

LIMIT COLLECTION OF OUTCOME AND ASSESSMENT INFORMATION SET (OASIS) DATA TO MEDICARE PATIENTS

ISSUE: Over the last few years, the National Association for Home Care & Hospice (NAHC) has been actively engaged in pursuing the streamlining and reduction of the OASIS instrument. While there is industry-wide support for an outcome-based assessment process, we question the appropriateness of certain requirements associated with OASIS data collection and reporting. The current OASIS requirements collect more data than is necessary, at too many time points, for too many patients to accomplish the purpose of Outcome Based Quality Improvement (OBQI) initiative. The cost of collecting and reporting the data far outweighs the benefits.

Congress should amend the Medicare Conditions of Participation for home health and limit the collection of OASIS data to skilled Medicare patients.

Rationale:

- The Center for Medicare and Medicaid Services (CMS) has already made exceptions to Medicare's home health conditions of participation for certain types of patients who are exempt from OASIS data collection, including patients who are (1) under age 18; (2) receiving maternity services; (3) receiving housekeeping or chore services; or (4) receiving only personal care services.
- The OASIS data collection on non-Medicare and non-Medicaid patients is not encoded nor is it transmitted by the home health agency to CMS. Furthermore the data is not used to generate reimbursement or any outcome reports. Agencies have been collecting this data on these patients since July 1999.
- Non-Medicare patient service needs are different from the service needs of the Medicare population. Patients who receive Medicare covered services must be homebound and need skilled and medically necessary services. Services to non-Medicare patients are often given to support health promotion and fulfill supportive needs, as opposed to the therapeutic services provided to Medicare patients. Combining outcome data for these two clinically diverse populations creates an inaccurate picture of an agency's patient population.
- Home care patients have complained that the process of OASIS data collection is intrusive, time-consuming, and fatiguing. Therefore, if some of the patient population were exempt from the process of OASIS data collection, nurses, therapists, and other clinicians would be able to spend more time in the provision of direct care.
- Since OASIS is not considered to be a comprehensive assessment, the current requirement under the Medicare Conditions of Participation for home health that a comprehensive assessment be provided to all patients would continue to apply.
- Limiting OASIS data collection for non-Medicare patients would help to decrease the cost of data collection. The cost is prohibitive in terms of clinical, clerical, and staff education time, and the printing of forms. The cost could be significantly reduced for agencies with moderate to high non-Medicare populations.
- The burdens associated with OASIS data collection and reporting requirements are cited as a key factor in nurses leaving the home care field.

- NAHC ultimately believes that collecting OASIS data from only Medicare patients (and measuring their outcomes) is likely to be the best and most efficient process for determining an agency's overall level of quality of care because it is a clean set of data from a more homogenous patient population. If an agency is consistently achieving good outcomes for its Medicare caseload, it would be highly unlikely that the same agency would provide lower quality care to its non-Medicare patients.

**For more information, contact the National Association for Home Care & Hospice (NAHC)
Government Affairs, 202-547-7424**