

OASIS Alert

OASIS Guidance: Welcome Integumentary Instruction With Manual Updates

Manual changes minimal, but help provide consistency.

With the new year comes a new OASIS-C Guidance Manual. Make sure you're up-to-date on these changes to instructions for completing the OASIS.

Watch for Clarifications

This year's changes mainly provide consistency or clarity in the definitions and instructions, says **Judy Adams, RN, BSN, HCS-D, HCS-O, COS-C** with **Adams Home Care Consulting** in Chapel Hill, N.C. The most useful update is the revision of Appendix C to reflect updates to the items used in the risk adjustment process, she says. These tables show the most up-to-date timepoints and potential uses of each of the OASIS data items.

The **Centers for Medicare & Medicaid Services** also revised Appendix E to clarify the four conditions required to be completed for a home health agency to submit a Request for Anticipated Payment (RAP), Adams says. CMS revised the first of the four conditions agencies must complete to submit a RAP to reflect that the OASIS assessment is completed, locked or export ready or the agency has an internal policy defining when the OASIS data is finalized for transmission to the state.

CMS did not change the other three conditions, but they require:

- Receiving and documenting a physician's verbal orders for home health
- Establishing a plan of care and sending it to the physician, and
- Delivery of the first service visit under the plan of care.

Know How to Report Pressure Ulcer Treatments

The most detailed updates to Chapter 3 center around OASIS integumentary items, and focus on integrating guidance previously found only in the quarterly OASIS Q&As with the item-specific guidance.

Previously, the first bullet on page F-8 in the item-specific guidance for M1308 -- Current Number of Unhealed (non epithelialized) Pressure Ulcers at Each Stage packed in a great deal of information about how to report pressure ulcers that the HHA had treated in various ways.

The updated manual breaks this one bullet out into four, making it easier to find the specific guidance you need. You'll also find a definition of skin advancement flap, muscle flap, and rotational flap: "full thickness skin and subcutaneous tissue partially attached to the body by a narrow strip of tissue so that it retains its blood supply."

But the biggest change in this section is the addition of guidance on how to report a pressure ulcer treated with a skin graft. These pressure ulcers remain pressure ulcers and HHAs shouldn't list them as surgical wounds in M1342 -- Status of Most Problematic (Observable) Surgical Wound, CMS says.

"Until the graft edges completely heal, the grafted pressure ulcer should be reported on M1308 as d.1 (unstageable) pressure ulcer," CMS advises. "Once the graft edges heal, the closed Stage III or Stage IV pressure ulcer would continue to be regarded as a pressure ulcer at its worst stage."

Bone Up on Stasis Ulcer Healing Status

CMS also gave OASIS item M1330 -- Does this patient have a Stasis Ulcer? a new bullet between existing bullets two and three. "Once a stasis ulcer has been completely epithelialized, it is considered healed and should not be reported as a current stasis ulcer," CMS says on page F-15.

And CMS gave Item M1334 -- Status of Most Problematic Stasis Ulcer a little fine-tuning in the update. This item includes the response "0" -- Newly epithelialized, but it is never appropriate to select this answer because an epithelialized stasis ulcer is considered healed and no longer a current stasis ulcer.

With the update, response "0" remains, despite its not being an appropriate response, but CMS has removed the bullet which read "Newly epithelialized refers to stasis ulcers that have been covered with epithelial tissue."

Welcome Expansion on Healing Status of Surgical Wounds

Changes to item M1342 -- Status of Most Problematic (Observable) Surgical Wound replaced several bullets and clarified the response-specific instructions for scoring a scab present when healing occurs under primary and secondary intention, Adams says.

This section also added a clarification that "epidermal resurfacing" means the opening created during the surgery is covered by epithelial cells, Adams says. If epidermal resurfacing has occurred completely, the correct response in the OASIS would be "Newly epithelialized" until 30 days have passed without complications, at which time it is no longer a reportable surgical wound.

Other changes to Chapter 3 included:

- Minimal, non-substantial adjustments to the definition of a standardized tool for M1240 -- Pain assessment, M1300 -- Pressure Ulcer assessment, M1730 -- Depression Screening and M1910 -- Fall Risk assessment. "This appears to be slight tweaking for consistency in the definition at each of the process items that utilize a standard assessment tool," Adams tells **Eli**.
- M2250 -- Plan of care synopsis replaced instructions to select a "no" response with directions to enter "NA" when the agency is using its own standardized guidelines which the physician has not agreed to include in the plan of care for a particular patient. This change corrects an error made in the 12/10 Guidance Manual update.

Read the full errata list and download an updated guidance manual here:

www.cms.gov/HomeHealthQualityInits/14_HHQIOASISUserManual.asp.

Next up: The annual consolidation of OASIS Q&As is now available at www.QTSO.com/hhdownload.html.