

## OASIS Alert

### Reimbursement: TAKE YOUR CUE FROM MR. MAGOO

If you turn a blind eye to your patients' vision problems, you could see reimbursement you deserve spiral down the drain.

OASIS item M0390 asks clinicians to assess patients' vision (with corrective lenses if the patient usually wears them), and is one of the M0 items that adds case mix points that can ultimately increase your payment, notes Chapel Hill, NC-based consultant **Judy Adams** with the **Larson Allen Health Group**. Checking box one (partially impaired) or two (severely impaired) adds six points to the patient's case mix score.

The trouble is, many clinicians have a hard time determining the degree to which a patient is visually impaired. A patient's vision is partially impaired if she can't see medication labels or newsprint, but can see obstacles in her path and the surrounding layout and can count fingers at arm's length, according to the OASIS Implementation Manual. A patient's vision is severely impaired if she can't locate objects without hearing or touching them or if she's non-responsive. If the patient can read medication labels and newsprint and sees fine in most situations, she's considered to have normal vision, and you must mark box zero.

To figure out which category a patient falls into, "pretend you're **Barbara Walters**," and conduct an interview, suggests consultant **Rose Kimball** with **Med-Care Administrative Services** in Dallas. Ask questions that require more than a yes/no response, she says. For example, when asking if the patient has corrective lenses, don't just say, "Do you have corrective lenses?" Instead, ask if she wears them regularly and when she last had her prescription refilled.

And don't simply ask the patient if she can read her medication labels and newsprint have her actually do it for you, Kimball insists. If the patient has several medication bottles, you can ask her to hand you a specific one, suggests consultant **Pat Sevast** with **American Express Tax & Business Services** in Timonium, MD.

Be careful, though. Remember that you're assessing the patient's ability to see, not her ability to read, Adams cautions. If you think a patient might be illiterate, have her look at a card that has pictures on it that are about the same size as writing and ask her to identify what they are, she suggests.

If you determine the patient is unable to read medication labels, that might mean the patient is unable to manage her oral medications (M0780) but not necessarily, notes Adams. Many patients with difficulty seeing have devised other ways to ensure they're taking the correct meds.

If that's the case, you should include a comment to that effect when answering M0780 or you could appear to have a discrepancy between your answers, she concludes.