

National Association for Home Care and Hospice Policy Conference and Law Symposium

Home Health Survey and Certification

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April 23, 2007

OASIS Changes

- Changes to OASIS for payment purposes
- OASIS items:
 - Added
 - Deleted
 - Modified
- New HAVEN and OASIS prior to PPS implementation

Resources

Data Transmission

OASIS Automation Coordinator

- http://www.cms.hhs.gov/OASIS/07_AutomationCoord.asp#TopOfPage
- HAVEN Help Desk
 - Haven_help@IFMC.org
 - 877-201-4721

OASIS Refinements

- Feedback from users
- Technical Experts Panel
- NQF Recommendations
- ASPE Risk Adjustment Study
- Consolidated Health Information (CHI)
- Electronic Health Record (EHR)
- Post Acute Care (PAC) Common Assessment Tool

OASIS Refinements

- Home Care Compare Website
 - <http://www.medicare.gov/>
 - Home care industry
 - Consumers and family
 - Referral source by discharge planners

Quality Measures

Considering new measures for :

- Pay for Reporting – P4R
 - Deficit Reduction Act 2005 (DRA)
 - Payment regulation in Federal Register 8/3/2006
- Pay for Performance – P4P
- Process Measures
- Patient Satisfaction
- Better Identify Chronic Care Patients

Resources-OASIS Items

OASIS Home Page

- <http://www.cms.hhs.gov/oasis/>
- OASIS Implementation Manual - Chapter 8
- Revised August 2006

OASIS Web-based Training

- <http://www.oasistraining.org/oasis11/upfront/U1.asp>
- <http://oasistraining.org>

Resources- OASIS Items

QTSO Questions & Answers

- <http://www.qtso.com/hhdownload.html>

OASIS Educational Coordinator

- <http://www.cms.hhs.gov/oasis/hhoec.pdf>

OASIS Team

- CMSOASISQandAS_OASISANSWERS@hcdi.com

OASIS Issues

Questions & Answers about OASIS

- 12 Categories of questions and answers
www.qtso.com/hhdownload.html
- Revised June 2005
- 62 new OASIS Q&As

OASIS Issues

Questions & Answers about OASIS

- Category 2 Comprehensive Assessment
- Category 3 Follow-up assessment
- Category 4 OASIS Data Set Items
- Crosswalk reference –Current to Prior Version

OASIS Issues

- Medicare Advantage
 - M0150
 - M0063
- FFS to Managed Care/Managed Care to FFS
- Surgical Wound Guidance
 - www.wocn.org
- Pressure Ulcer Guidance
 - www.npuap.org

Top 10 OASIS Transmission Errors

- 102 – Warning – Inconsistent lock date (no longer applicable)
- 257- Warning – The submitted HIPPS_CODE/HIPPS_Version must match the calculated value

Top 10 OASIS Transmission Errors

- 286 – Warning – Inconsistent M0090/Submission Date
- 1000 – Fatal Record – Duplicate assessment
- 234 – Warning – Inconsistent LOCK DATE/Submission Date (prior to 6/21/06)

Top 10 OASIS Transmission Errors

- 1002 – Warning – Inconsistent record sequence
- 262 – Warning - Inconsistent M0090 date
- 1003 – Warning – Inconsistent effective date sequence

Top 10 OASIS Transmission Errors

- 129 – Warning – Inconsistent M0090 date: Discharge record was not completed within CMS timing guidelines. (M0090) date should be no earlier than (M0906) date AND no more than the 2 days after (M0906) date
- 213 – Fatal record – Invalid data value

Conditions of Participation

- Appendix B of State Operations Manual
- Proposed rule under review
- Policy changes published in Survey and Cert letters
- <http://www.cms.hhs.gov/SurveyCertificationGenInfo/PMSR/list.asp#TopOfPage>

Survey Frequency

- Statutory requirement to survey HHAs no less frequently than every 36 months
- 5% Targeted sample
- Validation Surveys
 - Federal
 - Accrediting Organizations (AOs)

Surveyor Focus

- Quality of Care
- Patient Safety
- Outcome Oriented
- Types of Surveys
 - Standard Survey
 - Partial Extended
 - Fully Extended

Survey Tasks

- Pre-survey preparation
- Entrance Interview
- Information gathering
- Information analysis
- Exit Conference
- Formation of Statement of Deficiencies
(2567)

Top 10 Survey Deficiencies

- G 158 – Written plan of care established & periodically reviewed
- G 236 – Record with past/current findings maintained for all patients
- G 159 – Plan of care covers diagnosis, required services, visits, etc.
- G 337 – Assessment includes review of all medications

Top 10 Survey Deficiencies

- G 164 – Alert physician to changes that suggest need to alter plan
- G 165 – Drugs & treatment administered only as ordered by physician
- G 229 – Supervisory visits if skilled care no less than once every 2 weeks

Top 10 Survey Deficiencies

- G 143 – Coordination of patient services
- G 121 – Compliance with accepted professionals/standards of practice
- G 145 – Written report for each patient to attending physician every 60 days

NPI

- http://www.cms.hhs.gov/apps/npi/01_overview.asp
- Must have provider specific NPI by 5/23/2007

Other Resources

- HHA Center - <http://www.cms.hhs.gov/center/hha.asp>
- OBQI - <http://www.cms.hhs.gov/HomeHealthQualityInits/>
- HHA PPS - <http://www.cms.hhs.gov/HomeHealthPPS/HHPPSRN/list.asp>
- Open Door Forums - http://www.cms.hhs.gov/OpenDoorForums/17_ODF_HHHDME.asp
- State Operations Manual – SOM - <http://www.cms.hhs.gov/manuals/downloads/som107c02.pdf>
- Conditions of Participation - CoPs http://cms.hhs.gov/manuals/Downloads/som107ap_b_hha.pdf

Questions

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