

## **OASIS Alert**

## Get the Answers to our OASIS Q&A Quiz

Do you have your answers to the quiz on page 92 ready? Read on to check them against the latest guidance from CMS

**Answer 1:** When a patient is determined not eligible for services, there's no requirement to collect OASIS data. But because you have already submitted the OASIS to the state, you'll need to delete that assessment rather thaninactivate it.

Look to the "New Outcome and Assessment Information Set (OASIS) Correction Policy for Home Health Agencies" (April 2001) for guidance related to deleting assessments. It is located at <a href="https://www.cms.gov/SurveyCertificationGenInfo/">www.cms.gov/SurveyCertificationGenInfo/</a> downloads/SCLetter01-12.pdf and in Appendix B of the OASIS-C Guidance Manual at <a href="https://www.cms.gov/HomeHealthQualityInits/14">www.cms.gov/HomeHealthQualityInits/14</a> HHQIOASISUserManual.asp.

Your patient was determined not eligible for services, so no discharge OASIS is required. But be sure to maintain good clinical record documentation of the care you provided and the reason for his discharge.

Answer 2: The correct response to M1342 in this situation is 0 -- Newly epithelialized. Previous CMS OASIS Q&A 108.1 indicated that the correct response in this scenario would be 1 -- Fully granulating.

But with the advent of OASIS-C, new M1342 response 0 was added. "0" is the best response when a patient has a wound that is currently completely epithelialized but could not possibly have been fully epithelialized for at least 30 days, based on the date of the surgery. OASIS item guidance for M1342instructs you to report a surgical site closed primarily (with sutures, staples, or a chemical bonding agent) as a surgical wound until reepithelialization has been present for approximately 30 days, unless the wound dehisces or shows signs of infection.

After 30 days, the surgical wound is general described as a scar.

Answer 3: No, you cannot select response 1 for M1510 if the physician communicated the instructions directly to the patient or caregiver. In order to select Response 1, your agency must communicate directly with the physician or his designee regarding the heart failure symptoms and receive instructions or further advice from the physician or their designee by the end of the same day the symptoms were identified.

If the physician communicates directly with the patient or their caregiver, your agency must confirm the accuracy of the information with the physician on the same day in order to select Response 1.

Answer 4: In order to select "Yes" for M1750, you must have a physician's order for psychiatric nursing services on the Start of Care/Resumption of Care plan of treatment. The clinician completing the comprehensive assessment doesn't have to be a qualified psychiatric nurse and the first visit by the qualified psychiatric nurse doesn't have to occur in the time frame allowed for completing the comprehensive assessment. But you do need to have an order for the psychiatric nursing services to answer "Yes."

Answer 5: Yes. If your assessment reveals that the patient or caregiver received the medication education specified in M2015 from his pharmacist, you can include this education in M2015. But you must make sure the pharmacist educated the patient or caregiver about:

- monitoring the effectiveness of all drug therapy (prescribed, as well as all OTC),
- drug reactions,
- and side effects, and
- How and when to report problems that may occur to the appropriate care provider.



Caution: Simply including written materials in the bag with the medications at the time of purchase may not provide the required education. "The education of the patient may also be a collaborative effort, in which the pharmacist may provide part of the education, with other healthcare providers," CMS says

Editor's note: Read up on the remaining April 2011 CMS OCCB OASIS Q&As here: <a href="https://www.oasisanswers.com/downloads/CMS%20OCCB%201st%20Qtr%202011%20QAs">www.oasisanswers.com/downloads/CMS%20OCCB%201st%20Qtr%202011%20QAs</a> 04 20 11.pdf.