

Home Health Resource Group (HHRG) Worksheet

Revision:

FIGURE 2.H-1 HHRG FOR EPISODES BEGINNING ON OR AFTER JANUARY 1, 2008

CLINICAL SEVERITY DOMAIN					
OASIS ITEM	DESCRIPTION	ITEM RESPONSE	I. SCORING RULES	ITEM SCORE	
M0230(a)/ M0240(b)	Primary home care diagnosis/Secondary diagnoses		If Orthopedic DG, add 11 to score If Neurological DG, add 20 to score If Diabetes DG, add 17 to score If Burn/Trauma DG, see under M0440	(max is 20)	
M0250	IV/Infusion/ Parenteral/ Enteral Therapies		If box 1, add 14 to score If box 2, add 20 to score If box 3, add 24 to score	(max is 24)	
M0390	Vision		If box 1 or 2, add 6 to score		
M0420	Pain		If box 2 or 3, add 5 to score		
M0440	Wound/Lesion		If box 1 and M0230/240 is Burn/Trauma DG, add 21 to score		
M0450	Multiple pressure ulcers		If 2 or more stage 3 or 4 pressure ulcers, add 17 to score		
M0460	Current stage, most problematic pressure ulcer		If box 1 or 2, add 15 to score If box 3 or 4, add 36 to score	(max is 36)	
M0476	Stasis ulcer		If box 2, add 14 to score If box 3, add 22 to score		
M0488	Surgical wound		If box 2, add 7 to score If box 3, add 15 to score		
M0490	Dyspnea		If box 2, 3, or 4, add 5 to score		
M0520	Urinary incontinence		If box 1 or 2, add 6 to score		
M0540	Bowel incontinence		If box 2, 3, 4, or 5, add 9 to score		
M0550	Bowel ostomy		If box 1 or 2, add 10 to score		
M0610	Behavioral Problems		If box 2, 3, 4, 5, or 6, add 3 to score	(max is 3)	
TOTAL SCORE:					
Categories:		[0-19 = C1]	[20-40 = C2]	[41+ = C3]	CATEGORY: <input type="text" value="C"/>

FUNCTIONAL STATUS DOMAIN						
OASIS ITEM	DESCRIPTION	ITEM RESPONSE	SCORING RULES	ITEM SCORE		
M0650 (current)	Dressing upper body		If M0650 = box 1, 2, or 3, Or	(max is 4)		
M0660 (current)	Dressing lower body		If M0660 = box 1, 2, or 3, add 4 to score			
M0670 (current)	Bathing		If box 2, 3, 4, or 5, add 8 to score			
M0680 (current)	Toileting		If box 2, 3, or 4, add 3 to score			
M0690 (current)	Transferring		If box 1, add 3 to score If box 2, 3, 4, or 5, add 6 to score			
M0700 (current)	Locomotion		If box 1 or 2, add 6 to score If box 3, 4, or 5, add 9 to score			
M0800	Management of Injections		If box 1, add 1 to score If box 2, add 2 to score			
TOTAL SCORE:						
Categories:		[0-15 = F1]	[16-23 = F2]	[24-29 = F3]	[30 = F4]	CATEGORY: <input type="text" value="F"/>

SERVICE UTILIZATION DOMAIN					
OASIS ITEM	DESCRIPTION	ITEM RESPONSE	SCORING RULES	ITEM SCORE	
M0175 line 1	Hospital discharge past 14 days		If box 1 IS BLANK, add 1 to score	(max is 2)	
M0175 line 2	Rehab dischg. past 14 days		If box 2 or 3, add 2 to score		
M0175 line 3	SNF dischg. past 14 days				
M0826	Total number of therapy (PT, SLP, OT) visits recd. in 60 days		Actual number of visits NA No therapy visits		
TOTAL SCORE:					
Categories:		[0-3 = S1]	[4-6 = S2]	[7 = S3]	CATEGORY: <input type="text" value="S"/>

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Chapter 12, Addendum H

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**FIGURE 2.H-2
QUESTIONS**

ABBREVIATED OASIS

(To be used in conjunction with Home Health Resource Group (HHRG) Worksheet for scoring and payment of home health episodes beginning on or after January 1, 2008 for children and maternity cases.)

1. M0230(a) Primary home care diagnosis
2. M0240(b) First secondary diagnosis
3. M0250 Therapies
 - 1 IV Infusion
 - 2 Parenteral
 - 3 Enteral Therapies
4. M0390 Vision
 - 0 Normal vision
 - 1 Partially impaired: cannot see medication labels or newsprint
 - 2 Severe impairment: cannot locate objects
5. M0420 Frequency of pain
 - 0 No pain
 - 1 Less often than daily
 - 2 Daily, but not constant
 - 3 All of the time
6. M0440 Wound Lesion
 - 0 No
 - 1 Yes
7. M0450 Pressure ulcers
8. M0460 Current stage
 - 1 Stage 1
 - 2 Stage 2
 - 3 Stage 3
 - 4 Stage 4
 - NA No observable stasis ulcer
9. M0476 Stasis ulcer
 - 1 Fully granulating
 - 2 Early/partial granulation
 - 3 Not healing
 - NA No observable stasis ulcer
10. M0488 Surgical wound
 - 1 Fully granulating
 - 2 Early/partial granulation
 - 3 Not healing
 - NA No observable surgical wound
11. M0490 Respiratory
 - 1 Fully granulating
 - 2 Walking 20 ft, climbing stairs
 - 3 Moderate exertion-dressing, using bedpan, walking < 20 ft
 - 4 Minimal exertion - eating talking, agitation
 - NA No observable surgical wound
12. M0520 Urinary Incontinence
 - 0 Timed-voiding defers
 - 1 During night only
 - 2 During night & day
13. M0540 Bowel Incontinence
 - 0 Very rarely/never
 - 1 Less than once weekly
 - 2 One to three/week
 - 3 Four to six/week
 - 4 Daily
 - 5 More often than daily
 - NA Has ostomy
 - UK Unknown
14. M0550 Ostomy for Bowel
 - 0 No ostomy
 - 1 Ostomy not related to IP stay & no change necessary
 - 2 Ostomy needs change/treatment

15. M0610 Behaviors
 - 1 Memory deficits
 - 2 Impaired decisions
 - 3 Verbal disruptions
 - 4 Physical aggression
 - 5 Disruptive
 - 6 Delusional
 - 7 None of above
16. M0650/ M0660 Dress Upper & Lower Body
 - 0 Able to dress self
 - 1 Clothes laid out
 - 2 Need help
 - 3 Entirely dependent
 - UK Unknown
17. M0670 Bathing
 - 0 Able to bathe self
 - 1 Use devices
 - 2 Assistance to bathe
 - 3 Participates
 - 4 Unable to use shower or tub
 - 5 Totally dependent
 - UK Unknown
18. M0680 Toileting
 - 0 Independent w/ or w/o device
 - 1 When reminded, assisted, supervised
 - 2 Unable get to toilet, use commode
 - 3 Use bedpan/urinal
 - 4 Totally dependent
 - UK Unknown
19. M0690 Transferring
 - 0 Independent
 - 1 Minimal assistance/device
 - 2 Assist w/ weight-bearing & pivoting
 - 3 Transfer w/o wt-bearing & pivoting
 - 4 Bedfast, able to turn
 - 5 Bedfast, unable to turn
 - UK Unknown
20. M0700 Ambulation
 - 0 Independent
 - 1 Use device
 - 2 Walk w/supervision
 - 3 Chairfast, able to wheel self
 - 4 Chairfast, unable to wheel self
 - 5 Bedfast
 - UK Unknown
21. M0800 Management of Injections
 - 0 Independent
 - 1 Able to inject w/prepared syringes, reminders
 - 2 Administered by another
 - NA No injectables
 - UK Unknown
22. M0826 Total number of therapy visits _____ #
 - NA No therapy visits
23. M0175 Discharge
 - 1 Hospital
 - 2 Rehab facility
 - 3 SNF
 - 4 Other nursing facility
 - 5 Other Specify _____
 - NA Patient was not discharged

- END -