

OASIS Alert

Regulations; CMS Abbreviates OASIS Requirements, Again

With suspended requirements, documentation is critical.

Hurricane Ike cleared a path through Texas, but HHAs won't have to wade through paperwork to care for those who were affected by the storm.

In the wake of **Hurricane Katrina**, the **Centers for Medicare & Medicaid Services** waived specific Medicare, Medicaid, and HIPAA requirements -- including some conditions of participation for providers who provide care to hurricane victims. CMS has put that waiver back into effect so that Hurricane Ike's victims receive timely and appropriate care.

Rules: The waiver applies to Medicare-approved HHAs serving qualified home health patients in the public health emergency areas. In September, **Department of Health and Human Services** secretary **Michael Leavitt** declared public health emergencies in Texas and Louisiana due to Hurricane Ike. In August, Leavitt declared public health emergencies in Texas, Louisiana, Mississippi, and Alabama following **Hurricane Hanna**.

Payment Hinges On Your Accurate Documentation

Home health agencies in those public health emergency areas should follow these stated guidelines:

- The start of care assessment (RFA 1) may be abbreviated to include the Patient Tracking Sheet and the 24 payment items. This abbreviated assessment does not have to meet the five-day completion date or the seven-day lock date. In addition, the OASIS transmission requirements at 42 CFR 484.20 are suspended for those Medicare-approved HHAs that are serving qualified home health patients in the affected areas, CMS instructs.
- The resumption of care assessment (RFA 3) and the recertification assessment (RFA 4) may be abbreviated to just the 24 payment items.
- The discharge assessment (RFA 8 or RFA 9) and the transfer assessment (RFA 6, RFA 7) are suspended during the waiver period.

Crucial: "Agencies should maintain adequate documentation to support provision of care and payment," CMS warns, and they must use the exceptions "only as needed, and to return to business as usual as soon as possible."

Keep in mind: HHAs won't be able to submit their abbreviated SOC assessments to the state OASIS system, so they won't have outcome reports for those episodes, CMS notes. That means they'll receive warnings for all of their assessments that are submitted late due to the deferment.