

## Training and policy considerations for OASIS-E

The OASIS assessment instrument and its associated guidance manual are periodically revised based on CMS' addition or removal of quality measures from the Home Health Quality Reporting Program (HHQRP), or for other program requirements. The main driver for the upcoming version changes from OASIS-D to OASIS-E is the Improving Medicare Post-Acute Care Transformation (IMPACT) Act of 2014, which requires that standardized patient assessment data elements (known as SPADES) be collected across post-acute care (PAC) to enable cross-setting data collection, outcome comparison, exchangeability of data, and comparison of quality within and across PAC settings. To meet the requirements of the IMPACT Act, the six categories of SPADES are being nested within the four PAC assessment instruments, which includes the OASIS-E for home health agencies (HHAs).

As HHAs prepare for the implementation of OASIS-E, it will be important to include a review of current related policies and procedures with the cross walk of the new SPADES and changes from OASIS-D to OASIS-E. Here we review these new items, along with some recommended policy, procedure, and training considerations.

**Cognitive function and mental status:** OASIS-E contains three new cognitive and mood assessment items—C0100-C0500 Brief interview for mental status (BIMS), C1310 Signs and symptoms of delirium (CAM), and D0150-D0160 Patient mood interview (PHQ-2 to 9).

***Policy, procedure, and training considerations:***

- > Review clinical assessment, care coordination, and care planning policies/procedures.
- > Consider updating policy expectations/instructions for follow-up requirements based on assessment results; establish process for physician/NPP notification.
- > Develop a clinician toolkit (i.e., procedures/thresholds, cue cards, assessment techniques, cheat sheet for procedure when patient meets indications for conditions, OASIS-E item guidance).
- > Utilize behavioral health nurses as trainers/resource.
- > Assessment and guidance competency skills checks.

**Special services, treatments, and interventions:**

Includes new items under K0520 Nutritional approaches, N0415 High-risk drug classes, and multiple items under O0110 Special treatments, procedures, and programs.

***Policy, procedure, and training considerations:***

- > Review clinical assessment, care coordination, and care planning policies/procedures.
- > Review high-risk drug and medication reconciliation policies/procedures.
- > Develop a clinician toolkit (i.e., high-risk drug examples, nutritional approaches definitions, OASIS-E item guidance).

**Medical conditions and comorbidities:** Includes the new pain interview items at J0510, J0520 and J0530, which assess pain interference with sleep, therapy, and day-to-day activities.

**Policy, procedure, and training considerations:**

- > Review pain management policies/procedures.
- > Develop a clinician toolkit (i.e., pain assessment tools, sample interview scripts, pain management protocols, alternative therapies, OASIS-E item guidance).
- > Assessment and guidance competency skill checks.

**Impairments**

Includes new items for hearing (B0200) and vision (B1000; replaces M1200).

**Policy, procedure, and training considerations:**

- > Review clinical assessment, care coordination, and care planning policies/procedures.
- > Develop a clinician toolkit (resources for consults and referrals).

**Other categories deemed necessary**

**Social determinants of health (SDOH):**

Includes the addition of five new SDOH collection items for A1005 Ethnicity, A1010 Race, A1110 Language and interpreter services, A1250 Transportation, B1300 Health literacy, and D0700 Social isolation.

**Policy, procedure, and training considerations:**

- > Review clinical assessment, care coordination, and care planning policies/procedures.
- > Policy/procedure development for assessment, reporting, and management of SDOH factors.
- > Develop a clinician toolkit (resources for referrals and interventions that mitigate SDOH challenges; OASIS-E item guidance).

**Collections items for the two new TOH**

**cross-setting process measures:** These cross-setting process measures are intended to aid in medication reconciliation during care transitions at transfer or discharge from a PAC provider to another provider setting or the home of the individual, and identifies if and how an HHA provided a current reconciled medication list to the provider and/or patient (A2120-A2124 Provision of current reconciled medication list to provider/patient at transfer/discharge and mode of transmission).

**Policy, procedure, and training considerations:**

- > Review medication reconciliation, transfer, and discharge policies/procedures.
- > Review content of current transfer/discharge summary templates/forms.
- > Review care coordination policies/procedures.
- > Devise communication system between office and field; OASIS clinicians need to know mode of transmission used to send reconciled medication list to provider/patient.
- > Develop a clinician toolkit (medication reconciliation, transfer, discharge policies/procedures, OASIS-E item guidance).

The OASIS-E guidance manual is an important resource for all new items, and agencies should consider aligning training with the manual guidance for item intent, coding instructions, and response-specific instruction.

OASIS-E is coming in 2023, but MatrixCare customers will have early access, allowing them to become familiar with the changes and to start training staff.

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