

SOC Visit Done Then Patient Discharged--How to Handle OASIS

If you want to bill Medicare for the SOC visit, the rule that says the HIPPS code on the claim must match the HIPPS code transmitted to the state would not be met if it wasn't transmitted. If that rule doesn't apply, since it would be a LUPA claim and paid per visit, and not by HIPPS code, then keep the OASIS but change M0150 to 7-11, to keep it from being transmitted.

Knowledgebase

<http://kb.barnestorm.biz/KnowledgebaseArticle50861.aspx>