

## OASIS Alert

### News You Can Use: Private Pay OASIS Data Collection Ends - At Least For Now

But the reprieve may not last.

Home health agencies finally have something to be thankful for.

Without warning, as of Nov. 5 Medicare officials called off the collection of OASIS data for patients with payor sources other than Medicare and Medicaid.

Home care providers have asked repeatedly over the last year to be allowed to stop collecting data the government didn't use, but the announcement came as a surprise.

The **Centers for Medicare & Medicaid Services** is "immediately suspending the requirement to collect private-pay patient data on OASIS," CMS Administrator **Tom Scully** said in an Open Door Forum for home care providers. A more official, written announcement will be forthcoming, but "for now assume you are not required to collect it as of today," Scully instructed.

This means all skilled care patients who are not under Medicare, Medicare HMO, Medicaid or Medicaid HMO payors do not have to have OASIS assessments completed or transmitted, according to **National Association for Home Care & Hospice** VP of Regulatory Affairs **Mary St. Pierre**.

Many providers see this announcement as a golden opportunity to do less paperwork and more patient care, she tells **Eli**. It should be easy to find assessments from pre-OASIS days to allow HHAs to easily make this change, she adds.

Scully made the decision because it seems a waste of taxpayers' money to require HHAs to collect the data when they don't submit or use it meaningfully, he explained.

But he warned that if CMS could come up with a meaningful use for the data, the collection of it could be reinstated on very short notice. "This may very well be temporary," Scully cautioned.

1. **Two new OASIS tools are up on the CMS' Web site.** Home health agencies can download an OASIS follow-up assessment scheduling calendar for 2004 as well as a revised Appendix C for the OASIS manual. The revised chapter includes sample forms and a patient tracking sheet that incorporate changes from the OASIS data set that went into effect Oct. 1. They are available at [www.cms.hhs.gov/oasis/hhnew.asp](http://www.cms.hhs.gov/oasis/hhnew.asp).
2. Regional home health intermediaries started recouping for partial episode payments as scheduled, to correct for claims processing system's failure to make many PEP adjustments in the first two-and-a-half years of the prospective payment system.

But the gradual recoupment promised by CMS failed when RHHI **Palmetto GBA** took back \$500,000 from **VNA Care Network** in Worcester, MA - 90 percent of its projected takeback - in the first two months, says VNA Care VP for Finance **Pierre Henry**.

RHHI **United Government Services** has added a requirement to the process that limits each HHA's recouped PEP claims to 10 each week. Palmetto, UGS and RHHI **Cahaba GBA** say agencies burdened by too many PEP takebacks

should contact their customer service reps, who will work with them to resolve the problem.