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| <b>OASIS ITEM:</b>  |
| <b>(M0050) Patient State of Residence:</b> __ __  |
| <b>DEFINITION:</b>  |
| The State in which the patient is currently residing while receiving home care.   |
| <b>TIME POINTS ITEM(S) COMPLETED:</b>   |
| SOC (Patient Tracking Sheet) and updated if change occurs during the episode.   |
| <b>RESPONSE—SPECIFIC INSTRUCTIONS:</b>  |
| <ul style="list-style-type: none"><li>• Enter the two-letter postal service abbreviation of the State in which the patient is CURRENTLY residing, even if this is not the patient's usual (or legal) residence.</li></ul> |
| <b>ASSESSMENT STRATEGIES:</b>   |
| Clarify the exact (State) location of the residence with municipal, county, or State officials, if necessary.   |