Tuesday, October 15, 2019    3:45 PM
802    OASIS D: Ending the Battle Over the Functional Assessment
OASIS D: Ending the Battle Over the Functional Assessment

Disclosures

- Cindy Krafft and Dee Kornetti are paid instructors for Medbridge, teaching course content on OASIS
Learning Objectives

1. Define "safely" when assessing function as part of OASIS data collection.

2. Explain the relationships between M and GG versions of functional items on OASIS.

3. Create a plan for implementing the tool provided as part of the training session.

Patient Driven Groupings Model

Clinical Decision Making??

Claims Data

OASIS Data

Admission Source and Timing (From Claims)
- Community Early
- Community Late
- Institutional Early
- Institutional Late

Clinical Grouping (From Principal Diagnosis Reported on Claim)
- Neuro Rehab
- Wounds
- Complex Nursing Interventions
- ME Rehab
- Behavioral Health
- MNTA - Other
- MNTA - Surgical, and Cardiovascular
- MNTA - Endocrine
- MNTA - GI/GU
- MNTA - Infectious Disease
- MNTA - Respiratory

Functional Impairment Level (From OASIS Items)
- Low
- Medium
- High

Comorbidity Adjustment (From Secondary Diagnoses Reported on Claims)
- None
- Low
- High

HHRG (Home Health Resource Group)
Functional OASIS Items

- M1800: Grooming
- M1810: Current ability to dress upper
- M1820: Current ability to dress lower
- M1830: Bathing
- M1840: Toilet Transferring
- M1850: Transferring
- M1860: Ambulation/Locomotion
- M1033: Risk of Hospitalization

“When coding this item, the assessing clinician may consider available input from other agency staff who have had direct patient contact.”

Key Definitions

<table>
<thead>
<tr>
<th>ASSISTANCE</th>
<th>SAFETY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Defined as: “help; aid; support”</td>
<td>Defined as: “involving little or no risk of mishap”</td>
</tr>
<tr>
<td>Anything another person would do to ensure the safe completion of the task:</td>
<td>Impacted by one or more issues:</td>
</tr>
<tr>
<td>- Physical assistance</td>
<td>- Physical Ability</td>
</tr>
<tr>
<td>- Verbal Cues</td>
<td>- Cognitive Issues</td>
</tr>
<tr>
<td>- Supervision</td>
<td>- Environment</td>
</tr>
<tr>
<td>- Reminders</td>
<td>- Medical Restrictions</td>
</tr>
<tr>
<td>- Ask “Would there be any concerns if no one was there when the task was being done?”</td>
<td>- Sensory Issues</td>
</tr>
<tr>
<td></td>
<td>- Equipment</td>
</tr>
<tr>
<td></td>
<td>- Ask “Am I completely comfortable with how this task is being completed?”</td>
</tr>
</tbody>
</table>
What We Hear

• "The reviewer should just change the response"
• "Different reviewers tell me different things so who is telling me the truth"
• "You want me to pick that response just to increase payment / Home Health Compare scores"
• "The patient lives alone so I can’t put they need help"
• "What is my liability if I put they need help and don’t have it?"
• "I don’t have time to have the patient demonstrate all these tasks"

THERE IS A BETTER WAY!

M1060 – Height and Weight

(M1060) Height and Weight – While measuring, if the number is X.1-X.4 round down; X.5 or greater round up

<table>
<thead>
<tr>
<th>inches</th>
<th>pounds</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Height (in inches). Record most recent height measure since the most recent SOC/ROC</td>
<td></td>
</tr>
<tr>
<td>b. Weight (in pounds). Base weight on most recent measure in last 30 days; measure weight consistently, according to standard agency practice (for example, in a.m. after voiding, before meal, with shoes off, etc.)</td>
<td></td>
</tr>
</tbody>
</table>

- Only enter a height that has been directly measured by agency staff. Do not enter a height that is self-reported or derived from documentation from another provider setting.
- Only enter a weight that has been directly measured by agency staff. Do not enter a weight that is self-reported or derived from documentation from another provider setting.
- When there is an unsuccessful attempt to measure a patient’s height or weight, at SOC/ROC, and there is a documented agency-obtained height or weight from a documented visit conducted within the previous 30-day window may be used to complete M1060 for this SOC/ROC assessment. Whenever possible, a current height and weight should be obtained by the agency as part of the SOC/ROC assessment.
Function and Fall Risk

(M1910) Has this patient had a multi-factor Fall Risk Assessment (such as falls history, use of multiple medications, mental impairment, toileting frequency, general mobility/transferring impairment, environmental hazards)?

0 - No multi-factor falls risk assessment conducted.
1 - Yes, and it does not indicate a risk for falls.
2 - Yes, and it indicates a risk for falls.

Connecting M1910 to Function

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M1800 Grooming

(M1800) Grooming: Current ability to tend safely to personal hygiene needs (i.e., washing face and hands, hair care, shaving or make up, teeth or denture care, fingernail care).

0  - Able to groom self unaided, with or without the use of assistive devices or adapted methods.
1  - Grooming utensils must be placed within reach before able to complete grooming activities.
2  - Someone must assist the patient to groom self.
3  - Patient depends entirely upon someone else for grooming needs.

• When coding this item, the assessing clinician may consider available input from other agency staff who have had direct patient contact.
• In cases where a patient’s ability is different for various grooming tasks, enter the response that best describes the patient’s level of ability to perform the majority of grooming tasks.
• If ability varies over time, choose the response describing the patient’s ability more than 50% of the time period under consideration.
• Response 2 includes standby assistance or verbal cueing

M1830 - Bathing

(M1830) Bathing: Current ability to wash entire body safely. Excludes grooming (washing face, washing hands, and shampooing hair).

0  - Able to bathe self in shower or tub independently, including getting in and out of tub/shower.
1  - With the use of devices, is able to bathe self in shower or tub independently, including getting in and out of the tub/shower.
2  - Able to bathe in shower or tub with the intermittent assistance of another person:
   (a) for intermittent supervision or encouragement or reminders, OR (b) to get in and out of the shower or tub, OR (c) for washing difficult to reach areas.
3  - Able to participate in bathing self in shower or tub, but requires presence of another person throughout the bath for assistance or supervision.
4  - Unable to use the shower or tub, but able to bathe self independently with or without the use of devices at the sink, in chair, or on commode.
5  - Unable to use the shower or tub, but able to participate in bathing self in bed, at the sink, in bedside chair, or on commode, with the assistance or supervision of another person throughout the bath.
6  - Unable to participate effectively in bathing and is bathed totally by another person.

• When coding this item, the assessing clinician may consider available input from other agency staff who have had direct patient contact.
• If a patient is medically restricted from stair climbing, and the only tub/shower requires climbing stairs, the patient is temporarily unable to bathe in the tub or shower due to medical restrictions and environmental barriers.
• If the patient does not have a tub or shower in the home, or if the tub/shower is nonfunctioning or not safe for patient use, the patient should be considered unable to bathe in the tub or shower.
M1860 - Ambulation

(M1860) Ambulation/Locomotion: Current ability to walk safely, once in a standing position, or use a wheelchair, once in a seated position, on a variety of surfaces.

- 0: Able to independently walk on even and uneven surfaces and negotiate stairs with or without railings (i.e., needs no human assistance or assistive device).
- 1: With the use of a one-handed device (e.g., cane, single crutch, hemi-walker), able to independently walk on even and uneven surfaces and negotiate stairs with or without railings.
- 2: Requires use of a two-handed device (e.g., walker or crutches) to walk alone on a level surface and/or requires human supervision or assistance to negotiate stairs or steps or uneven surfaces.
- 3: Able to walk only with the supervision or assistance of another person at all times.
- 4: Chairfast, unable to ambulate but is able to wheel self independently.
- 5: Chairfast, unable to ambulate and is unable to wheel self.
- 6: Bedfast, unable to ambulate or be up in a chair.

- When coding this item, the assessing clinician may consider available input from other agency staff who have had direct patient contact.
- Variety of surfaces refers to typical surfaces that the patient would routinely encounter in his/her environment.
- Regardless of the need for an assistive device, if the patient requires human assistance (hands on, supervision and/or verbal cueing) to safely ambulate, select Response 2 or Response 3, depending on whether the assistance required is intermittent ("2") or continuous ("3").
- If the patient is safely able to ambulate without a device on a level surface, but requires minimal assistance on stairs, steps and uneven surfaces, then Response 2 is the best response (requires human supervision or assistance to negotiate stairs or steps or uneven surfaces).

Response Consistency – Does it Matter?
GG and Fall Risk

Risk for Falls?

- MAHC 10 < 4 = Little / No Risk
- MAHC 10 = 4+ = Significant Risk
- Completely Independent
- Assistance Before/After
- Human Assistance
- GG = 06
- GG = 05
- GG = at LEAST Supervision

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Reconciling M and GG

<table>
<thead>
<tr>
<th>Current Ability to Dress Upper Body</th>
<th>Enter Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>(M1810)</td>
<td>0</td>
<td>Able to get clothes out of closets and drawers, put them on and remove them from the upper body without assistance.</td>
</tr>
<tr>
<td></td>
<td>1</td>
<td>Able to dress upper body without assistance if clothing is laid out or handed to the patient.</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>Someone must help the patient put on upper body clothing.</td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>Patient depends entirely upon another person to dress the upper body.</td>
</tr>
</tbody>
</table>

F. Upper body dressing: The ability to dress and undress above the waist, including fasteners, if applicable.
### (M1830) Bathing: Current ability to wash entire body safely. Excludes grooming (washing face, washing hands, and shampooing hair).

<table>
<thead>
<tr>
<th>Enter Code</th>
<th>0</th>
<th>Able to bathe self in shower or tub independently, including getting in and out of tub/shower.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>With the use of devices, is able to bathe self in shower or tub independently, including getting in and out of the tub/shower.</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>Able to bathe in shower or tub with the intermittent assistance of another person:</td>
</tr>
<tr>
<td></td>
<td>(a)</td>
<td>for intermittent supervision or encouragement or reminders, OR</td>
</tr>
<tr>
<td></td>
<td>(b)</td>
<td>to get in and out of the shower or tub, OR</td>
</tr>
<tr>
<td></td>
<td>(c)</td>
<td>for washing difficult to reach areas.</td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>Able to participate in bathing self in shower or tub, but requires presence of another person throughout the bath for assistance or supervision.</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>Unable to use the shower or tub, but able to bathe self independently with or without the use of devices at the sink, in chair, or on commode.</td>
</tr>
<tr>
<td></td>
<td>5</td>
<td>Unable to use the shower or tub, but able to participate in bathing self in bed, at the sink, in bedside chair, or on commode, with the assistance or supervision of another person.</td>
</tr>
<tr>
<td></td>
<td>6</td>
<td>Unable to participate effectively in bathing and is bathed totally by another person.</td>
</tr>
</tbody>
</table>

#### GG

<table>
<thead>
<tr>
<th>1</th>
<th>SOC/ROC Performance</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Discharge Goal</td>
</tr>
<tr>
<td></td>
<td>Enter Codes in Boxes</td>
</tr>
</tbody>
</table>

### E. Shower/bathe self: The ability to bathe self, including washing, rinsing, and drying self (excludes washing of back and hair). Does not include transferring in/out of tub/shower

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### Not Attempted Codes – 88 versus 09

#### GG Item Specifics

- Can the task be done NOW?
  - Yes: Attempted Codes
  - No: Not Attempted Codes

#### Assess Ability

- Yes
- No

#### Code Options

- Attempted Codes
- Not Attempted Codes

#### GG Item Specifics

- Was the task done BEFORE?
  - Yes
  - No

#### Consider PLOF

- Yes: 88 = Medical Condition or Safety Concern
- No: 09 = Not applicable

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GG Response Options

Coding:
Safety and Quality of Performance – If helper assistance is required because patient’s performance is unsafe or of poor quality, score according to amount of assistance provided. Activities may be completed with or without assistive devices:
00. Independent – Patient completes the activity by him/herself with no assistance from a helper.
05. Setup or clean-up assistance – Helper sets up or cleans up; patient completes activity. Helper assists only prior to or following the activity.
04. Supervision or touching assistance – Helper provides verbal cues and/or touching/steadying and/or contact guard assistance as patient completes activity. Assistance may be provided throughout the activity or intermittently.
03. Partial/moderate assistance – Helper does LESS THAN HALF the effort. Helper lifts, holds or supports trunk or limbs, but provides less than half the effort.
02. Substantial/maximal assistance – Helper does MORE THAN HALF the effort. Helper lifts or holds trunk or limbs and provides more than half the effort.
01. Dependent – Helper does ALL of the effort. Patient does none of the effort to complete the activity. Or, the assistance of 2 or more helpers is required for the patient to complete the activity.

If activity was not attempted, code reason:
07. Patient refused
09. Not applicable – Not attempted and the patient did not perform this activity prior to the current illness, exacerbation or injury.
10. Not attempted due to environmental limitations (e.g., lack of equipment, weather constraints)
88. Not attempted due to medical conditions or safety concerns

Staying on the Same Page

Reviewer

Clinician
Time for Questions / Contact Information

Diana (Dee) Kornetti PT, MA, HCS-D, HCS-C – Owner/Founder
• Kornetti & Krafft Health Care Solutions
• Kornetti@valuebeyondthevisit.com

Cindy Krafft PT, MS, HCS-O – Owner/Founder
• Kornetti & Krafft Health Care Solutions
• Krafft@valuebeyondthevisit.com

thank you!