

# OASIS D

## What the Future Holds

# OASIS D: WHAT THE FUTURE HOLDS

*Presented by:*  
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## OASIS D: WHAT WE KNOW

- The proposed OASIS D item set was released March 2018
- The draft OASIS D Guidance Manual is scheduled for release in July 2018
- The final version of the OASIS D is scheduled for release in November 2018

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## OASIS D: THE BASIC FACTS

- Implementing OASIS D on January 1<sup>st</sup>, 2019. This is usually based on the M0090-Date Assessment Completed
- Removing: 28 M-Items
- Abbreviating: 1 M-Item
- Adding: 4 GG-Items and 2 J-Items

113 OASIS C2 Items 2018

- 28.5 OASIS C2 Items 2019

+ 6 OASIS D Items 2019

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**NOT** simple addition and subtraction!



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## OASIS D: RATIONALE FOR CHANGING

- CMS estimates an overall decrease in data collection times for OASIS:
  - SOC = 11.4 minutes less time to complete
  - ROC = 11.4 minutes less time to complete
  - F/U = 0.6 minutes less time to complete
  - TOC = 11.4 minutes less time to complete
  - D/C = 2.7 minutes less time to complete
  - DAH = 0.9 minutes more time to complete
- **BUT**, not all OASIS Items are created equally!



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## OASIS D: ITEMS REMOVED FROM OASIS

- C2 Items Removed:
  - M1011 – Inpatient Diagnoses ★
  - M1017 – Diagnoses Requiring Treatment Change ★
  - M1025 – Optional Payment Diagnoses ★
  - M1034 – Overall Status
  - M1210 – Hearing
  - M1220 – Understanding Speech
  - M1230 – Ability to Speak
  - M1300 – Assessment for Pressure Ulcer Risk ★
  - M1302 – Risk for Pressure Ulcers Identified ★
  - M1313 – Worsening in Pressure Ulcer Status ★
  - M1320 – Healing Status of Most Problematic Pressure Ulcer
  - M1350 – Skin Lesion or Open Wound
  - M1410 – Respiratory Treatments

★ = Time Saver!  
★ = No Time Savings

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## OASIS D: ITEMS REMOVED FROM OASIS

- C2 Items Removed :

- M1501 – Symptoms in Heart Failure ★
- M1511 – Heart Failure Follow-Up ★
- M1615 – When Does Urinary Incontinence Occur
- M1750 – Psychiatric Nursing Services ★
- M1880 – Ability to Plan and Prepare Meals
- M1890 – Ability to Use the Telephone
- M1900 – Prior Functioning ADL/IADL
- M2040 – Prior medication Management
- M2102a-e SOC – Assistance Available for ADLs, IADLs, Medications, Medical Procedures, and Equipment ★
- M2102b&e D/C – Assistance Available for IADLs and Equipment
- M2430 – Reason for Hospitalization ★
- M0903 – Date of Last Home Visit

★ = Time Saver!  
★ = No Time Savings

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## OASIS D: CHANGE IN OUTCOME CALCULATION

**New: Changes in Skin Integrity Post-acute Care: Pressure Ulcer/Injury**

**Old: Percent of Residents or Patient with Pressure Ulcers that are New or Worsened**

- M1311 will be used for calculations starting January 1, 2019
- Now includes new or worsening unstageable pressure injuries
- Including unstageable pressure ulcers in the calculation starting 1-1-2019 will increase the number of patients reported as having new or worsened pressure ulcers

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## OASIS D: ITEMS ADDED TO THE OASIS

**GG0100. Prior Functioning: Everyday Activities:** Indicate the patient's usual ability with everyday activities prior to the current illness, exacerbation, or injury.

**Coding:**

**3. Independent** – Patient completed the activities by him/herself, with or without an assistive device, with no assistance from a helper.

**2. Needed Some Help** – Patient needed partial assistance from another person to complete activities.

**1. Dependent** – A helper completed the activities for the patient.

**8. Unknown**

**9. Not Applicable**

↓ **Enter Codes in Boxes**

<input type="checkbox"/>	<b>A. Self Care:</b> Code the patient's need for assistance with bathing, dressing, using the toilet, or eating prior to the current illness, exacerbation, or injury.
<input type="checkbox"/>	<b>B. Indoor Mobility (Ambulation):</b> Code the patient's need for assistance with walking from room to room (with or without a device such as cane, crutch or walker) prior to the current illness, exacerbation, or injury.
<input type="checkbox"/>	<b>C. Stairs:</b> Code the patient's need for assistance with internal or external stairs (with or without a device such as cane, crutch, or walker) prior to the current illness, exacerbation or injury.
<input type="checkbox"/>	<b>D. Functional Cognition:</b> Code the patient's need for assistance with planning regular tasks, such as shopping or remembering to take medication prior to the current illness, exacerbation, or injury.

## OASIS D: ITEMS ADDED TO THE OASIS

**GG0110. Prior Device Use.** Indicate devices and aids used by the patient prior to the current illness, exacerbation, or injury.

↓ **Check all that apply**

<input type="checkbox"/>	<b>A. Manual wheelchair</b>
<input type="checkbox"/>	<b>B. Motorized wheelchair and/or scooter</b>
<input type="checkbox"/>	<b>C. Mechanical lift</b>
<input type="checkbox"/>	<b>D. Walker</b>
<input type="checkbox"/>	<b>E. Orthotics/Prosthetics</b>
<input type="checkbox"/>	<b>Z. None of the above</b>

## OASIS D: NEW OUTCOME CALCULATION

### Application of Percent of Long-Term Care Hospital Patients with an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function

- OASIS-C2 ADL items assess current ability vs. new items that evaluate usual performance at the time of admission and discharge for goal setting purposes
- Most items collected at SOC, ROC, F/U, and D/C – some items are omitted at F/U
- At least one goal must be selected to include the patient in outcome calculations

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## OASIS D: NEW OUTCOME CALCULATION

### 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).

#### 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.*

06. **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**

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## OASIS D: NEW OUTCOME CALCULATION

1. SOC/ROC Performance	2. Discharge Goal	
↓ Enter Codes in Boxes ↓		
□ □	□ □	A. <b>Eating:</b> The ability to use suitable utensils to bring food and/or liquid to the mouth and swallow food and/or liquid once the meal is placed before the patient.
□ □	□ □	B. <b>Oral Hygiene:</b> The ability to use suitable items to clean teeth. Dentures (if applicable): The ability to insert and remove dentures from and to the mouth, and manage equipment for soaking and rinsing them.
□ □	□ □	C. <b>Toileting Hygiene:</b> The ability to maintain perineal hygiene, adjust clothes before and after voiding or having a bowel movement. If managing an ostomy, include wiping the opening but not managing equipment.
□ □	□ □	E. <b>Shower/bathe self:</b> 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

## OASIS D: NEW OUTCOME CALCULATION

1. SOC/ROC Performance	2. Discharge Goal	
↓ Enter Codes in Boxes ↓		
□ □	□ □	F. <b>Upper body dressing:</b> The ability to dress and undress above the waist; including fasteners, if applicable.
□ □	□ □	G. <b>Lower body dressing:</b> The ability to dress and undress below the waist, including fasteners; does not include footwear.
□ □	□ □	H. <b>Putting on/taking off footwear:</b> The ability to put on and take off socks and shoes or other footwear that is appropriate for safe mobility; including fasteners, if applicable.



## OASIS D: NEW OUTCOME CALCULATION

### 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).

**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.*

- 06. **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:**

- 09. **Patient refused**
- 07. **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**

## OASIS D: NEW OUTCOME CALCULATION

1. SOC/ROC Performance	2. Discharge Goal	
↓ Enter Codes in Boxes ↓		
<input style="width: 30px; height: 20px;" type="text"/>	<input style="width: 30px; height: 20px;" type="text"/>	<b>A. Roll left and right:</b> The ability to roll from lying on back to left and right side, and return to lying on back on the bed.
<input style="width: 30px; height: 20px;" type="text"/>	<input style="width: 30px; height: 20px;" type="text"/>	<b>B. Sit to lying:</b> The ability to move from sitting on side of bed to lying flat on the bed.
<input style="width: 30px; height: 20px;" type="text"/>	<input style="width: 30px; height: 20px;" type="text"/>	<b>C. Lying to sitting on side of bed:</b> The ability to move from lying on the back to sitting on the side of the bed with feet flat on the floor, and with no back support.
<input style="width: 30px; height: 20px;" type="text"/>	<input style="width: 30px; height: 20px;" type="text"/>	<b>D. Sit to stand:</b> The ability to come to a standing position from sitting in a chair, wheelchair, or on the side of the bed.
<input style="width: 30px; height: 20px;" type="text"/>	<input style="width: 30px; height: 20px;" type="text"/>	<b>E. Chair/bed-to-chair transfer:</b> The ability to transfer to and from a bed to a chair (or wheelchair).
<input style="width: 30px; height: 20px;" type="text"/>	<input style="width: 30px; height: 20px;" type="text"/>	<b>F. Toilet transfer:</b> The ability to get on and off a toilet or commode.
<input style="width: 30px; height: 20px;" type="text"/>	<input style="width: 30px; height: 20px;" type="text"/>	<b>G. Car Transfer:</b> The ability to transfer in and out of a car or van on the passenger side. Does not include the ability to open/close door or fasten seat belt.
<input style="width: 30px; height: 20px;" type="text"/>	<input style="width: 30px; height: 20px;" type="text"/>	<b>I. Walk 10 feet:</b> Once standing, the ability to walk at least 10 feet in a room, corridor, or similar space. <i>If SOC/ROC performance is coded 07, 09, 10 or 88 → skip to GG0170M, 1 step (curb)</i>

## OASIS D: NEW OUTCOME CALCULATION

1. SOC/ROC Performance	2. Discharge Goal	
↓ Enter Codes in Boxes ↓		
<input type="text"/>	<input type="text"/>	<b>J. Walk 50 feet with two turns:</b> Once standing, the ability to walk 50 feet and make two turns.
<input type="text"/>	<input type="text"/>	<b>K. Walk 150 feet:</b> Once standing, the ability to walk at least 150 feet in a corridor or similar space.
<input type="text"/>	<input type="text"/>	<b>L. Walking 10 feet on uneven surfaces:</b> The ability to walk 10 feet on uneven or sloping surfaces (indoor or outdoor), such as turf or gravel.
<input type="text"/>	<input type="text"/>	<b>M. 1 step (curb):</b> The ability to go up and down a curb and/or up and down one step .
<input type="text"/>	<input type="text"/>	<b>N. 4 steps:</b> The ability to go up and down four steps with or without a rail.

## OASIS D: NEW OUTCOME CALCULATION

1. SOC/ROC Performance	2. Discharge Goal	
↓ Enter Codes in Boxes ↓		
<input type="text"/>	<input type="text"/>	<b>O. 12 steps:</b> The ability to go and down 12 steps with or without a rail.
<input type="text"/>	<input type="text"/>	<b>P. Picking up object:</b> The ability to bend/stoop from a standing position to pick up a small object, such as a spoon, from the floor.
		<input type="checkbox"/> <b>Q. Does patient use wheelchair/scooter?</b> 0. No → Skip GG0170R, GG0170RR1, GG0170S, and GG0170SS1. 1. Yes → Continue to GG0170R, Wheel 50 feet with two turns.
<input type="text"/>	<input type="text"/>	<b>R. Wheel 50 feet with two turns:</b> Once seated in wheelchair/scooter, the ability to wheel at least 50 feet and make two turns.
		<input type="checkbox"/> <b>RR1. Indicate the type of wheelchair or scooter used.</b> 1. Manual 2. Motorized
<input type="text"/>	<input type="text"/>	<b>S. Wheel 150 feet:</b> Once seated in wheelchair/scooter, the ability to wheel at least 150 feet in a corridor or similar space.
		<input type="checkbox"/> <b>SS1. Indicate the type of wheelchair or scooter used.</b> 1. Manual 2. Motorized

## OASIS D: NEW OUTCOME CALCULATION

### Application of The Percent of Residents Experiencing One or More Falls with Major Injury

- J1800-Any Falls Since SOC/ROC and J1900-Number of Falls Since SOC/ROC are captured on the Transfer, Discharge and Death At Home OASIS
- Concerns expressed over home health's inability to be in the home 24/7 vs. other post-acute care settings

## OASIS D: NEW OUTCOME CALCULATION

Section J	Health Conditions						
<b>J1800. Any Falls Since SOC/ROC</b> , whichever is more recent							
Enter Code <input style="width: 30px; height: 20px;" type="text"/>	Has the patient had any falls since SOC/ROC, whichever is more recent? 0. <b>No</b> → Skip J1900 1. <b>Yes</b> → Continue to J1900. Number of Falls Since SOC/ROC, whichever is more recent						
<b>J1900. Number of Falls Since SOC/ROC</b> , whichever is more recent							
<b>CODING:</b> 0. None 1. One 2. Two or more	↓ Enter Codes in Boxes <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center; vertical-align: middle;"><input style="width: 20px; height: 20px;" type="text"/></td> <td style="padding: 2px;"><b>A. No injury:</b> No evidence of any injury is noted on physical assessment by the nurse or primary care clinician; no complaints of pain or injury by the patient; no change in the patient's behavior is noted after the fall</td> </tr> <tr> <td style="text-align: center; vertical-align: middle;"><input style="width: 20px; height: 20px;" type="text"/></td> <td style="padding: 2px;"><b>B. Injury (except major):</b> Skin tears, abrasions, lacerations, superficial bruises, hematomas and sprains; or any fall-related injury that causes the patient to complain of pain</td> </tr> <tr> <td style="text-align: center; vertical-align: middle;"><input style="width: 20px; height: 20px;" type="text"/></td> <td style="padding: 2px;"><b>C. Major injury:</b> Bone fractures, joint dislocations, closed head injuries with altered consciousness, subdural hematoma</td> </tr> </table>	<input style="width: 20px; height: 20px;" type="text"/>	<b>A. No injury:</b> No evidence of any injury is noted on physical assessment by the nurse or primary care clinician; no complaints of pain or injury by the patient; no change in the patient's behavior is noted after the fall	<input style="width: 20px; height: 20px;" type="text"/>	<b>B. Injury (except major):</b> Skin tears, abrasions, lacerations, superficial bruises, hematomas and sprains; or any fall-related injury that causes the patient to complain of pain	<input style="width: 20px; height: 20px;" type="text"/>	<b>C. Major injury:</b> Bone fractures, joint dislocations, closed head injuries with altered consciousness, subdural hematoma
<input style="width: 20px; height: 20px;" type="text"/>	<b>A. No injury:</b> No evidence of any injury is noted on physical assessment by the nurse or primary care clinician; no complaints of pain or injury by the patient; no change in the patient's behavior is noted after the fall						
<input style="width: 20px; height: 20px;" type="text"/>	<b>B. Injury (except major):</b> Skin tears, abrasions, lacerations, superficial bruises, hematomas and sprains; or any fall-related injury that causes the patient to complain of pain						
<input style="width: 20px; height: 20px;" type="text"/>	<b>C. Major injury:</b> Bone fractures, joint dislocations, closed head injuries with altered consciousness, subdural hematoma						

- No risk adjustment is provided as this is a “never event”

## OASIS D: GET READY, GET SET, GO!

### What to do now:

- Solidify accuracy in OASIS-C2! While there are a lot of changes with OASIS C, there is still a good amount of OASIS-C2 that will remain the same.
  - Additional education on these problematic OASIS-C2/D Items is highly recommend:
    - M1030 Infusion Therapy Received in the Home \$\$
    - M1242 Pain Interfering with Activity \$\$ OC ★
    - M1311 Stage 2, 3, 4 or Unstageable Pressure Ulcers Present \$\$
    - M1340/1342 Surgical Wounds \$\$ OC
    - M1830 Bathing \$\$ OC ★
    - M1850 Bed Transfers \$\$ OC ★
    - M1860 Ambulation \$\$ OC ★
    - M2020 Oral Med Management OC

\$\$	Payment Item
OC	Home Health Compare Outcome
★	Star Rating Item

## OASIS D: GET READY, GET SET, GO!

### What to do now:

- If onsite training is needed, begin booking trainers now.
- Talk with your online training vendors or internal training staff on how they plan to transition to OASIS D.
- Agencies will need to consider how items difficult to assess will be managed
  - Discuss collaboration between nursing and therapy where appropriate
  - Define appropriate use of responses
    - 8 – Unknown
    - 07 – Patient Refused
    - 09 – Not Applicable
    - 10 – Not Attempted Due to Environmental Limitations
    - 88 – Not Attempted Due to Medical Conditions or Safety Concerns

## OASIS D: GET READY, GET SET, GO!

### What to do later:

- Put all current staff through crosswalk training in November. Subtlety and nuances of new data collection items will require ongoing education and cannot wait until the last week of December!
- Test staff competency with OASIS D in December, BEFORE they are using the new instrument.
- Begin transitioning your OASIS training for NEW staff from OASIS-C2 to OASIS D in December.
- Ensure that any training programs you currently use are fully updated to OASIS D by January 1, 2019.
- Consider retesting staff in OASIS D first quarter 2019.

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