








OASIS Review Services: Built around you

Coding and completing OASIS take time, attention, and specialized expertise. And you deserve support that makes the process feel lighter and more achievable. A data-driven review approach grounded in CMS guidance can help your team move faster and improve accurate reimbursements, while staying aligned with what matters most. Here's a clear look at what each OASIS Review Services level includes so you can choose what fits your workflow.

OASIS Review Services at a glance

Feature	OASIS and Plan of Care review (standard for SOC, ROC, recert, and SCIC)	OASIS review (standard for SOC, ROC, Recert, and SCIC)	OASIS review (standard for discharge)	Coding only (standard criteria for SOC, ROC, recert, and SCIC)
<p>Comprehensive review of all OASIS items Recommendations to change original responses based on clinician documentation, interdisciplinary collaboration, medical records, and OASIS item responses.</p>				
<p>Assignment of ICD 10 codes Primary diagnosis from PDGM Clinical Groupers, when applicable, plus additional diagnoses for comorbidity/risk adjustment; coding based on medical record documentation; review of MAR to determine if long term drug use codes apply.</p>				
<p>Review of plan of care locators Including Drug Regimen, Nutritional Requirements, Allergies, Functional Limitations, Mental Status, Prognosis, Orders for Discipline/Treatments, ED Visit & Hospital Readmission Risk, Goals/Rehab Potential/Discharge Plans in accordance with CMS Conditions of Participation.</p>				

How your agency can benefit

Helps capture accurate reimbursements to maximize what's earned for the care you deliver

Support better outcomes and agency ratings, including STAR ratings by helping reflect true patient improvement

Minimize claim delays or denials by reducing coding errors and staying aligned with requirements that support efficient processing

Strengthen value-based purchasing readiness by minimizing skewed functional scores and supporting an accurate performance picture

Reduce documentation deficiencies at survey with OASIS responses, diagnosis coding, and the plan of care telling a consistent, meaningful story

Work with certified specialists who stay current with evolving guidance and bring deep expertise to each review

Allows for clear turnaround expectations that support smoother workflows and timely documentation

Leverage data-driven tools and structured review processes that surface potential issues early and help minimize rework

Accurate coding. Accurate OASIS responses. A custom Plan of Care that reflects the full story.

When documentation aligns with CMS guidance and truly captures patient needs, it can support reimbursement, strengthen reported outcomes, and help your team feel confident at every step.

Ready to explore which level of review fits your agency best? Contact our experts at **866.469.3766** or visit **matrixcare.com** to get started.