

# ANSWERS TO THE QUIZ

Question #1: The correct answer is FALSE. Data is only submitted to the MAC for billing purpose. (Category 1, Applicability, Q 1.3)

Question #2: The correct answer is FALSE. Joint Commission accredited HHAs that are also Medicare approved must meet the data reporting requirements for both OASIS and Joint Commission. (Category 9, Vendors, Q1.)

Question #3: The correct answer is B. Comprehensive assessments can only be completed by RN, PT, OT, or ST. (Category 2, Comprehensive Assessment, Q 15)

Question #4: The correct answer is NO. When a patient returns to the agency during the last 5 days of an episode, the resumption of care should be completed, fulfilling both the resumption of care and the recertification. (Category 3, Follow-Up Assessment, Q 3)

Question #5: The answer is C. This is treated as a missed Recertification and should be completed as soon as possible after the patient returned home. (Category 3, Follow-Up Assessment, Q. 11.4)

Question #6: The correct answer is TRUE. The day of assessment for M1400 refers to the time of the assessment and the preceding 24 hours. (Provider Training Module Post Test Question #2 and Category 4, OASIS Data Set Forms and Items, Q. 113.3)

Question #7: The correct answer is FALSE. LPNs are not allowed to work cooperatively with a therapist to complete the drug regimen review. (Category 4, OASIS Data Set Forms and Items, Q. 160.3.1)

Question #8. The correct answer is D. Based on the information in this scenario, RFA 7 is the most appropriate choice. RFA 6 would require the use of special instructions and RFA 9 is not appropriate choice for a HHA patient that goes in the hospital for a qualifying inpatient stay. (Category 3, Follow-Up Assessment, Q. 3.1 and Category 2, Comprehensive Assessment, Qs. 53-55)

Question #9: The correct answer is C. If a PRN order exists and the patient meets the parameters for administration of the feeding based on the findings from the comprehensive assessment, or has met such parameter and/or received enteral nutrition at home in the past 24 hours, the assessing clinician would mark Response 3. (Category 4, OASIS Data Set Forms and Items, Q. 53.5)

Question 10: The correct answer is B. (PowerPoint presentation)

Question #11: The correct answer is TRUE. A clinician other than the assessing clinician can provide education to the patient or caregiver. (Category 4, OASIS Data Set Forms and Items, Q161.4)

Question #12: The correct answer is FALSE. To meet the definition of “standardized,” tool, it must have been scientifically tested on a population with characteristics similar to that of the patient being assessed and includes a standard response scale. (OASIS Manual)

Question #13. The correct answer is B. The QBQI and QBQI reports can be assessed in the CASPER system. The CASPER User Manual provides information on how to obtain OBQI and QBQM Reports from the CASPER system. It describes how to request a report, how to view a report online, and how to print or save a report. This manual can be found on each HHA's OASIS State Welcome Page, Chapter 2 (Functionality) of the CASPER User Manual.

Question #14: The correct answer is B. Error code 286 had 29306 errors for a total of 7.32%. (PowerPoint presentation)

Question #15. The correct answer is (B). Both diabetes and hypertension were actively treated in the hospital within the last 14 days. (OASIS Manual)

Question #16. The correct answer is A. This item does not address communicating in sign language, writing or by any non-verbal means. (OASIS Manual and Category 4, OASIS Data Set Forms and items, Q66.2)

Question #17. The correct answer is "NO." Response 1 can only be marked if the physician responds to the agency communication with acknowledgement of receipt of information and/or further advice or instructions the same day. For this item, the same day means by the end of this calendar day. (OASIS Manual)

Question 18: The answer is both A and B. The resumption of care should be completed within 48 hours of the inpatient discharge or within 48 hours of becoming aware of the inpatient discharge. There is no regulatory language allowing the ROC to be delayed by physician order greater than 48 hours from the inpatient facility discharge. (April 2013 Q & As, Q. 10 or July 2013 Q & As, Q. 1)

Question 19: The answer is FALSE. If the best practice is not applicable to the patient, the response will be NA. Depending on the items set, some best practices can be marked YES and some can be marked NO even if the ROC assessment is late. (October 2013 CMS Quarterly Q&As Q 2)

Question #20: The correct answer is TRUE. (Correction Policy on Data Submission)