

OASIS Alert

OASIS News: HHAs Finally Get A Look At Attachment D

Plus: New research could give seniors more independence.

Home health agencies have new guidance for diagnosis coding.

When the **Centers for Medicare & Medicaid Services** revamped the OASIS User's Manual in October 2007, it skipped over Chapter 8, attachment D that addresses diagnosis coding. Now the agency has issued the attachment with new coding guidance and examples, CMS's **Kathy Walch** said in a Dec. 9 Open Door Forum for home care providers.

HHAs can access Attachment D online, which has been revised to reflect changes to the refined HHPPS, at www.cms.hhs.gov/HomeHe althQualityInits/Downloads/HHQIAttachmentD.pdf.

IN OTHER NEWS

• A large volume of OASIS submission errors are still occurring, noted CMS's **Randy Throndset** in the Dec. 9 forum. Agencies often receive OASIS warning message 257 when they aren't using up-to-date pricer software.

"We continue to be concerned by the volume of these OASIS submission errors that we're seeing," Throndset said in the forum that drew 452 callers.

Although the payment system allows HHAs to bill despite the warning message, you shouldn't ignore it, Throndset urged. "Agencies should take action to resolve these errors." Providers are responsible for billing accurately, he reminded listeners.

• The National Quality Forum is considering new quality measures for HHAs in relation to the new OASIS-C proposal, CMS's **Debbie Terkay** said in the forum. After a November steering committee meeting, the NQF whittled down the number of possible new measures from 55 to 22.

The NQF is now taking public comments on its draft report on its Web site. Then it will likely make final recommendations by March, Terkay said.

CMS may continue to provide non-NQF-endorsed measures as part of the outcome-based quality improvement (OBQI) reports, Terkay added. But non-endorsed measures probably won't make it onto Home Health Compare.

- **Don't forget to submit your comments** on the drastically revamped OASIS form proposal, Terkay urged forum participants. Comments are due Jan. 13, she reminded agencies. The new form contains additional process measures and reworks activity of daily living items, among many other changes.
- Home health agencies have an ally in reducing hospital admissions.

Quinnipiac University researchers are testing new wireless sensor technology to see if it allows seniors to "remain independent for longer, delay being admitted to a hospital or nursing home, and better attend to their own basic needs," the university announced Dec. 3.

Sensor technology could not only improve seniors' quality of life, but also reduce the cost of aging services by keeping patients in their own homes for longer, explained **Jim Albert**, information services VP for **Mason-icare**, one of the



study's partners.

Researchers will study two groups of seniors -- one with the technology, one without -- for two years to see if there is any difference in the number of hospital admissions or nursing homes. They will also note differences in functionality, such as whether residents with access to the technology are able to maintain their ADLs for longer.

• Home care providers should keep a wary eye on the big health care reform package that's taking shape. President-elect **Barack Obama** and congressional leaders are already indicating their preferences for the bill, and fixing the perpetual physician payment shortfall is one of the items on their wish list.

To fix the problem, Congress will need to raise money from another sector under pay-go rules. Prime candidates for the chopping block are home health agencies with their double-digit profit margins and MedPAC cut recommendations, hospices with their explosive industry growth, and suppliers with their fraud and abuse reputation problems, observers say.