

OASIS Alert

Don't Ask, Don't Tell Can Cost You \$200 Per Episode

Can you name one of the most commonly underreported case mix items in home care patients? Not knowing the answer could hurt your bottom line.

Unless you ask the right questions, you may never know your patient qualifies for extra points because of incontinence - and you'll miss the extra money that follows.

How many of your patients score "1" or "2" on M0520 (urinary incontinence or urinary catheter)? How many would show up if your assessments were more accurate?

The incidence of at least occasional incontinence may reach 50 to 60 percent in women over 50, according to recent studies. And experts estimate that about 20 percent of the home care population is incontinent. But many patients are too embarrassed to admit incontinence and take great pains to hide the problem.

"Remember the OASIS scoring can only be as accurate as the information we've collected from the clinical assessment," **Linda Krulish**, OASIS expert and president of **Home Therapy Services** in Redmond, WA, reminded providers during a recent teleconference sponsored by the **Associated Home Health Industries of Florida**.

The wording of M0530 (when does urinary incontinence occur?) seems a bit confusing, Krulish said. There is no response for a patient who is incontinent only during the day. But the response-specific instructions the **Centers for Medicare & Medicaid Services** provides in the OASIS manual clarify the issue, she added. If a patient is incontinent during the day only, use response "2" (during the day and night), CMS instructs.

Stress incontinence - where urine leaks during laughing, coughing or other activities - often is missed, warns Chapel Hill, NC-based clinical consultant **Judy Adams** with the **LarsonAllen Health Care Group**. "Stress incontinence, even when generally controlled with timed voiding, will still usually show up as incontinence on M0520," because timed voiding will not work all the time, she says.

Educate staff that stress incontinence is part of M0520 and not a normal part of aging. Being very matter-of-fact when asking patients about incontinence and using words patients may be more comfortable with - such as, "do you experience leaking when you laugh hard or cough" - may uncover the problem, Adams suggests.

And any incontinence during the day, even stress incontinence, should be marked with response "2," instructs **Palmetto GBA** in its Web site questions and answers. Day or night incontinence not controlled by timed voiding adds six points to the patient's case mix score - and this plus two points elsewhere in the assessment can add \$210 to the episode payment by changing C0 to C1, Adams says.