

QUARTERLY OASIS UPDATE

October 16, 2024

October 2024



PRESENTED BY: OASIS ANSWERS, INC.



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Presenters

Linda Krulish, MHS COS-C
President and CEO

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Chief Quality Officer

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Clinical Lead

Lori Marmon, PT MBA COS-C
Clinical Consultant



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SESSION HANDOUTS:

OAI Quarterly OASIS Update Slides 

CMS October 2024 OASIS Quarterly Q&As 

Application Scenarios 



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AGENDA:

OASIS Answers Updates

CMS Updates

Calendar Year (CY) 2025 Timeline

Preparing for the All-Payer Transition in 2025

Home Health Value-Based Purchasing (HHVBP) Model September 2024 FAQs

CMS Help Desk Resources

Highlights

OASIS Requirements and Navigating Payer Changes Scenarios

Feature Presentation

Review of NEW October 2024 CMS Quarterly OASIS Q&As

Application Scenarios – October 2024 CMS Quarterly OASIS Q&As

Participant Questions and Answers



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COS-C Exam
Certificate for OASIS Specialist - Clinical

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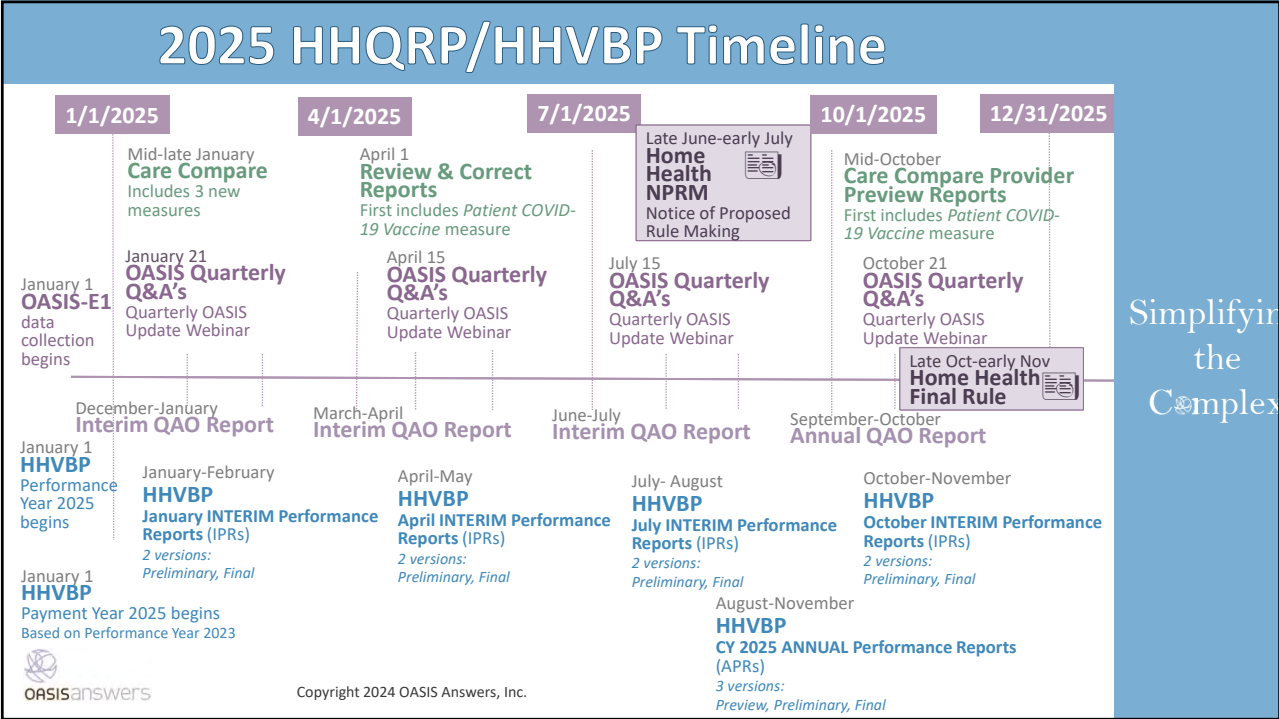
Home Health
Calendar Year (CY) 2025 Timeline

CMS Updates

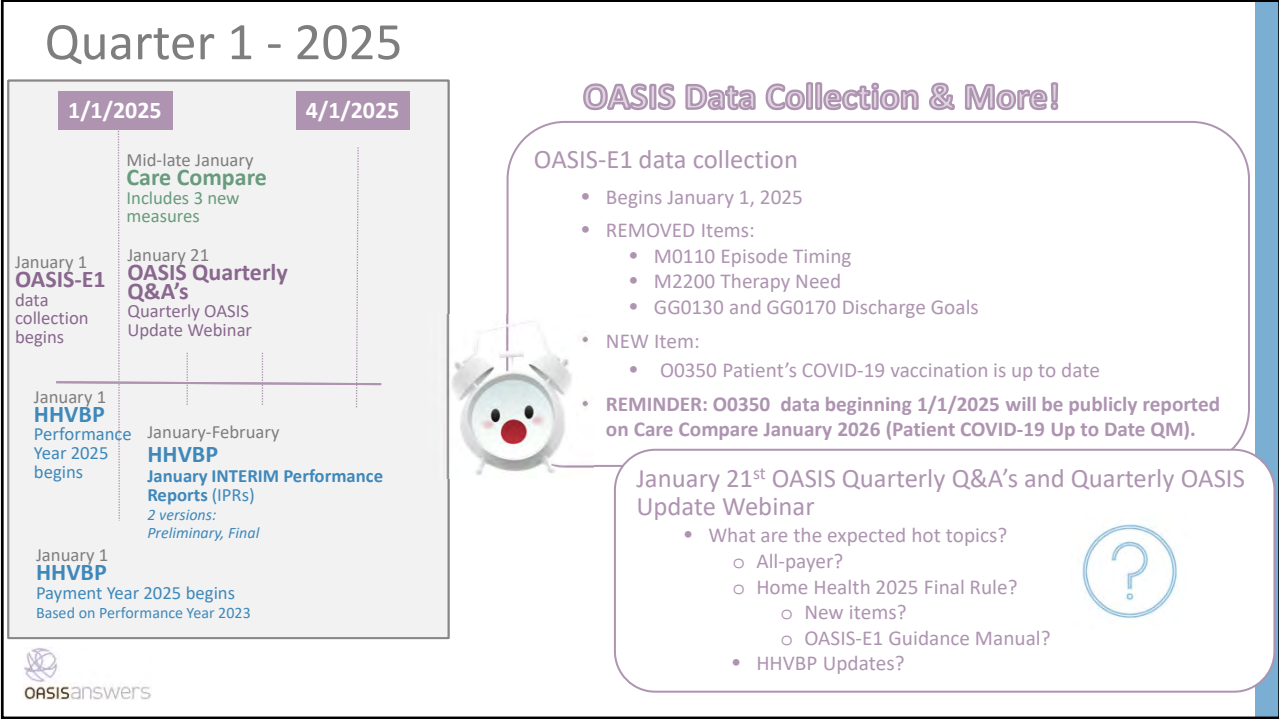
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Quarter 1 - 2025



Care Compare

January 2025 Refresh

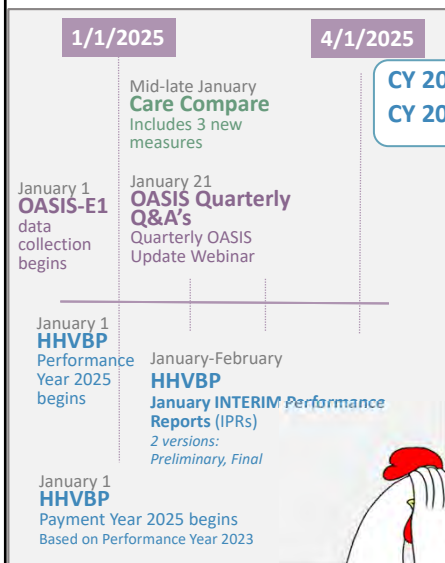
- 3 NEW Measures:
 - Discharge Function Score
 - Transfer of Health (TOH) – Patient
 - Transfer of Health (TOH) - Provider



Why should I care?

What do I tell my peeps?

Quarter 1 - 2025



HHVBP

CY 2025 PAYMENT Year ← CY 2024 APR ← 2023 Performance Year
CY 2025 PERFORMANCE Year → CY 2026 APR → 2027 Payment Year

CY 2025 Performance Year

Change in Applicable Measure Set and Measure Weights

- Added
 - Discharge Function Score (OASIS)
 - Discharge to Community (Claims)
 - Potentially Preventable Hospitalizations (Claims)
- Removed
 - Discharged to Community (OASIS)
 - TNC Self-Care
 - TNC Mobility
 - Acute Care Hospitalization (Claims)
 - ED Use (Claims)

Model Baseline Year

Changes from CY 2022 to CY 2023
 (CY 2022-2023 for DTC claims-based QM)

January Interim Performance Reports (IPRs)

- Preliminary IPRs - recalculation requests can be submitted
- Final IPRs



I'm so confused!

Quarter 2 - 2025

OASIS Data Collection & More!

April 15th
Quarterly OASIS Update Webinar!

4/1/2025
7/1/2025

April 1
Review & Correct Reports
First includes *Patient COVID-19 Vaccine* measure

April 15
OASIS Quarterly Q&A's
Quarterly OASIS Update Webinar

April-May
HHVBP
April INTERIM Performance Reports (IPRs)
2 versions:
Preliminary, Final

iQIES Reports

April 1st Review and Correct Report

- First includes *Patient COVID-19 Vaccine* measure

HHVBP

April Interim Performance Reports (IPRs)

- OASIS-Based Measures: 1/1/2024 – 12/31/2024
- Claims-Based and HH CAHPS Measures: 10/1/2023 – 9/30/2024

Yah!
We survived
the first
quarter!!!

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Quarter 3 - 2025

HHVBP

Performance Reports (IPRs and APRs)

Expected Order of Reports

- July – Preliminary July IPR
- August – Preview APR
- August – Final July IPR
- September-October – Preliminary APR

I can't
take
another
report!

7/1/2025
10/1/2025

July 15
OASIS Quarterly Q&A's
Quarterly OASIS Update Webinar

July- August
HHVBP
July INTERIM Performance Reports (IPRs)
2 versions:
Preliminary, Final

August-November
HHVBP
CY 2025 ANNUAL Performance Reports (APRs)
3 versions:
Preview, Preliminary, Final

OASIS Data Collection & More!

July 15th
Quarterly OASIS Update Webinar!

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Quarter 4 - 2025


OASIS Data Collection & More!

October 21st Quarterly OASIS Update Webinar!

IQIES Reports

October 2025 Care Compare Provider Preview Report

- First includes *Patient COVID-19 Vaccine* measure



So you're telling me there are MORE reports?!?

HHVBP

Performance Reports (IPRs and APRs)

Expected Order of Reports

- July – Preliminary July IPR
- August – Preview APR
- August – Final July IPR
- September-October – Preliminary APR
- October - Preliminary October IPR
- November – Final October IPR
- November – Final APR


10/1/2025
12/31/2025

Mid-October **Care Compare Provider Preview Reports**
First include *Patient COVID-19 Vaccine* measure

October 21 **OASIS Quarterly Q&A's**
Quarterly OASIS Update Webinar

October-November **HHVBP October INTERIM Performance Reports (IPRs)**
2 versions: *Preliminary, Final*

August-November **HHVBP CY 2025 ANNUAL Performance Reports (APRs)**
3 versions: *Preview, Preliminary, Final*




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...and don't forget...

Quarterly QAO Reports!

4 Quarterly Reports each Year

December – January:	1 st Interim QAO Report
March – April:	2 nd Interim QAO Report
June – July:	3 rd Interim QAO Report
September – October:	Annual QAO Report




QAO = Quality Assessment Only

Provides agencies with a preview of their OASIS data submission compliance that impacts APU (Annual Percentage Update) calculation.

Non-compliance = 2% reduction in Medicare fee-for-service claims payments for the associated calendar year.

APU compliance results are now publicly available on the HHQRP Website!



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Preparing for the All-Payer Transition in 2025

CMS Updates



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All-Payer Transition: Rule Making

CY 2023 HH PPS final rule

- CMS finalized the end of the temporary suspension of OASIS data collection on non-Medicare/non-Medicaid HHA patients and the requirement for HHAs to submit all-payer OASIS data for purposes of the HH QRP, beginning with the CY 2027 Program Year
 - Mandatory for all patients beginning July 1, 2025
- Finalized a two-quarter phase for patients discharged between January 1, 2025 and June 30, 2025
- Did not address other OASIS time points

CY 2025 NPRM

- CMS determined that further details would be needed to clarify OASIS data collection and submission for non-Medicare/non-Medicaid patients.
- Proposed to change data collection from beginning with the OASIS discharge time point to use the Start of Care (SOC) time point
- Proposal ensure agency and patient demographics would be collected for each non-Medicare/non-Medicaid patient assessment
- This would ensure that baseline data is available for use in calculating or risk adjusting quality measures, and in linking to prior OASIS assessments



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Voluntary Phase-in Period

- Prior to January 1, 2025:
 - Continue to collect and submit OASIS data for all skilled Medicare and/or Medicaid patients unless exempt from OASIS data collection
 - Exemptions: Patients under the age of 18, patients receiving only maternity services, and patients receiving only personal care, housekeeping, or chore services
- January 1, 2025 – June 30, 2025
 - Continue to collect on all skilled Medicare and Medicaid patients
 - Non-Medicare/non-Medicaid patients, who are not exempt, OASIS data collection is voluntary
 - Use M0090 of SOC
 - If a SOC is completed the agency can choose to complete subsequent assessments or not.
 - If a patient has a SOC OASIS with a M0090 during Q1 and Q2 of 2025 all subsequent OASIS are voluntary regardless of when it occurs
- July 1, 2025 and after
 - Patients with any pay source who are not exempt from OASIS data collection, and who have a SOC M0090 date on or after July 1, 2025 data collection is mandatory at all time points

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Home Health Value-Based Purchasing (HHVBP) Model

CMS Updates

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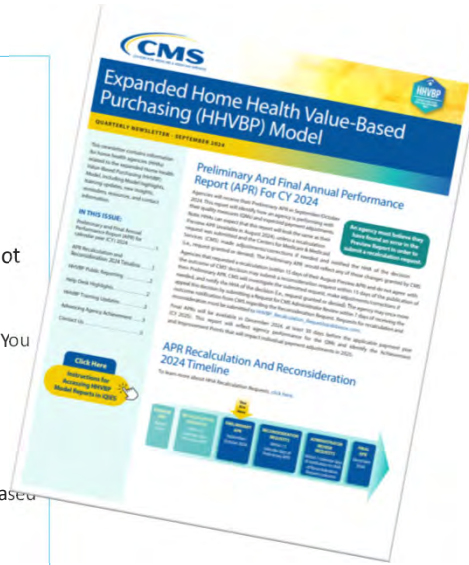
Expanded HHVBP Model Resources

HHVBP Model Newsletter

- September 2024

Highlights:

- Information regarding the Preliminary and Final Annual Performance Reports
- Final APRs will be available in December
- Understanding who received an APR and if your agency did not the potential reasons why
- HHVBP Training Updates
 - The HHVBP CY 2024 Annual Performance Report (APR) – What You Need to Know! Slides, recording and post webinar Q&As are all available
 - Expanded HHVBP Model Web-based Training: Changes to the Applicable Measure Set Beginning in CY 2025
 - 4 Part - Section GG Training
 - From Data Elements to Quality Measures: Cross-Setting Web-Based Training



Available under: Newsletters

*Expanded HHVBP Model webpage:
<https://www.cms.gov/priorities/innovation/innovation-models/expanded-home-health-value-based-purchasing-model>



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Expanded HHVBP Model Resources



HHVBP Public Reporting Tip Sheet

- September 2024

Highlights:

- Provides information re: the inaugural release of HHVBP Data for Public reporting
- Information related to the Annual Performance Reports
- Recalculation and reconsideration Request

Available under: HHVBP resources; Public Reporting

*Expanded HHVBP Model webpage:
<https://www.cms.gov/priorities/innovation/innovation-models/expanded-home-health-value-based-purchasing-model>



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Expanded HHVBP Model Resources

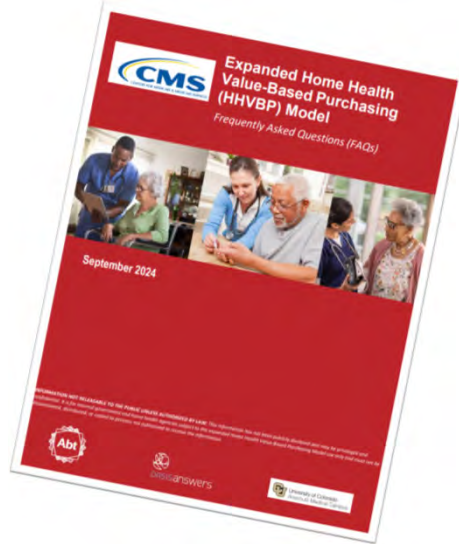
Expanded HHVBP FAQs

- September 2024

Highlights:

- 4 new FAQs
- 4 Updated FAQ

Available under: FAQs & Model Guide



*Expanded HHVBP Model webpage:
<https://www.cms.gov/priorities/innovation/innovation-models/expanded-home-health-value-based-purchasing-model>



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4 NEW FAQs

Q4018. For a newly certified HHA, when will their OASIS data begin to be used in the expanded HHVBP model and reported on HHVBP reports?

For a newly Medicare-certified HHA, OASIS data from the first full calendar year after the agency received Medicare-certification are used to calculate the agency's HHA baseline for each of the OASIS-based measures in the Model. OASIS data from the second calendar year after Medicare-certification are used to calculate the agency's performance on the OASIS-based measures included in the Model. For example:

- **Anytime in 2024** - HHA is Medicare-certified
- **1/1/2025 - 12/31/2025** - This agency's OASIS data are used to calculate the HHA baseline for each of the OASIS-based measures in the Model (if at least 20 eligible episodes are available in that year).
- **1/1/2026 - 12/31/2026** - The agency's OASIS data are used to calculate their performance on each of the OASIS-based measures in the Model. CY 2026 is this agency's 1st Performance Year in the Model.

Q3024. When will the expanded HHVBP Model include data from non-Medicare and non-Medicaid patients for the OASIS-based measures included in the Model?

As finalized in the CY2023 HH Final Rule, CMS is ending the suspension of OASIS data collection for patients with non-Medicare and non-Medicaid payers. The CY2023 rule specifies that starting July 1, 2025, OASIS data must be collected on all patients, regardless of payer, with some exceptions: patients under the age of 18, patients receiving maternity services, patients receiving only personal care, housekeeping services, or chore services. The OASIS-based measures used in the expanded HHVBP Model will continue to be calculated using only data from skilled Medicare and Medicaid patients that includes Medicare fee-for-service (FFS), Medicare Advantage, Medicaid, and Medicaid Managed Care.

Q6030. Our HHA was certified in 2022. Why did our first IPR in July 2024 show zero improvement points for claims-based and HHCAPPS Survey-based measures?

For claims-based and HHCAPPS Survey-based measures, an HHA certified in CY 2022 can receive only achievement points and not improvement points in the July 2024 IPR. This is because the data collection period for claims-based and HHCAPPS measures is the same as the HHA's baseline year (01/01/2022-12/31/2023). Since no improvement could be calculated, zero (0) improvement points are reported on the HHA's July 2024 IPR for the claims-based and HHCAPPS measures.

For the October 2024 IPR, the HHA baseline year will remain CY 2023 for the entire CY 2024 performance year, and the performance year data period for the claims-based and HHCAPPS Survey-based measures is 04/01/2023 - 03/31/2024. Since the 12-month performance period on the October IPR is not the same as the HHA baseline period (they differ by one quarter), HHAs will have their first opportunity to receive improvement points, if the measure value is better than their improvement threshold for the measure.

Q6031. Why is our HHA's performance report displaying dashes (-) for the HHCAPPS Survey-based measures if we are in the larger-volume cohort and think we have enough HHCAPPS data for the measures?

An HHA must have sufficient data for both the baseline year AND the performance year for an applicable measure's achievement points, improvement points, and care points to be calculated in the expanded HHVBP Model. A dash (-) on a report means that no or insufficient data are available. Therefore, if your HHA does not have sufficient data to establish an HHA baseline score (despite having sufficient data to calculate a performance year measure score) for an applicable measure, no care points can be earned for the measure.



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4 UPDATED FAQs

Q8001. What information will CMS publicly report for the expanded HHVBP Model?

Public reporting of performance data for the expanded HHVBP Model will begin with the calendar (CY) 2023 performance year/CY 2025 payment year. As finalized in the HH CY2023 Final Rule, CMS will publicly report the following information for the expanded HHVBP Model:

- Applicable measure benchmarks and achievement thresholds for each smaller volume and total volume cohort.
- For each HHA that qualified for a payment adjustment based on the data for the applicable performance year –
 - Applicable measure results and improvement thresholds
 - The HHA's Total Performance Score (TPS)
 - The HHA's TPS percentile ranking
 - The HHA's payment adjustment for a given year

Q8002. When will CMS publicly report HHA performance in the expanded HHVBP Model?

As finalized in the HH CY2023 Final Rule, CMS will publicly report information for the expanded HHVBP Model on or after December 1, 2024. CMS plans to first publicly report HHVBP data in January 2025 on the [Provider Data Catalog](#).

Q8003. Where will CMS make information for the expanded HHVBP Model available to the public?

The Provider Data Catalog (PDC) is a CMS website that is a companion to the Care Compare website. While the Care Compare website has consumer-focused content, the PDC is designed for innovators and stakeholders who are interested in detailed CMS data. Those looking for data related to the expanded HHVBP Model are encouraged to review the interactive and downloadable datasets for Home Health Care that CMS is planning to initially make available in January 2025 on the PDC.

Q8004. Why is CMS publicly reporting HHA performance in the expanded HHVBP Model?

Publicly reporting performance data under the expanded Model will enhance the current home health public reporting processes, as it will better inform the public when choosing an HHA, while also incentivizing HHAs to improve performance. Publicly reporting performance data under the expanded Model is also consistent with the CMS practice of publicly reporting performance data under other value-based initiatives such as the Skilled Nursing Facility Value-Based Purchasing (SNF VBP) ([42 CFR 413.338](#)) and Hospital Value-Based Purchasing (HVBP) Programs ([42 CFR 412.163](#)).



CMS Help Desk Resources

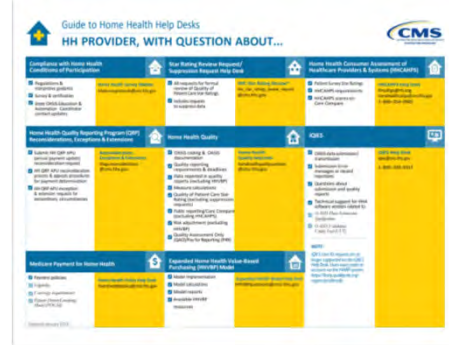
Highlights



Got a Question? There is a Help Desk for That!

CMS has multiple help desks (HD) available to allow home health providers to ask questions, trouble shoot problems and request guidance and support for various home health topics. Includes but not limited to:

- **Home Health Quality HD** – homehealthqualityquestions@cms.hhs.gov
Providing support for the various Home Health Quality Reporting program initiatives such as OASIS coding & OASIS documentation, Quality reporting requirements and deadlines, Measure calculations, information regarding risk adjustment and the Quality of Patient Care Star Rating
- **Expanded HHVBP Model HD** – HHVBPquestions@cms.hhs.gov
Providing support on the expanded HHVBP Model implementation, model calculations, model reports, and available HHVBP resources
- **Home Health Policy HD** – homehealthpolicy@cms.hhs.gov
Providing support for Medicare payment policies such as eligibility, coverage requirements and the Patient-Driven Groupings Model (PDGM)
- **Home Health Survey Mailbox** – hhasurveyprotocols@cms.hhs.gov
Providing support regarding compliance with the Home Health Conditions of Participation including regulations and interpretive guidance, survey and certification, and contact information for state OASIS Education Coordinators (OECs) and state OASIS Automation Coordinators



<https://www.cms.gov/files/document/guide-home-health-help-desks-updated-january-2024.pdf>



OASIS Requirements and Navigating Payer Changes Scenarios

Highlights



Existing OASIS Guidance related to Payer Changes



Following slides contain OASIS guidance that is applicable through December 31, 2024.

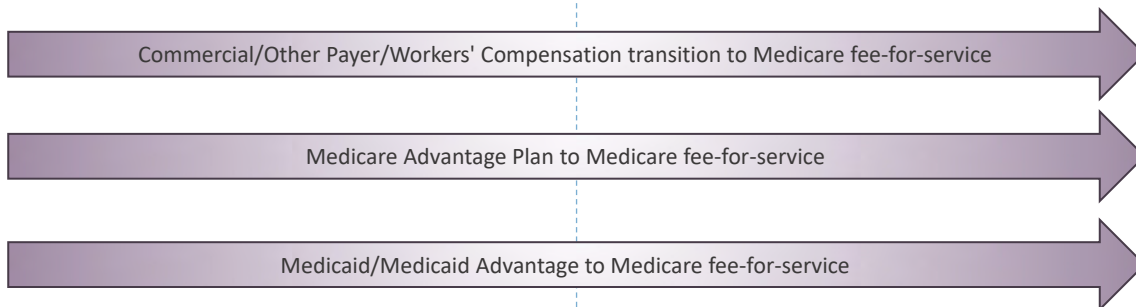
Expect additional guidance to be released due to the all-payer transition beginning with:

- Voluntary phase-in of all-payer collection and submission period from January 1, 2025 through June 30, 2025
- Mandated all-payer collection and submission period beginning July 1, 2025

Existing OASIS Guidance related to Payer Changes – New Payer is Medicare fee-for-service

Discharge comprehensive assessment including OASIS is recommended

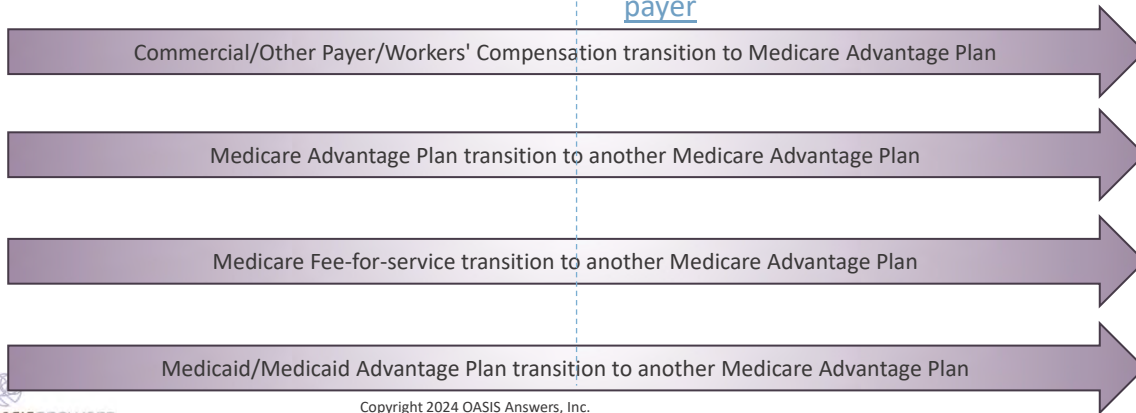
SOC comprehensive assessment including OASIS is required



Existing OASIS Guidance related to Payer Changes – New Payer is a Medicare Advantage Plan

Discharge comprehensive assessment including OASIS is [recommended](#)

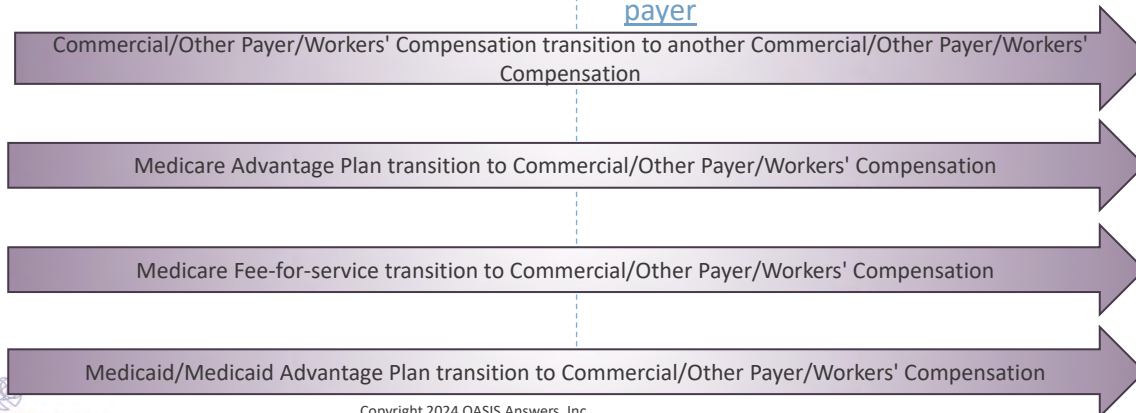
SOC comprehensive assessment including OASIS [if required by new payer](#)



Existing OASIS Guidance related to Payer Changes – New Payer is a Commercial/Other Payer/Workers' Compensation

Discharge comprehensive assessment including OASIS is [recommended](#)

SOC comprehensive assessment including OASIS [if required by new payer](#)



Existing OASIS Guidance related to Payer Changes – New Payer is Medicaid/Medicaid Advantage Plan

Discharge comprehensive assessment including OASIS is recommended

SOC comprehensive assessment including OASIS if required by new payer

Medicaid/Medicaid Advantage Plan transition to another Medicaid/Medicaid Advantage Plan

Medicare Advantage Plan transition to a Medicaid/Medicaid Advantage Plan

Medicare Fee-for-service transition to a Medicaid/Medicaid Advantage Plan

Commercial/Other Payer/Workers' Compensation transition to a Medicaid/Medicaid Advantage Plan

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Existing OASIS Guidance related to Payer Changes – M0102 Date of Physician-ordered SOC and M0104 – Date of Referral

M0102. Date of Physician-ordered Start of Care (Resumption of Care)

If the physician indicated a specific start of care (resumption of care) date when the patient was referred for home health services, record the date specified.

- - → Skip to M0110, Episode Timing, if date entered
 Month Day Year

NA – No specific SOC/ROC date ordered by physician

M0104. Date of Referral

Indicate the date that the written or verbal referral for initiation or resumption of care was received by the HHA.

- - ← Day prior to SOC
 Month Day Year

With changes in payer:

- M0102 – Date of Physician-ordered Start of Care (Resumption of Care) = NA
- M0104 – Date of Referral = Day prior to the new Start of Care date for new payer

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Existing OASIS Guidance related to Payer Changes – M0150 – Current Payment Sources for Home Care

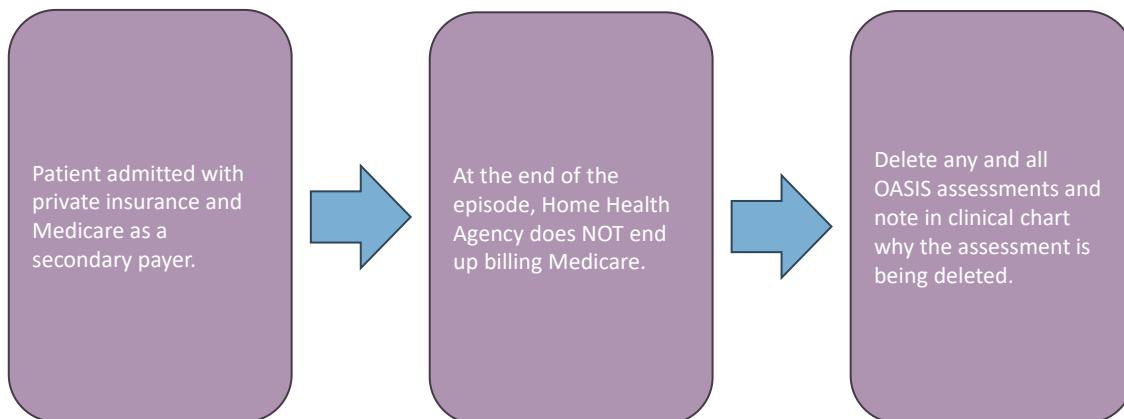
At SOC, if a Medicare patient has a private insurance pay source as the primary payer, Medicare may be considered a secondary payer.

M0150. Current Payment Sources for Home Care	
↓	Check all that apply
<input type="checkbox"/>	0. None; no charge for current services
<input checked="" type="checkbox"/>	1. Medicare (traditional fee-for-service)
<input type="checkbox"/>	2. Medicare (HMO/managed care/Advantage plan)
<input type="checkbox"/>	3. Medicaid (traditional fee-for-service)
<input type="checkbox"/>	4. Medicaid (HMO/managed care)
<input type="checkbox"/>	5. Workers' compensation
<input type="checkbox"/>	6. Title programs (for example, Title III, V, or XX)
<input type="checkbox"/>	7. Other government (for example, TriCare, VA)
<input checked="" type="checkbox"/>	8. Private insurance
<input type="checkbox"/>	9. Private HMO/managed care
<input type="checkbox"/>	10. Self-pay
<input type="checkbox"/>	11. Other (specify)
<input type="checkbox"/>	UK. Unknown

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Existing OASIS Guidance related to Payer Changes – M0150 – Current Payment Sources for Home Care

Medicare as secondary payer



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Existing OASIS Guidance related to Payer Changes – M2420 Discharge Disposition

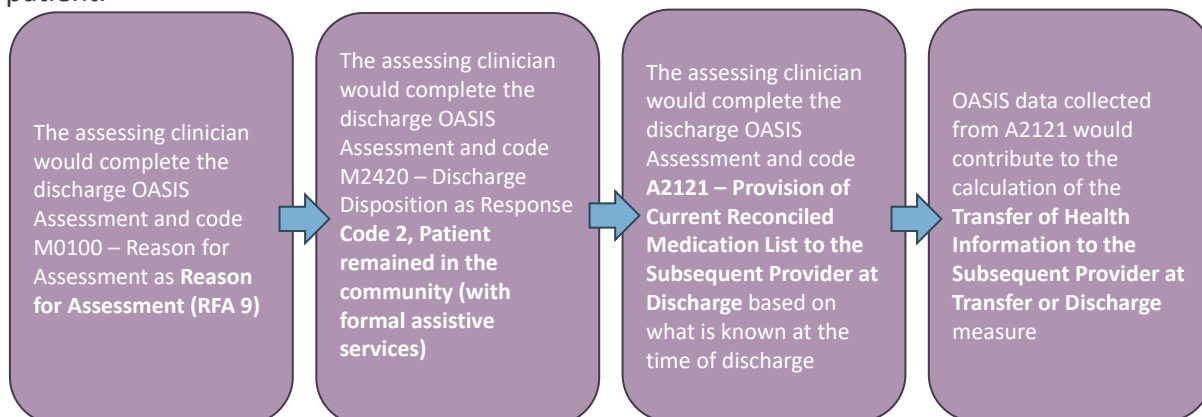
An agency completes a discharge and new SOC OASIS due to payer source change for a patient.

M2420. Discharge Disposition	
Where is the patient after discharge from your agency? (Choose only one answer.)	
Enter Code	1. Patient remained in the community (without formal assistive services) → Skip to A2123, Provision of Current Reconciled Medication List to Patient at Discharge
2	2. Patient remained in the community (with formal assistive services) → Continue to A2121, Provision of Current Reconciled Medication List to Subsequent Provider at Discharge
	3. Patient transferred to a non-institutional hospice → Continue to A2121, Provision of Current Reconciled Medication List to Subsequent Provider at Discharge
	4. Unknown because patient moved to a geographic location not served by this agency → Skip to A2123, Provision of Current Reconciled Medication List to Patient at Discharge
UK	Other unknown → Skip to A2123, Provision of Current Reconciled Medication List to Patient at Discharge

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Existing OASIS Guidance related to Payer Changes – Transfer of Health Implications

An agency completes a discharge and new SOC OASIS due to payer source change for a patient.



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Payer Transition Scenarios

October 2024 CMS Quarterly OASIS Q&As



Application Scenarios



Questions???

OASIS Questions that relate to existing OASIS guidance or issues otherwise not presented on today's call may be forwarded to your state's OASIS Education Coordinator:
OASIS Education Coordinators (by state) posted at:
<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/OASIS-Coordinators>

Questions related to quality measures or OASIS data collection may be forwarded to
homehealthqualityquestions@cms.hhs.gov (for OASIS and claims-based measures)
and hhcahps@rti.org (for HH CAHPS measures).

To register for future OASIS Answers Quarterly OASIS Updates, visit www.oasisanswers.com or call 425-868-2304

WORKSHOP

OASIS E1 2-DAY OASIS DATA COLLECTION WORKSHOP

Effective, up-to-the-minute, in person education targeted for field data collectors, their supervisors and those preparing for the COS-C Exam. Experience the comprehensive and nationally acclaimed two-day Blueprint for OASIS Accuracy workshop, presented by OASIS Answers' expert Blueprint Presenter Team.

EXAM

COS-C EXAM

The Certificate for OASIS Specialist – Clinical (COS-C) Exam is a voluntary certificate examination that evaluates an individual's knowledge of CMS' OASIS data collection guidance.

TESTING OPTIONS AVAILABLE:

- Paper & Pencil Test @ a Workshop Location
- Computer Based Test @ a Computer Based Testing Center

City, State	Blueprint for OASIS Accuracy Workshop	COS-C Exam Administration
Dallas, TX	October 9-10, 2024	October 11, 2024
Las Vegas, NV	December 4-5, 2024	December 6, 2024

VISIT www.oasisanswers.com for more information and to register for OASIS Answers' training and testing.

QR Code 1:

QR Code 2:

QR Code 3:

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RECORDED RESOURCE

COS-C EXAM CRAM

Updated for OASIS-E and 2024

OASIS ANSWERS

A virtual exam refresher session with interactive test questions. The webinar is organized to mimic the breakdown of the COS-C exam, with education modeled to demonstrate use of test taking strategies using CMS references. All domains of the COS-C Exam will be represented in the mock exam questions and training.

OASIS answers

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Updated for 2024, the **OASIS Now** three-part webinar series is designed to provide important core foundational OASIS guidance to support an agency's OASIS orientation and competency program. This streamlined training is based on current OASIS guidance.

Updated January 2024

OASIS Now



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RECORDED



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Upcoming Teleconference Schedule

Wednesday – January 22, 2025

1:00-2:30 Eastern

12:00-1:30 Central

11:00-12:30 Mountain

10:00-11:30 Pacific



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Nursing Contact Hours Disclosure

This nursing continuing professional development activity was approved by Montana Nurses Association, an accredited approver with distinction by the American Nurses Credentialing Center's Commission on Accreditation.

Participants who attend the entire session as demonstrated by signing in and who complete the post-workshop evaluation confirming their participation in the resource activity will be awarded 1.5 contact hours. Certificates will be emailed to participants by OASIS Answers within 30 days of completion of the workshop.

The authors, planners, reviewers and faculty of this educational activity declare no conflicts of interest with this activity. There are no commercial interests or sponsorships related to this educational activity.

Please direct questions regarding this educational activity to OASIS Answers, Inc. at oaionline@oasisanswers.com

Additional information

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