a routine colonoscopy while there. Don't list the colonoscopy procedure code (45.23) in M1012 unless something is found that will have an impact on the care you offer, Laff says.

Best bet: If you have identified a procedure at M1012, make sure you are addressing the diagnosis related to the procedure code in your plan of care, Laff says.

Know How The 14-Day Rule Works

When reporting inpatient procedures, the patient's inpatient discharge must have occurred sometime in the 14 days prior to the patient's start or resumption of home care. However, the procedures you report in M1012 can take place at any time during that stay.

So your patient could have had a procedure three weeks ago, but if the discharge from inpatient care was within the last 14 days, that procedure counts -- provided it's relevant to the care you furnish, says consultant **Karen Vance** with **BKD** in Springfield, Mo.

Look Here For The Inpatient Information You Need

The procedures should be coded in the hospital, but you'll have to learn where to look for them, Will says. And you'll also need to learn the language of the procedures. Familiarize yourself with Volume 3 of your ICD-9 coding book, especially if you're not used to looking up procedure codes.

This inpatient procedure information can only be as good as what your intake staff gathers, Will says. Talk to your intake staff about the importance of gathering this information. If you have liaisons in the hospital, make sure they know to communicate this information.

Unfortunately, it is highly unlikely that home care coders will get the actual codes from the hospital, says **Lisa Selman-Holman, JD, BSN, RN, HCS-D, COS-C**, consultant and principal of **Selman-Holman & Associates** and **CoDR "Coding Done Right"** in Denton, Texas. The coding is done after the patient's discharge from the hospital in most cases, and by the time the hospital coder gets around to it, it's often too late to do the home care coder any good, she says. So becoming familiar with Volume 3 of your ICD-9 manual is even more important.

CMS Wants You To Complete M1012

In adding M1012 to the OASIS assessment, the **Centers for Medicare & Medicaid Services** wants a more comprehensive picture of your patient's condition prior to the start of home care.

When your patient has a surgical procedure, it can have an impact on his health, Will says. Plus, diagnostic procedures such as an MRI (88.9x) or ultrasonography (88.7x) can validate a diagnosis, she says. For example, diagnostic tests might confirm that a cancer patient has a tumor, or show the bulging disk causing another patient's back pain.

It remains to be seen how this information will be used, Will notes. CMS wants to gather the information now, but perhaps it is trying to see what data it can use in assessing risk adjustment in the future, she says.