

## OASIS Alert

### Medical Review: Prepare for New Focus on OASIS Accuracy

#### This MAC has your M2030 responses in its crosshairs.

Brace yourself for OASIS-related takebacks if your answers aren't on target.

The latest Comprehensive Error Rate Testing results found CERT reviewers reducing HIPPS codes due to inaccurate responses in M2030 -- Patient's current ability to prepare and take all prescribed injectable medications reliably and safely, including administration of correct dosage at the appropriate times/intervals. Excludes IV medications. In the downcodes, "responses to this OASIS item ... were inconsistent with the documentation submitted by the provider," notes HHH Medicare Administrative Contractor **CGS** in its review of the CERT results in its June newsletter for providers.

In the majority of cases, "the documentation did not indicate that the beneficiary was receiving any injectable medications" even though the clinician chose a response indicating the patient was receiving injectable meds, CGS notes.

At the time of discharge, when you have no current ongoing orders for medication to be administered with intramuscular or subcutaneous injections via needle and syringe in the home, the appropriate response to M2030 is "NA," says consultant **Pam Warmack** with **Clinic Connections** in Ruston, La.

Chicago-based regulatory consultant **Rebecca Friedman Zuber** is surprised to see this problem rank as one of the top HHA claims errors. "I have not often seen reviewers draw a direct line from an error on OASIS to a recoupment in anything other than therapy," Zuber notes.

HHAs must tread a careful line with OASIS accuracy, experts warn. Authorities could view OASIS errors that result in higher payment as deliberate falsifications -- in other words, fraud and abuse.

Why M2030? The number of case weight points assigned an M item depends on the equation where the item is located, Warmack says. "The equation makes a big difference in the number of points an item receives." And M2030 provides an opportunity to gain points in one especially difficult equation.

In equation 3 (Late episode with 0-13 therapy visits), there are far fewer opportunities to capture points than in any other equation, Warmack points out. There are no points available in Equation 3 for Blood Diagnoses, Neuro 3 diagnoses, Psych 2 diagnoses, M1030 enteral nutrition; M1200 Vision; M1242 Pain, or M1400 Dyspnea.

But there are two clinical points available in Equation 3 for M2030 -- Injectable medications, Warmack says. "So in an equation where it is very, very difficult to capture clinical points, providers may feel a little pressured to answer M2030 perhaps less than accurately. But wrong is wrong," she says.

Warning: "If I were in Medical Review for a MAC and I believed the Clinical Domain thresholds were too high in Equation 3, I would definitely take a close look at M2030," Warmack says.

Try this: To avoid OASIS-related takebacks, implement a stringent OASIS review process, advises consultant **Lynda Laff** with **Laff Associates** in Hilton Head Island, S.C. HHAs can consider a manual review process -- having an OASIS-C certified nurse review the OASIS and ensure clinicians make all appropriate corrections. Or agencies might want to use a data scrubbing tool to review for diagnosis issues and OASIS item inconsistencies, Laff suggests.

Staff training on OASIS errors you find -- both one-on-one and in a group setting -- are key followups, experts counsel.

For example: For one of the CERT downcodes based on M2030, the clinician marked that the patient was receiving

injectable meds even though the B12 injections were being administered at the doctor's office. But Medicare's **OASIS-C Guidance Manual** updated this January specifically states that the question "excludes IV medications, infusions (i.e., medications given via a pump), and medications given in the physician's office or other settings outside the home."

Mistake: "I continue to find clinicians answering this item considering injections the patient is receiving at the doctor's office or a clinic," Warmack agrees.

### Brush Up On Your M2030 Skills

Here are a few more tips on how to correctly choose a response to M2030 from the OASIS-C Best Practice Manual from **Fazzi Associates**:

1. Include assessment of ability to not only draw up and administer injection but to also dispose of syringe properly.

Remember, if a patient lacks the knowledge he needs for safe needle disposal on the day of assessment, he was unable to take his injectable medication, Warmack says. You would answer 3 -- Unable to take injectable medication unless administered by another person for this patient.

If the patient could dispose of the needle or syringe safely only when given a reminder to do so, then you would select answer 2 -- Able to take medication(s) at the correct times if given reminders by another person based on the frequency of the injection.

2. Conduct assessment prior to initiation of teaching to establish baseline performance.

Conducting the complete medication review very early in the patient assessment can reveal a great deal about the patient, Warmack says. Don't wait until the very end of the assessment when both you and the patient may be too tired to accurately review all the medications.

3. For patients on multiple injectable medications, score based on that medication with which most assistance is needed.

This is not a "majority rules" item, Warmack says. This item is intended to assess the patient's ability to take all medications reliably and safely at all times.

4. Orders for a nurse to administer the injection infers that the patient is unsafe/unable to self-inject: select response 3 -- Unable.

Even if the orders are for a one-time-only injection in the home during the episode and even if it is not due to be administered on the day of assessment, you would answer 3, Warmack says. This is true for a flu vaccination or B12 injection.

Note: Item-specific guidance from CMS is in Chapter 3 of its OASIS-C Manual at [www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/HomeHealthQualityInits/HHQIOASISUserManual.html](http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/HomeHealthQualityInits/HHQIOASISUserManual.html) (scroll down to "2011 OASIS-C Manual" in the Downloads section). Fazzi's Best Practice Manual is at [www.deltahealthtech.com/assets/docs/OASIS%20C%20Best%20Practice%20Manual.pdf](http://www.deltahealthtech.com/assets/docs/OASIS%20C%20Best%20Practice%20Manual.pdf).

Note: For more tips on running a successful home care agency, see Eli's Home Care Week. Information on subscribing is online at [www.elihealthcare.com](http://www.elihealthcare.com) or by phone at 1-800-874-9180.