

## OASIS Alert

### Training: Don't Skimp On OASIS Training Or Your Profits Will Suffer

**Here's how to convince your CFO to put more training in the budget.**

You cheat yourself out of money you've earned if you take a light approach to training.

Learning important OASIS lessons takes longer than you might think. Your OASIS training mantra should be "once is not enough." Adult learners need to hear or see things an average of seven times to remember them, emphasizes OASIS trainer **Patricia Jump** with Stewartville, MN-based **Acorn's End Training & Consulting**. Repeat OASIS explanations frequently and in a variety of ways so your staff retains the information, she says.

Inaccurate OASIS answers can be a huge drain on your agency's bottom line, experts agree. Especially for a small agency, obtaining your rightful reimbursement for each episode is crucial. The price of ignorance will hurt you more than paying money to educate clinicians, says reimbursement consultant **Vern Peterschmidt** with **Peterschmidt & Associates** in Albuquerque, NM.

OASIS experts who audited charts for both underpayments and overpayments found that fewer than 5 percent of the answers were over-scored, while 60 percent were under-scored, Jump tells **Eli**. That's a lot of dollars lost, she reminds providers.

Don't let your finance staff tell you there's no money for training. Instead show them how training can increase profits by adapting these examples to your agency:

**Example:** A company that tracks both low utilization payment adjustment percentage (which was higher than average) and case mix weight (which was lower than average) had a mandatory OASIS training session held over a two-day period, so all staff could attend. After the training, staff were able to answer the OASIS questions more accurately and consistently, Jump reports. The agency saw the LUPA rates decrease and case mix weights increase significantly - leading to increased revenue and profitability.

**Example:** For an agency the size of the **VNA of Boston** (about 15,000 patients a year), a change in the case mix weight of only one hundredth of a point - say between 1.09 and 1.10 - if sustained for a year can add or subtract about \$250,000 in revenue, says the agency's COO **Kate O'Neil**. If this change results from improved OASIS accuracy, it will not require any additional people or visits, so the entire amount "drops directly to the bottom line," she tells **Eli**. Refusing to pay for continuing education would be hard to justify in the face of these numbers, she says.

Remember, you have to know what the **Centers for Medicare & Medicaid Services** is looking for to be able to answer accurately. You'd be hard pressed to find two people who could do an assessment on the same patient and come up with the same answers, if they had no training in how to answer OASIS questions, O'Neil says. Both the meaning of the questions and the information CMS wants to know are not intuitive, she adds.

You can illustrate the difficulty of accurately answering the OASIS assessment by making sure the finance and management people in your agency actually look at the questions and imagine answering them. Even better is to show them a video of a patient ambulating and then ask them to answer the relevant M0 questions, O'Neil suggests. They will be surprised by the difficulty and the lack of agreement among respondents, she predicts.

**Fallback position:** If cost-benefit arguments don't get you the training funds, don't forget to mention that inaccurate answers cause compliance problems. Making the same mistake repeatedly can mean you will owe the government "significant money" when the feds start looking back at confusing questions, O'Neil notes. M0175 recoupments are a

case in point. And the looming threat of pay for performance should add urgency to your efforts, she says.