

January 24, 2022

## **McBee OASIS and Coding Options**

**OASIS Accuracy and/or Coding Review Process** – After workflow is established, documentation will be evaluated remotely through a comprehensive, concurrent review of client-selected, pre-submission OASIS cases. The McBee team will review each of the assigned charts, including supporting documentation and data, the plan of care, physician orders, progress notes, history and physical, medication profile and case communication documentation. This review also includes ICD-10 coding, when requested, as well as client designated OASIS questions. McBee will review patient charts and documentation for start of care (SOC), resumption of care (ROC), and recertifications, make recommendations, and offer insight into proper OASIS completion. ICD-10 coding will include a primary diagnosis and then correctly sequenced with other co-morbidities based on the documentation provided by the client. With this review, McBee can immediately recommend improvements for the cases reviewed and provide a diagnostic detailing any identified documentation problems and training needs.

The original scoring of the OASIS and the recommended scoring will be documented, and all changes made will be tracked in the review platform. If client desires, edits can be made within their EMR system. Our tools also provide valuable feedback regarding key performance indicators, including potential reimbursement impact. The clinician responsible for completing this step allows McBee to provided error rates based on the OASIS author. Client is responsible for locking and approving the OASIS after reviews are completed.

McBee offers three different OASIS & Coding Options and will review and make recommendations on the selected Bundle's M items:

PDGM Bundle - \$68 per review	
Items Reviewed at SOC/ROC/Recert	
Item	Description
M1021	Primary Diagnosis
M1023	Other Diagnoses
M1033	Risk for Hospitalization
M1800	Grooming
M1810	Upper Body Dressing
M1820	Lower Body Dressing
M1830	Bathing
M1840	Toilet Transferring
M1850	Transferring
M1860	Ambulation/Locomotion

PDGM and Star Ratings Bundle - \$78 Per Review			
Items Reviewed at SOC/ROC/Recert			
Item	Description	Item	Description
M0102	Date of Physician Ordered SOC/ROC	M1800	Grooming
M0104	Date of Referral	M1810	Upper Body Dressing
M1021	Primary Diagnosis	M1820	Lower Body Dressing
M1023	Other Diagnoses	M1830	Bathing
M1033	Risk for Hospitalization	M1840	Toilet Transferring
M1400	When Dyspneic	M1850	Transferring
M1700	Cognitive Functioning	M1860	Ambulation/Locomotion
M1710	When Confused	M2020	Management of Oral Medications
M1720	When Anxious		

Comprehensive OASIS (PDGM, Star, Outcomes, Process) - \$90			
Items Reviewed at SOC/ROC/Recert			
Item	Description	Item	Description
M0102	Date of Physician Ordered SOC/ROC	M1840	Toilet Transferring
M0104	Date of Referral	M1850	Transferring
M1021	Primary Diagnosis	M1860	Ambulation/Locomotion
M1023	Other Diagnoses	M2001	Drug Regimen Review
M1033	Risk for Hospitalization	M2003	Medication Follow-up
M1311	Current Number Unhealed PU/Injuries at each Stage	M2020	Management of Oral Medications
M1400	When Dyspneic	GG0130	Self-Care (GG0130 A, B, C)
M1700	Cognitive Functioning	GG0170	Mobility (GG0170 B, C, D, E, F, J, K, R, S)
M1710	When Confused	M0100	Reason for Assessment (Care Type-SOC, ROC, Recert)
M1720	When Anxious	M0030	Start of Care Date (Episode Date on SOC)
M1800	Grooming	M0032	Resumption of Care Date (Episode date on ROC)
M1810	Upper Body Dressing	M1000	Inpatient Facility discharge
M1820	Lower Body Dressing	M1005	Inpatient Discharge Date
M1830	Bathing		

One Time Implementation Fee: New McBee client environment configuration and setup fee of \$995.00

## **Additional Optional Review Services**

Discharge OASIS - PDGM and Star Ratings - \$30	
Items Reviewed at DC	
Item	Description
M1400	When Dyspneic
M1830	Bathing
M1850	Transferring
M1860	Ambulation/Locomotion
M2020	Management of Oral Medications
M1700	Cognitive Functioning
M1710	When Confused
M1720	When Anxious

485 review by section	Plan of Care (485) Reviews - \$45
Section 10	Med profile should include O2, IV flushes, IV meds, enteral feedings, TPN
Section 11	Principal diagnosis should match the focus of care
Section 13	Pertinent diagnoses should be relevant to the care rendered.
Section 14	Does DME support homebound status and functional limitations (Hoyer lift, hospital bed, trapeze).
Section 15	Safety measures should match the OASIS. Fall risk? Skin breakdown risk?
Section 16	Dietary requirements meet physician orders? TPN? Enteral Feedings? Diabetic diet?
Section 18 A/B	Do functional limitations and activities permitted match the OASIS? Dyspnea? Incontinence? Bedbound?
	Does 18 A/B include partial weight bearing for patients with wounds on lower extremities? (Supporting PC 1.1)
Section 21	Frequency for each discipline
	Do orders match the diagnoses? Is there a clear skilled need?
	BG checks for diabetics
	CHF daily weights?
	HTN prn visits for BP checks
	Any duplication of orders between disciplines?
	Coumadin - prn visits for lab draws
Section 22	Goals patient specific, achievable, measurable
	Therapy goals include both long- and short-term goals

Supportive documentation for HB status	Devices? Special transportation? Medically contraindicated condition? Normal inability to leave home? What is the taxing and considerable effort?
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Primary diagnosis will provide the PDGM clinical grouping category and up to 24 secondary diagnosis will be listed to determine the comorbidity adjustment level under PDGM.

Episodic coding only - \$45/review

Hospice coding only - \$45/review

Pay Per Visit (Commercial/Essential) coding - \$20/review

Post-Acute Academy Licenses - \$299 annual subscription per license

**-All pricing is valid for 90 days-**