



Accurate OASIS coding has always been important, but with PDGM on the horizon, our ability to master the OASIS will be imperative! After all, accurate OASIS coding will directly impact an agency's ability to achieve optimal outcomes and support reimbursement in today's and tomorrow's world.

All Aboard...The Train is leaving the Station

HealthPRO® Heritage at Home recommends that home health agencies begin preparing for PDGM TODAY by initiating the following four strategies:

- Take an interdisciplinary approach by establishing processes & prioritizing ongoing training – with a specific focus on the functional items -- to ensure accurate coding. (NOTE: This is in stark contrast to the traditional 'one clinician' rule.)
- Establish processes to support interdisciplinary collaboration utilizing the 5 day window allowed by CMS.
- Partner with your EMR vendor RE: OASIS data tracking and outcomes reporting.
- Implement a QA process to assess OASIS accuracy.

Tickets Please

Of course, success under the PDGM system will require agencies to understand how changes will impact reimbursement. HealthPRO® Heritage at Home offers one example here:

In the new world of PDGM, there are three proposed functional impairment levels for each clinical grouping:

- Low
- Medium
- High

These point levels:

- Are inversely related to a patient's functional status (i.e.: *low* is the highest functioning patients, and *high* is the lowest),
- Vary between clinical groupings, and (ICD-10 coding is important for proper clinical grouping placement, while OASIS accuracy is important for appropriate functional level assignment)
- Are assigned based on responses to questions listed in Table 28. (Important to note: Under PDGM, M1800 (Grooming) and M1022 (Risk of Hospitalization) are now OASIS questions that now will impact functional scoring/reimbursement.)

	Response Category	Points (2017)	% of Periods in 2017 with this Response Category
M1800: Grooming	1	4	56.9%
M1810: Current Ability to Dress Upper Body	1	6	60.0%
M1820: Current Ability to Dress Lower Body	1	5	59.3%
	2	11	20.9%
M1830: Bathing	1	3	18.0%
	2	13	53.1%
	3	21	23.7%
M1840: Toilet Transferring	1	4	32.1%
M1850: Transferring	1	4	37.7%
	2	8	59.3%
M1860: Ambulation/Locomotion	1	10	25.1%
	2	12	52.0%
	3	24	14.8%
M1032: Risk of Hospitalization	4 or more items checked	11	17.8%

Mind the Gap

Since it was rolled out in January, nurses and therapists have been learning and utilizing the OASIS-D, but questions are common and these clinicians need help. (HealthPRO® Heritage at Home's surveyed participants during a recent webinar presentation, and 35%+ reported "practically guessing" when completing the new sections (Section GG and Section J.) Clearly, more training and competencies will be necessary to bring staff up to speed.

Need support? HealthPRO® Heritage at Home offers your agency training and resources to assure OASIS accuracy for your clinicians.