OASIS ITEM
(M1000) From which of the following Inpatient Facilities was the patient discharged <u>during the past 14 days?</u> (Mark all that apply.)
☐ 1 - Long-term nursing facility (NF)
☐ 2 - Skilled nursing facility (SNF / TCU)
☐ 3 - Short-stay acute hospital
☐ 4 - Long-term care hospital (LTCH)
☐ 5 - Inpatient rehabilitation hospital or unit (IRF)
☐ 6 - Psychiatric hospital or unit
☐ 7 - Other (specify)
☐ NA - Patient was not discharged from an inpatient facility [Go to M1016]
ITEM INTENT
Identifies whether the patient has been discharged from an inpatient facility within the 14 days (two-week period) immediately preceding the start of care/resumption of care. The purpose of this item is to establish the patient's recent health care history before formulating the plan of care. This determination must be made with sufficient accuracy to allow appropriate care planning. For example, the amount and types of rehabilitation treatment the patient has received and the type of institution that delivered the treatment are important to know when developing the home health plan of care.
TIME POINTS ITEM(S) COMPLETED
Start of care
Resumption of care
RESPONSE—SPECIFIC INSTRUCTIONS
Mark all that apply. For example, patient may have been discharged from both a hospital <u>and</u> a rehabilitation facility within the past 14 days.
An inpatient facility discharge that occurs on the day of the assessment does fall within the 14-day period.
• The term "past fourteen days" is the two-week period immediately preceding the start/resumption of care. This means that for purposes of counting the 14-day period, the date of admission is day 0 and the day immediately prior to the date of admission is day 1. For example, if the patient's SOC date is August 20, any inpatient discharges falling on or after August 6 and prior to the HHA admission would be reported. Discharges on Day 0 should be included.
Facility type is determined by the facility's state license.
If the patient was discharged from a Medicare-certified skilled nursing facility, but did not receive care under the Medicare Part A benefit in the 14 days prior to home health care, select Response 1 - Long-term nursing facility.
Response 2 – Skilled nursing facility means a (a) Medicare certified nursing facility where the patient received a skilled level of care under the Medicare Part A benefit or (b) transitional care unit (TCU) within a Medicare-

certified nursing facility.

RESPONSE—SPECIFIC INSTRUCTIONS (Cont'd for OASIS ITEM M1000)

Determine responses to the questions below. If all three of the criteria below apply, select Response 2.

- 1) Was the patient discharged from a Medicare-certified skilled nursing facility? If so, then:
- 2) While in the skilled nursing facility was the patient receiving skilled care under the Medicare Part A benefit? If so, then:
- 3) Was the patient receiving skilled care under the Medicare Part A benefit during the 14 days prior to admission to home health care?
- Response 3 Short-stay acute hospital applies to most hospitalizations.
- Response 4 Long-term care hospital, applies to a hospital that has an average inpatient length of stay of greater than 25 days.
- Response 5 Inpatient rehabilitation hospital or unit (IRF) means a freestanding rehab hospital or a rehabilitation bed in a rehabilitation distinct part unit of a general acute care hospital.
- Intermediate care facilities for the mentally retarded (ICF/MR) should be considered Response 7 Other.
- If patient has been discharged from a swing-bed hospital, it is necessary to determine whether the patient was
 occupying a designated hospital bed (Response 3), a skilled nursing bed under Medicare Part A (Response
 2), or a nursing bed at a lower level of care (Response 1). The referring hospital can answer this question
 regarding the bed status.

DATA SOURCES / RESOURCES

- Patient/caregiver interview
- Physician
- Referral Information
- For Medicare patients, Medicare's Common Working File (CWF) can be accessed to assist in determining the
 type of inpatient services received and the date of inpatient facility discharge if the claim for inpatient services
 has been received by Medicare.