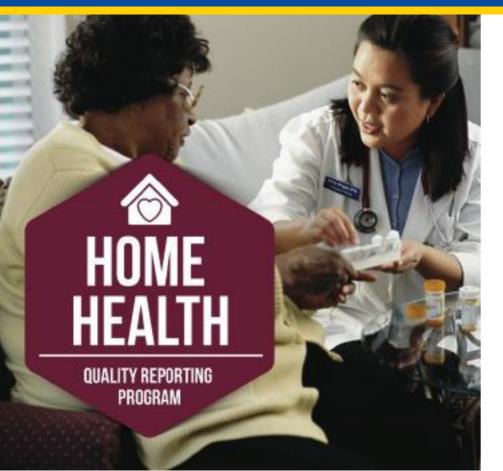


# Home Health Quality Reporting Program Provider Training



#### **Section GG:**

#### **Functional Abilities and Goals**

Kathryn D. Roby and Charlotte Steniger Qualidigm

September 5, 2018

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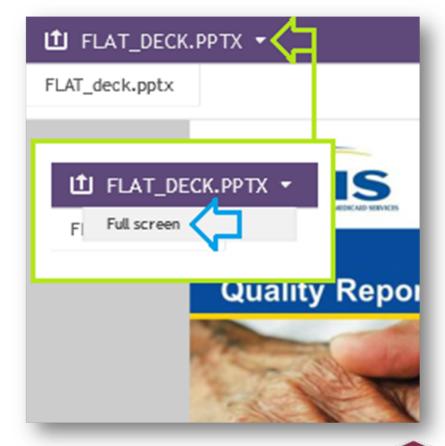
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- Training materials can be downloaded from:
  - Home Health Quality Reporting Training page:
     <a href="https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/HomeHealthQualityInits/Home-Health-Quality-Reporting-Training.html">https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/HomeHealthQualityInits/Home-Health-Quality-Reporting-Training.html</a>
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- During this presentation, you will be asked to respond to questions that test your knowledge of the material presented
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- Once you select your answer, it will automatically be submitted for you
- Following a brief pause, the presenter will review the correct responses and rationale for each question



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- A. Just me—I am the only one participating
- B. Two people
- C. Three or four people
- D. Five or more people



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# Today's Presenters



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## **Acronyms in This Presentation**

- Activities of Daily Living (ADL)
- Certification and Survey Provider Enhanced Reports (CASPER)
- Centers for Medicare & Medicaid Services (CMS)
- Gastrostomy Tube (G-Tube)
- Home Health (HH)
- Home Health Agency (HHA)
- Home and Community-Based Services Continuity Assessment Record and Evaluation (HCBS CARE)
- Improving Medicare Post-Acute Care Transformation (IMPACT)



# Acronyms in This Presentation (cont. 1)

- Inpatient Rehabilitation Facility (IRF)
- Inpatient Rehabilitation Facility-Patient Assessment Instrument (IRF-PAI)
- Long-Term Care Hospital (LTCH)
- Long-Term Care Hospital Continuity Assessment Record and Evaluation (CARE) Data Set (LCDS)
- Medicare Learning Network (MLN)
- Minimum Data Set (MDS)
- Occupational Therapist (OT)
- Outcome and Assessment Information Set (OASIS)



# Acronyms in This Presentation (cont. 2)

- Post-Acute Care (PAC)
- Prospective Payment System (PPS)
- Quality Reporting Program (QRP)
- Quality Improvement and Evaluation System (QIES)
- QIES Technical Support Office (QTSO)
- Resumption of Care (ROC)
- Skilled Nursing Facility (SNF)
- Start of Care (SOC)
- Total Parenteral Nutrition (TPN)



# **Learning Objectives**



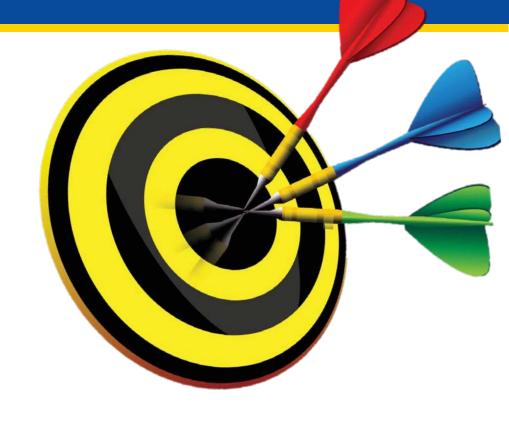
Describe the new assessment items in Section GG:
Functional Abilities and Goals



Apply coding instructions to accurately code practice scenarios



Identify resources available to guide utilization of Outcome and Assessment Information Set D (OASIS-D)





# Overview of Section GG, Effective January 1, 2019

Section	Item	Time Points Completed
	<ul> <li>GG0100. Prior Functioning: Everyday Activities</li> <li>GG0110. Prior Device Use</li> </ul>	<ul><li>Start of Care (SOC)</li><li>Resumption of Care (ROC)</li></ul>
Section GG: Functional Abilities and Goals	<ul><li>GG0130. Self-Care</li><li>GG0170. Mobility</li></ul>	<ul> <li>SOC</li> <li>ROC</li> <li>Follow-up</li> <li>Discharge from agency – not to an inpatient facility</li> </ul>



#### Why is Section GG Being Added to OASIS?

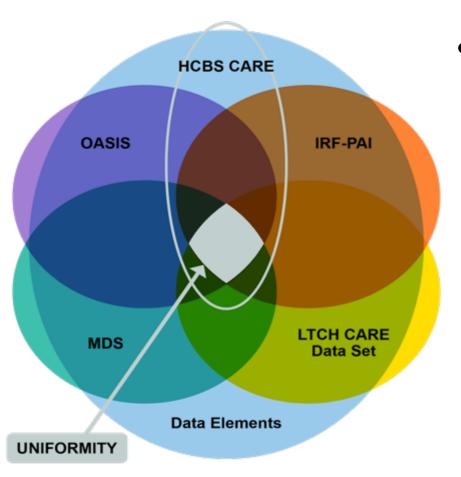
128 STAT, 1952 PUBLIC LAW 113-185-OCT, 6, 2014 Public Law 113-185 113th Congress To amend title XVIII of the Social Security Act to provide for standardized post-Oct. 6, 2014 acute core assessment data for quality, payment, and discharge planning, and (36.8, 4994) Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled, This Act may be cited as the "Improving Medicare Post-Acute Care Transformation Act of 2014" or the "IMPACT Act of 2014". SEC. 2. STANDARDIZATION OF POST-ACUTE CARE DATA. (a) In General.-Title XVIII of the Social Security Act is amended by adding at the end the following new section: 42 USC 1365IL "SEC, 1800B. STANDARDIZED POST-ACUTE CARE (PAC) ASSESSMENT DATA FOR QUALITY, PAYMENT, AND DISCRARGE PLAN-"(a) REQUIREMENT FOR STANDARDIZED ASSESSMENT DATA.-"(1) IN GENERAL .- The Secretary shall-"(A) require under the applicable reporting provisions post-acute care providers (as defined in paragraph (2)(A)) "(i) standardized patient assessment data in accordance with subsection (b): "(ii) data on quality measures under subsection "(iii) data on resource use and other measures under subsection (d)(1);

"B) require data described in subparagraph (A) to be standardized and interoperable so as to allow for the exchange of such data among such post-acute care providers and other providers and the use by such providers of such data that has been so exchanged, including by using common standards and definitions, in order to provide the substantial information for such providers are the foreign of the substantial information for such providers. access to longitudinal information for such providers to facilitate coordinated care and improved Medicare beneficiary outcomes; and (C) in accordance with subsections (b)(1) and (c)(2), modify PAC assessment instruments (as defined in paragraph (2)(B)) applicable to post-acute care providers to-"(i) provide for the submission of standardized satient assessment data under this title with respect

- CMS is aligning quality measurement across postacute care (PAC) assessment instruments to meet the provisions of the Improving Medicare Post-Acute Care Transformation (IMPACT) Act of 2014
- The move toward standardized assessment data elements facilitates cross-setting:
  - Data collection
  - Quality measurement
  - Outcome comparison
  - Interoperable data exchange



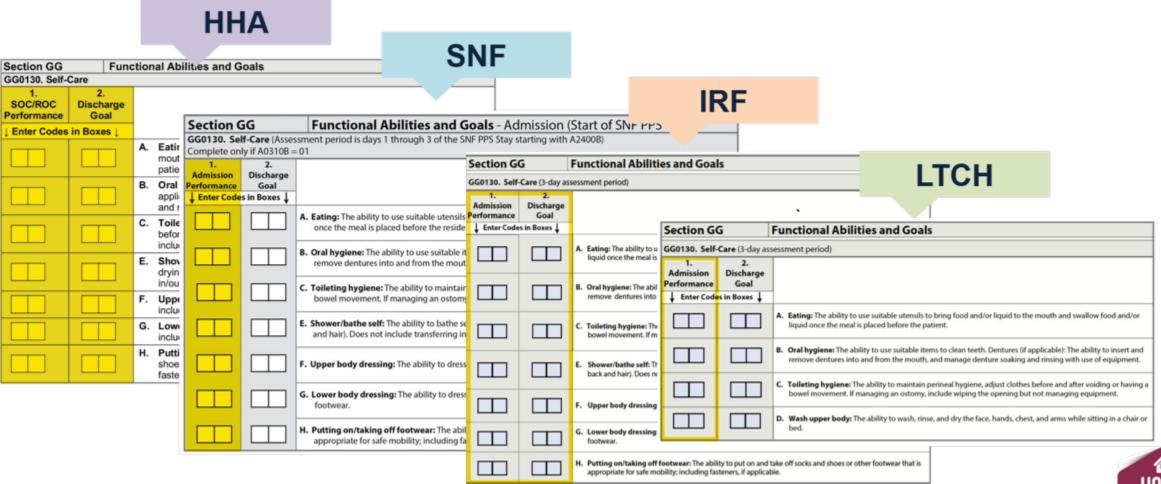
# Why is Section GG Being Added to OASIS? (cont.)



- Section GG will be added to OASIS for standardization and alignment with other PAC settings, including:
  - Inpatient rehabilitation facilities (IRFs)
  - Skilled nursing facilities (SNFs)
  - Long-term care hospitals (LTCHs)



# Section GG Across PAC Settings





#### Differences Between Section GG and M-Items

- Items are different; assessed differently
- Item definitions are not intended to be exactly the same as Mitems
  - Important to understand inclusions/exclusions
- Coding scales are different



#### **How will Section GG Be Used?**



- Used to calculate the cross-setting quality process measure "Percent of Home Health Episodes with an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function"
  - Reports the percent of patients with a SOC/ROC and a discharge functional assessment and a treatment goal that addresses function





# **GG0100**

Prior Functioning: Everyday Activities



#### **GG0100 Intent**

 Identifies the patient's usual ability with everyday activities, prior to the current illness, exacerbation, or injury





#### GG0100. Prior Functioning: Everyday Activities

**GG0100. Prior Functioning: Everyday Activities:** Indicate the patient's usual ability with everyday activities prior to the current illness, exacerbation, or injury. Coding: 3. Independent – Patient completed the **A. Self Care:** Code the patient's need for assistance with activities by him/herself, with or without bathing, dressing, using the toilet, or eating prior to the an assistive device, with no assistance current illnesss, exacerbation, or injury. from a helper. **Indoor Mobility (Ambulation):** Code the patient's need 2. Needed Some Help – Patient needed for assistance with walking from room to room (with or partial assistance from another person to without a device such as cane, crutch or walker) prior to complete activities. the current illness, exacerbation, or injury. 1. **Dependent** – A helper completed the **Stairs:** Code the patient's need for assistance with activities for the patient. internal or external stairs (with or without a device such 8. Unknown as cane, crutch, or walker) prior to the current illness, 9. Not Applicable exacerbation or injury. **D.** Functional Cognition: Code the patient's need for assistance with planning regular tasks, such as shopping or remembering to take medication prior to the current illness, exacerbation, or injury.

# Complete only at SOC/ROC



#### GG0100A. Self Care

**A. Self Care:** Code the patient's need for assistance with bathing, dressing, using the toilet, or eating prior to the current illnesss, exacerbation, or injury.

Section GG Functional Abilities and Goals					
GG0100. Prior Functioning: Everyday Activities: Indicate the patient's usual ability with everyday activities prior to the current illness, exacerbation, or injury.					
Coding:		↓ Enter Codes in Boxes			
3. Independent – Patient completed the activities by him/herself, with or without an assistive device, with no assistance from a helper.			A.	<b>Self Care:</b> Code the patient's need for assistance with bathing, dressing, using the toilet, or eating prior to the current illnesss, exacerbation, or injury.	
2. Needed Some Help – Patient needed partial assistance from another person to complete activities.  1. Dependent – A helper completed the activities for the patient.  8. Unknown  9. Not Applicable		B.	Indoor Mobility (Ambulation): Code the patient's need for assistance with walking from room to room (with or without a device such as cane, crutch or walker) prior to the current illness, exacerbation, or injury.		
		C.	Stairs: Code the patient's need for assistance with internal or external stairs (with or without a device such as cane, crutch, or walker) prior to the current illness, exacerbation or injury.		
			D.	Functional Cognition: Code the patient's need for assistance with planning regular tasks, such as shopping or remembering to take medication prior to the current illness, exacerbation, or injury.	



# GG0100B. Indoor Mobility (Ambulation)

B. Indoor Mobility (Ambulation): Code the patient's need for assistance with walking from room to room (with or without a device such as cane, crutch or walker) prior to the current illness, exacerbation, or injury.

Section GG	Functional Abi	lities a	nd e	DUAIS
GG0100. Prior Function to the current illness, exa			: Indi	cate the patient's usual ability with everyday activities prior
Coding:	↓ Enter Codes in Boxes			
3. Independent – Patient completed the activities by him/herself, with or without an assistive device, with no assistance from a helper.			A.	Self Care: Code the patient's need for assistance with bathing, dressing, using the toilet, or eating prior to the current illnesss, exacerbation, or injury.
2. Needed Some Help – Patient needed partial assistance from another person to complete activities.  1. Dependent – A helper completed the activities for the patient.  8. Unknown  9. Not Applicable		B.	Indoor Mobility (Ambulation): Code the patient's need for assistance with walking from room to room (with or without a device such as cane, crutch or walker) prior to the current illness, exacerbation, or injury.	
		C.	Stairs: Code the patient's need for assistance with internal or external stairs (with or without a device such as cane, crutch, or walker) prior to the current illness, exacerbation or injury.	
		D.	Functional Cognition: Code the patient's need for assistance with planning regular tasks, such as shopping or remembering to take medication prior to the current illness, exacerbation, or injury.	



#### GG0100C. Stairs

C. Stairs: Code the patient's need for assistance with internal or external stairs (with or without a device such as cane, crutch, or walker) prior to the current illness, exacerbation or injury.

Section GG Functional Abilities and Goals					
GG0100. Prior Functioning: Everyday Activities: Indicate the patient's usual ability with everyday activities prior to the current illness, exacerbation, or injury.					
Coding:  3. Independent – Patient completed the activities by him/herself, with or without an assistive device, with no assistance from a helper.  2. Needed Some Help – Patient needed partial assistance from another person to complete activities.  1. Dependent – A helper completed the activities for the patient.  8. Unknown  9. Not Applicable		↓ Enter Codes in Boxes			
	t   🗀	A.	Self Care: Code the patient's need for assistance with bathing, dressing, using the toilet, or eating prior to the current illnesss, exacerbation, or injury.		
	to	B.	Indoor Mobility (Ambulation): Code the patient's need for assistance with walking from room to room (with or without a device such as cane, crutch or walker) prior to the current illness, exacerbation, or injury.		
		C.	Stairs: Code the patient's need for assistance with internal or external stairs (with or without a device such as cane, crutch, or walker) prior to the current illness, exacerbation or injury.		
		D.	Functional Cognition: Code the patient's need for assistance with planning regular tasks, such as shopping or remembering to take medication prior to the current illness, exacerbation, or injury.		



# GG0100D. Functional Cognition

D. Functional Cognition: Code the patient's need for assistance with planning regular tasks, such as shopping or remembering to take medication prior to the current illness, exacerbation, or injury.

Section GG Functional Abilities and Goals				Udi5	
	GG0100. Prior Functioning: Everyday Activities: Indicate the patient's usual ability with everyday as the current illness, exacerbation, or injury.			cate the patient's usual ability with everyday activities prior	
Co	Coding:  3. Independent – Patient completed the activities by him/herself, with or without an assistive device, with no assistance from a helper.  2. Needed Some Help – Patient needed partial assistance from another person to complete activities.  1. Dependent – A helper completed the activities for the patient.  8. Unknown  9. Not Applicable	↓ Enter Codes in Boxes			
			A.	<b>Self Care:</b> Code the patient's need for assistance with bathing, dressing, using the toilet, or eating prior to the current illnesss, exacerbation, or injury.	
			B.	Indoor Mobility (Ambulation): Code the patient's need for assistance with walking from room to room (with or without a device such as cane, crutch or walker) prior to the current illness, exacerbation, or injury.	
			C.	Stairs: Code the patient's need for assistance with internal or external stairs (with or without a device such as cane, crutch, or walker) prior to the current illness, exacerbation or injury.	
				D.	Functional Cognition: Code the patient's need for assistance with planning regular tasks, such as shopping or remembering to take medication prior to the current illness, exacerbation, or injury.



## **GG0100 Response-Specific Instructions**









# **GG0100 Coding Instructions**

Code 3, Independent

If the patient completed the activities by himself or herself, with or without an assistive device, with no assistance from a helper

Code 2, Needed Some Help

If the patient needed partial assistance from another person to complete the activities

Code 1,
Dependent

If the helper completed the activities for the patient

Code 8, Unknown

If the patient's usual ability prior to the current illness, exacerbation, or injury is unknown

Code 9,
Not Applicable

If the activity was not applicable to the patient prior to the current illness, exacerbation, or injury

**A dash** is a valid response for this item. CMS expects dash use to be a rare occurrence.



# **Coding Tip**



If no information about the patient's ability is available after attempt to interview the patient or family and after reviewing the patient's clinical record, code 8, Unknown





# **GG0110**

#### Prior Device Use



#### **GG0110 Intent**

 Identifies the patient's use of devices and aids immediately prior to the current illness, exacerbation, or injury to align treatment goals





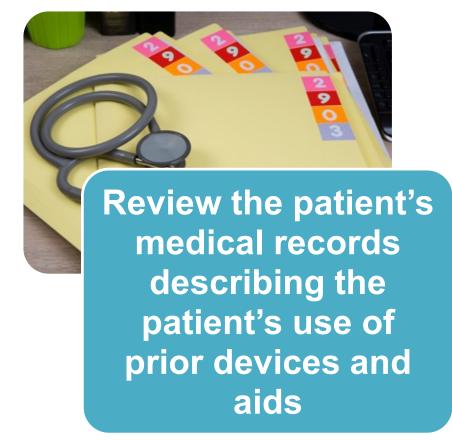
#### GG0110. Prior Device Use

Complete only at SOC/ROC Check all that apply Manual wheelchair Motorized wheelchair and/or scooter Functional Abilities and **Section GG** Mechanical lift GG0110. Prior Device Use. Indicate devices and aids exacerbation, or injury. D. Walker ↓ Check all that apply **Orthotics/Prosthetics** Ε. A. Manual wheelchair Motorized wheelchair and/or scooter None of the above Mechanical lift D. Walker **Orthotics/Prosthetics** None of the above



## **GG0110 Response-Specific Instructions**







# **GG0110 Coding Instructions**

- Check all devices that apply:
  - A. Manual wheelchair
  - B. Motorized wheelchair and/or scooter
  - C. Mechanical lift
  - D. Walker
  - E. Orthotics/prosthetics
- Check Z, None of the above, if the patient did not use any of the listed devices or aids immediately prior to the current illness, exacerbation, or injury
- A dash is a valid response for this item. CMS expects dash use to be a rare occurrence



#### GG0110C. Mechanical Lift

- Any device a patient or caregiver requires for lifting or supporting the patient's bodyweight
- Examples include, but are not limited to:
  - Stair lift
  - Hoyer lift
  - Bathtub lift





#### GG0110D. Walker

- Include all walker types
- Examples include, but are not limited to:
  - -Pickup walker
  - Hemi-walker
  - Rolling walker
  - -Platform walker







# GG0130: Self-Care and GG0170: Mobility



#### GG0130 and GG0170 Intent

- GG0130 identifies the patient's ability to perform the listed selfcare activities and discharge goal(s)
- GG0170 identifies the patient's ability to perform the listed mobility activities and discharge goal(s)













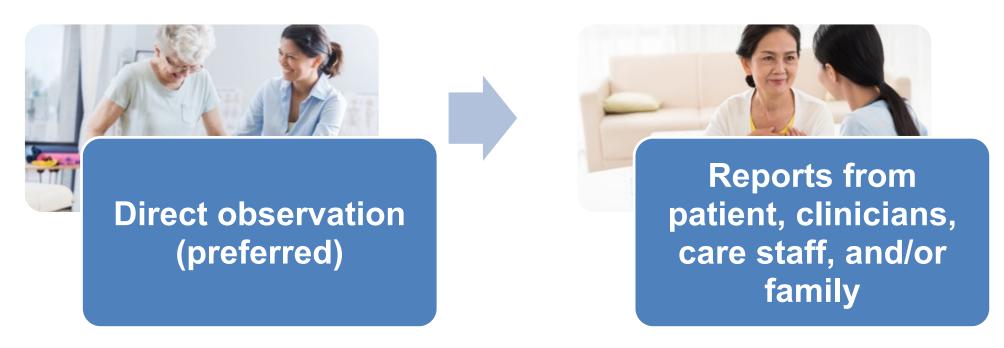
#### Time Points GG0130 and GG0170 Completed

Time Point	Assess:		
SOC/ROC	1. SOC/ROC Performance		
30C/ROC	2. Discharge Goal		
Follow-up	3. Follow-up Performance		
Discharge from agency – not to an inpatient facility	4. Discharge Performance		



### Response-Specific Instructions: Performance Assessment

Licensed clinicians may assess the patient's performance based on:



When possible, CMS invites a multidisciplinary approach to patient assessment



## Response-Specific Instructions: Performance Assessment (cont. 1)

- Patients should be allowed to perform activities as independently as possible, as long as they are safe
  - If helper assistance is required because patient's performance is unsafe or of poor quality, score according to amount of assistance provided
  - Activities may be completed with or without assistive device(s). Use of assistive device(s) to complete an activity should not affect coding of the activity





### Response-Specific Instructions: Performance Assessment (cont. 2)

- Patients with cognitive impairments/limitations may need physical and/or verbal assistance when completing an activity
- Code based on the patient's need for assistance to perform the activity safely
  - For example, choking risk due to rate of eating, amount of food placed into mouth, risk of falling



## GG0130. Self-Care SOC/ROC Performance Assessment

Section GG	Section GG Functional Abilities and Goals							
GG0130. Self-Care								
1. SOC/ROC Performance	2. Discharge Goal							
↓ Enter Codes in Boxes ↓								
		A. Eating: The ability to use suitable utensils to bring food and/or liquid to the mouth and swallow food and/or liquid once the meal is placed before the patient.						
		B. Oral Hygiene: The ability to use suitable items to clean teeth. Dentures (if applicable): The ability to remove and replace dentures from and to the mouth, and manage equipment for soaking and rinsing them.						
		C. Toileting Hygiene: The ability to maintain perineal hygiene, adjust clothes before and after voiding or having a bowel movement. If managing an ostomy, include wiping the opening but not managing equipment.						
		E. Shower/bathe self: The ability to bathe self, including washing, rinsing, and drying self (excludes washing of back and hair). Does not include transferring in/out of tub/shower						
		F. Upper body dressing: The ability to dress and undress above the waist; including fasteners, if applicable.						
		G. Lower body dressing: The ability to dress and undress below the waist, including fasteners; does not include footwear.						
		H. Putting on/taking off footwear: The ability to put on and take off socks and shoes or other footwear that is appropriate for safe mobility; including fasteners, if applicable.						



## GG0170. Mobility SOC/ROC Performance Assessment

Section GG	tion GG Functional Abilities and Goals					
GG0170. Mobility				Section GG	tion GG Functional Abilities and Goals	
1.	2.			GG0170. Mobil		
SOC/ROC				1. SOC/ROC	2. Discharge	
Performance	Goal			Performance	Goal	
↓ Enter Codes	in Boxes ↓			↓ Enter Codes	in Boxes ↓	
		A.	Roll left and right: The ability to roll from lying on bac and return to lying on back on the bed.			K. Walk 150 feet: Once standing, the ability to walk at least 150 feet in a corridor or similar space.
		В.	Sit to lying: The ability to move from sitting on side of bed.			L. Walking 10 feet on uneven surfaces: The ability to walk 10 feet on uneven or sloping surfaces (indoor or outdoor), such as turf or gravel.
		C.	Lying to sitting on side of bed: The ability to move fi sitting on the side of the bed with feet flat on the floor, support.			M. 1 step (curb): The ability to go up and down a curb and/or up and down one step. If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170P, Picking up object.
		D.	Sit to stand: The ability to come to a standing position wheelchair, or on the side of the bed.			N. 4 steps: The ability to go up and down four steps with or without a rail. If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170P, Picking up object.
		E.	Chair/bed-to-chair transfer: The ability to transfer to chair (or wheelchair).			O. 12 steps: The ability to go up and down 12 steps with or without a rail.
		F.	Toilet tranfer: The ability to get on and off a toilet or of			P. Picking up object: The ability to bend/stoop from a standing position to pick up a small object, such as a spoon, from the floor.
		G.	Car Transfer: The ability to transfer in and out of a car passenger side. Does not include the ability to open/c belt.			<ul> <li>Q. Does patient use wheelchair and/or scooter?</li> <li>0. No → Skip GG0170R, GG0170RR1, GG0170S, and GG0170SS1.</li> <li>1. Yes → Continue to GG0170R, Wheel 50 feet with two turns.</li> </ul>
		I.	Walk 10 feet: Once standing, the ability to walk at lea corridor, or similar space.  If SOC/ROC performance is coded 07, 09, 10 or 88, so (supply)			R. Wheel 50 feet with two turns: Once seated in wheelchair/scooter, the ability to wheel at least 50 feet and make two turns.  RR1.Indicate the type of wheelchair or scooter used.  1. Manual
		J.	(curb)  Walk 50 feet with two turns: Once standard make two turns.			Motorized     Wheel 150 feet: Once seated in wheelchair/scooter, the ability to wheel at least 150 feet in a corridor or similar space.
						SS1. Indicate the type of wheelchair or scooter used.  1. Manual 2. Motorized



### Response-Specific Instructions: SOC/ROC Performance Assessment

- The patient's functional status should be based on a functional assessment that occurs soon after the patient's SOC/ROC
- Should reflect the patient's SOC/ROC baseline status and be based on observation of activities, to the extent possible
- When possible, the assessment should occur prior to the start of therapy services to capture the patient's true baseline status
  - Therapy interventions can affect the patient's functional status



## Response-Specific Instructions: SOC/ROC Performance Assessment (cont.)

- A patient's functional ability can be impacted by the environment or situations encountered in the home
- Observing the patient in different locations and circumstances within the home is important for a comprehensive understanding of the patient's functional status
  - If the patient's status varies during the assessment timeframe, record his or her usual ability to perform each activity
  - Do not record the patient's best performance and worst performance;
     instead, record the patient's usual performance



#### **Assessment Timeframe**

- A patient's functional ability can be im or situations encountered in the home
- Observing the patient in different loca within the home is important for a con of the patient's functional status

The maximum number of days within which to complete the comprehensive assessment

- If the patient's status varies during the assessment timeframe,
   record his or her usual ability to perform each activity
- Do not record the patient's best performance and worst performance;
   instead, record the patient's usual performance



#### **Usual Performance/Ability**

- A patir or situ

A patient's usual performance is his/her ability greater than 50 percent of the assessment timeframe

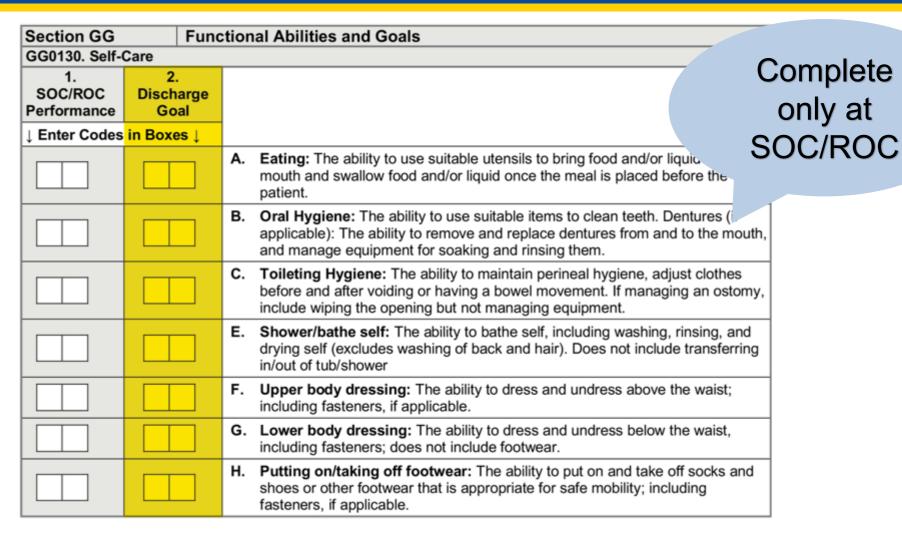
impacted by the environment ne

cations and circumstances omprehensive understanding

- If the patie status varies during the assessment timeframe, record his or her usual ability to perform each activity
- Do not record the patient's best performance and worst performance;
   instead, record the patient's usual performance

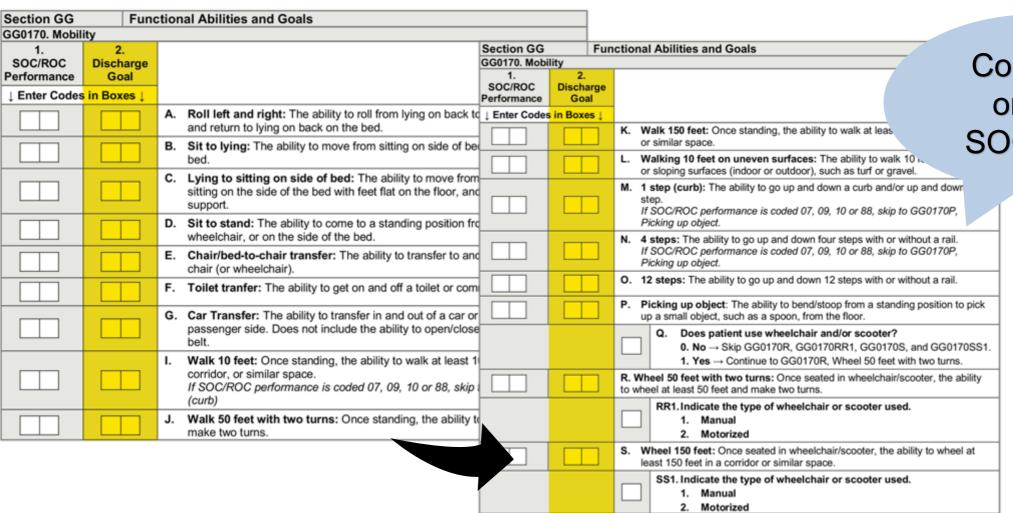


#### GG0130 SOC/ROC Discharge Goal





#### GG0170 SOC/ROC Discharge Goal



Complete only at SOC/ROC

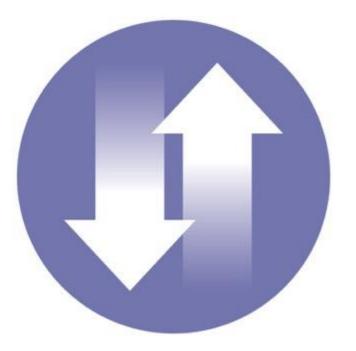


# Response-Specific Instructions: SOC/ROC Discharge Goal(s)



- Code the patient's discharge goal(s) for each activity using:
  - The 6-point scale, or
  - One of the activity not attempted codes (07, 09, 10 or 88)
- Use a dash for any remaining self-care or mobility goals that were not coded

# Response-Specific Instructions: SOC/ROC Discharge Goal(s) (cont. 1)



- Discharge goal(s) may be the coded the same as SOC/ROC performance, higher than SOC/ROC performance, or lower than SOC/ROC performance
- If the SOC/ROC performance of an activity was coded using one of the activity not attempted codes (07, 09, 10 or 88), a discharge goal may be submitted using the 6-point scale if the patient is expected to be able to perform the activity by discharge

## Response-Specific Instructions: SOC/ROC Discharge Goal(s) (cont. 2)

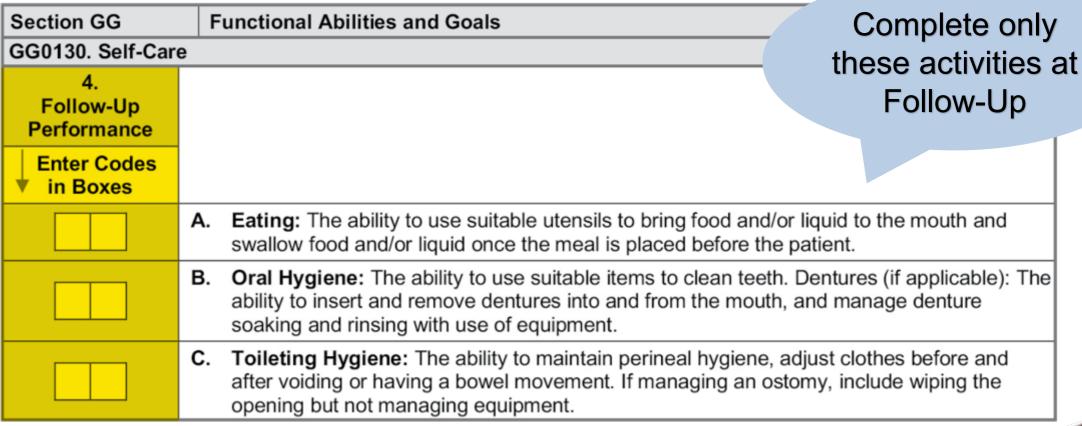
- Licensed clinicians can establish a patient's discharge goal(s) at the time of SOC/ROC based on:
  - Patient's prior medical condition
  - SOC/ROC assessment
  - Self-care and mobility status
  - Discussions with the patient and family
  - Professional judgment

- Profession's practice standards
- Expected treatments
- Patient motivation to improve
- Anticipated length of stay
- The discharge plan

Goals should be established as part of the patient's care plan

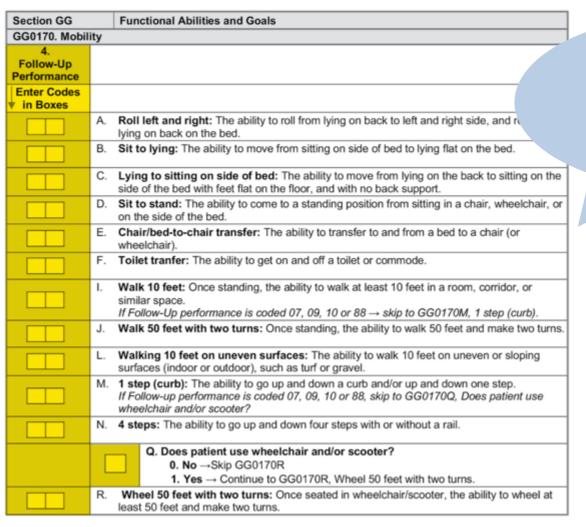


#### GG0130 Follow-Up Performance





#### GG0170 Follow-Up Performance



Complete only these activities at Follow-Up



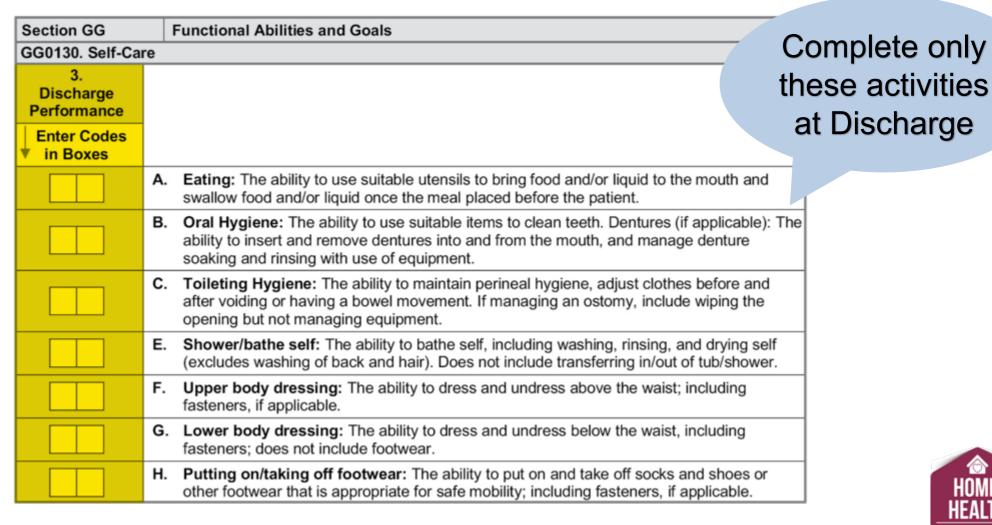
## Response Specific Instructions: Follow-Up Performance



 Clinicians should code the patient's functional status based on a functional assessment that occurs within the assessment timeframe

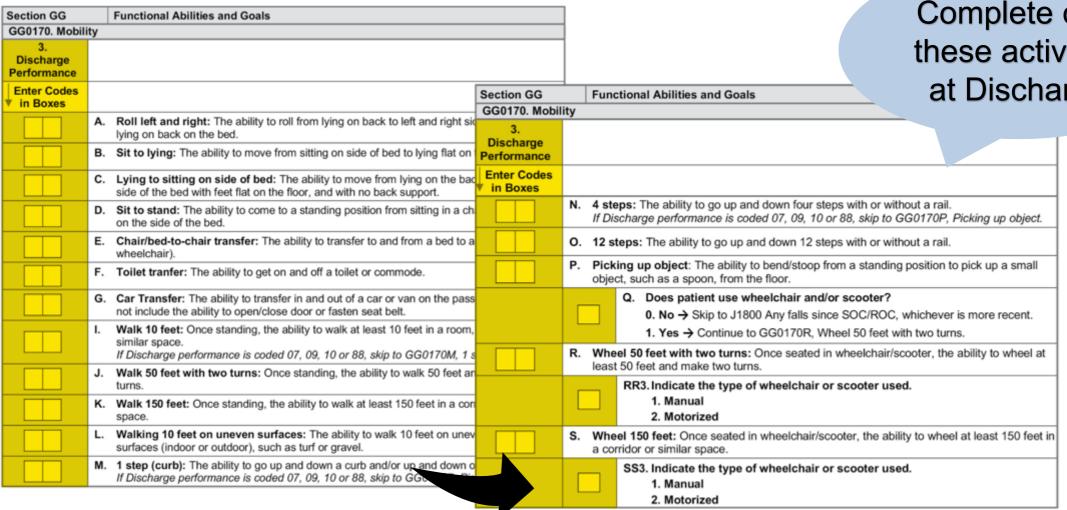


#### GG0130 Discharge Performance





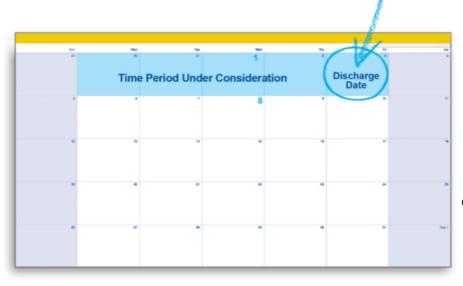
#### **GG0170 Discharge Performance**



Complete only these activities at Discharge



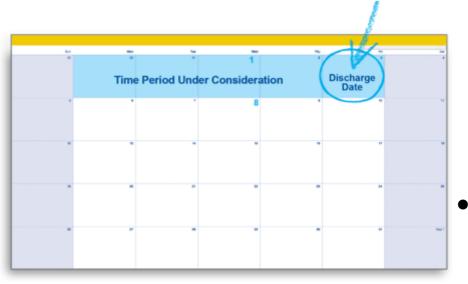
## Response Specific Instructions: Discharge Performance



- The discharge time period under consideration includes the last 5 days of care
  - This includes the date of the discharge visit plus the 4 preceding calendar days
- Code the patient's functional status based on a functional assessment that occurs at or close to the time of discharge



#### **Time Period Under Consideration**



The discharge time period under consideration in des the last 5 days of care

- This ir plus 1

 Code t based occurs dischai The span of time for data collection and assessment. For most OASIS items, this is the day of assessment.

For other items, item wording or related guidance will specify the time period under consideration, such as, since the most recent SOC/ROC

## GG0130 and GG0170 Coding Instructions: 6-Point Scale

Code 06 Independent

Code 05 Setup or Clean-up Assistance

Code 04 Supervision or Touching Assistance

Code 03 Partial/Moderate Assistance

Code 02 Substantial/Maximal Assistance

Code 01 Dependent



# GG0130 and GG0170 Coding Instructions: Activity Was Not Attempted

Code **07** 

**Patient Refused** 

Code 09

Not Applicable

Code 10

Not Attempted Due to Environmental Limitations

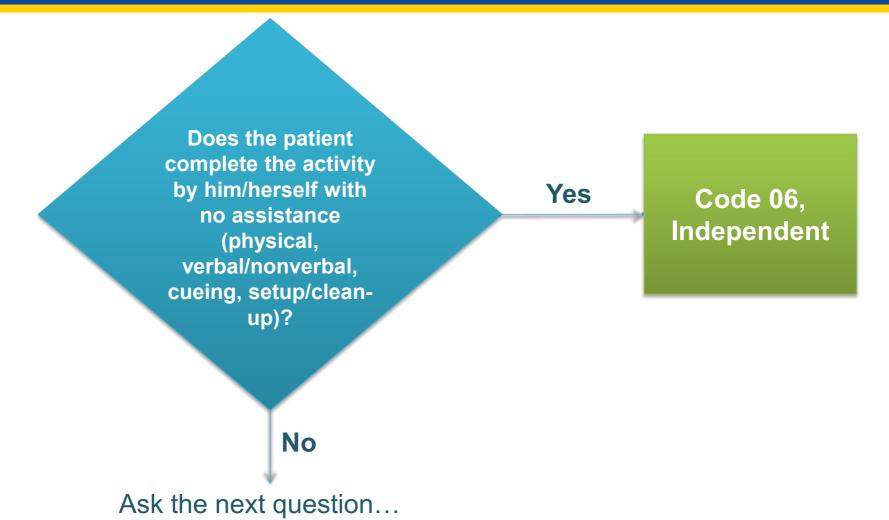
Code 88

Not Attempted Due to Medical Conditions or Safety Concerns

A dash is a valid response for this item. CMS expects dash use to be a rare occurrence.

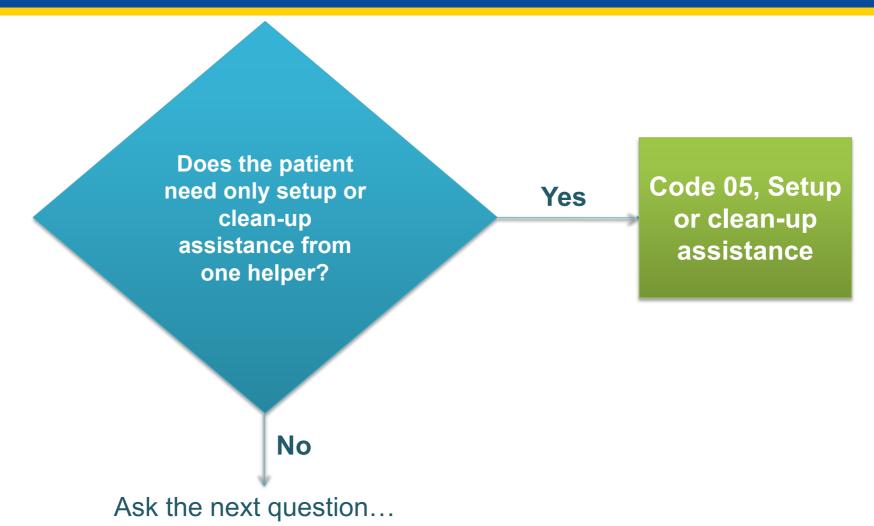


## **GG0130 and GG0170 Key Coding Questions**



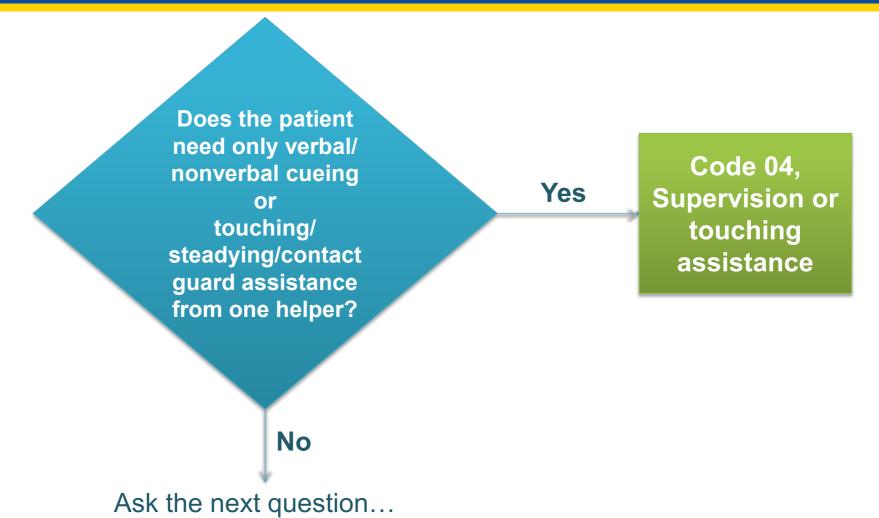


#### GG0130 and GG0170 Key Coding Questions (cont. 1)



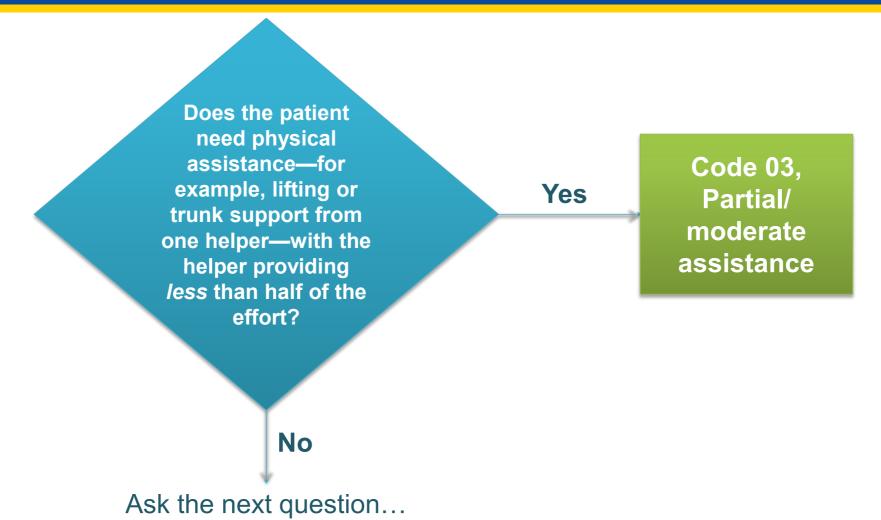


#### GG0130 and GG0170 Key Coding Questions (cont. 2)



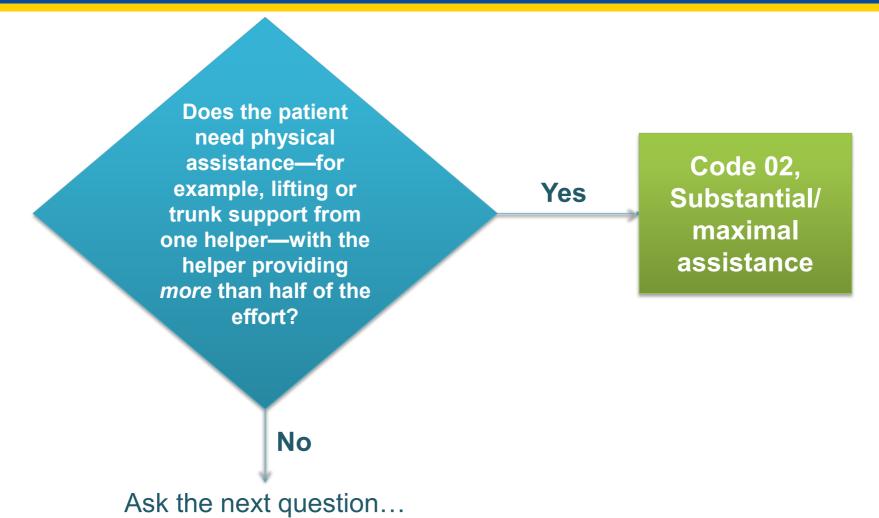


#### GG0130 and GG0170 Key Coding Questions (cont. 3)



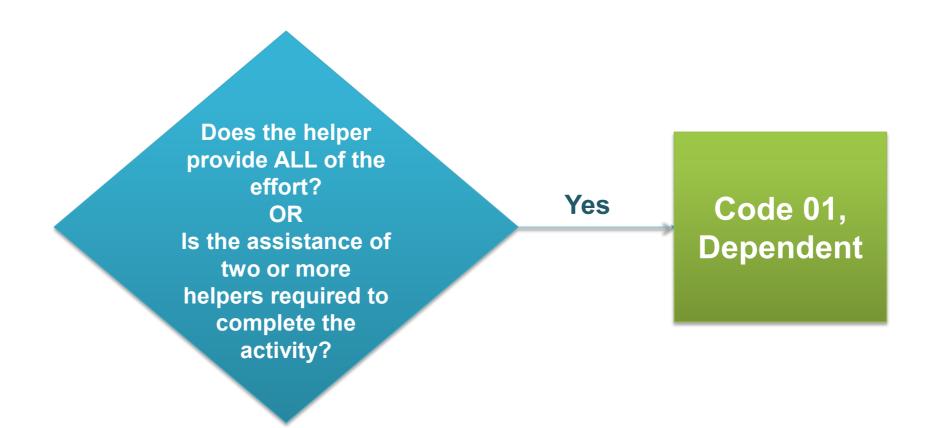


#### GG0130 and GG0170 Key Coding Questions (cont. 4)





#### GG0130 and GG0170 Key Coding Questions (cont. 5)





#### GG0130 and GG0170 Key Coding Questions (cont. 6)

#### Indicate the reason activity was not attempted

Code **07**, **Patient** refused

Patient refused to complete the activity

Code **09**, **Not** applicable

Not attempted and the patient did not perform this activity prior to the current illness, exacerbation, or injury Code 10, Not attempted due to environmental limitations

For example, lack of equipment, weather constraints

New Code!

Code 88, Not attempted due to medical conditions or safety concerns

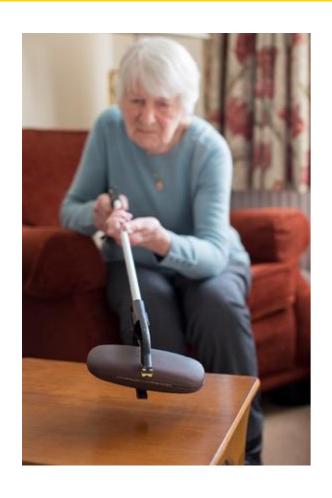
Activity was not attempted due to medical conditions or safety concerns



## **GG0130 and GG0170 General Coding Tips**

- A dash (–) indicates "No information"
- Do not use a dash if the reason that the item was not assessed was because:
  - The patient refused (code 07)
  - The item is not applicable (code 09)
  - The activity was not attempted due to environmental limitations (code 10)
  - The activity was not attempted due to medical conditions or safety concerns (code 88)

#### GG0130 and GG0170 General Coding Tips (cont. 1)



- Use of assistive device(s) and adaptive equipment required to complete the activity should not affect coding
- If the only help a patient needs to complete an activity is for a helper to retrieve an assistive device or adaptive equipment, such as a cane for walking, or a tub bench for bathing, then enter code **05**, **Setup or clean-up assistance**



#### GG0130 and GG0170 General Coding Tips (cont. 2)

 If two or more helpers are required to assist the patient to complete the activity, code as 01, Dependent





### Knowledge Check 1: What is the preferred method for assessing the patient's self-care or mobility performance?

- A. Patient self-report
- B. Family report
- C. Direct observation
- D. Report from other care staff





### Knowledge Check 2: Which example below best demonstrates allowing the patient to function "as independently as possible"?

- A. Feeding a patient who can feed himself in order to expedite mealtime
- B. Allowing the patient to brush her teeth as much as possible, assisting only if she becomes fatigued
- C. Providing the patient with a bedside commode when he is capable of walking to the bathroom with assistance
- D. All of the above





### Knowledge Check 3: Since Mrs. W uses a rolling walker, she cannot be considered independent for the Section GG walking items

A.True

B.False







### GG0130. Self-Care

Item-Specific Guidance and Practice Scenarios



#### GG0130A. Eating

A. Eating: The ability to use suitable utensils to bring food and/or liquid to the mouth and swallow food and/or liquid once the meal is placed before the patient.

Section GG	Section GG Functional Abilities and Goals				
GG0130. Self-	Care				
1. SOC/ROC Performance	2. Discharge Goal				
↓ Enter Codes	in Boxes ↓				
		A.	<b>Eating:</b> The ability to use suitable utensils to bring food and/or liquid to the mouth and swallow food and/or liquid once the meal is placed before the patient.		
		В.	<b>Oral Hygiene:</b> The ability to use suitable items to clean teeth. Dentures (if applicable): The ability to remove and replace dentures from and to the mouth, and manage equipment for soaking and rinsing them.		
		C.	<b>Toileting Hygiene:</b> The ability to maintain perineal hygiene, adjust clothes before and after voiding or having a bowel movement. If managing an ostomy, include wiping the opening but not managing equipment.		
		E.	<b>Shower/bathe self:</b> The ability to bathe self, including washing, rinsing, and drying self (excludes washing of back and hair). Does not include transferring in/out of tub/shower		
		F.	<b>Upper body dressing:</b> The ability to dress and undress above the waist; including fasteners, if applicable.		
		G.	<b>Lower body dressing:</b> The ability to dress and undress below the waist, including fasteners; does not include footwear.		
		H.	<b>Putting on/taking off footwear:</b> The ability to put on and take off socks and shoes or other footwear that is appropriate for safe mobility; including fasteners, if applicable.		



#### GG0130. Eating Coding Tips

- Patient uses a gastrostomy tube (G-Tube) or total parenteral nutrition (TPN):
  - Assistance with tube feedings or TPN is not considered when coding the item eating
  - If the patient does not eat or drink by mouth and relies solely on nutrition and liquids through tube feedings or TPN due to a new (recent onset) medical condition, code GG0130A as 88, Not attempted due to medical conditions or safety concerns



### GG0130. Eating Coding Tips (cont.)



- If the patient does not eat or drink by mouth at the time of the assessment, and the patient did not eat or drink by mouth prior to the current illness, injury or exacerbation, code GG0130A as 09, Not applicable
- If the patient eats and drinks by mouth, and relies
  partially on obtaining nutrition and liquids via tube
  feedings or TPN, code eating based on the amount
  of assistance the patient requires to eat and drink by
  mouth

## **GG0130A Practice Coding Scenario 1**

#### **Eating:**

- Mr. R is unable to eat or drink by mouth since he had a stroke 1 week ago
- He receives nutrition and hydration through a G-tube, which is administered by a helper



### How would you code GG0130A SOC/ROC Performance?

- A. Code **01**, Dependent
- B. Code 02, Substantial/maximal assistance
- C. Code 09, Not applicable
- D. Code **88**, Not attempted due to medical conditions or safety concerns





#### GG0130B. Oral Hygiene

B. Oral Hygiene: The ability to use suitable items to clean teeth. Dentures (if applicable): The ability to remove and replace dentures from and to the mouth, and manage equipment for soaking and rinsing them.

Section GG	Section GG Functional Abilities and Goals				
GG0130. Self-	GG0130. Self-Care				
1. SOC/ROC Performance	2. Discharge Goal				
↓ Enter Codes	in Boxes ↓				
		A. Eating: The ability to use suitable utensils to bring food and/or liquid to the mouth and swallow food and/or liquid once the meal is placed before the patient.			
		B. Oral Hygiene: The ability to use suitable items to clean teeth. Dentures (if applicable): The ability to remove and replace dentures from and to the mouth, and manage equipment for soaking and rinsing them.			
		C. Toileting Hygiene: The ability to maintain perineal hygiene, adjust clothes before and after voiding or having a bowel movement. If managing an ostomy, include wiping the opening but not managing equipment.			
		E. Shower/bathe self: The ability to bathe self, including washing, rinsing, and drying self (excludes washing of back and hair). Does not include transferring in/out of tub/shower			
		F. Upper body dressing: The ability to dress and undress above the waist; including fasteners, if applicable.			
		G. Lower body dressing: The ability to dress and undress below the waist, including fasteners; does not include footwear.			
		H. Putting on/taking off footwear: The ability to put on and take off socks and shoes or other footwear that is appropriate for safe mobility; including fasteners, if applicable.			



#### GG0130B. Oral Hygiene Coding Tip



If a patient does not perform oral hygiene during home visit, determine the patient's abilities based on the patient's performance of similar activities during the assessment, or on patient and/or caregiver report



## **GG0130B Practice Coding Scenario 2**

#### **Oral Hygiene:**

- The helper provides steadying assistance to Mr. S as he walks to the bathroom
- The helper applies toothpaste onto Mr. S' toothbrush. Mr. S then brushes his teeth at the sink in the bathroom without physical assistance or supervision
- Once Mr. S is done brushing his teeth and washing his hands and face, the helper returns and provides steadying assistance as the patient walks back to his bed



## How would you code GG0130B SOC/ROC Performance?

- A. Code 05, Setup or clean-up assistance
- B. Code **04**, Supervision or touching assistance
- C. Code 03, Partial/moderate assistance
- D. Code **02**, Substantial/maximal assistance





### GG0130C. Toileting Hygiene

C. Toileting Hygiene: The ability to maintain perineal hygiene, adjust clothes before and after voiding or having a bowel movement. If managing an ostomy, include wiping the opening but not managing equipment.

Section GG Functional Abilities and Goals			
GG0130. Self-	Care		
1. SOC/ROC Performance	2. Discharge Goal		
↓ Enter Codes	in Boxes ↓		
		A. Eating: The ability to use suitable utensils to bring food and/or liquid to the mouth and swallow food and/or liquid once the meal is placed before the patient.	
		B. Oral Hygiene: The ability to use suitable items to clean teeth. Dentures (if applicable): The ability to remove and replace dentures from and to the morand manage equipment for soaking and rinsing them.	
		C. Toileting Hygiene: The ability to maintain perineal hygiene, adjust clothes before and after voiding or having a bowel movement. If managing an ostor include wiping the opening but not managing equipment.	
		E. Shower/bathe self: The ability to bathe self, including washing, rinsing, and drying self (excludes washing of back and hair). Does not include transferring in/out of tub/shower	
		F. Upper body dressing: The ability to dress and undress above the waist; including fasteners, if applicable.	
		G. Lower body dressing: The ability to dress and undress below the waist, including fasteners; does not include footwear.	
		H. Putting on/taking off footwear: The ability to put on and take off socks an shoes or other footwear that is appropriate for safe mobility; including fasteners, if applicable.	nd



#### GG0130E. Shower/Bathe Self

E. Shower/bathe self: The ability to bathe self, including washing, rinsing, and drying self (excludes washing of back and hair). Does not include transferring in/out of tub/shower

Section GG	Fund	tion	nal Abilities and Goals
GG0130. Self-	Care		
1. SOC/ROC Performance	2. Discharge Goal		
↓ Enter Codes	in Boxes ↓		
		A.	Eating: The ability to use suitable utensils to bring food and/or liquid to the mouth and swallow food and/or liquid once the meal is placed before the patient.
		В.	Oral Hygiene: The ability to use suitable items to clean teeth. Dentures (if applicable): The ability to remove and replace dentures from and to the mouth, and manage equipment for soaking and rinsing them.
		C.	<b>Toileting Hygiene:</b> The ability to maintain perineal hygiene, adjust clothes before and after voiding or having a bowel movement. If managing an ostomy, include wiping the opening but not managing equipment.
		E.	<b>Shower/bathe self:</b> The ability to bathe self, including washing, rinsing, and drying self (excludes washing of back and hair). Does not include transferring in/out of tub/shower
		F.	<b>Upper body dressing:</b> The ability to dress and undress above the waist; including fasteners, if applicable.
		G.	<b>Lower body dressing:</b> The ability to dress and undress below the waist, including fasteners; does not include footwear.
		H.	Putting on/taking off footwear: The ability to put on and take off socks and shoes or other footwear that is appropriate for safe mobility; including fasteners, if applicable.



### GG0130F. Upper Body Dressing

F. Upper body dressing: The ability to dress and undress above the waist; including fasteners, if applicable.

Section GG	Fund	tion	al Abilities and Goals
GG0130. Self-	Care		
1. SOC/ROC Performance	2. Discharge Goal		
↓ Enter Codes	in Boxes ↓		
		A.	Eating: The ability to use suitable utensils to bring food and/or liquid to the mouth and swallow food and/or liquid once the meal is placed before the patient.
		B.	Oral Hygiene: The ability to use suitable items to clean teeth. Dentures (if applicable): The ability to remove and replace dentures from and to the mouth, and manage equipment for soaking and rinsing them.
		C.	<b>Toileting Hygiene:</b> The ability to maintain perineal hygiene, adjust clothes before and after voiding or having a bowel movement. If managing an ostomy, include wiping the opening but not managing equipment.
		E.	Shower/bathe self: The ability to bathe self, including washing, rinsing, and drying self (excludes washing of back and hair). Does not include transferring in/out of tub/shower
		F.	<b>Upper body dressing:</b> The ability to dress and undress above the waist; including fasteners, if applicable.
		G.	<b>Lower body dressing:</b> The ability to dress and undress below the waist, including fasteners; does not include footwear.
		H.	<b>Putting on/taking off footwear:</b> The ability to put on and take off socks and shoes or other footwear that is appropriate for safe mobility; including fasteners, if applicable.



#### GG0130G. Lower Body Dressing

G. Lower body dressing: The ability to dress and undress below the waist, including fasteners; does not include footwear.

Section GG Fund		tional Abilities and Goals
GG0130. Self-	Care	
1. SOC/ROC Performance	2. Discharge Goal	
↓ Enter Codes	in Boxes ↓	
		A. Eating: The ability to use suitable utensils to bring food and/or liquid to the mouth and swallow food and/or liquid once the meal is placed before the patient.
		B. Oral Hygiene: The ability to use suitable items to clean teeth. Dentures (if applicable): The ability to remove and replace dentures from and to the mouth and manage equipment for soaking and rinsing them.
		C. Toileting Hygiene: The ability to maintain perineal hygiene, adjust clothes before and after voiding or having a bowel movement. If managing an ostomy include wiping the opening but not managing equipment.
		E. Shower/bathe self: The ability to bathe self, including washing, rinsing, and drying self (excludes washing of back and hair). Does not include transferring in/out of tub/shower
		F. Upper body dressing: The ability to dress and undress above the waist; including fasteners, if applicable.
		G. Lower body dressing: The ability to dress and undress below the waist, including fasteners; does not include footwear.
		H. Putting on/taking off footwear: The ability to put on and take off socks and shoes or other footwear that is appropriate for safe mobility; including fasteners, if applicable.



### GG0130H. Putting On/Taking Off Footwear

H. Putting on/taking off footwear: The ability to put on and take off socks and shoes or other footwear that is appropriate for safe mobility; including fasteners, if applicable.

Section GG Fund		tional Abilities and Goals
GG0130. Self-	Care	
1. SOC/ROC Performance	2. Discharge Goal	
↓ Enter Codes	in Boxes ↓	
		Eating: The ability to use suitable utensils to bring food and/or liquid to the mouth and swallow food and/or liquid once the meal is placed before the patient.
		B. Oral Hygiene: The ability to use suitable items to clean teeth. Dentures (if applicable): The ability to remove and replace dentures from and to the mouth and manage equipment for soaking and rinsing them.
		C. Toileting Hygiene: The ability to maintain perineal hygiene, adjust clothes before and after voiding or having a bowel movement. If managing an ostomy include wiping the opening but not managing equipment.
		E. Shower/bathe self: The ability to bathe self, including washing, rinsing, and drying self (excludes washing of back and hair). Does not include transferring in/out of tub/shower
		F. Upper body dressing: The ability to dress and undress above the waist; including fasteners, if applicable.
		G. Lower body dressing: The ability to dress and undress below the waist, including fasteners; does not include footwear.
		H. Putting on/taking off footwear: The ability to put on and take off socks and shoes or other footwear that is appropriate for safe mobility; including fasteners, if applicable.





### GG0170. Mobility

Item-Specific Guidance and Practice Scenarios



### GG0170. Mobility

Section GG	Func	tional Abilities and Goals
GG0170. Mobil		
1. SOC/ROC Performance	2. Discharge Goal	
↓ Enter Codes	in Boxes ↓	
		A. Roll left and right: The ability to roll from lying on back to left and right side, and return to lying on back on the bed.
		B. Sit to lying: The ability to move from sitting on side of bed to lying flat on the bed.
		C. Lying to sitting on side of bed: The ability to move from lying on the back to sitting on the side of the bed with feet flat on the floor, and with no back support.
		D. Sit to stand: The ability to come to a standing position from sitting in a chair, wheelchair, or on the side of the bed.
		E. Chair/bed-to-chair transfer: The ability to transfer to and from a bed to a chair (or wheelchair).
		F. Toilet tranfer: The ability to get on and off a toilet or commode.
		G. Car Transfer: The ability to transfer in and out of a car or van on the passenger side. Does not include the ability to open/close door or fasten seat belt.
		I. Walk 10 feet: Once standing, the ability to walk at least 10 feet in a room, corridor, or similar space. If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170M, 1 step (curb)
		J. Walk 50 feet with two turns: Once standing, the ability to walk 50 feet and make two turns.



### GG0170. Mobility (cont.)

Section GG Fur		ctional Abilities and Goals
GG0170. Mobi	lity	
1. SOC/ROC Performance	2. Discharge Goal	
⊥ Enter Codes		
		K. Walk 150 feet: Once standing, the ability to walk at least 150 feet in a corridor or similar space.
		L. Walking 10 feet on uneven surfaces: The ability to walk 10 feet on uneven or sloping surfaces (indoor or outdoor), such as turf or gravel.
		M. 1 step (curb): The ability to go up and down a curb and/or up and down one step. If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170P, Picking up object.
		N. 4 steps: The ability to go up and down four steps with or without a rail. If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170P, Picking up object.
		O. 12 steps: The ability to go up and down 12 steps with or without a rail.
		P. Picking up object: The ability to bend/stoop from a standing position to pick up a small object, such as a spoon, from the floor.
		<ul> <li>Q. Does patient use wheelchair and/or scooter?</li> <li>0. No → Skip GG0170R, GG0170R1, GG0170S, and GG0170SS1.</li> <li>1. Yes → Continue to GG0170R, Wheel 50 feet with two turns.</li> </ul>
		R. Wheel 50 feet with two turns: Once seated in wheelchair/scooter, the ability to wheel at least 50 feet and make two turns.
		RR1.Indicate the type of wheelchair or scooter used.  1. Manual 2. Motorized
		S. Wheel 150 feet: Once seated in wheelchair/scooter, the ability to wheel at least 150 feet in a corridor or similar space.
		SS1. Indicate the type of wheelchair or scooter used.  1. Manual 2. Motorized



# GG0170A. Roll Left and Right

A. Roll left and right: The ability to roll from lying on back to left and right side, and return to lying on back on the bed.

Section GG Fun		tional Abilities and Goals
GG0170. Mobil	ity	
1.	2.	
SOC/ROC Discharge Performance Goal		
↓ Enter Codes	in Boxes ↓	
		A. Roll left and right: The ability to roll from lying on back to left and right side, and return to lying on back on the bed.
		B. Sit to lying: The ability to move from sitting on side of bed to lying flat on the bed.
		C. Lying to sitting on side of bed: The ability to move from lying on the back to sitting on the side of the bed with feet flat on the floor, and with no back support.
		D. Sit to stand: The ability to come to a standing position from sitting in a chair, wheelchair, or on the side of the bed.
		E. Chair/bed-to-chair transfer: The ability to transfer to and from a bed to a chair (or wheelchair).
		F. Toilet tranfer: The ability to get on and off a toilet or commode.
		G. Car Transfer: The ability to transfer in and out of a car or van on the passenger side. Does not include the ability to open/close door or fasten seat belt.
		<ol> <li>Walk 10 feet: Once standing, the ability to walk at least 10 feet in a room, corridor, or similar space.</li> <li>If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170M, 1 step (curb)</li> </ol>
		J. Walk 50 feet with two turns: Once standing, the ability to walk 50 feet and make two turns.



## **GG0170A Practice Coding Scenario 3**

#### Roll left and right:

- At SOC, the physical therapist helps Mr. R turn onto his right side by instructing him to bend his left leg and roll to his right side. He then instructs him how to position his limbs to return to lying on his back and then to repeat a similar process for rolling onto his left side and then return to lying on his back
- Mr. R completes the activity without physical assistance from a helper. Mr. R was moving about in bed without difficulty prior to hospitalization. The therapist expects Mr. R will roll left and right by himself by discharge



### How would you code GG0170A SOC/ROC Performance?

- A. Code 05, Setup or clean-up assistance
- B. Code **04**, Supervision or touching assistance
- C. Code **09**, Not applicable
- D. Code **88**, Not attempted due to medical conditions or safety concerns





#### How would you code GG0170A Discharge Goal?

- A. Code 06, Independent
- B. Code 05, Setup or clean-up assistance
- C. Code 07, Patient refused
- D. Code **09**, Not applicable





### GG0170B. Sit to Lying

B. Sit to lying: The ability to move from sitting on side of bed to lying flat on the bed.

Section GG	Fund	ctior	nal Abilities and Goals
GG0170. Mobil	ity		
1. SOC/ROC Performance	2. Discharge Goal		
↓ Enter Codes	in Boxes ↓		
		A.	Roll left and right: The ability to roll from lying on back to left and right side, and return to lying on back on the bed.
		B.	<b>Sit to lying:</b> The ability to move from sitting on side of bed to lying flat on the bed.
		C.	Lying to sitting on side of bed: The ability to move from lying on the back to sitting on the side of the bed with feet flat on the floor, and with no back support.
		D.	Sit to stand: The ability to come to a standing position from sitting in a chair, wheelchair, or on the side of the bed.
		E.	Chair/bed-to-chair transfer: The ability to transfer to and from a bed to a chair (or wheelchair).
		F.	Toilet tranfer: The ability to get on and off a toilet or commode.
		G.	Car Transfer: The ability to transfer in and out of a car or van on the passenger side. Does not include the ability to open/close door or fasten seat belt.
		I.	Walk 10 feet: Once standing, the ability to walk at least 10 feet in a room, corridor, or similar space.  If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170M, 1 step (curb)
		J.	Walk 50 feet with two turns: Once standing, the ability to walk 50 feet and make two turns.



## GG0170C. Lying to Sitting on Side of Bed

Existing Item!

C. Lying to sitting on side of bed: The ability to move from lying on the back to sitting on the side of the bed with feet flat on the floor, and with no back support.

	Section GG Functional Abilities and Goals				
GG0170. Mobil					
1. SOC/ROC Performance	2. Discharge Goal				
↓ Enter Codes	in Boxes ↓				
		A.	Roll left and right: The ability to roll from lying on back to left and right side, and return to lying on back on the bed.		
		В.	Sit to lying: The ability to move from sitting on side of bed to lying flat on the bed.		
		C.	Lying to sitting on side of bed: The ability to move from lying on the back to sitting on the side of the bed with feet flat on the floor, and with no back support.		
		D.	Sit to stand: The ability to come to a standing position from sitting in a chair, wheelchair, or on the side of the bed.		
		E.	Chair/bed-to-chair transfer: The ability to transfer to and from a bed to a chair (or wheelchair).		
		F.	Toilet tranfer: The ability to get on and off a toilet or commode.		
		G.	Car Transfer: The ability to transfer in and out of a car or van on the passenger side. Does not include the ability to open/close door or fasten seat belt.		
		I.	Walk 10 feet: Once standing, the ability to walk at least 10 feet in a room, corridor, or similar space.  If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170M, 1 step (curb)		
		J.	Walk 50 feet with two turns: Once standing, the ability to walk 50 feet and make two turns.		



# GG0170C. Lying to Sitting Coding Tips



- If a patient's feet do not reach the floor upon lying to sitting, the clinician will determine if a bed height adjustment (if applicable), or if a footstool is required to accommodate foot placement on the floor/footstool
- Back support refers to an object or person providing support of the patient's back



## GG0170A-C "Lying" Coding Tips

- If at the time of the assessment the patient is unable to lie flat due to medical conditions or restrictions, but could perform this activity prior to the current illness, exacerbation or injury, code 88, Not attempted due to medical conditions or safety concerns
- If at the time of the assessment the patient is unable to lie flat due to medical conditions or restrictions, and could not perform the activity prior to the current illness, exacerbation or injury, code 09, Not applicable

# GG0170A-C "Lying" Coding Tips (cont.)



- For GG0170A-C, clinical judgment should be used to determine what is considered a "lying" position for the patient
  - For example, a clinician could determine that a patient's preferred slightly elevated resting position is "lying" for that patient

#### GG0170D. Sit to Stand

**D. Sit to stand:** The ability to come to a standing position from sitting in a chair, wheelchair, or on the side of the bed.

Section GG Fund		ctional Abilities and Goals			
GG0170. Mobility					
1. SOC/ROC Performance	2. Discharge Goal				
↓ Enter Codes in Boxes ↓					
		A. Roll left and right: The ability to roll from lying on back to left and right side, and return to lying on back on the bed.			
		B. Sit to lying: The ability to move from sitting on side of bed to lying flat on the bed.			
		C. Lying to sitting on side of bed: The ability to move from lying on the back to sitting on the side of the bed with feet flat on the floor, and with no back support.			
		D. Sit to stand: The ability to come to a standing position from sitting in a chair, wheelchair, or on the side of the bed.			
		E. Chair/bed-to-chair transfer: The ability to transfer to and from a bed to a chair (or wheelchair).			
		F. Toilet tranfer: The ability to get on and off a toilet or commode.			
		G. Car Transfer: The ability to transfer in and out of a car or van on the passenger side. Does not include the ability to open/close door or fasten seat belt.			
		<ol> <li>Walk 10 feet: Once standing, the ability to walk at least 10 feet in a room, corridor, or similar space.</li> <li>If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170M, 1 step (curb)</li> </ol>			
		J. Walk 50 feet with two turns: Once standing, the ability to walk 50 feet and make two turns.			



#### GG0170E. Chair/Bed-to-Chair Transfer

E. Chair/bed-to-chair transfer: The ability to transfer to and from a bed to a chair (or wheelchair).

Section GG	Fund	tional Abilities and Goals				
The state of the s						
GG0170. Mobility						
1.	2.					
SOC/ROC Performance	Discharge Goal					
	0.04					
↓ Enter Codes in Boxes ↓						
		A. Roll left and right: The ability to roll from lying on back to left and right side, and return to lying on back on the bed.				
		B. Sit to lying: The ability to move from sitting on side of bed to lying flat on the bed.				
		C. Lying to sitting on side of bed: The ability to move from lying on the back to sitting on the side of the bed with feet flat on the floor, and with no back support.				
		D. Sit to stand: The ability to come to a standing position from sitting in a chair, wheelchair, or on the side of the bed.				
		E. Chair/bed-to-chair transfer: The ability to transfer to and from a bed to a chair (or wheelchair).				
		F. Toilet tranfer: The ability to get on and off a toilet or commode.				
		G. Car Transfer: The ability to transfer in and out of a car or van on the passenger side. Does not include the ability to open/close door or fasten seat belt.				
		Walk 10 feet: Once standing, the ability to walk at least 10 feet in a room, corridor, or similar space. If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170M, 1 step (curb)				
		J. Walk 50 feet with two turns: Once standing, the ability to walk 50 feet and make two turns.				



## GG0170E. Chair/Bed-to-Chair Transfer Coding Tips



- Sit to lying and lying to sitting are not assessed as part of GG0170E
- If a mechanical lift is used to assist in transferring a patient for a chair/bedto-chair transfer and two helpers are needed to assist with a mechanical lift transfer, then code 01, Dependent, even if the patient assists with any part of the chair/bed-to-chair transfer

## **GG0170E Practice Coding Scenario 4**

#### Chair/bed-to-chair transfer:

- Mr. L had a stroke and uses a wheelchair for mobility
- When Mr. L gets out of bed at SOC, the therapist moves the wheelchair into the correct position and locks the brakes so that Mr. L can transfer into the wheelchair safely. Mr. L transfers into the wheelchair by himself without the need for supervision or assistance during the transfer
- The family reports that Mr. L does transfer safely without the need for supervision, once the wheelchair is placed and locked. The nurse does not expect Mr. L's mobility status to change by discharge



## How would you code GG0170E SOC/ROC Performance?

- A. Code 05, Setup or clean-up assistance
- B. Code **04**, Supervision or touching assistance
- C. Code **09**, Not applicable
- D. Code **88**, Not attempted due to medical conditions or safety concerns





#### How would you code GG0170E Discharge Goal?

- A. Code 06, Independent
- B. Code 05, Setup or clean-up assistance
- C. Code **07**, Patient refused
- D. Code 09, Not applicable





#### **GG0170F.** Toilet Transfer

F. Toilet tranfer: The ability to get on and off a toilet or commode.

	1 -				
Section GG	Fund	tional Abilities and Goals			
GG0170. Mobility					
1. SOC/ROC Performance	2. Discharge Goal				
↓ Enter Codes in Boxes ↓					
		A. Roll left and right: The ability to roll from lying on back to left and right side, and return to lying on back on the bed.			
		B. Sit to lying: The ability to move from sitting on side of bed to lying flat on the bed.			
		C. Lying to sitting on side of bed: The ability to move from lying on the back to sitting on the side of the bed with feet flat on the floor, and with no back support.			
		D. Sit to stand: The ability to come to a standing position from sitting in a chair, wheelchair, or on the side of the bed.			
		E. Chair/bed-to-chair transfer: The ability to transfer to and from a bed to a chair (or wheelchair).			
		F. Toilet tranfer: The ability to get on and off a toilet or commode.			
		G. Car Transfer: The ability to transfer in and out of a car or van on the passenger side. Does not include the ability to open/close door or fasten seat belt.			
		<ol> <li>Walk 10 feet: Once standing, the ability to walk at least 10 feet in a room, corridor, or similar space.</li> <li>If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170M, 1 step (curb)</li> </ol>			
		J. Walk 50 feet with two turns: Once standing, the ability to walk 50 feet and make two turns.			



# GG0170F. Toilet Transfer Coding Tip



Toileting hygiene and clothing management are not considered part of the toilet transferring activity



#### GG0170G. Car Transfer

**G.** Car Transfer: The ability to transfer in and out of a car or van on the passenger side. Does not include the ability to open/close door or fasten seat

Section GG	Func	tional Abilities and Goals
GG0170. Mobil	ity	
1. 2. Discharge Performance Goal		
↓ Enter Codes	in Boxes ↓	
		A. Roll left and right: The ability to roll from lying on back to left and right side, and return to lying on back on the bed.
		B. Sit to lying: The ability to move from sitting on side of bed to lying flat on the bed.
		C. Lying to sitting on side of bed: The ability to move from lying on the back to sitting on the side of the bed with feet flat on the floor, and with no back support.
		D. Sit to stand: The ability to come to a standing position from sitting in a chair, wheelchair, or on the side of the bed.
		E. Chair/bed-to-chair transfer: The ability to transfer to and from a bed to a chair (or wheelchair).
		F. Toilet tranfer: The ability to get on and off a toilet or commode.
		G. Car Transfer: The ability to transfer in and out of a car or van on the passenger side. Does not include the ability to open/close door or fasten seat belt.
		<ol> <li>Walk 10 feet: Once standing, the ability to walk at least 10 feet in a room, corridor, or similar space.</li> <li>If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170M, 1 step (curb)</li> </ol>
		J. Walk 50 feet with two turns: Once standing, the ability to walk 50 feet and make two turns.



## GG0170G Car Transfer Coding Tips

- Does not include opening or closing the car door or fastening the seatbelt
- If the patient is not able to attempt car transfers (for example, because no car is available, or there are weather or other environmental constraints), and the patient's usual status cannot be determined based on patient or caregiver report, enter code 10, Not attempted due to environmental limitations
- If at the time of the assessment the patient is unable to attempt car transfers, and <u>could not</u> perform the car transfers prior to the current illness, exacerbation or injury, code **09**, **Not applicable**



# **GG0170G Practice Coding Scenario 5**

#### **Car Transfer:**

- The day after being admitted to home health, Mrs. N works with an occupational therapist (OT) on transfers in and out of the passenger side of a car
- When reviewing the therapist's evaluation, the assessing clinician reads that when performing car transfers, Mrs. N required verbal reminders for safety and contact guarding assistance from the OT for guidance and direction
- The therapist instructed the patient on strategic hand placement while Mrs. N transitioned to sitting into the car seat. Documentation showed that the therapist opened and closed the car door



## How would you code GG0170G SOC/ROC Performance?

- A. Code 05, Setup or cleanup assistance
- B. Code **04**, Supervision or touching assistance
- C. Code 03, Partial/moderate assistance
- D. Code 02, Substantial/maximal assistance





#### GG0170I. Walk 10 Feet

 Walk 10 feet: Once standing, the ability to walk at least 10 feet in a room, corridor, or similar space.

Section GG	Fund	tional Abilities and Goals
GG0170. Mobil	ity	
1. 2. Discharge Performance Goal		
↓ Enter Codes	in Boxes ↓	
		A. Roll left and right: The ability to roll from lying on back to left and right side, and return to lying on back on the bed.
		B. Sit to lying: The ability to move from sitting on side of bed to lying flat on the bed.
		C. Lying to sitting on side of bed: The ability to move from lying on the back to sitting on the side of the bed with feet flat on the floor, and with no back support.
		D. Sit to stand: The ability to come to a standing position from sitting in a chair, wheelchair, or on the side of the bed.
		E. Chair/bed-to-chair transfer: The ability to transfer to and from a bed to a chair (or wheelchair).
		F. Toilet tranfer: The ability to get on and off a toilet or commode.
		G. Car Transfer: The ability to transfer in and out of a car or van on the passenger side. Does not include the ability to open/close door or fasten seat belt.
		Walk 10 feet: Once standing, the ability to walk at least 10 feet in a room, corridor, or similar space. If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170M, 1 step (curb)
		J. Walk 50 feet with two turns: Once standing, the ability to walk 50 feet and make two turns.



## GG0170J. Walk 50 Feet With Two Turns

J. Walk 50 feet with two turns: Once standing, the ability to walk 50 feet and make two turns.

Section GG		tional Abilities and Goals
GG0170. Mobil	ity	
1. SOC/ROC Performance	2. Discharge Goal	
↓ Enter Codes	in Boxes ↓	
		A. Roll left and right: The ability to roll from lying on back to left and right side, and return to lying on back on the bed.
		B. Sit to lying: The abi <mark>lity to move from sitting</mark> on side of bed to lying flat on the bed.
		C. Lying to sitting on side of bed: The ability to move from lying on the back to sitting on the side of the bed with feet flat on the floor, and with no back support.
		D. Sit to stand: The ability to come to a standing position from sitting in a chair, wheelchair, or on the side of the bed.
		E. Chair/bed-to-chair transfer: The ability to transfer to and from a bed to a chair (or wheelchair).
		F. Toilet tranfer: The ability to get on and off a toilet or commode.
		G. Car Transfer: The ability to transfer in and out of a car or van on the passenger side. Does not include the ability to open/close door or fasten seat belt.
		Walk 10 feet: Once standing, the ability to walk at least 10 feet in a room, corridor, or similar space. If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170M, 1 step (curb)
		J. Walk 50 feet with two turns: Once standing, the ability to walk 50 feet and make two turns.



# GG0170J. Walk 50 Feet With Two Turns Coding Tips



- The turns are 90-degree turns and may be:
  - In the same direction (two 90-degree turns to the right or two 90-degree turns to the left)
  - In different directions (one 90-degree turn to the right and one 90-degree turn to the left)
- The 90-degree turns should occur at the patient's ability level (i.e., not jeopardizing patient safety)
- Can include the use of an assistive device (for example walker or crutches) without affecting coding of the activity

# **GG0170J Practice Coding Scenario 6**

#### Walk 50 feet with two turns:

- At SOC, Mr. B is recovering from a recent stroke and now has difficulty walking. Even with assistance, he is able to walk only 30 feet
- Mr. B's care plan includes muscle strengthening and gait training
- The therapist expects Mr. B will be able to walk 50 feet with two turns safely with the assistance of a caregiver for verbal cues and contact guard for steadying on the turns at discharge



## How would you code GG0170J SOC/ROC Performance?

- A. Code **02**, Substantial/maximal assistance
- B. Code **01**, Dependent
- C. Code **09**, Not applicable
- D. Code **88**, Not attempted due to medical conditions or safety concerns





### How would you code GG0170J Discharge Goal?

- A. Code **06**, Independent
- B. Code 05, Setup or clean-up assistance
- C. Code **04**, Supervision or touching assistance
- D. Code 03, Partial/moderate assistance





#### GG0170K. Walk 150 Feet

Section GG		nctional Abilities and Goals	
GG0170. Mobi			4506 41
1. SOC/ROC Performance	2. Discharge Goal	K. Walk 150 feet: Once standing, the ability to walk at least or similar space.	150 feet in a corridor
↓ Enter Codes	in Boxes ↓		
		K. Walk 150 feet: Once standing, the ability to walk at least 150 feet in a corridor or similar space.	
		L. Walking 10 feet on uneven surfaces: The ability to walk 10 feet on uneven or sloping surfaces (indoor or outdoor), such as turf or gravel.	
		M. 1 step (curb): The ability to go up and down a curb and/or up and down one step.  If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170P, Picking up object.	
		N. 4 steps: The ability to go up and down four steps with or without a rail.  If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170P,  Picking up object.	
		O. 12 steps: The ability to go up and down 12 steps with or without a rail.	
		P. Picking up object: The ability to bend/stoop from a standing position to pick up a small object, such as a spoon, from the floor.	
		Q. Does patient use wheelchair and/or scooter?  0. No → Skip GG0170R, GG0170R1, GG0170S, and GG0170SS1.  1. Yes → Continue to GG0170R, Wheel 50 feet with two turns.	
		R. Wheel 50 feet with two turns: Once seated in wheelchair/scooter, the ability to wheel at least 50 feet and make two turns.	
		RR1.Indicate the type of wheelchair or scooter used.  1. Manual 2. Motorized	
		S. Wheel 150 feet: Once seated in wheelchair/scooter, the ability to wheel at least 150 feet in a corridor or similar space.	
		SS1. Indicate the type of wheelchair or scooter used.  1. Manual 2. Motorized	



# GG0170K. Walk 150 Feet Coding Tip



If the patient's environment does not accommodate a walk of 150 feet without turns, but the patient demonstrates the ability to walk with or without assistance 150 feet with turns without jeopardizing the patient's safety, code using the 6-point scale



### GG0170L. Walking 10 Feet on Uneven Surfaces

Section GG	Fun	nctional Abilities and Goals	]
GG0170. Mobi			
1.	2.	L. Walking 10 feet on uneven surfaces: The ability to walk	
SOC/ROC Performance	Discharge Goal	or sloping surfaces (indoor or outdoor), such as turf or gra	avel.
↓ Enter Codes	in Boxes ↓		
		K. Walk 150 feet; Once standing, the ability to walk at least 150 feet in a corridor or similar space.	
		L. Walking 10 feet on uneven surfaces: The ability to walk 10 feet on uneven or sloping surfaces (indoor or outdoor), such as turf or gravel.	
		M. 1 step (curb): The ability to go up and down a curb and/or up and down one step.  If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170P, Picking up object.	
		N. 4 steps: The ability to go up and down four steps with or without a rail. If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170P, Picking up object.	
		O. 12 steps: The ability to go up and down 12 steps with or without a rail.	
		P. Picking up object: The ability to bend/stoop from a standing position to pick up a small object, such as a spoon, from the floor.	
		<ul> <li>Q. Does patient use wheelchair and/or scooter?</li> <li>0. No → Skip GG0170R, GG0170RR1, GG0170S, and GG0170SS1.</li> <li>1. Yes → Continue to GG0170R, Wheel 50 feet with two turns.</li> </ul>	
		R. Wheel 50 feet with two turns: Once seated in wheelchair/scooter, the ability to wheel at least 50 feet and make two turns.	
		RR1.Indicate the type of wheelchair or scooter used.  1. Manual 2. Motorized	
		S. Wheel 150 feet: Once seated in wheelchair/scooter, the ability to wheel at least 150 feet in a corridor or similar space.	
		SS1. Indicate the type of wheelchair or scooter used.  1. Manual 2. Motorized	



# GG0170L. Walking 10 Feet on Uneven Surfaces Coding Tip



If the patient is not able to attempt walking on uneven surfaces (for example, because no uneven surfaces are available, or there are weather or other environmental constraints limiting access), and the patient's usual status for walking 10 feet on uneven surfaces cannot be determined based on the patient or caregiver report, enter code 10, Not attempted due to environmental limitations



# **GG0170L Practice Coding Scenario 7**

#### Walking 10 feet on uneven surfaces:

- Mrs. N has severe joint degenerative disease and is recovering from sepsis
- When walking on the uneven driveway was attempted yesterday when Mrs. N came home from the hospital, she reports that her neighbor had to hold her belt and help lift her a little during a few steps. The neighbor also provided help to advance the walker across the gravel driveway as the patient walked



## How would you code GG0170L SOC/ROC Performance?

- A. Code **05**, Setup or clean-up assistance
- B. Code **04**, Supervision or touching assistance
- C. Code 03, Partial/moderate assistance
- D. Code **02**, Substantial/maximal assistance





## GG0170M. 1 Step (Curb)

Section GG	Fur	nctio	nal Abilities and Goals	
GG0170. Mobi	lity	_		
1. SOC/ROC Performance	2. Discharge Goal s in Boxes ↓	М.	1 step (curb): The ability to go up and down a curb and/o step.  If SOC/ROC performance is coded 07, 09, 10 or 88, skip is	.
		-	Picking up object. or similar space.	
		L.	Walking 10 feet on uneven surfaces: The ability to walk 10 feet on uneven or sloping surfaces (indoor or outdoor), such as turf or gravel.	
		M.	1 step (curb): The ability to go up and down a curb and/or up and down one step.  If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170P, Picking up object.	
		N.	4 steps: The ability to go up and down four steps with or without a rail.  If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170P,  Picking up object.	
		О.	12 steps: The ability to go up and down 12 steps with or without a rail.	
		P.	Picking up object: The ability to bend/stoop from a standing position to pick up a small object, such as a spoon, from the floor.	
			<ul> <li>Q. Does patient use wheelchair and/or scooter?</li> <li>0. No → Skip GG0170R, GG0170RR1, GG0170S, and GG0170SS1.</li> <li>1. Yes → Continue to GG0170R, Wheel 50 feet with two turns.</li> </ul>	
			Wheel 50 feet with two turns: Once seated in wheelchair/scooter, the ability wheel at least 50 feet and make two turns.	
			RR1.Indicate the type of wheelchair or scooter used.  1. Manual 2. Motorized	
		S.	Wheel 150 feet: Once seated in wheelchair/scooter, the ability to wheel at least 150 feet in a corridor or similar space.	
			SS1. Indicate the type of wheelchair or scooter used.  1. Manual 2. Motorized	



# **GG0170M Practice Coding Scenario 8**

#### 1 step (curb):

- Mrs. Z had a stroke and needs to learn how to step up and down one step to enter and exit her home
- At SOC, the physical therapist provides needed verbal cueing as Mrs. Z uses her quad cane to aid her balance in stepping up and back down one step. The therapist does not provide any physical assistance



## How would you code GG0170M SOC/ROC Performance?

- A. Code **04**, Supervision or touching assistance
- B. Code 03, Partial/moderate assistance
- C. Code **02**, Substantial/maximal assistance
- D. Code 01, Dependent





### GG0170N. 4 Steps

Section GG	Fur	nctional Abilities and Goals
GG0170. Mobi	lity	
1. SOC/ROC Performance	2. Discharge Goal	N. 4 steps: The ability to go up and down four steps with or without a rai If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170F Picking up object.
, Enter ocues	TIT BOXES ;	M. W. H. 4504
		K. Walk 150 feet: Once standing, the ability to walk at least 150 feet in a corridor or similar space.
		<ul> <li>Walking 10 feet on uneven surfaces: The ability to walk 10 feet on uneven or sloping surfaces (indoor or outdoor), such as turf or gravel.</li> </ul>
		M. 1 step (curb): The ability to go up and down a curb and/or up and down one step.  If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170P,  Picking up object.
		N. 4 steps: The ability to go up and down four steps with or without a rail.  If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170P,  Picking up object.
		O. 12 steps: The ability to go up and down 12 steps with or without a rail.
		P. Picking up object: The ability to bend/stoop from a standing position to pick up a small object, such as a spoon, from the floor.
		<ul> <li>Q. Does patient use wheelchair and/or scooter?</li> <li>0. No → Skip GG0170R, GG0170RR1, GG0170S, and GG0170SS1.</li> <li>1. Yes → Continue to GG0170R, Wheel 50 feet with two turns.</li> </ul>
		R. Wheel 50 feet with two turns: Once seated in wheelchair/scooter, the ability to wheel at least 50 feet and make two turns.
		RR1.Indicate the type of wheelchair or scooter used.  1. Manual 2. Motorized
		S. Wheel 150 feet: Once seated in wheelchair/scooter, the ability to wheel at least 150 feet in a corridor or similar space.
		SS1. Indicate the type of wheelchair or scooter used.  1. Manual 2. Motorized



# **GG0170N Practice Coding Scenario 9**

#### 4 steps:

- At SOC, Mr. J has lower body weakness, and the physical therapist provides light touching assistance when he ascends 4 steps
- While descending 4 steps, the physical therapist faces the patient and descends the stairs, providing minimal trunk support, with one hand on the patient's hip and the other holding the gait belt, as Mr. J holds the stair railing



## How would you code GG0170N SOC/ROC Performance?

- A. Code **05**, Setup or clean-up assistance
- B. Code **04**, Supervision or touching assistance
- C. Code 03, Partial/moderate assistance
- D. Code **02**, Substantial/maximal assistance





### GG01700. 12 Steps

Section GG		nctional Abilities and Goals	
GG0170. Mobi	lity		_
1. SOC/ROC	2. Discharge	O. 12 steps: The ability to go up and down 12 steps with or without a rail.	
Performance	Goal		
↓ Enter Codes	in Boxes ↓		
		K. Walk 150 feet: Once standing, the ability to walk at least 150 feet in a corridor or similar space.	
		L. Walking 10 feet on uneven surfaces: The ability to walk 10 feet on uneven or sloping surfaces (indoor or outdoor), such as turf or gravel.	
		M. 1 step (curb): The ability to go up and down a curb and/or up and down one step.  If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170P, Picking up object.	
		N. 4 steps: The ability to go up and down four steps with or without a rail.  If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170P,  Picking up object.	
		O. 12 steps: The ability to go up and down 12 steps with or without a rail.	
		P. Picking up object: The ability to bend/stoop from a standing position to pick up a small object, such as a spoon, from the floor.	
		<ul> <li>Q. Does patient use wheelchair and/or scooter?</li> <li>0. No → Skip GG0170R, GG0170R1, GG0170S, and GG0170SS1.</li> <li>1. Yes → Continue to GG0170R, Wheel 50 feet with two turns.</li> </ul>	
		R. Wheel 50 feet with two turns: Once seated in wheelchair/scooter, the ability to wheel at least 50 feet and make two turns.	
		RR1.Indicate the type of wheelchair or scooter used.  1. Manual 2. Motorized	
		S. Wheel 150 feet: Once seated in wheelchair/scooter, the ability to wheel at least 150 feet in a corridor or similar space.	
		SS1. Indicate the type of wheelchair or scooter used.  1. Manual 2. Motorized	



# GG0170N-O "Steps" Coding Tip



If at the time of the assessment the patient is unable to complete the activity due to a physician prescribed restriction (for instance, no stair climbing for 2 weeks), but could perform this activity prior to the current illness, exacerbation or injury, code 88, Not attempted due to medical conditions or safety concern



### GG0170P. Picking up Object

Section GG	Fur	ctio	nal Abilities and Goals	
GG0170. Mobi	lity			
1.	2.	Р.	<b>Picking up object</b> : The ability to bend/stoop from a stand	ling position to pick
SOC/ROC Performance	Discharge Goal	_	up a small object, such as a spoon, from the floor.	
↓ Enter Codes	in Boxes ↓			
		K.	Walk 150 feet: Once standing, the ability to walk at least 150 feet in a corridor or similar space.	
		L.	Walking 10 feet on uneven surfaces: The ability to walk 10 feet on uneven or sloping surfaces (indoor or outdoor), such as turf or gravel.	
		M.	1 step (curb): The ability to go up and down a curb and/or up and down one step.  If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170P, Picking up object.	
		N.	4 steps: The ability to go up and down four steps with or without a rail.  If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170P,  Picking up object.	
		0.	12 steps: The ability to go up and down 12 steps with or without a rail.	
		P.	Picking up object: The ability to bend/stoop from a standing position to pick up a small object, such as a spoon, from the floor.	
			<ul> <li>Q. Does patient use wheelchair and/or scooter?</li> <li>0. No → Skip GG0170R, GG0170RR1, GG0170S, and GG0170SS1.</li> <li>1. Yes → Continue to GG0170R, Wheel 50 feet with two turns.</li> </ul>	
			Wheel 50 feet with two turns: Once seated in wheelchair/scooter, the ability wheel at least 50 feet and make two turns.	
			RR1.Indicate the type of wheelchair or scooter used.  1. Manual  2. Motorized	
		S.	Wheel 150 feet: Once seated in wheelchair/scooter, the ability to wheel at least 150 feet in a corridor or similar space.	
			SS1. Indicate the type of wheelchair or scooter used.  1. Manual 2. Motorized	



# GG0170P. Picking up Object Coding Tip



If at the time of the assessment the patient is unable to complete the activity (for instance, is unable to stand), and could not stand to perform this activity prior to the current illness, exacerbation or injury, code 09, Not applicable



# **GG0170P Practice Coding Scenario 10**

#### Picking up object:

- Ms. C has recently undergone a hip replacement
- At SOC, she walks with a walker without assistance. When she drops a hair brush from her walker basket, she asks her daughter to locate her long-handled reacher and bring it to her
- Using the reacher, Mrs. C is able to bend slightly, and safely pick up the hair brush with the reacher, without need of additional assistance or verbal cues



## How would you code GG0170P SOC/ROC Performance?

- A. Code **05**, Setup or clean-up assistance
- B. Code **04**, Supervision or touching assistance
- C. Code 03, Partial/moderate assistance
- D. Code **02**, Substantial/maximal assistance





## GG0170Q. Does the Patient Use a Wheelchair and/or Scooter?

Section GG	Fur	nctional Abilities and Goals	
GG0170. Mobi	lity		
1. SOC/ROC Performance	2. Discharge Goal	<ul> <li>Q. Does patient use wheelchair and/or scooter?</li> <li>0. No → Skip GG0170R, GG0170RR1, GG0170S, and GG0170S</li> </ul>	S1.
↓ Enter Codes	in Boxes ↓	<ol> <li>Yes → Continue to GG0170R, Wheel 50 feet with two turns.</li> </ol>	
		K. Walk 150 feet: Once standing, the ability to walk at least 150 feet in a corridor or similar space.	
		L. Walking 10 feet on uneven surfaces: The ability to walk 10 feet on uneven or sloping surfaces (indoor or outdoor), such as turf or gravel.	
		M. 1 step (curb): The ability to go up and down a curb and/or up and down one step.  If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170P, Picking up object.	
		N. 4 steps: The ability to go up and down four steps with or without a rail.  If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170P,  Picking up object.	
		O. 12 steps: The ability to go up and down 12 steps with or without a rail.	
		P. Picking up object: The ability to bend/stoop from a standing position to pick up a small object, such as a spoon, from the floor.	
		<ul> <li>Q. Does patient use wheelchair and/or scooter?</li> <li>0. No → Skip GG0170R, GG0170RR1, GG0170S, and GG0170SS1.</li> <li>1. Yes → Continue to GG0170R, Wheel 50 feet with two turns.</li> </ul>	
		R. Wheel 50 feet with two turns: Once seated in wheelchair/scooter, the ability to wheel at least 50 feet and make two turns.	
		RR1.Indicate the type of wheelchair or scooter used.  1. Manual 2. Motorized	
		S. Wheel 150 feet: Once seated in wheelchair/scooter, the ability to wheel at least 150 feet in a corridor or similar space.	
		SS1. Indicate the type of wheelchair or scooter used.  1. Manual 2. Motorized	



## GG0170Q. Does the Patient Use a Wheelchair/Scooter? Coding Tips

- Use clinical judgment to determine if the patient's use of a wheelchair is for self-mobilization due to the patient's medical condition or safety
- If the patient is ambulatory and is not learning how to mobilize in a wheelchair, and only uses a wheelchair for transport within a larger living facility (assisted living facility or apartment complex), or for community mobility outside the home (for instance to a physician appointment or to dialysis), enter code 0 – No for GG0170Q Does the patient use a wheelchair/scooter, and skip all remaining wheelchair questions

#### GG0170R. Wheel 50 Feet With Two Turns

Section GG	Fur	nctional Abilities and Goals
GG0170. Mobi		
1. SOC/ROC Performance	2. Discharge Goal	R. Wheel 50 feet with two turns: Once seated in wheelchair/scooter, the ability to wheel at least 50 feet and make two turns.
↓ Enter Codes	in Boxes ↓	
		K. Walk 150 feet: Once standing, the ability to walk at least 150 feet in a corridor or similar space.
		L. Walking 10 feet on uneven surfaces: The ability to walk 10 feet on uneven or sloping surfaces (indoor or outdoor), such as turf or gravel.
		M. 1 step (curb): The ability to go up and down a curb and/or up and down one step.  If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170P, Picking up object.
		N. 4 steps: The ability to go up and down four steps with or without a rail.  If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170P,  Picking up object.
		O. 12 steps: The ability to go up and down 12 steps with or without a rail.
		P. Picking up object: The ability to bend/stoop from a standing position to pick up a small object, such as a spoon, from the floor.
		Q. Does patient use wheelchair and/or scooter?  0. No → Skip GG0170R, GG0170R1, GG0170S, and GG0170SS1.  1. Yes → Continue to GG0170R, Wheel 50 feet with two turns.
		R. Wheel 50 feet with two turns: Once seated in wheelchair/scooter, the ability to wheel at least 50 feet and make two turns.
		RR1.Indicate the type of wheelchair or scooter used.  1. Manual 2. Motorized
		S. Wheel 150 feet: Once seated in wheelchair/scooter, the ability to wheel at least 150 feet in a corridor or similar space.
		SS1. Indicate the type of wheelchair or scooter used.  1. Manual 2. Motorized



# GG0170R. Wheel 50 Feet With Two Turns Coding Tips



- The turns are 90-degree turns and may be:
  - In the same direction (two 90-degree turns to the right or two 90-degree turns to the left)
  - In different directions (one 90-degree turn to the right and one 90-degree turn to the left)
- The 90-degree turns should occur at the patient's ability level (i.e., not jeopardizing patient safety)



## GG0170RR1 and GG0170SS1. Indicate the Type of Wheelchair and/or Scooter Used

Section GG		onal Abilities and Goals	
1. SOC/ROC Performance	2. Discharge Goal	RR1. Indicate the type of wheelchair or scooter used.  1. Manual	
↓ Enter Codes	in Boxes ↓	2. Motorized	
		Walk 150 feet: Once standing, the ability to walk at least 150 feet in a corridor or similar space.	
		Walking 10 feet on uneven surfaces: The ability to walk 10 feet on uneven or sloping surfaces (indoor or outdoor), such as turf or gravel.  Section GG Functional Abilities and Goals  GG0170. Mobility	
		1 step (curb): The ability to go up and down a curb and/or up and down one step.  If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170P, Picking up object.  1. Soc/ROC Discharge Goal  I Enter Codes in Boxes 1  SS1. Indicate the type of wheelchair or scooter use.  1. Manual  2. Motorized	sed.
		4 steps: The ability to go up and down four steps with or without a rail.  If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170P,  Picking up object.  K. Walk 150 feet: Once standing, the ability to walk at least 150 feet in a corridor or similar space.	_
		12 steps: The ability to go up and down 12 steps with or without a rail.  L. Walking 10 feet on uneven or sloping surfaces: The ability to walk 10 feet on uneven or sloping surfaces (indoor or outdoor), such as turf or gravet.	
		Picking up object: The ability to bend/stoop from a standing position to pick up a small object, such as a spoon, from the floor.  M. 1 step (curb): The ability to go up and down a curb and/or up and down one step.  If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170P.	
		Q. Does patient use wheelchair and/or scooter?  O. No → Skip GG0170R, GG0170R1, GG0170S, and GG0170SS1  1. Yes → Continue to GG0170R, Wheel 50 feet with two turns.  Wheel 50 feet with two turns: Once seated in wheelchair/scooter, the ability wheel at least 50 feet and make two turns.	
		RR1.Indicate the type of wheelchair or scooter used.  1. Manual 2. Motorized  O. 12 steps: The ability to go up and down 12 steps with or without a rail.  P. Picking up object: The ability to bend/stoop from a standing position to pick up a small object, such as a spoon, from the floor.	
		Wheel 150 feet: Once seated in wheelchair/scooter, the ability to wheel at least 150 feet in a corridor or similar space.  SS1. Indicate the type of wheelchair or scooter used.  Q. Does patient use wheelchair and/or scooter?  0. No → Skip GG0170R, GG0170RR1, GG0170S, and GG0170SS1.  1. Yes → Continue to GG0170R, Wheel 50 feet with two turns.	
		1. Manual 2. Motorized  R. Wheel 50 feet with two turns: Once seated in wheelchair/scooter, the ability to wheel at least 50 feet and make two turns.	
		RR1. Indicate the type of wheelchair or scooter used.  1. Manual 2. Motorized	
		S. Wheel 150 feet: Once seated in wheelchair/scooter, the ability to wheel at least 150 feet in a corridor or similar space.	
		SS1. Indicate the type of wheelchair or scooter used.  1. Manual 2. Motorized	



### GG0170S. Wheel 150 Feet

Section GG	Fun	ctional Abilities and Goals	
GG0170. Mobi	lity		
1. SOC/ROC Performance	2. Discharge Goal	S. Wheel 150 feet: Once seated in wheelchair/scooter, the a least 150 feet in a corridor or similar space.	ibility to wheel at
↓ Enter Codes in Boxes ↓			
		K. Walk 150 feet: Once standing, the ability to walk at least 150 feet in a corridor or similar space.	
		L. Walking 10 feet on uneven or sloping surfaces (indoor or outdoor), such as turf or gravel.	
		M. 1 step (curb): The ability to go up and down a curb and/or up and down one step.  If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170P, Picking up object.	
		N. 4 steps: The ability to go up and down four steps with or without a rail.  If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170P,  Picking up object.	
		O. 12 steps: The abi <mark>lity to go up and dow</mark> n 12 steps with or without a rail.	
		P. Picking up object: The ability to bend/stoop from a standing position to pick up a small object, such as a spoon, from the floor.	
		Q. Does patient use wheelchair and/or scooter?  0. No → Skip GG0170R, GG0170RR1, GG0170S, and GG0170SS1.  1. Yes → Continue to GG0170R, Wheel 50 feet with two turns.	
		R. Wheel 50 feet with two turns: Once seated in wheelchair/scooter, the ability to wheel at least 50 feet and make two turns.	
		RR1.Indicate the type of wheelchair or scooter used.  1. Manual 2. Motorized	
		S. Wheel 150 feet: Once seated in wheelchair/scooter, the ability to wheel at least 150 feet in a corridor or similar space.	
		SS1. Indicate the type of wheelchair or scooter used.  1. Manual 2. Motorized	



# GG0170S. Wheel 150 Feet Coding Tip



If the patient's environment does not accommodate wheelchair/scooter use of 150 feet without turns, but the patient demonstrates the ability to mobilize the wheelchair/scooter with or without assistance 150 feet with turns without jeopardizing the patient's safety, code using the 6point scale



# **GG0170S Practice Coding Scenario 11**

#### Wheel 150 feet:

- Mr. N uses a below-the-knee prosthetic limb. Mr. N has peripheral neuropathy and limited vision due to complications of diabetes
- Via observation and patient report, the assessing clinician determines that Mr. N's usual performance is that a helper is needed to provide verbal cues for safety due to vision deficits, and the patient mobilizes his manual wheelchair a distance of 150 feet within his home



## How would you code GG0170S SOC/ROC Performance?

- A. Code **06**, Independent
- B. Code **05**, Setup or clean-up assistance
- C. Code **04**, Supervision or touching assistance
- D. Code 03, Partial/moderate assistance





#### Summary



- Section GG assesses the need for assistance with self-care and mobility activities
- Added to OASIS-D for standardization and alignment with other PAC settings
- Section GG items are different from M-Items
- GG0130 and GG0170:
  - Use a 6-level rating scale and "activity was not attempted" codes
  - Include Performance assessment and Discharge
     Goal(s) at SOC/ROC

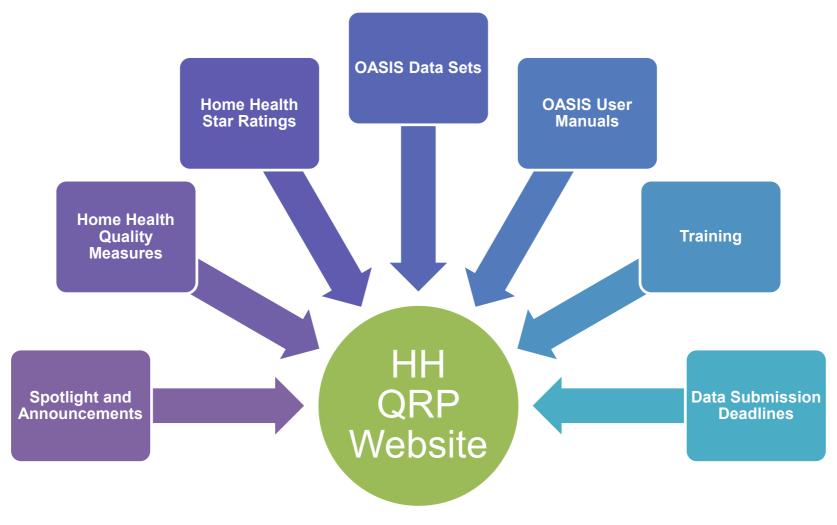




## Training and Resources

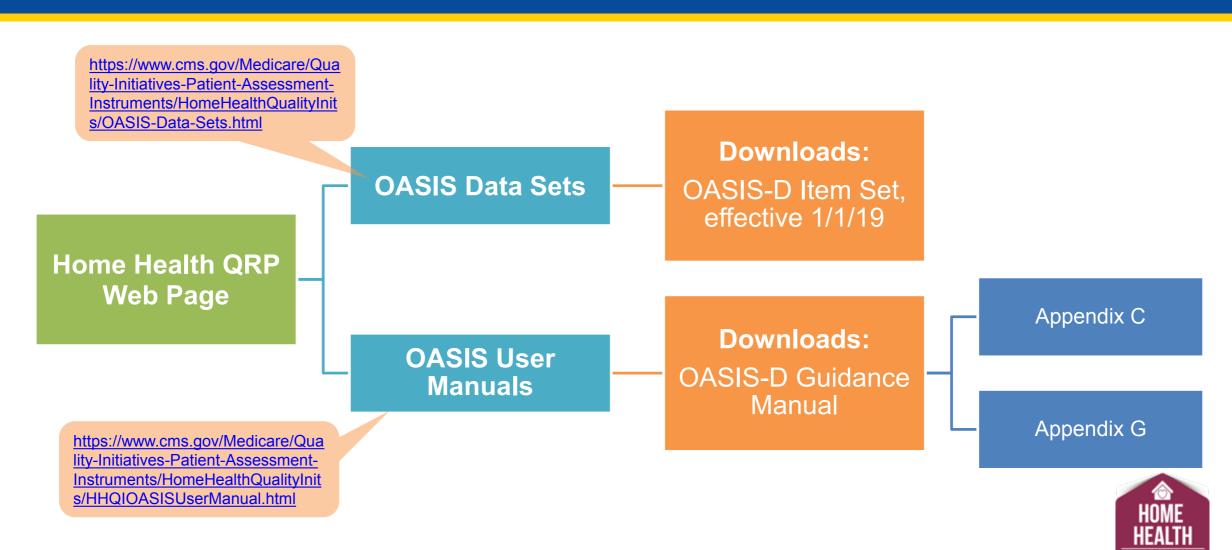


#### HH Quality Reporting Program (QRP) Website





#### OASIS-D Item Set and Guidance Manual



Home Health: OASIS-D | Section GG | August 2018

#### **OASIS Educational Coordinators**

 Each State has a designated OASIS Educational Coordinator with the responsibility to ensure that all home care providers have access to:

Training in the OASIS data set administration for assessing patients

Training and technical support in integrating the OASIS items in the agency's record-keeping system

Technical support in answering questions on the clinical aspects of OASIS

#### **Find your OASIS Education Coordinator:**

https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/OASIS/downloads/OASISeducationalcoordinators.pdf



#### Help Desks

For HH QRP and OASIS
Guidance related
questions

Home Health Quality

homehealthqualityquestions@cms .hhs.gov

**Help Desk** 

For Condition of Participation related questions

Home Health Agency
Survey Protocols Mailbox

hhasurveyprotocols@cms.hhs.gov

For Home Health
Prospective Payment
System (PPS) Payment
Policy questions

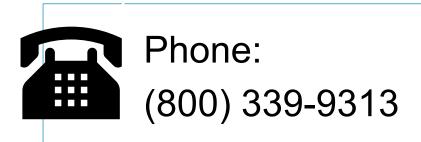
Home Health Policy Mailbox

HomehealthPolicy@cms.hhs.gov



### **Technical Help Desk**

 Data Submission & Certification and Survey Provider Enhancement Reports (CASPER): Quality Improvement and Evaluation System (QIES) Technical Support Office (QTSO) Help Desk





Email:

help@qtso.com





### Help Desk Disclaimer

- Please do not send any identifiable patient information through email, such as:
  - Medical record numbers
  - Dates of birth
  - Service dates (including visit dates, admission dates, or discharge dates)
  - Any other data items considered identifiers or protected health information



### Rulemaking

- Proposed Rules and Final Rules are published in the Federal Register and typically released each year in July and November
- Proposed and Final Rules are posted on this web page:
  - https://www.federalregister.gov/agencies/centers-for-medicaremedicaid-services



# Stay Connected: Medicare Learning Network (MLN)



- Free educational materials for healthcare professionals on CMS programs, policies, and initiatives:
  - https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNGenInfo/Index.html
- Subscribe to MLN Connects weekly email newsletter for healthcare professionals:
  - https://public.govdelivery.com/accounts/US
     CMS/subscriber/new

## Stay Connected: Home Health, Hospice & Durable Medical Equipment Open Door Forum

- The Home Health, Hospice & Durable Medical Equipment Open Door Forum addresses the concerns of three unique health care areas within the Medicare & Medicaid programs
- Issues related to Home Health PPS, the newly proposed competitive bidding for Durable Medical Equipment and the Medicare Hospice benefit are all topics the forum has covered:
  - https://www.cms.gov/Outreach-and Education/Outreach/OpenDoorForums/ODF\_HHHDME.html
- Subscribe to the email newsletter:
  - https://public.govdelivery.com/accounts/USCMS/subscriber/new?topic\_id=USCMS\_ 502



### **OASIS-D Training Opportunities**

Presentation and recording will be posted on the CMS website

 Introduction to OASIS-D Webinar

August 28, 2018

September 5, 2018

 Introduction to OASIS-D Section GG Webinar Q&A
 Teleconference

Anticipated October/November 2018 Webcast available!

Anticipated October/November 2018

 In-Person Home Health Provider Training, Baltimore, MD



### **Training Information and Updates**

#### **Spotlight and Announcements**

 https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/HomeHealthQualityInits/Spotlight-and-Announcements.html

#### Home Health Quality Reporting Training

 https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/HomeHealthQualityInits/Home-Health-Quality-Reporting-Training.html







