

## **OASIS Alert**

## Item Focus: M1308: Don't Miss the Points for Pressure Ulcers

There's no need to report Stage I or closed Stage II pressure ulcers for this item.

OASIS item M1308 asks you to report your patient's current number of unhealed [non-epithelialized] pressure ulcers. Know how to answer this item correctly, and you can earn both NRS and clinical points. But if you're tripped up by this often confusing item, your agency's reimbursement will suffer.

**What's at stake:** If your patient has two or more Stage III or IV pressure ulcers and you answer M1308 correctly, you'll earn clinical points. Plus you can earn nonroutine supply points for patients with one to four Stage II to Stage IV pressure ulcers and for unstageable pressure ulcers.



## Start with Stage II

M1308 Current Number of Unhealed (non epithelialized) Pressure Ulcers at Each Stage: (Enter "0" if none; excludes Stage I pressure ulcers)

You won't report any Stage I pressure ulcers in M1308, said **Tracie Jones, BSN, RN, CWOCN, WCC, COS-C** with **At Home Healthcare** in Tyler, Texas. That's because M1308 only applies to Stage II, Stage III, Stage IV, and unstageable ulcers.

You also won't report any closed Stage II pressure ulcers in M1308, Jones said during her presentation "Master the OASIS-C Pressure Ulcer items & Maximize Outcomes Through The Use of Evidence-Based Treatment Protocols" during the **National Association for Home Care and Hospice**'s annual meeting in Oct. 2012. That's because Stage II pressure ulcers that completely epithelialize are considered healed.

On the other hand, you will always report your patient's Stage III and Stage IV pressure ulcers -- even when they have closed, says **Lisa Selman-Holman, JD, BSN, RN, HCS-D, COS-C**, **HCS-O**, consultant and principal of **Selman-Holman & Associates** and **CoDR -- Coding Done Right** in Denton, TX.

**Here's why:** Closed Stage III and Stage IV pressure ulcers are still counted as pressure ulcers because they have a high likelihood of breaking down again. These full thickness ulcers are considered closed once they are fully granulated, but they will never fully heal. So you will continue to report these closed ulcers at their worst stage, unless they deteriorate, or are replaced by an advancement or muscle flap.

## **Mind the Time Points**

You'll list a response in Column 1 -- Number currently present at all time points, Jones said. In other words, report the qualifying pressure ulcers your patient has that day. Answer Column 2 -- Number of those listed in Column 1 that were present on admission (most recent SOC/ROC) only at follow up or discharge.

**Tip:** When completing Column 2, if the pressure ulcers listed in Column 1 were present at the most recent SOC or ROC you'll report them in Column 2 even if they are currently at a different stage.

One way to check that you are answering Column 2 correctly is to make sure that the number of pressure ulcers in Column 2 isn't greater than the number listed in Column 1.



**Example:** At start of care, your patient has two pressure ulcers on her sacrum that cannot be staged due to coverage of the wound bed by slough. To answer M1308 for this patient at SOC, report these unstageable pressure ulcers with a "2" in Column 1, row d.2 and leave Column 2 blank, Jones said.

Now suppose you are completing a follow-up assessment for the same patient. Since SOC, the pressure ulcers have deteriorated. They were debrided and became larger. You can now visualize and palpate muscle which means the pressure ulcers are now Stage IV. To answer M1308 at follow-up, you will report a "2" in Column 1, row c and a "2" in Column 2 row c.

**Why?** When completing Column 2 in M1308, the previous stage of the pressure ulcer doesn't matter, Jones said. Instead, focus on whether or not the pressure ulcers you are reporting in Column 1 existed at whatever stage when the last SOC/ROC was completed.

**Bottom line:** The data collected at M1308 is used to track whether an ulcer develops during a quality episode. To make sure the information you report is accurate, it's important to document and report all wounds and observations carefully and thoroughly, Northampton, MA-based **Fazzi Associates**, points out in its OASIS-C Best Practices Manual. In the end, the data you report about your patient's pressure ulcers will affect your outcomes and eventually your bottom line.