

## OASIS Alert

### OASIS C: Keep Your Focus On OASIS C Processes To Stay Profitable

Expect surveyor scrutiny of new assessments and interventions.

Major OASIS changes could soon hit you square in the wallet, as CMS looks for hard data to justify payment amounts. Home health agencies at long last have a final OASIS C form to examine, but they still need to hold off on training staff, advises consultant **Lynda Laff** with **Laff Associates** in Hilton Head Island, S.C. That's because they'll need the item-by-item guidance in the OASIS User's Manual to complete the training. The **Centers for Medicare & Medicaid Services** plans to issue that guidance in September or October, it said in the most recent home health Open Door Forum.

Get ready: But if you haven't done so already, now's the time to jump into preparation for the process items in the new OASIS C form, Laff urges. Many agencies are focusing on the mechanics of filling out the new assessment form and may be missing the big picture on how all the process items will change the Medicare landscape in terms of quality improvement, surveys, and even reimbursement.

Look to other providers: HHAs wondering how the new process items on pressure ulcers, pain, diabetes, heart failure, depression, falls, medications, and vaccinations will affect them need look no further than hospitals for an example, Laff tells **Eli**. Hospitals have been collecting similar process-based data since 2006 and this year -- three years later -- the data is influencing their reimbursement, she points out.

Don't be surprised to see HHA payments affected by process-based outcomes as early as 2011, Laff predicts. "It's so clear what CMS is looking for," she contends -- hard data upon which to base payment.

Agencies should also expect surveyors to begin utilizing process item data, she warns. For example, if a patient undergoes an adverse event related to a fall, you can bet the surveyor will look over the OASIS assessment to see whether the patient was risk assessed for falls and whether an intervention was implemented in the plan of care.

CMS hints at its intentions in its response to OASIS C comments earlier this year. "Agencies that choose not to adopt these evidencebased practices ... will see that decision reflected in their scores for process measures on the Home Health Compare website," CMS says. "If CMS develops a Pay-for-Performance component to the home health reimbursement system, a decision not to incorporate evidence-based practices could impact payment."

Collecting the data on these process items will be hugely challenging for many HHAs, especially those that do not utilize point of care computer systems, Laff worries. "It's going to be very cumbersome for many home care agencies to manage this process," she says.

"This is a major, major change," she warns. Agencies will have to figure out how they're going to collect the pertinent data.

**Warning:** Many staff already have a tough time wrapping their heads around OASIS and its implications, Laff notes. Once the process measures are introduced and the assessment is tied more securely to quality improvement, surveys, and reimbursement, this challenge will only get worse.

Note: The final OMB-approved OASIS C form is at [www.cms.hhs.gov/HomeHealthQualityInits/downloads/OASISfinal.pdf](http://www.cms.hhs.gov/HomeHealthQualityInits/downloads/OASISfinal.pdf). The crosswalk is at [www.cms.hhs.gov/HomeHealthQualityInits/06\\_OASISC.asp](http://www.cms.hhs.gov/HomeHealthQualityInits/06_OASISC.asp) under the "Downloads" section.