

OASIS Alert

Industry Notes

If you're a new provider and didn't start submitting submitting OASIS data by June 30 you're looking at a 2 percent payment reduction next year. If you started participating in Medicare before May 1, you're on the hook for OASIS data submission in 2011 to avoid the 2012 pay cut, the **Centers for Medicare & Medicaid Services** says in a new MLN Matters article.

The catch: "HHAs whose initial surveys are completed in the early months of the year may not receive their retroactive notification of participation, containing their CMS Certification Number (CCN), from the CMS Regional Office until May or June," CMS recognizes in the article. "For these recently enrolled HHAs, it is important to act immediately after receiving their CCN. The HHA should immediately begin to submit OASIS data, as required by their Conditions of Participation, before June 30, 2011."

Agencies that fail to submit their data by that date will be subject to the pay cut, CMS warns.

Similarly, agencies that started before April 1 also must submit HHCAHPS data or face a 2 percent pay cut in 2012. However, agencies with less than 60 patients between April, 1, 2009, and March 31, 2010, are exempt from HHCAHPS participation for CY 2012.

Don't forget: Agencies must complete an HHCAHPS Participation Exemption Request form for CY 2012 on the HHCAHPS website to qualify for the exemption.

The article is online at www.cms.gov/MLNMattersArticles/downloads/SE1115.pdf.

Don't overlook a valuable resource in making your transition to the ICD-10 diagnosis coding system. CMS and the **Centers for Disease Control and Prevention** have issued "General Equivalence Mappings" or GEMS, the agencies remind providers.

"You can look up an ICD-9 code and be provided with the most appropriate ICD-10 matches and vice versa," CMS explains in an e-mail message to providers. "They are not a substitute for learning the new ICD-10 codes; however, they can assist users" with various coding functions.

Links to the GEMs for 2010 and 2011 are at www.cms.gov/ICD10.

Reminder: ICD-9 will undergo a code freeze starting Oct. 1. "This is the last day for regular updates to both the ICD-9 and ICD-10 code sets," CMS explains. "Starting Oct. 1, 2012 there will be only limited code updates to ICD-9-CM and ICD-10 code sets to capture new technology and new diseases."

Deadline: ICD-10 will take effect in October 2013. **What is required for the physician signature** regarding faceto-face encounter rules?

Answer: Look to a new frequently asked question from the **Centers for Medicare & Medicaid Services** for the answer to this commonly asked question. "One physician signature suffices if the face-to-face encounter documentation is colocated with the physician's certification of eligibility," CMS says in FAQ # 10633 posted in May. "Otherwise, if the face-to-face documentation is attached as an addendum to the certification (a separate document), the face-to-face documentation and certification each require a signature. Electronic signatures are acceptable."

Note: The FAQ is at http://questions.cms.hhs.gov/app/answers/detail/a_id/10633.

