

## OASIS Alert

### OASIS News: NEW INITIATIVE WILL ADDRESS HOSPITALIZATION RATE

The **Centers for Medicare & Medicaid Services** plans to announce a new collaborative effort between CMS and the home health industry to reduce the rate of acute care hospitalizations, the **American Association for Homecare** announced July 19.

Although participation will be voluntary, agencies that participate may receive some public recognition, AAHomecare notes. And those who do not may find themselves under greater surveyor scrutiny, the trade association adds.

With pay for performance on a fast track and the rate of acute care hospitalization likely to be a prime measure under a P4P system, home health agencies will want to participate, AAHomecare predicts.

- **CMS has revised its OASIS manuals** in light of the new reporting regulation that took effect last month (see Eli's OASIS Alert, Vol. 7, No. 2). HHAs should download and print the new Implementation Manual, System User's Guide, OASIS Validation Report Guide, and HAVEN Reference Manual at [www.cms.hhs.gov/HomeHealthQualityInits/14\\_HHQIOASISUserManual.asp](http://www.cms.hhs.gov/HomeHealthQualityInits/14_HHQIOASISUserManual.asp), [CMS recommends. CMS plans to issue a revised Chapter 8 of the OASIS User's Manual this summer, the agency says.](#)
- **CMS will issue instructions** for the revised home health advance beneficiary notice before the Sept. 1 implementation date, CMS' **Elizabeth Carmody** pledged in the July 11 HH Open Door Forum. CMS also will issue an MLN Matters educational article on the topic.
- **The Institute of Medicine released a report** on July 20 pointing out that medication errors kill several thousand patients each year, harm many more and result in annual costs to the country of at least \$3.5 billion. The CMS sponsored study (available at [www.nap.edu/catalog/11623.html#toc](http://www.nap.edu/catalog/11623.html#toc)) addresses the scope of the problem, guidance on monitoring systems to prevent errors and ways for providers to work closely with patients to improve error rates.