

# **Home Health Coding and OASIS Expert**

# **Quality Measures: Are Your OASIS Responses Costing Your Agency?**

### Nine measures factor into your star rating.

Starting this month, prospective patients are able to check your agency's star ratings on the home health compare website. Make certain your clinicians` OASIS responses aren't lowering your agency's rating.

**Background:** The **Centers for Medicare & Medicaid Services** will post ratings for home health agencies on a scale of 1 to 5 stars starting in July. CMS is also adding two new quality measures to the site as well [] rehospitalization during the first 30 days of home health, and emergency department use without hospital readmission during the first 30 days of home health.

#### Know What's Factored In

Tallying "star ratings for some outcome measures is intended to help consumers more quickly identify differences in quality and make use of the information when selecting a health care provider and to help providers identify areas of improvement," says **Pat Jump** with Rice Lake, Wis.-based **Acorn's End Training & Consulting**. CMS formerly reported 27 process, outcome, and patient experience of care quality measures on the Home Health Compare (HHC) website to help consumers and their families make choices about who will provide their home health care, she says. The HHC Star Rating is an additional measure available on the website.

There are 9 star rating categories. And most agencies will fall in the 3- and 3.5-star range, a CMS official said during a May 6 Open Door Forum.

The HHC Star Ratings include 9 of the 22 already reported process and outcome quality measures:

# **Process Measures:**

- 1. Timely Initiation of Care
- 2. Drug Education on all Medications Provided to Patient/Caregiver
- 3. Influenza Immunization Received for Current Flu Season

#### Outcome measures:

- 4. Improvement in Ambulation
- 5. Improvement in Bed Transferring
- 6. Improvement in Bathing
- 7. Improvement in Pain Interfering With Activity
- 8. Improvement in Shortness of Breath
- 9. Acute Care Hospitalization

## **Make a Positive Impact on Your Ratings**

"Providers have been reviewing outcomes and targeting areas for improvement for many years," Jump says. "The review



process remains the same but the incentive for improvement has been enhanced with the initiation of the HHC Star Rating."

From a big picture perspective, consider these general action steps from Jump to help ensure the best possible rating:

- Select specific care processes and outcome measures to work on.
- Assess reasons for low rates of compliance with best practice interventions. Include clinicians who complete OASIS assessments and who deliver direct care to the client in this research.
- Develop a plan of action to improve rates of compliance with best practice interventions.
- Implement a plan of action and monitor for improvement in rates of compliance with best practice interventions.
- Analyze process quality measures in conjunction with relevant outcomes.

#### **Drill Down to Specifics**

The data used to calculate your outcomes is derived from your OASIS responses, so making certain you're not making some common mistakes will also help boost your star ratings. Consider these tips from **Beth Johnson**, **MBA**, **BSN**, **RN**, **CRRN**, **HCS-D**, **HCS-O**, President of **Johnson**, **Richards & Associates**, in Brighton, Mich. for improving you accuracy on these important items.

**Timely Initiation of Care:** Remember, the date of referral is the date on the fax, whether anyone is there to receive it or not. So if you don't have anyone in your office to receive faxes after hours or on weekends, you may be behind in processing referrals. Consider changing to e-faxes or forwarding your fax machine to the supervisor on-call to make sure you don't miss after-hours referrals.

**Influenza Immunization Received for Current Flu Season:** Problems with this measure often stem from a tracking issue. Check for problems with tracking immunization data and make appropriate improvements. Also remind staff that "look-back" to prior OASIS documents is allowed when responding to this question.

**Improvement in Pain Interfering with Activity:** Make sure staff understands official OASIS guidance about how to answer this question: "Pain interferes with activity when the pain results in the activity being performed less often than otherwise desired, requires the patient to have additional assistance performing the activity, or causes the activity to take longer to complete. Include all activities (e.g., sleeping, recreational activities, watching television), not just ADLs" (OASIS Guidance Manual). Additional assistance includes non-pharmacologic interventions as well as the use of assistive devices if a walker or cane relives pain when walking or transferring.

**Improvement in Shortness of Breath:** Don't hesitate to involve the interdisciplinary team when a patient has deficits in ADLs or issues with pain or SOB. Physical therapy and occupational therapy services for patient with cardiopulmonary diagnoses are often under-utilized, Johnson says. "Yet those patients can benefit from the expertise of these skilled disciplines. PTs and OTs can work on work simplification, improving cardiac reserve, and improving respiratory muscle strength, among other skills."

**Acute Care Hospitalization:** "We've often talked about front-loading visits but we are now seeing a pattern of readmissions after 30 days, so it's important that we follow patients long enough to be sure that they aren't readmitted to the hospital after a period of high-acuity," Johnson says. "We've been seeing agencies discharge patients too soon and end up with partial episode payments (PEPs). This is a delicate balance and one that agencies should be leveraging with data about their own patterns of readmissions and PEPs."