

OASIS ITEM:		<b>[EFFECTIVE 10/1/2003]</b>				
<b>(M0245) Payment Diagnoses (Optional):</b> If a V code was reported in M0230 in place of a case mix diagnosis, list the primary diagnosis and ICD-9-CM code, determined in accordance with OASIS requirements in effect before October 1, 2003 -- no V codes, E codes, or surgical codes allowed. ICD-9-CM sequencing requirements must be followed. Complete both lines (a) and (b) if the case mix diagnosis is a manifestation code or in other situations where multiple coding is indicated for the primary diagnosis; otherwise complete line (a) only.						
	<u>(M0245) Primary Diagnosis</u>	<u>ICD-9-CM</u>	<u>Severity Rating</u>			
a.	_____	(____.____)	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3 <input type="checkbox"/> 4
	<u>(M0245) First Secondary Diagnosis</u>	<u>ICD-9-CM</u>	<u>Severity Rating</u>			
b.	_____	(____.____)	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3 <input type="checkbox"/> 4
DEFINITION:						
A case mix diagnosis is a primary diagnosis that assigns patients with selected conditions to an orthopedic, diabetes, neurological, or burns/trauma group for Medicare PPS case mix adjustment. A case mix diagnosis may involve manifestation coding.						
TIME POINTS ITEM(S) COMPLETED:						
Start of care Resumption of care Follow-up						
RESPONSE—SPECIFIC INSTRUCTIONS:						
<ul style="list-style-type: none"> <li>• V codes and E codes may not be entered in M0245 (a) or (b) as these pertain to the Medicare PPS case mix diagnosis only.</li> <li>• Complete M0245 only if a V code has been reported in place of a case mix diagnosis in M0230.</li> <li>• Do not complete M0245 if a V code has not been reported in M0230 in place of a case mix diagnosis.</li> </ul>						
ASSESSMENT STRATEGIES:						
Select the code(s) that would have been reported as the primary diagnosis under the OASIS-B1 (8/2000) instructions:						
a. No surgical codes -- list the underlying diagnosis.						
b. No V codes or E codes -- list the relevant medical diagnosis.						
c. If the patient's primary home care diagnosis is coded as a combination of an etiology and a manifestation code, the etiology code should be entered in M0245 (a) and the manifestation code should be entered in M0245 (b).						
d. You can refer to CMS Guidelines for selecting a diagnosis under PPS at: <a href="http://www.cms.hhs.gov/prodocs/hhdiag.pdf">www.cms.hhs.gov/prodocs/hhdiag.pdf</a> .						
<b>See Attachment D to this chapter for further guidance on assigning and coding diagnoses in M0245.</b>						