

OASIS Alert

Industry Notes:

The feds want some things to change in home care, the HHS Office of Inspector General indicates in a new report.

In its latest semiannual report to Congress, which the watchdog agency issues every six months, the OIG revisits its findings from a February report taking the **Centers for Medicare & Medicaid Services** to task for not having stricter OASIS data submission standards. "HHAs did not properly submit required OASIS data for 6 percent of claims filed in 2009, which represented over \$1 billion in Medicare payments," the semiannual report emphasizes to Congress. "CMS should identify all HHAs that failed to submit OASIS data and apply its 2 percent payment reduction authority," among other measures, the OIG urges.

Watch out: CMS appears to already have heeded this suggestion from the OIG. In a transmittal released in early June, CMS tells contractors to dock agencies' pay rates by 2 percent if they don't meet OASIS and HH CAHPS data submission requirements, including submitting OASIS data "for all episodes." The transmittal's implementation and effective dates are Aug. 13.

The OIG also restates a suggestion from a March report on intermediate sanctions. "CMS should make HHA intermediate sanctions a high priority and complete their implementation as soon as possible," the OIG tells Congress.

And the OIG reiterates findings from a March report on documentation. The agency actually found that only 2 percent of home health claims it reviewed failed to meet Medicare coverage criteria.

But "home health is an area at increased risk for fraud" and CMS needs to go beyond paper record reviews, the OIG urges. And the review found 22 percent of claims billed in error.

If you use dementia codes 294.20, (Dementia, unspecified, without behavioral disturbance) and 294.21 (Dementia, unspecified, with behavioral disturbance) in M1020/M1022 frequently, you should look at your past claims for possible adjustment.

These two new ICD-9 codes took effect Oct. 1, 2011, but Medicare's home health prospective payment system grouper didn't count them as case mix diagnoses until Jan. 1, 2012. "Home health agencies may want to review any claims with dates of service submitted from October 1, 2011 through December 31, 2011 to make a business decision as to whether or not to adjust the claim based upon a different HIPPS score determination," CMS says in a message to providers.

CMS is putting more money where its mouth is when it comes to preventing unnecessary rehospitalizations. Twentythree additional organizations will participate in the Community-based Care Transitions Program (CCTP), CMS says in a release. The program began in 14 communities in 2009 and includes home care and hospice.

The new participants "will support more than 126 local hospitals and help more than 223,000 Medicare beneficiaries in 19 states across the country," the agency adds. CMS announced last year it was kicking in \$500 million more in funding for the program. The second round of CCTP, which brings the number of participants up to 30 total, is using about half the \$500 million amount, CMS explains. CMS will continue to take applications for the remainder of the funds.

Goal: The program aims to reduce preventable hospital readmissions by 20 percent over a three-year period, CMS notes.

Add these new resources to your flu-prevention toolkit. The **National Council on Aging** has undertaken a new initiative to help protect older adults from influenza this upcoming flu season. "Each year in the United States about nine out of 10 flu-related deaths and more than six out of 10 flu-related hospital stays occur in people over the age of 65," the NCOA says in a press release.



Central to the initiative is promoting an understanding of how aging affects the body's ability to fight infection. But older adults and their caregivers can take simple steps to help protect against influenza, the NCOA says. Key to prevention efforts is getting a flu shot.

The Flu + You toolkit includes a how-to guide with step-by-step tips for educating older adults about the flu, handouts, and customizable communication materials. Find out more here: www.ncoa.org/improve-health/community-education/flu--you/.

Good news for diabetic patients: Advances in medical care and disease management mean they face a lower risk of heart attack and stroke.

Unfortunately, scientists predict that the number of people who are diagnosed with diabetes will continue to rise, according to a new study published in Diabetes Care.

According to the study, people with diabetes saw death drop substantially from 1997 to 2006. This was especially noticeable in the rate of deaths due to heart disease and stroke, found researchers at the **Centers for Disease Control and Prevention** and the **National Institutes of Health**.

Overall, deaths of diabetic patients from all causes dropped 23 percent during the period studied. But deaths related to heart disease and stroke dropped by an impressive 40 percent. While adults who have diabetes remain more likely to die younger than those without the disease, the gap is growing smaller.

What works: Better treatment for cardiovascular disease, improved diabetes management, and healthy lifestyle changes all contributed to the improved number, the CDC found. But, obesity levels among people with diabetes remain on the rise.

However, the fact that people with diabetes are living longer, combined with an increase in newly diagnosed diabetics means the total population of those with the disease will continue to grow, the CDC said in a press release.

The number of diabetic Americans has more than tripled since 1980. This growth is due mostly to type 2 diabetes "which is closely linked to a rise in obesity, inactivity and older age," the CDC said. An estimated 25.8 million Americans have diabetes, with 7 million of that number unaware that they have the disease.