

HOME CARE ORYX REPORTING OPTIONS SELECTION FORM

JCAHO HCO ID #
HCO NAME
ADDRESS
CITY, STATE, ZIP

Fax completed form to
(630) 792-4599 or (630) 792-4992

Carefully read each section of this form. Your responses will determine your
ORYX reporting requirements until the implementation of core measures.

SECTION A

1. The service(s) you provide will determine your ORYX reporting requirements. Please check the box(es) that best represent the
service(s) that your organization provides. Check all that apply.

- Home medical equipment (Predominantly)
Medicare-certified home health services
Other home care services
Hospice services
Non-Medicare-certified home health services
Non-Medicare personal care/support services
Pharmacy services
OTHER (Please Describe)

SECTION B

Refer to the ORYX PARTICIPATION REQUIREMENTS: HOME CARE ACCREDITATION PROGRAM for an explanation of
reporting requirements. Once you determine your ORYX reporting requirements, check the appropriate box and indicate the last
calendar quarter for which you will submit ORYX data. Included is the option to voluntarily continue to participate with a listed
measurement system and submit data to JCAHO.

1. Home Medical Equipment

- Excused from participation in the ORYX initiative until the implementation of core measures. The last calendar quarter for
which ORYX measure data will be submitted is Quarter 2002.

2. Medicare-Certified Home Health Organization

- Will share OASIS Based Quality Indicator (OBQI) and OASIS Based Quality Measure (OBQM) data and reports with Joint
Commission surveyors during onsite surveys and discuss how the data were used in internal quality improvement activities.
Those reports also will be made available upon demand of the Joint Commission for purposes of intra-cycle monitoring. The
last calendar quarter for which ORYX measure data will be submitted is Quarter 200.

NOTE: If you provide any Medicare-certified home health care services, and you do not elect to continue
with a measurement system, you MUST select the JCAHO Internet reporting option.

3. Other home care organizations

- Until such time as the Joint Commission implements relevant core measures for non-Medicare-certified home care
organizations, will collect data internally on six self-selected measures and generate run charts or control charts on each
measure, at least quarterly, for use in internal quality improvement activities. Data and reports will be shared with JCAHO
surveyors during onsite surveys and made available upon demand to the Joint Commission for the purpose of intra-cycle
monitoring. The last calendar quarter for which ORYX measure data will be submitted is Quarter 200.

NOTE: Please complete one copy of the attached Measure Information Form B for each of the six measures.
Retain the forms and present them to JCAHO surveyors at the time of survey.

CEO Signature: Phone: Date:

This form will not be processed unless all requested information is provided and the form is signed.