

OASIS Alert

OASIS News You Can Use: DAVE WILL SOON BE YOUR SHADOW

DAVE a new measure designed to increase data accuracy will soon be moving from the nursing home setting to home health agencies.

Like the Minimum Data Set in nursing homes, OASIS data is the basis of a variety of important functions payment, quality, survey, research at the **Centers for Medicare & Medicaid Services**, noted CMS official **Heidi Gelzer** in a presentation at the **National Association for Home Care & Hospice's** annual policy conference April 7 in Washington.

To make sure that data most accurately represents patients, CMS has implemented the Data Assessment and Verification (DAVE) Contract. The project aims to ferret out areas that are inconsistent or need further analysis, and educate providers, Gelzer explained.

DAVE clinicians will shadow provider clinicians and fill out OASIS assessments on the same patients at the same time. The DAVE staff and the provider staff then would compare their assessments and talk about the differences, Gelzer said.

The nursing home DAVE project is in the pilot stage, with the national rollout beginning in a few months. The OASIS reviews are "just in the planning stages," Gelzer added.

CMS won't be keeping the DAVE findings to itself or sharing them just with providers, however. In a July 2, 2002 letter to state survey agencies outlining the 2003 survey budget (S&C-02-40), CMS makes clear it will be sharing DAVE accuracy results with the survey agencies. "We anticipate increased [survey agency] involvement and general assistance to providers coordinating activities with DAVE staff and taking enforcement actions as required," the letter said.

Lesson learned: Keeping an eye on quality improvement efforts in nursing homes will give you a heads up on what to expect in home health.

1. **CMS has released** the draft specs for OASIS 1.40 to help software developers and others prepare for the change, it says. The specs specify that V and E diagnosis codes will not be allowed in M0190, M0210 or new item M0245, but will be allowed in M0230 and M0240. HHAs also must start using the standardized branch identification number issued by the state in M0016 for assessments completed Jan. 1, 2004 and later, CMS says. Interested parties can download the draft specs at www.cms.hhs.gov/oasis/datasubm.asp. CMS plans to release the final version by Aug. 31.
2. **In a May 1 letter to Health and Human Services Secretary Tommy Thompson, Sen. Charles Grassley (R-IA) urged** the HHS chief to back down on a proposal to eliminate the OASIS requirement for private-pay patients.

HHAs currently have to collect OASIS data on such patients, but they don't transmit it making the process an apparently needless paperwork burden for agencies with many private-pay patients.

Grassley, who is chair of the Senate Finance Committee, argues the private-pay collection requirement is consistent with the Medicare program's overall vision of ensuring beneficiaries receive the same quality of care as private-pay patients. Since CMS purportedly has the technology to encrypt OASIS data appropriately, Grassley maintains the agency should begin collecting and analyzing the data as part of its quality improvement efforts.

A CMS official at the May 7 Home Health Open Door Forum stated that there is no date set for making that decision.

3. **HHAs that missed** the special Open Door Forum on the Home Health Quality Initiative March 27 can review CMS' 44-page transcript of the call, which gives an overview of the project, at www.cms.hhs.gov/quality/hhqi/OpenDoorTranscript.pdf.

4. **CMS has issued** Microsoft Word files of the reduced OASIS dataset so HHAs can cut and paste if they modify their own assessment forms. "Use of a new reduced OASIS assessment form is completely optional" until Oct. 1 when M0245 is required, CMS reminds agencies. The files are at www.cms.hhs.gov/oasis/oasisdat.asp.