

### *(M1700) (SRD)*

—Cognitive Functioning: Patient’s current (day of assessment) level of alertness, orientation, comprehension, concentration, and immediate memory for simple commands

- Refers to the patient’s current (at the time of the assessment and in preceding 24 hours) level of cognitive functioning, including alertness, orientation, comprehension, concentration, and immediate memory for simple commands.
- Consider the amount of supervision and care required due to cognitive deficits.
- Diagnoses such as dementia, delirium, development delay disorders, and mental retardation will have various degrees of cognitive dysfunction.
- Patients with neurological deficits related to stroke, mood/anxiety disorders, or opioid therapy may have cognitive deficits.

#### **Quality of Patient Care Star Ratings Alert**

This item is used in the calculation of the Star Ratings that is published on the Care Compare website. These Star Ratings are used by caregivers, payers, etc., to evaluate the level of quality care that your agency provides to your patients.

Tip: Educate staff on the importance of the Star Ratings and the agency’s expectations as to the level of rating it will attain. This item is used in calculating Improvement in Pain Interfering with Activity, Improvement in Management of Oral Medications, Improvement in Ambulation- Locomotion, Improvement in Bed Transferring, and Improvement in Bathing Measures.

### *(M1710) (SRD)*

—When Confused (Reported or Observed Within the Last 14 Days)

- **Code 0, Never**, if the patient had no confusion in the last 14 days.
- **Code 1, In new or complex situations only**, if the patient’s confusion is isolated to a new or a complex situation.
- **Code 4, Constantly**, if the patient’s confusion was present at all times during the entire 14 days.

## Chapter 8: General Instructions for Completion of the OASIS-E Items

- **Code, NA, Patient nonresponsive**, if the patient is nonresponsive at the time of assessment and the information cannot be elicited from the caregiver or other source.
- **Dash** is **not** a valid response for this item.
- This item may not directly relate to M1700.
- Nonresponsive means the patient is unable to respond or responds in a way such that the clinician cannot make a clinical judgment about the patient's level of orientation.

### Quality of Patient Care Star Ratings Alert

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This item is also used for multiple other outcome measures for RISK ADJUSTMENT.

Tip: Educate staff on the importance of the Star Ratings and expectations the agency has for the level of rating that the agency wishes to attain. This item is used in calculating Improvement in Pain Interfering with Activity, Improvement in Management in Oral Medications, Improvement in Ambulation-Locomotion, Improvement in Bed Transferring, and Improvement in Bathing Measures.

### *(M1720) (SRD)*

—When Anxious (Reported or Observed Within the Last 14 Days)

- Identifies frequency of anxiety within the past 14 days.
- **Code 3, All of the time**, if the patient felt anxious at all times during the entire look back period of 14 days.
- **Code NA, Patient nonresponsive**, if the patient is nonresponsive at the time of assessment and the information cannot be elicited from the caregiver or other source.
- **Dash** is **not** a valid response for this item.

## Home Health Guide to OASIS-E: A Reference for Field Staff

- Nonresponsive means the patient is unable to respond or responds in a way such that the clinician cannot make a clinical judgment about the patient's level of anxiety. If the patient is nonresponsive at the time of assessment, elicit from the caregiver or other sources whether the patient experienced any anxiety during the past 14 days.
- Responses appear in order of increasing frequency of anxiety.

Anxiety includes:

- Worry that interferes with learning and normal activities. Feelings of being overwhelmed and having difficulty coping. Symptoms of anxiety disorders.

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Tip: Educate staff on the importance of the Star Ratings and expectations the agency has for the level of rating that the agency wishes to attain. This item is used in calculating Improvement in Pain Interfering with Activity, Improvement in Management of Oral Medications, Improvement in Ambulation-Locomotion, Improvement in Bed Transferring, and Improvement in Bathing Measures.

## Item by Item: Section D. Mood

This section contains items that address mood distress. The presence of indicators does not automatically mean that the patient has a diagnosis of depression or other mood disorder.

### *(D0150) (SRD)*

—Patient Mood Interview (PHQ-2 to 9)

**Note:** Disregard the instruction in the OASIS item that states “If either D0150A2 or D0150B2 is coded 2 or 3, CONTINUE asking the questions below. If not, END the PHQ interview”. This statement is outdated due to refinements in OASIS guidance. (SEE INSTRUCTIONS BELOW)