Instructions to Ensure Accurate OASIS Assessments

1. **Error Validation.** In the SOS Electronic Health Record (EHR) online application OASIS form, click on the “VALIDATE” link at the top of the form and read edits.
   a. If all there are no errors, the result with be zero (0) errors and you can move onto the PPS Plus accuracy analysis.
   b. If there are errors, please read the edits and correct them, then recheck until you have zero (0) errors.

2. **Accuracy Analysis.** Click on the “EXPORT TO PPS PLUS” link at the top of the form. This will give you a summary of potential inaccuracies in several sections:
   a. **Coding:** check to make sure the codes are what you want to select and are reflective of the care you plan to provide to the patient, and are in keeping with the MD orders and referral information. Make changes if needed.
   b. **Patient Hx and Dx:** This section is geared to coding tips to help with reimbursement and is mostly to be addressed by Clinical Managers in the office.
      i. This section also highlights each system where inconsistency errors are noted (e.g. Integumentary patient has mobility problems, which may be inconsistent with no stage 1 pressure ulcers being listed. e.g. Neuro patient is alert and oriented, may be inconsistent with a response that patient has impaired decision making.
      ii. It only highlights a system if there are potential inconsistencies. If a system is not listed, then no problems were found by the software.
      iii. Please take the time to review the OASIS M-item listed so you can make an informed decision on whether you need to make change of your entry. We recommend that you re-read the M-item and also look the item up in your OASIS Item-by-Item Guide for a better understanding of what to consider when answering the item (if you do not have an OASIS Item-by-Item guide, please contact the office to receive one).
   c. **ADL/IADL overview:** This is where it points out inconsistencies and asks the clinician to review answers because the response in one area conflicts with entries in other areas (e.g. Patient is independent with grooming but needs assistance with toilet transfers and ambulation).
      i. The clinician needs to read this section carefully and make corrections required if they identify that initial responses were inaccurate.
      ii. Re-read the oasis M-item carefully and change response if required. In example above, you may decide to changing Grooming to 1 (grooming utensil must be placed within reach before able to groom self) or 2 (someone else must assist patient to groom self), the rationale being that if the patient needs help with transfers and ambulation, then they probably need things put into their reach and/or assistance with the actual activity to complete it safely. The operative word in this example is **safely**.
iii. If a patient can do an activity but it takes increased time to do it, at risk of falling as it is a struggle to accomplish the activity, then the patient should not be scored as independent with the activity.

iv. Another thing to always keep in mind is that this section helps to justify homebound status.
   1. Patients that score mostly zero (0) may not homebound and may be able to leave home to receive medical care outside the home. Because homebound status is a requirement that must be met before Medicare with cover care provided, we are at risk for Medicare to deny claims if scores are mostly zero (0).

d. **Medication Follow Up:** Clinically significant issues pop up here.
   i. Read the items clearly to identify high risk medications and medication issues if identified, and what is done about medication issues.

e. **Potentially Avoidable Events Prevention:** This section seeks to help agency stay in compliance with best practice measures (e.g. a clinician states that the patient is cognitively impaired so PPS Plus reminds the clinician to be sure that interventions are in place to prevent improper medication administration).

Finally, Care at Home relies on the clinician's assessment skills and ability to understand the OASIS items to determine the best answer to enter. Accuracy of assessments and reimbursement depend on how the OASIS M-items are answered so it is important that clinicians strive to enter assessment information as accurately as possible. If you have OASIS completion questions or would like to access OASIS training resources, please contact our certified OASIS specialists in the office!

The PPS Plus system provides valuable insights and can be used as a tool to help everyone learn more about OASIS accuracy and completion. A tool is only valuable if one takes the time to learn it and use it correctly, so please do not hesitate to request additional training on OASIS completion and using the PPS Plus analysis software if it would help you improve OASIS accuracy.

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