March 10, 2023

Dear Administrator:

RE: Modifications to NYS Medicaid Grouper for Certified Home Health Agencies Due to Changes to the Federal Outcome & Assessment Information Set-E (OASIS-E) Tool

Beginning January 1, 2023 the Federal OASIS-E tool that collects data for skilled Medicare and Medicaid patients, 18 years and older, was updated by CMS, which caused a disconnect between many of the claims billings systems and the current NYS Medicaid Episodic Payment System (EPS) "Grouper" scoring.

With OASIS-E becoming effective January 1, 2023, certain codes no longer exist and have been replaced with new codes. These new codes and two existing codes have been removed from the Recertification (Recert) and Other Follow-Up forms but they do exist on the Start of Care (SOC) and Resumption of Care (ROC) forms. As a result, the Medicaid grouper is no longer aligned to accurately calculate the patient's clinical score which is used to determine the proper rate to bill.

In order to facilitate functional billing logic, the Medicaid grouper mapping will remain consistent. If the patient is being recertified, once the Recert OASIS-E is finalized, the billing system should refer to the patient's latest ROC OASIS and pull all of the missing information from it. If there is no ROC OASIS, then the system should refer to the patient's latest SOC OASIS (see attachment A for a detailed summary of changes). If there is no ROC or SOC OASIS due to the patient's recent transition into the current electronic medical record (EMR)/billing system from a legacy EMR/billing system, then the missing information from the legacy system's most recent ROC or SOC OASIS should be manually obtained and entered into the current system.

In light of the time required by providers and billing agents to update their systems and conduct necessary testing, the 90-day timely filing deadline has been waived through April 2023 date of service claims. Providers using this waiver should complete all claiming by May 31, 2023 (1 month after the conclusion of the waiver) using delay reason code 3.

It is important to note that this waiver does not include any adjustment to the rates for pediatric patients, who continue to be reimbursed on a historical fee-for-service per unit basis in accordance with Part 86-1.13 and who are not assessed with the OASIS-E tool. The list of applicable rate codes is attached (Attachment B). Please email any questions to the email address: CHHA-Rates@health.ny.gov.

Sincerely,

Laura Rosenthal, Director
Bureau of Nursing Home and Long Term Care
Rate Setting
Division of Finance and Rate Setting
Office of Health Insurance Programs

Cc: Amanda Pyskadlo, Deputy Division Director, DMDD
    Thomas Heckert, Pended Claims Unit, DMDD
    Tammy Jessup, Pended Claims Unit, DMDD

Attachment A – OASIS-E Changes – Codes Impacted

Code Replacements

Code	Replaced with a New Code in OASIS-C1	Replacement Code in OASIS-E
M1020	Yes	M1021
M1022	Yes	M1023

Code Changes

Code	Code Exists in Start of Care	Code Exists in Resumption of Care	Code Exists in Recertification (Follow-Up)	Code Exist in Other (Follow-Up)
M1021	Yes	Yes	No	No
M1023	Yes	Yes	No	No
M1610	Yes	Yes	No	No
M1620	Yes	Yes	No	No

Impact of Code Changes

Code	Correct EPS Rate Code Generated/Billed for Start of Care and Resumption of Care OASIS	Correct EPS Rate Code Generated/Billed for Recertification (Follow-Up) and "Other Follow-up" OASIS
M1021	Yes	No
M1023	Yes	No
M1610	Yes	No
M1620	Yes	No

A log of changes since the last update between the OASIS forms is available on CMS's web page at: OASIS Data Sets | CMS

Attachment B

Rate Code	Rate Code Description
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Attachment B

	Certified Home Health Agencies - New York State Medicaid - Episodic Payment System Rate Codes - Effective May 1, 2012
Rate Code	**Rate Code Description**
4810	EPS START OF CARE, CLIN A, FUNC E, AGE GRP 1
4811	EPS START OF CARE, CLIN A, FUNC E, AGE GRP 2
4812	EPS START OF CARE, CLIN A, FUNC E, AGE GRP 3
4813	EPS START OF CARE, CLIN A, FUNC E, AGE GRP 4
4814	EPS START OF CARE, CLIN A, FUNC E, AGE GRP 5
4815	EPS START OF CARE, CLIN A, FUNC E, AGE GRP 6
4816	EPS START OF CARE, CLIN A, FUNC F, AGE GRP 1
4817	EPS START OF CARE, CLIN A, FUNC F, AGE GRP 2
4818	EPS START OF CARE, CLIN A, FUNC F, AGE GRP 3
4819	EPS START OF CARE, CLIN A, FUNC F, AGE GRP 4
4820	EPS START OF CARE, CLIN A, FUNC F, AGE GRP 5
4821	EPS START OF CARE, CLIN A, FUNC F, AGE GRP 6
4822	EPS START OF CARE, CLIN A, FUNC G, AGE GRP 1
4823	EPS START OF CARE, CLIN A, FUNC G, AGE GRP 2
4824	EPS START OF CARE, CLIN A, FUNC G, AGE GRP 3
4825	EPS START OF CARE, CLIN A, FUNC G, AGE GRP 4
4826	EPS START OF CARE, CLIN A, FUNC G, AGE GRP 5
4827	EPS START OF CARE, CLIN A, FUNC G, AGE GRP 6
4828	EPS START OF CARE, CLIN B, FUNC E, AGE GRP 1
4829	EPS START OF CARE, CLIN B, FUNC E, AGE GRP 2
4830	EPS START OF CARE, CLIN B, FUNC E, AGE GRP 3
4831	EPS START OF CARE, CLIN B, FUNC E, AGE GRP 4
4832	EPS START OF CARE, CLIN B, FUNC E, AGE GRP 5
4833	EPS START OF CARE, CLIN B, FUNC E, AGE GRP 6
4834	EPS START OF CARE, CLIN B, FUNC F, AGE GRP 1
4835	EPS START OF CARE, CLIN B, FUNC F, AGE GRP 2
4836	EPS START OF CARE, CLIN B, FUNC F, AGE GRP 3
4837	EPS START OF CARE, CLIN B, FUNC F, AGE GRP 4
4838	EPS START OF CARE, CLIN B, FUNC F, AGE GRP 5

Attachment B

Rate Code	Rate Code Description
	**Certified Home Health Agencies - New York State Medicaid - Episodic Payment System Rate Codes - Effective May 1, 2012**
4839	EPS START OF CARE, CLIN B, FUNC F, AGE GRP 6
4840	EPS START OF CARE, CLIN B, FUNC G, AGE GRP 1
4841	EPS START OF CARE, CLIN B, FUNC G, AGE GRP 2
4842	EPS START OF CARE, CLIN B, FUNC G, AGE GRP 3
4843	EPS START OF CARE, CLIN B, FUNC G, AGE GRP 4
4844	EPS START OF CARE, CLIN B, FUNC G, AGE GRP 5
4845	EPS START OF CARE, CLIN B, FUNC G, AGE GRP 6
4846	EPS START OF CARE, CLIN C, FUNC E, AGE GRP 1
4847	EPS START OF CARE, CLIN C, FUNC E, AGE GRP 2
4848	EPS START OF CARE, CLIN C, FUNC E, AGE GRP 3
4849	EPS START OF CARE, CLIN C, FUNC E, AGE GRP 4
4850	EPS START OF CARE, CLIN C, FUNC E, AGE GRP 5
4851	EPS START OF CARE, CLIN C, FUNC E, AGE GRP 6
4852	EPS START OF CARE, CLIN C, FUNC F, AGE GRP 1
4853	EPS START OF CARE, CLIN C, FUNC F, AGE GRP 2
4854	EPS START OF CARE, CLIN C, FUNC F, AGE GRP 3
4855	EPS START OF CARE, CLIN C, FUNC F, AGE GRP 4
4856	EPS START OF CARE, CLIN C, FUNC F, AGE GRP 5
4857	EPS START OF CARE, CLIN C, FUNC F, AGE GRP 6
4858	EPS START OF CARE, CLIN C, FUNC G, AGE GRP 1
4859	EPS START OF CARE, CLIN C, FUNC G, AGE GRP 2
4860	EPS START OF CARE, CLIN C, FUNC G, AGE GRP 3
4861	EPS START OF CARE, CLIN C, FUNC G, AGE GRP 4
4862	EPS START OF CARE, CLIN C, FUNC G, AGE GRP 5
4863	EPS START OF CARE, CLIN C, FUNC G, AGE GRP 6
4864	EPS RECERTIFICATION, CLIN A, FUNC E, AGE GRP 1
4865	EPS RECERTIFICATION, CLIN A, FUNC E, AGE GRP 2
4866	EPS RECERTIFICATION, CLIN A, FUNC E, AGE GRP 3
4867	EPS RECERTIFICATION, CLIN A, FUNC E, AGE GRP 4
4868	EPS RECERTIFICATION, CLIN A, FUNC E, AGE GRP 5

Attachment B

Rate Code	Rate Code Description
Certified Home Health Agencies - New York State Medicaid - Episodic Payment System Rate Codes - Effective May 1, 2012	
4869	EPS RECERTIFICATION, CLIN A, FUNC E, AGE GRP 6
4870	EPS RECERTIFICATION, CLIN A, FUNC F, AGE GRP 1
4871	EPS RECERTIFICATION, CLIN A, FUNC F, AGE GRP 2
4872	EPS RECERTIFICATION, CLIN A, FUNC F, AGE GRP 3
4873	EPS RECERTIFICATION, CLIN A, FUNC F, AGE GRP 4
4874	EPS RECERTIFICATION, CLIN A, FUNC F, AGE GRP 5
4875	EPS RECERTIFICATION, CLIN A, FUNC F, AGE GRP 6
4876	EPS RECERTIFICATION, CLIN A, FUNC G, AGE GRP 1
4877	EPS RECERTIFICATION, CLIN A, FUNC G, AGE GRP 2
4878	EPS RECERTIFICATION, CLIN A, FUNC G, AGE GRP 3
4879	EPS RECERTIFICATION, CLIN A, FUNC G, AGE GRP 4
4880	EPS RECERTIFICATION, CLIN A, FUNC G, AGE GRP 5
4881	EPS RECERTIFICATION, CLIN A, FUNC G, AGE GRP 6
4882	EPS RECERTIFICATION, CLIN B, FUNC E, AGE GRP 1
4883	EPS RECERTIFICATION, CLIN B, FUNC E, AGE GRP 2
4884	EPS RECERTIFICATION, CLIN B, FUNC E, AGE GRP 3
4885	EPS RECERTIFICATION, CLIN B, FUNC E, AGE GRP 4
4886	EPS RECERTIFICATION, CLIN B, FUNC E, AGE GRP 5
4887	EPS RECERTIFICATION, CLIN B, FUNC E, AGE GRP 6
4888	EPS RECERTIFICATION, CLIN B, FUNC F, AGE GRP 1
4889	EPS RECERTIFICATION, CLIN B, FUNC F, AGE GRP 2
4890	EPS RECERTIFICATION, CLIN B, FUNC F, AGE GRP 3
4891	EPS RECERTIFICATION, CLIN B, FUNC F, AGE GRP 4
4892	EPS RECERTIFICATION, CLIN B, FUNC F, AGE GRP 5
4893	EPS RECERTIFICATION, CLIN B, FUNC F, AGE GRP 6
4894	EPS RECERTIFICATION, CLIN B, FUNC G, AGE GRP 1
4895	EPS RECERTIFICATION, CLIN B, FUNC G, AGE GRP 2
4896	EPS RECERTIFICATION, CLIN B, FUNC G, AGE GRP 3
4897	EPS RECERTIFICATION, CLIN B, FUNC G, AGE GRP 4
4898	EPS RECERTIFICATION, CLIN B, FUNC G, AGE GRP 5

Attachment B

Rate Code	Rate Code Description
Certified Home Health Agencies - New York State Medicaid - Episodic Payment System Rate Codes - Effective May 1, 2012	
4899	EPS RECERTIFICATION, CLIN B, FUNC G, AGE GRP 6
4900	EPS RECERTIFICATION, CLIN C, FUNC E, AGE GRP 1
4901	EPS RECERTIFICATION, CLIN C, FUNC E, AGE GRP 2
4902	EPS RECERTIFICATION, CLIN C, FUNC E, AGE GRP 3
4903	EPS RECERTIFICATION, CLIN C, FUNC E, AGE GRP 4
4904	EPS RECERTIFICATION, CLIN C, FUNC E, AGE GRP 5
4905	EPS RECERTIFICATION, CLIN C, FUNC E, AGE GRP 6
4906	EPS RECERTIFICATION, CLIN C, FUNC F, AGE GRP 1
4907	EPS RECERTIFICATION, CLIN C, FUNC F, AGE GRP 2
4908	EPS RECERTIFICATION, CLIN C, FUNC F, AGE GRP 3
4909	EPS RECERTIFICATION, CLIN C, FUNC F, AGE GRP 4
4910	EPS RECERTIFICATION, CLIN C, FUNC F, AGE GRP 5
4911	EPS RECERTIFICATION, CLIN C, FUNC F, AGE GRP 6
4912	EPS RECERTIFICATION, CLIN C, FUNC G, AGE GRP 1
4913	EPS RECERTIFICATION, CLIN C, FUNC G, AGE GRP 2
4914	EPS RECERTIFICATION, CLIN C, FUNC G, AGE GRP 3
4915	EPS RECERTIFICATION, CLIN C, FUNC G, AGE GRP 4
4916	EPS RECERTIFICATION, CLIN C, FUNC G, AGE GRP 5
4917	EPS RECERTIFICATION, CLIN C, FUNC G, AGE GRP 6
4919	ASSESSMENT VISIT WITH NO OASIS - LUPA ONLY
4920	EPS MATERNITY, NO OASIS, 18 AND OLDER