



Blueprint for OASIS Accuracy

& (COS-C) Exam ~ COLUMBUS, OH

Two FULL day OASIS-C Data Collection Rules & Guidance workshop, with optional Certificate for OASIS Specialist-Clinical Exam Administration

Spend **two intense and fun days** learning all there is to know to collect the **OASIS-C** accurately. Understand the specifics of the new items, changed items, process measures and the **latest** guidance updates related to data collection rules and conventions. Demonstrate mastery of learned concepts through participation in application scenarios.

Educational Goals:

- To support the educational needs of home health clinicians in achieving comprehension and accuracy in OASIS data collection using guidelines established by the Centers for Medicare & Medicaid Services (CMS)
- To enhance compliance with the OASIS Prospective Payment System (PPS)
- To provide a preparatory review for candidates for the **COS-C (Certificate for OASIS Specialist-Clinical) examination**
- To provide the learner with the **latest CMS documents** to facilitate researching answers to future questions and to support data collection in special situations

The **Blueprint for OASIS Accuracy** workshop offers effective, timely, comprehensive and at times, entertaining education, directed at **the field data collectors and their supervisors**. Rather than provide opinions, assumptions, or unfounded interpretations, the "*Blueprint*" presenters will provide **up-to-the-minute** education on what information IS available and what questions remain unanswered.

Two FULL days of training allowing comprehensive coverage of all the relevant guidance, and **Two OASIS experts** presenting at each training, supporting individual and group learning needs, offer the motivated learner the highest quality and most preferred OASIS training available with unprecedented access for questions. We are committed in helping you be **ready** for the data collection challenges that face you, in day-to-day practice, and in seeking the COS-C designation.

Join us in our commitment to enhancing OASIS accuracy by attending the workshop, and confirming your knowledge by sitting for the COS-C exam.

Approved for 13 Nursing contact hours.

Presented by:

Linda Krulish
PT MHS COS-C

Annette Lee
RN MS HCS-D COS-C



Sponsored by:



OASISanswers

Tuesday & Wednesday

May 29th & 30th, 2012

8:00 am – 4:00 pm

Mount Carmel East Hospital,
Bruce E. Siegel Center for
Health Education
5975 E. Broad St.

Columbus, OH 43213

COS-C Exam:

May 31st, 2012

Supported by:



WORKSHOP FACILITATORS



Annette Lee, RN MS HCS-D COS-C

Annette is a registered nurse practicing since 1990, with the majority of her nursing experience in home health care. In 2000, she joined the home health intermediary **Cahaba GBA medical review** and **appeals** unit reviewing home health documentation. Annette also focused on medical review, appeals and provider outreach and education. She has extensive experience providing education to home health providers on **Medicare reimbursement issues** and effective documentation strategies. Her broad experiences make her uniquely able to provide practical solutions to meet the requirements of the **fiscal intermediary system and medical review** within the “real world” environment of home health. She presents nationally on OASIS, PPS, documentation and coverage and provides content expertise to the CMS OASIS Q&A Mailbox. Annette has earned the **Certificate for OASIS Specialist - Clinical (COS-C)** designation and is an **Associate Consultant** with OASIS Answers, Inc.



Linda Krulish, PT, MHS, COS-C

Linda, a physical therapist in home care since 1988, is a nationally recognized expert on OASIS and home health quality improvement. She serves as a consultant to the **Centers for Medicare & Medicaid Services (CMS)** and its contractors, assisting in quality improvement measures and initiatives, PPS- models analysis and enhancement, refinement of the OASIS data set and resulting measures, and development of related support and training materials. Currently she oversees the contract managing the national **CMS OASIS Q&A Mailbox** and overseeing the annual training of the state **OASIS Education Coordinators**. She served as the **President** and a **Founding Member** of the **OASIS Certificate and Competency Board (OCCB)**, serving as **Chair** of the **OCCB’s Clinical Advisory Panel** and **Exam Review Task Force**. Linda is **President** and **Founder** of **OASIS ANSWERS, Inc.**

Individuals may register for the workshop, the exam, or BOTH.

Registration and payment for the workshop and/or the COS-C examination is through OASIS Answers, Inc. at www.oasisanswers.com.

Stay at the hotel of your choice. We have listed some information on area hotels below:

Country Inn & Suites Columbus Airport East
(614) 322-8000
6305 E. Broad St.
Columbus, OH 43213

Comfort Suites East Broad at 270
(614) 604-6400
70 Chris Perry Lane
Columbus, OH 43213



Location: Mount Carmel East Hospital Seigel Center
Date: May 31st, 2012
Time: 9:00–11:30am (Registration 8:15)

Exam Registration Fee:

- Initial Exam: \$250 – (reflects “Blueprint discount”)
- Renewal Exam: \$200 – (reflects “Blueprint discount”)

Register online at www.oasisanswers.com

*Secure a spot by registering at least one week in advance.
Onsite exam registration may not be available.*

The Certificate for OASIS Specialist-Clinical (COS-C) Exam

is a *voluntary certificate examination* which home care providers may take in order to demonstrate and establish their expertise and commitment to OASIS data accuracy. The COS-C exam will be administered the day following the Blueprint for OASIS Accuracy training. The scope of the COS-C exam includes CMS instructions related to the OASIS time points, regulations, patient populations and OASIS-C item specific scoring and always tests on guidance that is current as of the testing date.

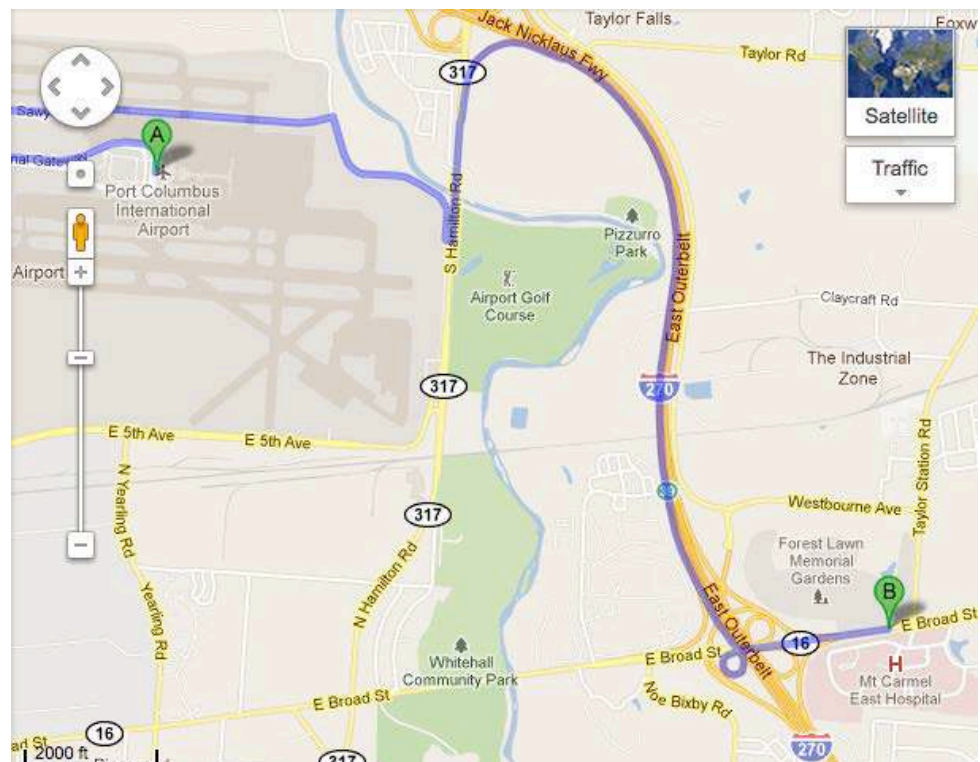
Candidates who successfully complete the examination are awarded the **Certificate for OASIS Specialist – Clinical (COS-C)** designation. Call OASIS Answers, Inc. at (425) 868.2304 or visit www.oasisanswers.com to learn more or to register for the COS-C examination.

AIRPORT TO SITE:

Port Columbus International Airport
4600 International Gateway
Columbus, Ohio 43219

1. Head north on International Gateway 0.6 mi
2. International Gateway turns slightly right and becomes Sawyer Rd (signs for Sawyer Road) 1.0 mi
3. Turn right to stay on Sawyer Rd 0.6 mi
4. Turn left onto OH-317 N/S Hamilton Rd 0.4 mi
5. Merge onto I-270 S via the ramp to Wheeling 1.8 mi
6. Take exit 39 to merge onto OH-16 E/E Broad St
Destination will be on the right 1.1 mi

Mount Carmel East Hospital, Bruce E. Siegel
Center for Health Education
5975 E Broad St
Columbus, OH 43213





Workshop Registration Form:

Print and mail completed form with check or credit card information to OASIS Answers, Inc. PO Box 2768 Redmond, WA 98073
 or fax completed form with credit card information to Fax: 425.868.5484
 or Register by Phone: 425.868.2304
 ONLINE REGISTRATION ALSO AVAILABLE www.oasisanswers.com

Blueprint for OASIS Accuracy Conference

May 29th & 30th ~ Columbus, OH ~ Mount Carmel East Hospital – Bruce E. Siegel Center

5975 E. Broad St. Columbus, OH, 43213

	Advanced Registration (received by 03/29/12)	Registration (received 03/30/12-05/15/12)	Onsite Registration - if available (received after 5/15/12)		Number of registrants	Total
Blueprint for OASIS Accuracy workshop	\$395	\$495	\$650	X		

Workshop Registrant Name & E-mail Address		Do you plan on registering for the May 31 st COS-C exam?
1.		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Undecided
2.		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Undecided
3.		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Undecided
4.		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Undecided

If more than 4 registrants, enter registrants on second form, and attach to this form.

Company: _____

Address: _____

City, State, Zip: _____

Phone: _____ **Name on Credit Card:** _____

Visa MC # - - -

Exp. Date: _____ Verification Code Billing Zip Code

EXAM: Those interested in taking the COS-C Exam on May 31st must complete a "Paper & Pencil COS-C Exam Application" form.

HOUSING: To be arranged by attendee at hotel of choice.

CANCELLATIONS/TRANSFERS: Notification of cancellation must be submitted in writing to OASIS Answers, and received more than 30 days prior to the workshop date. A 10% processing fee will apply. NO refunds for cancellations for any reason will be made within 30 days of the workshop date. A written request to transfer a registration to another individual within the same organization is permitted with a \$50.00 administrative fee.



OASISanswers

COS-C EXAM APPLICATION

- PAPER & PENCIL

[Exam application also available online at www.oasisanswers.com]

Please carefully print when completing the form below. Paying by Credit Card: Complete form and fax to 425.868.5484. Paying by Check: **MAKE CHECKS PAYABLE TO OASIS ANSWERS, Inc.** & mail with form to PO Box 2768 Redmond, WA 98073.

***All registration payments MUST be received prior to a candidate sitting for any exam. NO EXCEPTIONS!**

COS-C Exam Location/Date:	City:	State:	Exam Date:
Candidate's Full Name: (As you would like it to appear on your certificate) PLEASE PRINT!			
Candidate's E-mail Address: (Must Be UNIQUE! For confirmation and to access online profile)	<input type="checkbox"/> Personal <input type="checkbox"/> Work		
Agency/Company Name:			
Candidate's Address: (Where your results are mailed. Please indicate address type)	<input type="checkbox"/> Home <input type="checkbox"/> Work		
Contact Phone:	<input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Cell		
Estimate the number of OASIS assessments (at all time points) that you have conducted during the past 12 months:	<input type="checkbox"/> > 400 (more than 8 assessments per week) <input type="checkbox"/> 250-400 (5 to 8 assessments per week) <input type="checkbox"/> 100 – 249 (2 to 5 assessments per week) <input type="checkbox"/> 10-99 (less than 2 assessments per week) <input type="checkbox"/> 1– 9 total assessments in the past 12 months <input type="checkbox"/> I have not conducted an OASIS assessment in the past 12 months <input type="checkbox"/> I have never conducted an OASIS assessment		
What is your primary OASIS role?: (You may select more than one)	<input type="checkbox"/> Data collector in the field <input type="checkbox"/> Auditor of OASIS assessments <input type="checkbox"/> User of OASIS-based reports/data for quality/compliance/reimbursement functions <input type="checkbox"/> Educator/trainer/consultant <input type="checkbox"/> CMS contractor (i.e., OEC,OAC, QIO, Surveyor) <input type="checkbox"/> Researcher <input type="checkbox"/> Other (specify) : _____		
Please indicate your discipline:	<input type="checkbox"/> RN <input type="checkbox"/> PT <input type="checkbox"/> OT <input type="checkbox"/> Other: _____		
Select your registration rate: (Registration is discounted by \$50 if the exam is preceded by OASIS Answers, Inc.'s "Blueprint for OASIS Accuracy" Workshop)		Initial Examination	Renewal Examination*
	Exam offered without "Blueprint"	<input type="checkbox"/> \$300	<input type="checkbox"/> \$250
*Renewal rates available only to active COS-Cs	Exam offered with "Blueprint"	<input type="checkbox"/> \$250	<input type="checkbox"/> \$200
Type of Credit Card:	<input type="checkbox"/> Visa <input type="checkbox"/> Master Card		
Credit Card Number:			
Expiration Date/Security Code:	Expiration Date: _____	3 digit Security Code: _____	
Card Holder's Name:	Billing Zip code: _____		

Signature:

Date: