



# **OASIS-C Technical Information, HAVEN/CASPER Reporting, Data Management Issues**



## Learning Objectives

- Identify the major new Identify technical data specifications related to the development of OASIS-C
- Identify why certain OASIS transmissions will not be accepted due to payer status
- Identify the top 10 reasons data transmissions are rejected (Fatal Errors)



# OASIS Technical Changes with OASIS–C



# OASIS Data Specifications 2.00

- Based on M0090 date of 1/1/2010 or greater

OASIS C Assessments shall be submitted using the OASIS Data Specifications Version 2.00 which are affective for assessments with a M0090 date of 1/1/2010 or greater.

Prior to 1/1/2010 the assessments shall comply with the data specification version active at this time.



## Data Specifications Misc.

- OASIS Data Specifications V2.00
- Item number changed only
- STATE\_DATA filler used

Several items within OASIS C have items that are the same as they were in OASIS B except the item number was changed. In this instance the item will retain the same position within the data specification for Version 2.00 with the item number updated.

For new items for OASIS C there was an unused portion of the data specifications titled STATE\_DATA. As there were not plans to use these fields for any other reasons these were used to add new OASIS C items.



## Field Names

- Item number only has changed
  - Display on the Final Validation Report New Item Name followed by old Item name in parentheses
- New to OASIS–C
- Items remain unchanged in OASIS–C
- Retired OASIS–B Items

For the convenience of the agency personnel we have retained the original OASIS B Item number as part of the field name for the Final Validation Report.

A new value was added to the OASIS C data specifications which will indicate the following:

Item Number only has changed. Items such as M0230 which has not been changed, but in OASIS C is known as M2010. In this instance on the final validation report this item will be displayed as M2010(M0230).

New to OASIS C

Items remained unchanged in OASIS C

Retired OASIS B Items

```

does not match the hnx telephone number in the
State database.
-----
Record: 1                               Rejected
Assmt Int ID = 2171814                   Name      = HLIS&PAT1, PATIENT1
Res Int ID = 0                           SSN       = 999-00-0001
RFA, BRANCH ID = 01 N                    Eff Date  = 02/01/2009
Correction Num = 00                       M0090 Date = 02/01/2009 ←
[Field or OASIS Items]                   M0063 Patient Medicare num   Item not changed from B1 to C
[Invalid Data Submitted]                 [99900001A ]
[Message Number]                         +213 Fatal Record
[Message]                                Invalid data value: The submitted data for this
                                           response is not in the valid range of acceptable
                                           values.
[Field or OASIS Items]                   M1020 (M0230) Primary diagnosis ICD code
[Invalid Data Submitted]                 [ ]
[Message Number]                         +150 Fatal Record           Item Number changed from B1 to C
[Message]                                Inconsistent M0100/M1020 values: If M0100(RFA) =
                                           1, 3, 4 or 5, then M1020 (Primary Diagnosis)
                                           cannot be blank.
[Field or OASIS Items]                   M0300 Current residence
[Invalid Data Submitted]                 [ ]
[Message Number]                         +213 Fatal Record           Item retired from B1 to C
[Message]                                Invalid data value: The submitted data for this
                                           response is not in the valid range of acceptable
                                           values.

```

This is an example of the final validation report:

Here we see Item M0063 of an item that has not changed between OASIS B and OASIS C

M0300 Current Residence is an OASIS B item which is being retired and will not be included in OASIS C. As a result the display of this item also has not changed.





## **Non-Medicare/Non-Medicaid Assessments No Longer Accepted**

- M0150 responses 1, 2, 3 and 4 are all unchecked
- Assessment will be rejected
- Identifying information deleted from submission file



## Non-Medicare/Non-Medicaid in HAVEN

- HAVEN will mark the any assessment where M0150 1, 2, 3 and 4 are not checked as complete
- Will not be included in the export file

Beyond the OASIS C changes other changes that are being implemented at this time are:

As of 1/1/2009 all Non-Medicare/Non-Medicaid assessments will be rejected, regardless of M0090 date. The record will also be blanked out of the submission file so the final validation report will only display the Assessment Internal ID, the Patient name and SSN, etc will not be displayed.



## HIPPS Code Calculation Timeframe

- M0090 date is greater than 27 months in the past from the submission date
- Will not call the grouper on the State system
- Generates warning message +304

Also being changed this weekend with the September downtime is that the HIPPS code will no longer be calculated for assessments submitted where the M0090 date is greater than 27 months in the past from the submission date.

A warning message will be generated on the final validation report to let the user know why the HIPPS Code was not calculated by the state server. If a HIPPS Code is submitted this will be stored.



## Warning Message +257

- Will occur only if the submitted HIPPS value does not match the calculated HIPPS value
- Previously was also generated if the submitted HIPPS version does not match the calculated HIPPS version

Recent comments we have received from CMS and providers indicate that Warning Message +257 is somewhat confusing as it currently includes both the HIPPS Cod and the HIPPS Version. With the release of OASIS C these two issues will be split out into two different warning messages.

+257 will be retained to occur if the Submitted HIPPS Code does not match the Calculated HIPPS Code



## New Warning Message +320

- The submitted HIPPS version did not match the calculated HIPPS version
- Notifies user software may not contain latest version
- Version number returned by the HHRG Grouper is different based on the M0090 date of the assessment

And new warning message +320 will be generated if the submitted HIPPS Version does not Match the Calculated HIPPS Version. The primary purpose of this warning message is to let the provider know that they may not be using the latest grouper version. One thing I would like to note is that with the release this weekend there will be different versions returned by the grouper based on the M0090 date.

RFA = 01 or 03:

M0090 is prior to 1/1/2008 – version returned will be 02.03

M0090 is 1/1/2008 -



## HHRG Versions

- RFA = 01 or 03
  - M0090 is prior to 1/1/2008 – version returned will be 02.03
  - M0090 is 1/1/2008 - 9/30/2009 – version returned will be V2308
  - M0090 is 10/1/2009 – 12/31/2009 version returned will be V2409



## HHRG Versions (cont.)

- RFA = 04 or 05
  - M0090 is prior to 12/27/2007 – version returned will be 02.03
  - M0090 is 12/27/2007 - 9/30/2009 – version returned will be V2308
  - M0090 is 10/1/2009 – 12/31/2009 version returned will be V2409



## Questions About the Grouper?

- Send questions to [grouperemail@mmm.com](mailto:grouperemail@mmm.com)



## OASIS Data Management System Changes

- OASIS–C items will appear on separate screen
- Can still query for OASIS–B and OASIS–C assessments at one time





OASIS - Data Management System

File Utilities Reports Window Help

HLISA01 - HHA Browse

HHA ID	Login ID	Name	City	Contact
HLISA01	HLISA01	HLISA01	SACRAMENTO	LISA BADGER

HHA View (Full) Row 1 of 1 ifmcread 07/28/2009 11:21:09

OASIS - Data Management System

File Utilities Reports Window Help

HLISAPAT1, PATIENT1 - Patient Browse

SSN	Provider Type	Current Provider	Last Name	First Name	M.I.	Date of Birth	Gender	P
999-00-0010	HHA	HLISA01	OASISAC7	PATIENT1	C	07/16/1912	Male	66
999-00-0010	HHA	HLISA01	OASISGF3	PATIENT1	C	11/10/1912	Male	66
999-00-0001	HHA	HLISA01	HLISAPAT1	PATIENT1		01/01/1900	Male	66
999-00-0010	HHA	HLISA01	OASISEE1	PATIENT1	C	12/14/1915	Male	66
999-00-0010	HHA	HLISA01	OASISGF2	PATIENT1	C	11/10/1916	Male	66
999-00-0010	HHA	HLISA01	OASISBG7	PATIENT1	C	07/15/1913	Male	66
999-00-0010	HHA	HLISA01	OASISAG7	PATIENT1	C	07/15/1915	Male	66
999-00-0010	HHA	HLISA01	OASISDD1	PATIENT1	C	12/04/1912	Male	66
999-00-0010	HHA	HLISA01	OASISFF1	PATIENT1	C	12/12/1916	Male	66
999-00-0010	HHA	HLISA01	OASISCC7	PATIENT1	C	07/12/1912	Male	66
999-00-0010	HHA	HLISA01	OASIS-D1	PATIENT1	C	02/04/1911	Male	66
999-00-0010	HHA	HLISA01	OASISGF6	PATIENT1	C	06/11/1912	Male	66
999-00-0010	HHA	HLISA01	OASISGG6	PATIENT1	C	06/12/1912	Male	66
999-00-0010	HHA	HLISA01	OASISBB7	PATIENT1	C	08/12/1912	Male	66
999-18-1433	HHA	HLISA01	PATIENT1	PATIENT1	P	01/02/1923	Female	66
999-00-0010	HHA	HLISA01	OASISGF5	PATIENT1	C	06/10/1912	Male	66
999-26-8710	HHA	HLISA01	PATIENT2	PATIENT2		06/12/1924	Male	66

Drill Down to Patients (Fit) Row 6 of 43 ifmcread 07/23/2009 12:56:09

OASIS - Data Management System

File Utilities Reports Window Help

Assessment View

Assessment ID	Original Assessment ID	Modification Indicator	Correction Version	HHA ID	HHA Name	SS
513061	513061	C	0	HLISA01	HLISA01	999-00
516923	516923	C	0	HLISA01	HLISA01	999-00

Drill Down to Assessments (Full) Row 1 of 2 ifmcread 07/23/2009 13:37:37

**OASIS - Data Management System**

File Utilities Reports Window Help

**Assessment Detail**

Name: ETHNIC208, ETHNIC208    HHAID: HSTEVE01    RFA#: 01    Eff Date: 01/01/2010    Subm Date: 01/05/2010

Clinical Record	Demo	Pat Hist	Living Arrange	Support Assist	Sensory Status	Integ Status	Integ Status Cont	Resp Status	Card Status	Elim Status	Neuro/Emotional/Behavioral	ADL/IADL	Meds	Equip Mgmt	HIPPS
-----------------	------	----------	----------------	----------------	----------------	--------------	-------------------	-------------	-------------	-------------	----------------------------	----------	------	------------	-------

**(M1000) From which of following Inpatient Facilities was the patient discharged during the past 14 days:**

- 1 - Long-term nursing facility
- 2 - Skilled nursing facility (SNF / TCU)
- 3 - Short-stay acute hospital (IPP S)
- 4 - Long-term care hospital (LTCH)
- 5 - Inpatient rehabilitation hospital or unit (IRF)
- 6 - Psychiatric hospital or unit
- 7 - Other
- NA - Patient was not discharged from an inpatient facility

**(M1005) Inpatient Discharge Date:** 12/31/2009     UK - Unknown

**(M1010) Inpatient Diagnoses ICD Code Categories:**

250.00    251.00    252.00    253.00    254.00    255.00

**(M1012) Inpatient Procedure ICD Code Categories:**

01.01    01.02    01.03    01.04

- NA - Not applicable
- UK - Unknown

**(M1030) Therapies:**

- 1 - Intravenous or infusion therapy (excludes TPN)
- 2 - Parenteral Nutrition (TPN or lipids)
- 3 - Enteral nutrition (nasogastric, gastrostomy, jejunostomy, or any other artificial entry into the alimentary canal)
- 4 - None of the above

**(M1032) Risk for Hospitalization:**

- 1 - Recent decline in mental, emotional, or behavioral
- 2 - Multiple hospitalizations (2 or more) in the past 12 months
- 3 - History of falls
- 4 - Taking five or more medications
- 5 - Frailty indicators, e.g., weight loss, self reported exhaustion
- 6 - Other
- 7 - None of the above

**(M1034) Overall Status:** 0

0 - The patient is stable with no heightened risk(s) for serious complications and death during the next 30 days of the current hospitalization.

Drill Down to Assessments    Row 1 of 1    ifmread    07/24/2009 13:26:54

**OASIS - Data Management System**

File Utilities Reports Window Help

---

**Assessment Detail**

Name: BUNNY, BUGS P.    HHAID: HSTEVE01    RFA#: 01    Eff Date: 04/20/2009    Subm Date: 04/21/2009

Clinical Record	Demo	Pat Hist	Living Arrange	Support Assist	Sensory Status	Integ Status	Integ Status Cont	Resp Status	Elim Status	Neuro/Emotional/Behavioral	ADL/IADL	Meds	Equip Mgmt	HIPPS
-----------------	------	----------	----------------	----------------	----------------	--------------	-------------------	-------------	-------------	----------------------------	----------	------	------------	-------

**(M0170) Inpatient Facilities:**

- 1 - Hospital
- 2 - Rehabilitation facility
- 3 - Nursing home
- 4 - Other
- NA - Patient was not discharged from an inpatient facility

**(M0175) From which of following Inpatient Facilities was the patient discharged during the past 14 days:**

- 1 - Hospital
- 2 - Rehabilitation facility
- 3 - Skilled nursing facility
- 4 - Other nursing home
- 5 - Other (specify)
- NA - Patient was not discharged from an inpatient facility

**(M0180) Inpatient Discharge Date:**   UK - Unknown

**(M0190) Inpatient Diagnoses ICD Code Categories:** 013.05

**(M0200) Medical or Treatment Regimen Change Within Past 14 Days:**  No  Yes

**(M0240) Other Diagnoses and Severity Index:**

b. V89.05	<input type="radio"/> 0	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4
c. V81.09	<input type="radio"/> 0	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4
d. V58.69	<input type="radio"/> 0	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4
e. V12.42	<input type="radio"/> 0	<input type="radio"/> 1	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4
f. V25.04	<input type="radio"/> 0	<input type="radio"/> 1	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4

**(M0245) Payment Diagnoses**

a.

b.

**(M0246) Case Mix Diagnosis:**

Column 3		Column 4	
a.	<input type="text" value="300.00"/>	a.	<input type="text" value="398.99"/>
b.	<input type="text" value="099.9"/>	b.	<input type="text" value="079.0"/>
c.	<input type="text" value="800.03"/>	c.	<input type="text" value="800.05"/>
d.	<input type="text" value="800.01"/>	d.	<input type="text" value="897.6"/>
e.	<input type="text" value="016.23"/>	e.	<input type="text" value="002.3"/>
f.	<input type="text" value="799.89"/>	f.	<input type="text" value="700."/>

Ready      Row 1 of 1      ifmcread      07/24/2009 13:35:21

OASIS - Data Management System

File Utilities Reports Window Help

Assessment Detail

Name: ETHNIC208, ETHNIC208    HHAID: HSTEVE01    RFA#: 01    Eff Date: 01/01/2010    Subm Date: 01/05/2010

Clinical Record	Demo	Pat Hist	Living Arrange	Support Assist	Sensory Status	Integ Status	Integ Status Cont	Resp Status	Card Status	Elim Status	Neuro/Emotional/Behavioral	ADL/IADL	Meds	Equip Mgmt	HIPPS
<p><b>(M1500) Symptoms in Heart Failure Patients:</b></p> <p> <input type="radio"/> No  <input type="radio"/> Yes  <input type="radio"/> Not assessed  <input type="radio"/> Patient does not have diagnosis of heart failure         </p> <p><b>(M1510) Heart Failure Follow-up:</b></p> <p> <input type="checkbox"/> 0 - No action taken  <input type="checkbox"/> 1 - Patient's physician (or other primary care practitioner) contacted the same day  <input type="checkbox"/> 2 - Patient advised to get emergency treatment (e.g., call 911 or go to emergency room)  <input type="checkbox"/> 3 - Implemented physician-ordered patient-specific established parameters for treatment  <input type="checkbox"/> 4 - Patient education or other clinical interventions  <input type="checkbox"/> 5 - Obtained change in care plan orders (e.g.m increased monitoring by agency, change in visit frequency, telehealth, etc.)         </p>															

Ready    Row 1 of 1    ifmcread    07/24/2009 13:36:32



## **QIES Workbench and OASIS–C**

- Adding OASIS–C items to current view
- Will allow State users and CMS to extract data for OASIS–B and OASIS–C in same view
- Data restores for agencies will be the same



## CASPER Reporting

- Key fields left unchanged
- HHA Provider Reports unchanged
- Error Reports
  - Error Summary
  - Error by Month by Agency



# Top 10 Fatal Record Errors

QIES OLAP Reports - Microsoft Internet Explorer

Home HHA Assessment Error Reports Help

## HHA Assessment Error Reports QIES OLAP

### HHA Assessment Error Comparison Report

Tools View Layout Format Spotlight Sort Saved Selections

Crosstab Graph Bar Bar Go

Filter Export

	Year 2009			Year 2008			Year 2007	
	Errors per 100 Asmts	Warnings per 100 Asmts	Fatal Errors per 100 Asmts	Errors per 100 Asmts	Warnings per 100 Asmts	Fatal Errors per 100 Asmts	Errors per 100 Asmts	Warnings per 100 Asmts
National	57.22	51.25	5.62	74.08	66.16	7.55	62.67	55.75

For every 100 assessments submitted to the State system 57% of the assessments generate some kind of message on the final validation report.

Of these assessment with messages just over 90% are warning messages. That leaves almost 10% of the assessments being rejected due to fatal record errors. With this in mind I thought it would be beneficial to review the Top 10 Fatal Record Error Messages from January 2009 – June 2009 rather than just the Top 10 overall.

Along the way I will also point out if there will be any changes to this message when OASIS C is implemented.



**#10**

**+266**

**Inconsistent M0066/M0090 Dates:**

**OASIS-C Technical Updates** **8-29**

The 10<sup>th</sup> most common Fatal Record Error message is +266 –

This occurs if the patient is not at least 18 years of age. The age is determined by taking the M0090 (Completion) date – M0066 DOB.

One thing to note is that when it is determined that patient is less than 18 years of age, then the identifying data in the submission file is blanked out with the Rec\_ID in the submission file being updated to reflect D1.

The final validation report will display the assessment internal id only to identify the assessment as all other identifying information will be blanked out.

```

[Agency Name]                HLISAO1
[# Records Processed]         1
[# Records Rejected]         1
[# Duplicate Records]         0
[# Records with Messages]     1
[Total # of Messages]        2
-----

Record: Header

[Field or OASIS Items]       FAC_PHONE
[Invalid Data Submitted]     [Submitted: 5154573767 Database: 5151231234]
[Message Number]             +16      Warning
[Message]                     Inconsistent HHA telephone number: The HHA
                              telephone number submitted in the header record
                              does not match the HHA telephone number in the
                              State database.
-----

Record: 1                      Rejected
Assmt_Int_ID = 2171863        Name =
Res_Int_ID =                  SSN =
RFA, BRANCH_ID =             Eff Date =
Correction Num =              MO090 Date =

[Field or OASIS Items]       MO066_PAT_BIRTH_DT, MO090_INFO_COMPLETED_DT
[Invalid Data Submitted]     [20000204, 20100101]
[Message Number]             +266      Fatal Record
[Message]                     Inconsistent MO066/MO090 dates: The required
                              (MO066) Birth Date is less than 18 years in the
                              past. The (MO066) Birth Date cannot be less than
                              18 years from the (MO090) date.
-----

Record: Trailer
-----

```



**#9**

+134

Inconsistent M0150/M0065 values

Occurs when M0150 is equal to 03 (Medicaid Fee for Service) AND M0065 (Medicaid number) is equal to 'NA'.



**#8**

+133

Inconsistent M0150/M0063 values:

Just like Fatal Record Error +134 which expects a Medicaid number in M0065 if the Pay Source is Medicaid FFS, this error message is generated if the Pay Source is Medicare FFS and M0063 Medicare Number is marked as 'NA'.



**#7**

+26

Invalid record HHA\_ID:

This fatal Record error is generated if the HHA\_ID in any of the individual assessment records does not match the HHA\_ID in the header record.



**#6**

**+244**

**Inconsistent M0150/MASK\_VERSION\_CODE  
Values**

**OASIS–C Technical Updates** **8-34**

This fatal record error occurs when the all M0150 current Payment Source responses 1, 2, 3 and 4 are unchecked, then currently the Mask Version code must be checked as the pay source would be considered to be Private Pay or Non-Medicare/Non-Medicaid.

With the implementation of the Version 2.0 OASIS data specifications this error message will no longer occur as CMS has made the determination that Non-Medicare/Non-Medicaid assessments will no longer be accepted by the state database if submitted on or after 1/1/2009. Please note that this change is NOT based on M0090 date.

In the future – if a non-Medicare/Non-Medicaid assessment is submitted then the assessment will be rejected with +306 Fatal Record Error and the identifying information will be deleted from the submission file with the final validation report displaying only the Assessment Internal ID.



**#5**

+279

Inconsistent M0016 value:

The submitted Branch ID (M0016) value does not match the state database.



**#4**

+1007

No Match Found:

Correction assessments



**#3**

+213

Invalid Data Value:



**#2**

+169

Inconsistent M0830 values:



**#1**

+1000

Duplicate Assessment



## Questions?

QTSO Help Desk

888-477-7876

[help@qtso.com](mailto:help@qtso.com)