Outcome and Assessment Information Set

Items to be Used at Specific Time Points

Start of Care -- M0010-M0030, M0040-M0150, M1000-M1036, M1100-M1242, M1300-M1302, M1306, M1308-M1324, M1330-M1350, M1400, M1410, M1600-M1730, M1740-M1910, M2000, M2002, M2010, M2020-M2250

    Start of care—further visits planned

Resumption of Care --- M0032, M0080-M0110, M1000-M1036, M1100-M1242, M1300-M1302, M1306, M1308-M1324, M1330-M1350, M1400, M1410, M1600-M1730, M1740-M1910, M2000, M2002, M2010, M2020-M2250

    Resumption of care (after inpatient stay)

Follow-Up --- M0080-M0100, M0110, M1020-M1030, M1200, M1242, M1306, M1308, M1322-M1324, M1330-M1350, M1400, M1610, M1620, M1630, M1810-M1840, M1850, M1860, M2030, M2200

    Recertification (follow-up) assessment
    Other follow-up assessment

Transfer to an Inpatient Facility ------------------------------ M0080-M0100, M1040-M1055, M1500, M1510, M2004, M2015, M2300-M2410, M2430-M2440, M0903, M0906

    Transferred to an inpatient facility—patient not discharged from an agency
    Transferred to an inpatient facility—patient discharged from agency

Discharge from Agency — Not to an Inpatient Facility

    Death at home--- M0080-M0100, M0903, M0906
    Discharge from agency------------------------------------- M0080-M0100, M1040-M1055, M1230, M1242, M1306-M1350, M1400-M1620, M1700-M1720, M1740, M1745, M1800-M1890, M2004, M2015-M2030, M2100-M2110, M2300-M2420, M0903, M0906

CLINICAL RECORD ITEMS

(M0080) Discipline of Person Completing Assessment:

    ☐ 1-RN   ☐ 2-PT   ☐ 3-SLP/ST   ☐ 4-OT

(M0090) Date Assessment Completed: __ __ /__ __ /__ __ __ __
                                  month / day /   year

(M0100) This Assessment is Currently Being Completed for the Following Reason:

    Start/Resumption of Care
    ☐   1 –   Start of care—further visits planned
    ☐   3 –   Resumption of care (after inpatient stay)

    Follow-Up
    ☐   4 –   Recertification (follow-up) reassessment [*Go to M0110*]
    ☐   5 –   Other follow-up [*Go to M0110*]

    Transfer to an Inpatient Facility
    ☐   6 –   Transferred to an inpatient facility—patient not discharged from agency [*Go to M1040*]
    ☐   7 –   Transferred to an inpatient facility—patient discharged from agency [*Go to M1040*]

    Discharge from Agency — Not to an Inpatient Facility
    ☐   8 –   Death at home [*Go to M0903*]
    ☐   9 –   Discharge from agency [*Go to M1040*]

(M0903) Date of Last (Most Recent) Home Visit:

__ __ / __ __ / __ __ __ __
month / day /   year

(M0906) Discharge/Transfer/Death Date: Enter the date of the discharge, transfer, or death (at home) of the patient.

__ __ / __ __ / __ __ __ __
month / day /   year