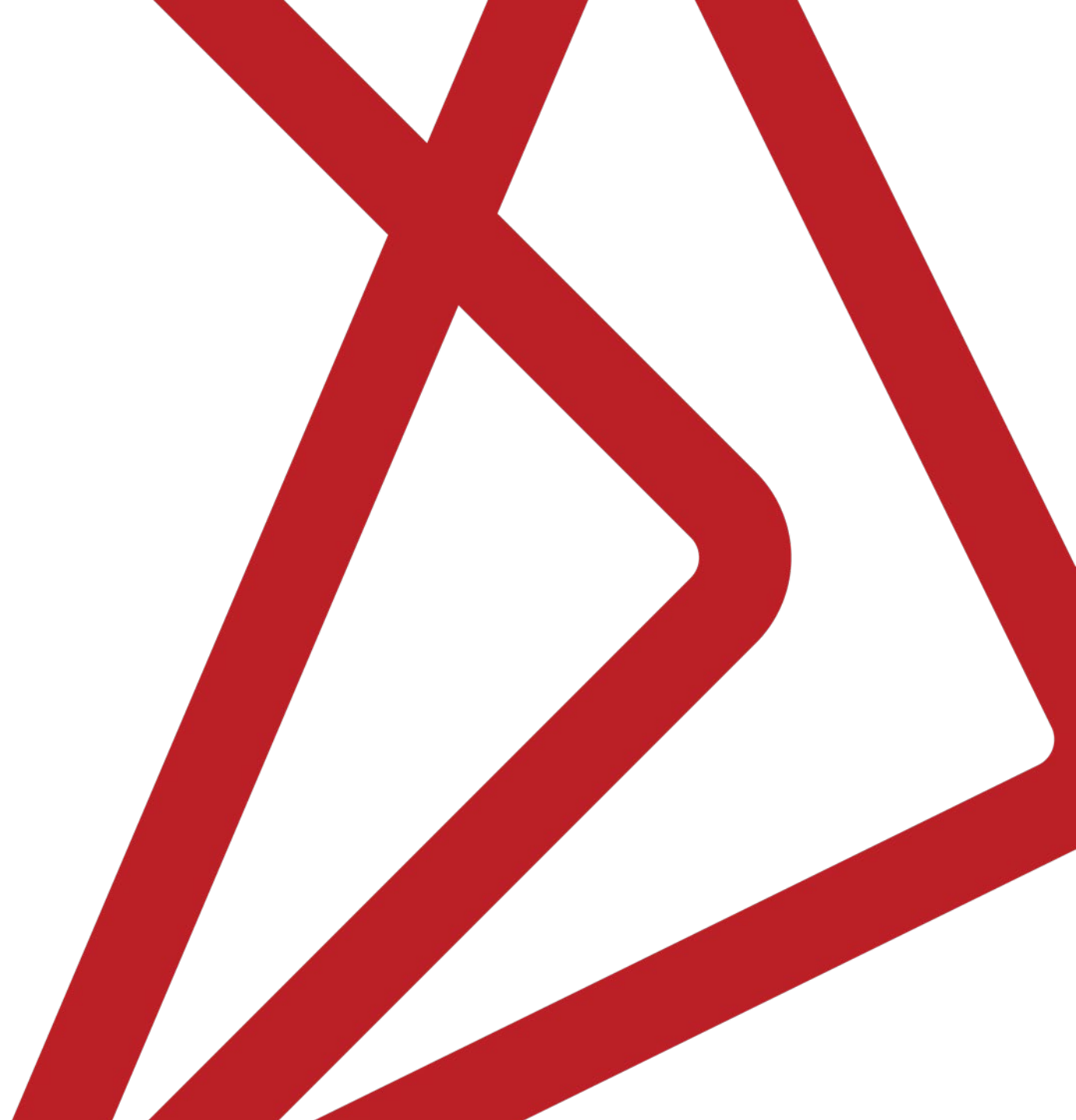




OASIS-E1 Guidance Update

Guidance Manual Changes from
version OASIS-E

April 30, 2024





Overview

- Three items & guidance removed
 - M0110 Episode Timing
 - M2200 Therapy Need
 - GG0130 Self-Care and GG0170 Mobility Discharge Goals
- One item & guidance added
 - O0350 Patient COVID-19 Vaccine Up to Date
- Transition to all payer OASIS data collection
- General updates (i.e., version name, punctuation, typographical errors)





Remove M0110 Episode Timing

M0110. Episode Timing
Is the Medicare home health payment episode, for which this assessment will define a case mix group, an “early” episode or a “later” episode in the patient’s current sequence of adjacent Medicare home health payment episodes?

Enter Code

- 1. **Early**
- 2. **Later**
- UK **Unknown**
- NA **Not Applicable:** No Medicare case mix group to be defined by this assessment.

Time Points Item Collected

- Start of Care
- Resumption of Care
- Follow-up





Remove M2200 Therapy Need

M2200. Therapy Need

In the home health plan of care for the Medicare payment episode for which this assessment will define a case mix group, what is the indicated need for therapy visits (total of reasonable and necessary physical, occupational, and speech-language pathology visits combined)? (Enter zero [“000”] if no therapy visits indicated.)

Number of therapy visits indicated (total of physical, occupational and speech-language pathology combined).

NA – Not Applicable: No case mix group defined by this assessment.

Time Points Item Collected

- Start of Care
- Resumption of Care





Remove Discharge Goals from GG0130/GG0170

SOC/ROC

GG0130. Self-Care

Code the patient's usual performance at SOC/ROC for each activity using the 6-point scale. If activity was not attempted at SOC/ROC, code the reason. Code the patient's discharge goal(s) using the 6-point scale. Use of codes 07, 09, 10 or 88 is permissible to code discharge goal(s).

SOC/ROC

GG0170. Mobility

Code the patient's usual performance at SOC/ROC for each activity using the 6-point scale. If activity was not attempted at SOC/ROC, code the reason. Code the patient's discharge goal(s) using the 6-point scale. Use of codes 07, 09, 10 or 88 is permissible to code discharge goal(s).

Time Points Discharge Goals Collected

- Start of Care
- Resumption of Care



1. SOC/ROC Performance	2. Discharge Goal
↓ Enter Codes in Boxes ↓	
<input type="text"/>	<input type="text"/>



Add O0350 COVID-19 Vaccine Up to Date

O0350. Patient's COVID-19 vaccination is up to date.

Enter Code

0. No, patient is not up to date
1. Yes, patient is up to date

Time Points Item Collected

- Transfer
- Death at Home
- Discharge





Transition to all payer OASIS collection

Draft clarifying language in the Home Health proposed rule (NPRM) about transition to collection and submission of OASIS data for all payers.

- Opportunity for public comment and final clarification

When the rule is finalized, OASIS Guidance in Chapter 1 will be updated to include requirements.

No change to any OASIS item.

- Specification change for M0150 Current Payment Source to allow submission of non-Medicare, non-Medicaid response(s).





General Updates



- Where applicable the Manual is edited for the following:
 - Formatting, grammar, style, to improve clarity
 - Updated dates, updated references and resources
 - Reorganized information
 - Updated version title from E to E1
- Anticipated posting of Draft OASIS-E1 Guidance Manual in May 2024





Resource for changes to OASIS

Home Health Calendar Year (CY) 2024 Final Rule

[Federal Register :: Medicare Program; Calendar Year \(CY\) 2024 Home Health \(HH\) Prospective Payment System Rate Update; HH Quality Reporting Program Requirements; HH Value-Based Purchasing Expanded Model Requirements; Home Intravenous Immune Globulin Items and Services; Hospice Informal Dispute Resolution and Special Focus Program Requirements, Certain Requirements for Durable Medical Equipment Prosthetics and Orthotics Supplies; and Provider and Supplier Enrollment Requirements](#)

