



# IRF and LTCH Virtual Training Program – Part 1

## Section GG: Summary of Guidance Changes

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# Objectives

- Identify the Section GG items where a change in the data element and/or guidance has occurred.
- Discuss guidance changes for Section GG standardized data elements.



# GG0100. Prior Functioning and GG0110. Prior Device Use

# GG0100. Prior Functioning Item Changes

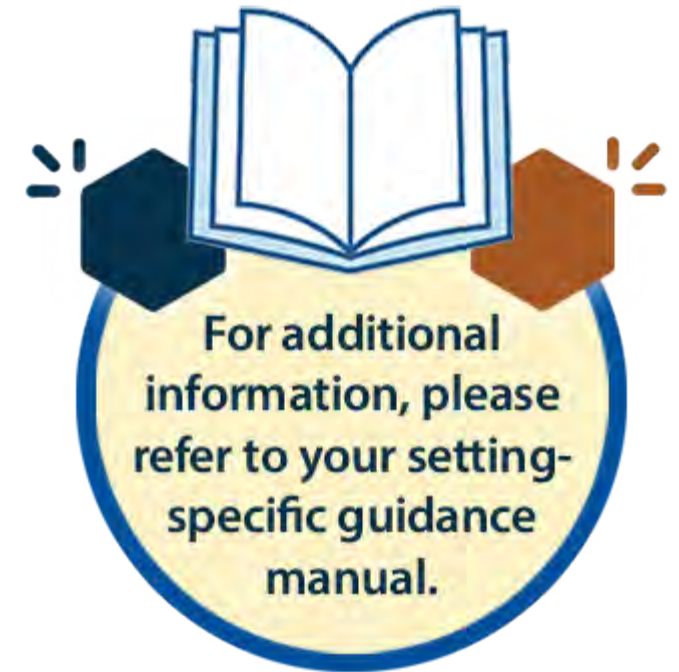


- Updated to include gender-neutral language.
- Removed “or” and replaced with “and” for clarity and standardization.

GG0100. Prior Functioning: Everyday Activities. Indicate the patient's usual ability with everyday activities prior to the current illness, exacerbation, or injury.	
<b>Coding:</b> 3. <b>Independent</b> - Patient completed all the activities by themselves, with or without an assistive device, with no assistance from a helper. 2. <b>Needed Some Help</b> - Patient needed partial assistance from another person to complete any activities. 1. <b>Dependent</b> - A helper completed all the activities for the patient. 8. <b>Unknown</b> 9. <b>Not Applicable</b>	<b>↓ Enter Codes in Boxes</b>
	<input type="text"/> <b>A. Self-Care:</b> Code the patient's need for assistance with bathing, dressing, using the toilet, and eating prior to the current illness, exacerbation, or injury.
	<input type="text"/> <b>B. Indoor Mobility (Ambulation):</b> 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.
	<input type="text"/> <b>C. Stairs:</b> 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.
	<input type="text"/> <b>D. Functional Cognition:</b> 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.

# Revisions to GG0100. Prior Functioning Coding Instructions

- **Code 3, Independent**, if the patient completed **all** the activities by themselves 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 any** activities.
- **Code 1, Dependent**, if the helper completed **all** the activities for the patient, or the assistance of two or more helpers was required for the patient to complete the activities.
- **Code 8, Unknown**, if the patient's **usual ability** prior to the current illness, exacerbation, or injury is unknown.





# GG0110. Prior Device Use

- Coding instructions added/emphasized for both settings:
  - Complete during the 3-day admission assessment period.
  - Check all devices that apply.

**GG0110. Prior Device Use.** Indicate devices and aids used by the patient prior to the current illness, exacerbation, or injury.

↓ Check all that apply

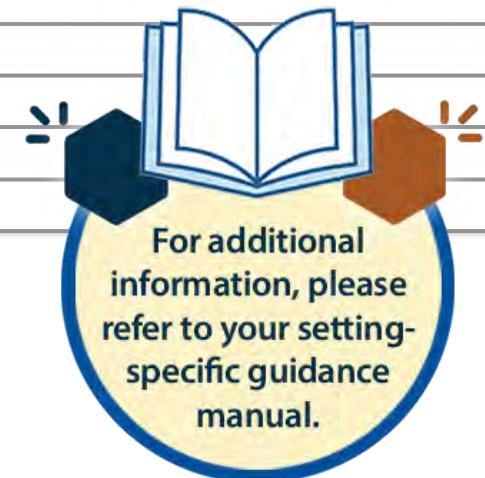
<input type="checkbox"/>	A. Manual wheelchair
<input type="checkbox"/>	B. Motorized wheelchair and/or scooter
<input type="checkbox"/>	C. Mechanical lift
<input type="checkbox"/>	D. Walker
<input type="checkbox"/>	E. Orthotics/Prosthetics
<input type="checkbox"/>	Z. None of the above



**GG0110. Prior Device Use.** Indicate devices and aids used by the patient prior to the current illness, exacerbation, or injury.

↓ Check all that apply

<input type="checkbox"/>	A. Manual wheelchair
<input type="checkbox"/>	B. Motorized wheelchair and/or scooter
<input type="checkbox"/>	C. Mechanical lift
<input type="checkbox"/>	Z. None of the above



# **GG0130. Self-Care and GG0170. Mobility Items**

# Overview of Changes for GG0130 and GG0170

- Item rationale clarified.
- Steps for assessment revised.
- New and revised definitions.
- Coding instructions include new examples.
- Decision tree instructions clarified.
- New coding tips added.
- Examples revised to include gender-neutral language and examples of probing conversations.





# GG0130. Self-Care for IRF

Section GG	Functional Abilities and Goals
GG0130. Self-Care (3-day assessment period)	
Code the patient's usual performance at admission for each activity using the 6-point scale. If activity was not attempted at admission, code the reason. Code the patient's discharge goal(s) using the 6-point scale. Use of codes 07, 09, 10, or 88 is permissible to code discharge goal(s).	
<b>Coding:</b> <b>Safety and Quality of Performance</b> - If helper assistance is required because patient's performance is unsafe or amount of assistance provided. <i>Activities may be completed with or without assistive devices.</i> 06. <b>Independent</b> - Patient completes the activity by themselves with no assistance from a helper. 05. <b>Setup or clean-up assistance</b> - Helper sets up or cleans up; patient completes activity. Helper assists only 04. <b>Supervision or touching assistance</b> - Helper provides verbal cues and/or touching/steadying and/or contact to complete activity. Assistance may be provided throughout the activity or intermittently. 03. <b>Partial/moderate assistance</b> - Helper does LESS THAN HALF the effort. Helper lifts, holds or supports trunk or limb for half the effort. 02. <b>Substantial/maximal assistance</b> - Helper does MORE THAN HALF the effort. Helper lifts or holds trunk or limb for more than half the effort. 01. <b>Dependent</b> - Helper does ALL of the effort. Patient does none of the effort to complete the activity. Or, the assistance is required for the patient to complete the activity.  <b>If activity was not attempted, code reason:</b> 07. <b>Patient refused</b> 09. <b>Not applicable</b> - Not attempted and the patient did not perform this activity prior to the current illness, exam, or procedure. 10. <b>Not attempted due to environmental limitations</b> (e.g., lack of equipment, weather constraints) 88. <b>Not attempted due to medical condition or safety concerns</b>	

1. Admission Performance	2. Discharge Goal	
↓ Enter Codes in Boxes ↓		
<input type="text"/>	<input type="text"/>	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.
<input type="text"/>	<input type="text"/>	B. <b>Oral hygiene:</b> The ability to use suitable items to clean teeth. Dentures (if applicable): The ability to insert and remove dentures into and from the mouth, and manage denture soaking and rinsing with use of equipment.
<input type="text"/>	<input type="text"/>	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.
<input type="text"/>	<input type="text"/>	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.
<input type="text"/>	<input type="text"/>	F. <b>Upper body dressing:</b> The ability to dress and undress above the waist; including fasteners, if applicable.
<input type="text"/>	<input type="text"/>	G. <b>Lower body dressing:</b> The ability to dress and undress below the waist, including fasteners; does not include footwear.
<input type="text"/>	<input type="text"/>	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. Self-Care for LTCH


Section GG	Functional Abilities and Goals		
GG0130. Self-Care (3-day assessment period)			
Code the patient's usual performance at admission for each activity using the 6-point scale. If activity was not attempted at admission, code the reason. Code the patient's discharge goal(s) using the 6-point scale. Use of codes 07, 09, 10, or 88 is permissible to code discharge goal(s).			
<b>Coding:</b> <b>Safety and Quality of Performance</b> - If helper assistance is required because patient's performance is unsafe or of poor quality, score according to amount of assistance provided. <i>Activities may be completed with or without assistive devices.</i> 06. <b>Independent</b> - Patient completes the activity by themselves with no assistance from a helper. 05. <b>Setup or clean-up assistance</b> - Helper sets up or cleans up; patient completes activity. Helper assists only prior to or following the activity. 04. <b>Supervision or touching assistance</b> - Helper provides verbal cues and/or touching/steadying and/or contact guard assistance as patient completes activity. Assistance may be provided throughout the activity or intermittently. 03. <b>Partial/moderate assistance</b> - Helper does LESS THAN HALF the effort. Helper does MORE THAN HALF the effort. 02. <b>Substantial/maximal assistance</b> - Helper does MORE THAN HALF the effort. Helper does LESS THAN HALF the effort. 01. <b>Dependent</b> - Helper does ALL of the effort. Patient does none of the effort to complete the activity.			
	1. Admission Performance	2. Discharge Goal	
	↓ Enter Codes in Boxes ↓		
	<input type="text"/>	<input type="text"/>	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.
	<input type="text"/>	<input type="text"/>	B. <b>Oral hygiene:</b> The ability to use suitable items to clean teeth. Dentures (if applicable): The ability to insert and remove dentures into and from the mouth, and manage denture soaking and rinsing with use of equipment.
	<input type="text"/>	<input type="text"/>	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.
	<input type="text"/>	<input type="text"/>	D. <b>Wash upper body:</b> The ability to wash, rinse, and dry the face, hands, chest, and arms while sitting in a chair or bed.
<b>If activity was not attempted, code reason:</b> 07. <b>Patient refused</b> 09. <b>Not applicable</b> – Not attempted and the patient did not perform this activity. 10. <b>Not attempted due to environmental limitations</b> (e.g., lack of equipment) 88. <b>Not attempted due to medical condition or safety concerns</b>			



# GG0170. Mobility

Section GG	Functional Abilities and Goals		
GG0170. Mobility (3-day assessment period)			
Code the patient's usual performance at admission for each activity using the 6-point scale. If activity was not attempted at admission, code the reason. Code the patient's discharge goal(s) using the 6-point scale. Us permissible to code discharge goal(s).			
<p><b>Coding:</b></p> <p><b>Safety and Quality of Performance</b> - If helper assistance is required because patient's performance is unsafe amount of assistance provided.</p> <p><i>Activities may be completed with or without assistive devices.</i></p> <p>06. <b>Independent</b> - Patient completes the activity by themselves with no assistance from a helper.</p> <p>05. <b>Setup or clean-up assistance</b> - Helper sets up or cleans up; patient completes activity. Helper assists</p> <p>04. <b>Supervision or touching assistance</b> - Helper provides verbal cues and/or touching/steadying and/or completes activity. Assistance may be provided throughout the activity or intermittently.</p> <p>03. <b>Partial/moderate assistance</b> - Helper does LESS THAN HALF the effort. Helper lifts, holds or supports tr the effort.</p> <p>02. <b>Substantial/maximal assistance</b> - Helper does MORE THAN HALF the effort. Helper lifts or holds trunk effort.</p> <p>01. <b>Dependent</b> - Helper does ALL of the effort. Patient does none of the effort to complete the activity. Or, the required for the patient to complete the activity.</p> <p><b>If activity was not attempted, code reason:</b></p> <p>07. <b>Patient refused</b></p> <p>09. <b>Not applicable</b> - Not attempted and the patient did not perform this activity prior to the current illness.</p> <p>10. <b>Not attempted due to environmental limitations</b> (e.g., lack of equipment, weather constraints)</p> <p>88. <b>Not attempted due to medical condition or safety concerns</b></p>	1. Admission Performance	2. Discharge Goal	
	↓ Enter Codes in Boxes ↓		
			A. <b>Roll left and right:</b> 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. <b>Lying to sitting on side of bed:</b> The ability to move from lying on the back to sitting on the side of the bed with no back support.
			D. <b>Sit to stand:</b> The ability to come to a standing position from sitting in a chair, wheelchair, or on the side of the bed.
			E. <b>Chair/bed-to-chair transfer:</b> The ability to transfer to and from a bed to a chair (or wheelchair).
			F. <b>Toilet transfer:</b> The ability to get on and off a toilet or commode. <i>If admission performance is coded 07, 09, 10, or 88 → Skip to GG0170I, Walk 10 feet</i>
			G. <b>Car transfer:</b> 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. <b>Walk 10 feet:</b> Once standing, the ability to walk at least 10 feet in a room, corridor, or similar space. <i>If admission performance is coded 07, 09, 10, or 88 → Skip to GG0170M, 1 step (curb)</i>
			J. <b>Walk 50 feet with two turns:</b> Once standing, the ability to walk at least 50 feet and make two turns.
			K. <b>Walk 150 feet:</b> Once standing, the ability to walk at least 150 feet in a corridor or similar space.

# GG0170. Mobility (cont.)

Section GG	Functional Abilities and Goals	
GG0170. Mobility (3-day assessment period)	1. Admission Performance	2. Discharge Goal
Code the patient's usual performance at admission for each activity using the 6-point scale. admission, code the reason. Code the patient's discharge goal(s) using the 6-point scale. Use permissible to code discharge goal(s).	↓ Enter Codes in Boxes ↓	
<b>Coding:</b> <b>Safety and Quality of Performance</b> - If helper assistance is required because patient's performance is unsafe amount of assistance provided. <i>Activities may be completed with or without assistive devices.</i> 06. <b>Independent</b> - Patient completes the activity by themselves with no assistance from a helper. 05. <b>Setup or clean-up assistance</b> - Helper sets up or cleans up; patient completes activity. Helper assists. 04. <b>Supervision or touching assistance</b> - Helper provides verbal cues and/or touching/steadying and/or completes activity. Assistance may be provided throughout the activity or intermittently. 03. <b>Partial/moderate assistance</b> - Helper does LESS THAN HALF the effort. Helper lifts, holds or supports trunk effort. 02. <b>Substantial/maximal assistance</b> - Helper does MORE THAN HALF the effort. Helper lifts or holds trunk effort. 01. <b>Dependent</b> - Helper does ALL of the effort. Patient does none of the effort to complete the activity. Or, the required for the patient to complete the activity.  <b>If activity was not attempted, code reason:</b> 07. <b>Patient refused</b> 09. <b>Not applicable</b> - Not attempted and the patient did not perform this activity prior to the current illness. 10. <b>Not attempted due to environmental limitations</b> (e.g., lack of equipment, weather constraints) 88. <b>Not attempted due to medical condition or safety concerns</b>		
		<b>L. Walking 10 feet on uneven surfaces:</b> The ability to walk 10 feet on uneven or sloping surfaces (indoor or outdoor), such as turf or gravel.
		<b>M. 1 step (curb):</b> The ability to go up and down a curb or up and down one step. <i>If admission performance is coded 07, 09, 10, or 88 → Skip to GG0170P, Picking up object</i>
		<b>N. 4 steps:</b> The ability to go up and down four steps with or without a rail. <i>If admission performance is coded 07, 09, 10, or 88 → Skip to GG0170P, Picking up object</i>
		<b>O. 12 steps:</b> The ability to go up and down 12 steps with or without a rail.
		<b>P. Picking up object:</b> The ability to bend/stoop from a standing position to pick up a small object, such as a spoon, from the floor.
		<b>Q1. Does the patient use a wheelchair and/or scooter?</b> 0. <b>No</b> → Skip to H0350, Bladder Continence 1. <b>Yes</b> → Continue to GG0170R, Wheel 50 feet with two turns
		<b>R. Wheel 50 feet with two turns:</b> Once seated in wheelchair/scooter, the ability to wheel at least 50 feet and make two turns.
		<b>RR1. Indicate the type of wheelchair or scooter used.</b> 1. <b>Manual</b> 2. <b>Motorized</b>
		<b>S. Wheel 150 feet:</b> Once seated in wheelchair/scooter, the ability to wheel at least 150 feet in a corridor or similar space.
		<b>SS1. Indicate the type of wheelchair or scooter used.</b> 1. <b>Manual</b> 2. <b>Motorized</b>



# GG0130 and GG0170: Item Rationale

- Item rationale enhanced:
  - Patients in a PAC setting may have self-care **and mobility** limitations on admission and may be at risk of further functional decline during their stay.



# GG0130 and GG0170: Clarified Assessment Approach

- Allow the patient to complete each activity as independently as possible, as long as they are safe, regardless of how the patient performed the activity prior to the current illness, exacerbation, or injury.
  - Activities may be completed with or without an assistive device. ~~Use of assistive device(s) to complete an activity should not affect coding of the activity.~~
  - This includes the use of any new or previously utilized assistive device(s) or equipment.
  - Use of a device or equipment may result in the patient needing less assistance from a helper.





# GG0130 and GG0170: Performance

- Clarification to wording regarding patient performance:
  - If helper assistance is required because the patient's performance is unsafe or of poor quality, code based on the **type and** amount of assistance provided.



# GG0130 and GG0170: First Use of Assistive Device

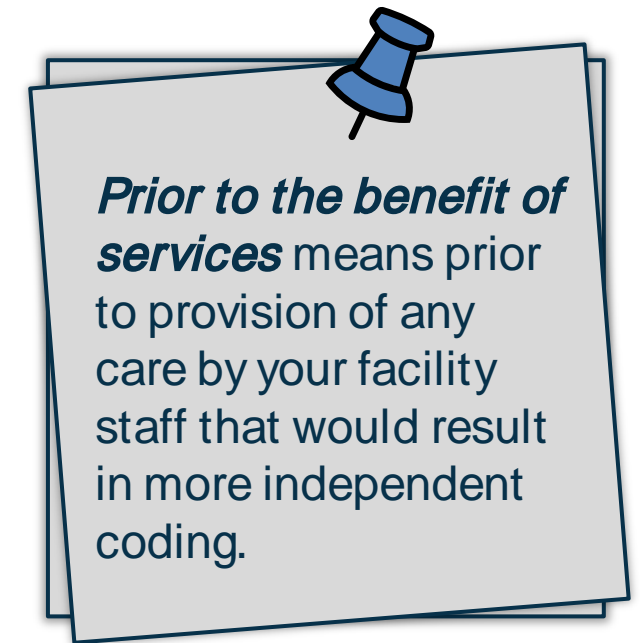


- The patient may be assessed based on the first use of an assistive device or equipment that has not been previously used.
  - The clinician would provide assistance, as needed, in order for the patient to complete the activity safely and code based on the type and amount of assistance required prior to the benefit of services provided by your facility staff.



# GG0130 and GG0170: Introducing a New Device

- Introducing a new device should not automatically be considered as “providing a service.”
  - Whether a device used during the clinical assessment is new to the patient or not, use clinical judgment to code based on the type and amount of assistance that is required for the patient to complete the activity prior to the benefit of services provided by your facility.



# GG0130 and GG0170: Completion of Activity

- If the patient was not able to complete an activity (e.g., go up and down the stairs) prior to the benefit of services and the performance code cannot be determined based on patient/caregiver report, collaboration with other facility staff, or assessment of similar activities, use the appropriate “activity not attempted” code.





# GG0130 and GG0170: Routine Performance of an Activity

- Assessment of the GG self-care and mobility items is based on the patient's ability to complete the activity with or without assistance and/or a device.
  - This is true regardless of whether or not the activity is being/will be routinely performed (e.g., walking may be assessed for a patient who did/does/will use a wheelchair as their primary mode of mobility, stair activities may be assessed for a patient not routinely accessing stairs).



# GG0130 and GG0170: Communicating Activity Requests

- Communicating an activity request to the patient (e.g., “*Can you stand up from the toilet?*”) would not be considered verbal cueing.
- If additional prompts are required in order for the patient to safely complete the activity (e.g., “*Push down on the grab bar,*”), the assessing clinician may need to use clinical judgment to determine the most appropriate code, utilizing the Section GG Decision Tree.





# GG0130 and GG0170: Code 06 and 05 Instructions

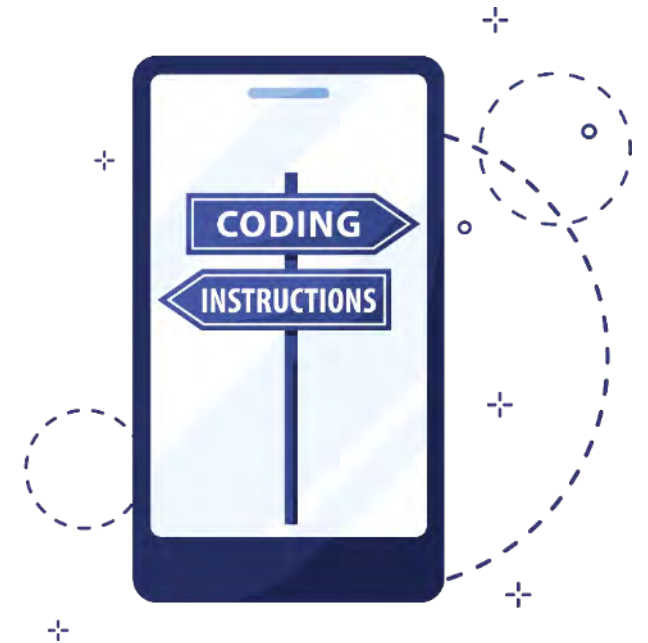
If admission assessment, complete as close to the time of admission as possible. If discharge assessment, complete as close to the time of discharge as possible.

- **Code 06, Independent**, if the patient completes the activity by themselves with no assistance from a helper.
- **Code 05, Setup or clean-up assistance**, if the helper sets up or cleans up and the patient completes the activity. The helper assists only prior to or following the activity, but not during the activity.
  - For example, the patient requires assistance cutting up food or opening a container, or requires setup of hygiene item(s) or **other** assistive device(s).



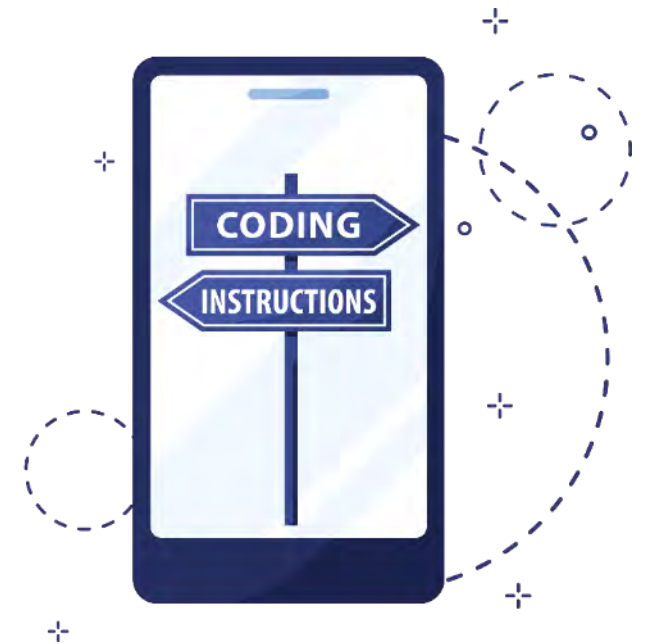
# GG0130 and GG0170: Code 04 Instructions

- **Code 04, Supervision or touching assistance**, if the helper provides verbal cues and/or touching/steadying and/or contact guard assistance as patient completes activity. Assistance may be provided throughout the activity or intermittently.
  - For example, the patient requires verbal cueing, coaxing, or general supervision for safety to complete **the** activity or the patient may require only **incidental help such as** contact guard or steadying assistance during the activity. **Code 04, Supervision or touching assistance** if the patient requires only verbal cueing to complete the activity safely.



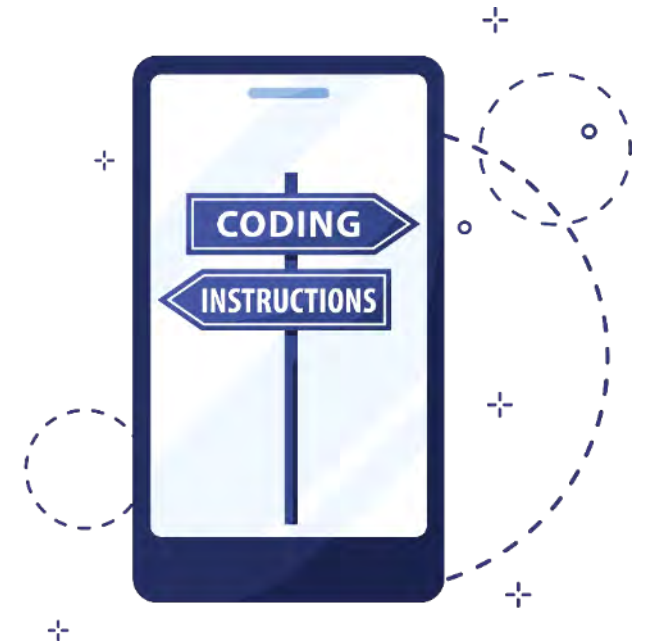
# GG0130 and GG0170: Code 03 and 02 Instructions

- **Code 03, Partial/moderate assistance**, if the helper does LESS THAN HALF the effort. Helper lifts, holds, or supports trunk or limbs, but provides less than half the effort. **For example, the patient requires minimal assistance from a helper to support partial weight-bearing during sit-to-stand.**
- **Code 02, Substantial/maximal assistance**, if the helper does MORE THAN HALF the effort. Helper lifts or holds trunk or limbs and provides more than half the effort. **For example, the patient is only able to wash their left arm and chest and requires a helper to complete all the remaining bath.**



# GG0130 and GG0170: Code 01 Instructions

- **Code 01, Dependent**, if the helper does ALL of the effort. Patient does none of the effort to complete the activity or the assistance of two or more helpers is required for the patient to complete the activity.
  - Code 01, Dependent, if two helpers are required for the safe completion of an activity, even if the second helper provides supervision/stand-by assist only and does not end up needing to provide hands-on assistance.
  - Code 01, Dependent, if a patient requires the assistance of two helpers to complete an activity (one to provide support to the patient and a second to manage the necessary equipment to allow the activity to be completed).



# GG0130 and GG0170: Using Not Attempted Codes



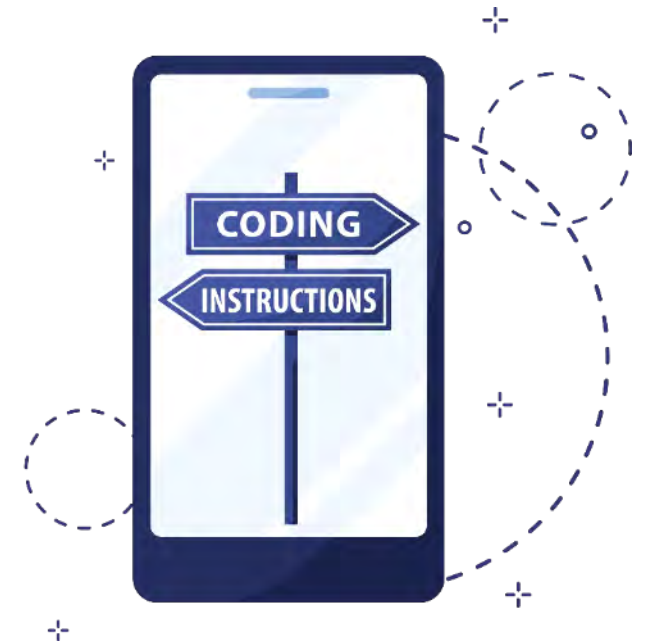
- Use of an “activity not attempted” code (07, 09, 10, or 88) should occur only after determining that an activity is not completed and the performance code cannot be determined based on:
  - Patient/caregiver report.
  - Collaboration with other facility staff.
  - Assessment of similar activities.





# GG0130 and GG0170: Activity Not Attempted Codes

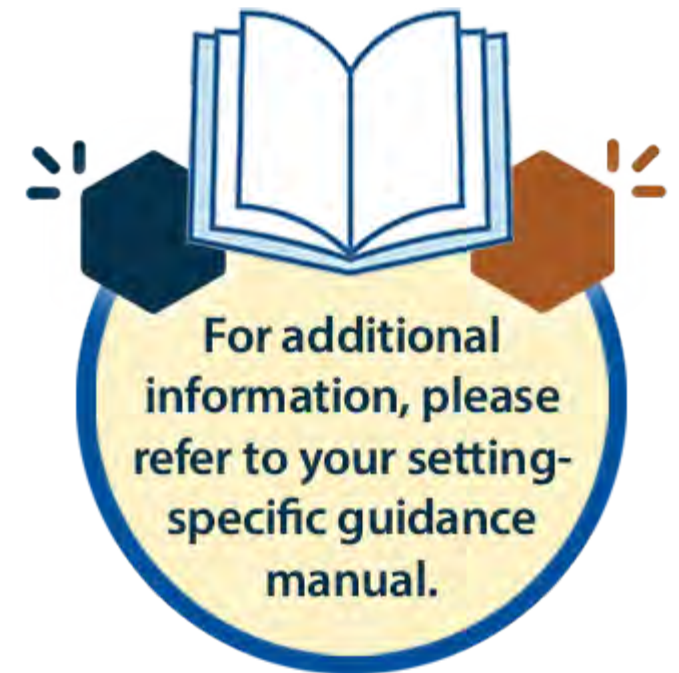
- **Code 07, Patient refused**, if the patient refused to complete the activity.
- **Code 09, Not applicable**, if the patient did not attempt to perform the activity and did not perform this activity prior to the current illness, exacerbation, or injury.
- **Code 10, Not attempted due to environmental limitations**, if the patient did not attempt this activity due to environmental limitations. Examples include lack of equipment, and weather constraints.
- **Code 88, Not attempted due to medical condition or safety concerns**, if the activity was not attempted due to medical condition or safety concerns, **but the patient could perform the activity prior to the current illness, exacerbation, or injury.**





# GG0130 and GG0170: Decision Tree Instructions

- Use this decision tree to code the patient's performance. If helper assistance is required because the patient's performance is unsafe or of poor quality, score according to the type and amount of assistance provided.
- Use of an “activity not attempted” code should occur only after determining that the activity is not completed, and the performance code cannot be determined based on patient/caregiver report, collaboration with other facility staff, or assessment of similar activities.



# GG0130 and GG0170: Partial Completion of Activity



- If the patient only completes a portion of the activity (e.g., performs a partial bath or transfers into but not out of a vehicle) and does not complete the entire activity during the assessment time period, use clinical judgment to determine if the situation allows the clinician to adequately assess the patient's ability to complete the activity.
  - If the clinician determines that this observation is adequate, code based on the type and amount of assistance the patient requires to complete the ENTIRE activity.
  - If the clinician determines the partial activity does not provide adequate information to support determination of a performance code, select an appropriate “activity not attempted” code.

# GG0130 and GG0170: General Coding Tips

A blue speech bubble icon with the words "CODING TIPS" in white capital letters.

## CODING TIPS

- When an activity is not completed entirely during one clinical observation (e.g., a patient transfers bed-to-chair in the morning, and transfers chair-to-bed at night), code based on the type and amount of assistance required to complete the ENTIRE activity.



# GG0130 and GG0170: Discharge Goal Coding



- Once a discharge goal is established on the IRF-PAI or LCDS, there is no need to update it if circumstances change or additional information becomes available either within or after the 3-day admission time period. However, the patient's care plan may need to be updated.
- If the performance of an activity was coded with an “activity not attempted” code during the admission assessment, a discharge goal may be coded using the 6-point scale if the patient is expected to be able to perform the activity by discharge.

1. Admission Performance	2. Discharge Goal
↓ Enter Codes in Boxes ↓	↓ Enter Codes in Boxes ↓
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
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# Changes to GG0130. Self-Care Items for IRF and LTCH

# GG0130A. Eating – New Guidance



- The intent of GG0130A. Eating is to assess the patient's 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.
  - Assistance with tube feedings or parenteral nutrition is not considered when coding GG0130A. Eating.
  - If a patient requires assistance (e.g., supervision or cueing) to swallow safely, code based on the type and amount of assistance required for feeding and safe swallowing.
  - If a patient swallows safely without assistance, exclude swallowing from consideration when coding GG0130A. Eating.



# GG0130A. Eating – New Guidance (cont.)

- If the patient eats finger foods using their hands, then code GG0130A. Eating based on the type and amount of assistance required. If the patient eats finger foods with their hands independently, for example, the patient would be coded as 06, Independent.
- For a patient taking only fluids by mouth, the item may be coded based on the ability to bring liquid to the mouth and swallow liquid, once the drink is placed in front of the patient.



# GG0130B. Oral Hygiene – New Guidance



- For a patient who is edentulous (without teeth), code GG0130B. Oral hygiene based on the type and amount of assistance required from a helper to clean the patient's gums.



# GG0130C. Toileting Hygiene – Clarified Guidance

- Toileting hygiene (managing clothing and perineal cleansing) takes place before and after use of the toilet, commode, bedpan, or urinal. If the patient completes a bowel toileting program in bed, code **GG0130C**. Toileting hygiene based on the patient's need for assistance for managing clothing and perineal cleansing. This **includes**:
  - Performing perineal hygiene.
  - Managing clothing (including undergarments and incontinence briefs) before and after voiding or having a bowel movement.
  - Adjusting clothing relevant to the individual patient.
- The toileting hygiene activity can be assessed and coded regardless of the patient's need to void or have a bowel movement at the time of the assessment.



# Changes to GG0130. Self-Care Items for IRF Only



# GG0130E. Shower/Bathe Self – Clarified Guidance



- Shower/bathe self does not include transferring in/out of a tub/shower or onto or off a tub bench.
- Assessment of shower/bathe self can take place in any location, including a shower or bathtub, at a sink, or in bed (i.e., full-body sponge bath). Bathing can be assessed with the patient seated on a tub bench.
- Code 05, Setup or clean-up assistance, if the patient can complete bathing tasks only after a helper retrieves or sets up supplies necessary to perform the included tasks.





# GG0130E. Shower/Bathe Self – New and Clarified Guidance



- **New Guidance:**
  - **Code 05, Setup or clean-up assistance**, if the only help a patient requires is assistance before the bathing activity to cover wounds or devices for water-protection during bathing.
  - Use clinical judgment to determine if completing a partial bath or simulating the shower/bath allows the clinician to adequately assess the patient's ability to complete the activity of shower/bathe self (GG0130E). If the clinician determines that this observation is adequate, code based on the type and amount of assistance required to complete the shower/bathing activity.
- **Revised Guidance:**
  - If the patient cannot bathe their entire body because of a medical condition (e.g., cast or a non-removable dressing), then code GG010E. Shower/bathe self based on the type and amount of assistance ~~needed~~ required to complete the activity.

# GG0130F. Upper Body Dressing, GG0130G. Lower Body Dressing, and GG0130H. Footwear



- **New Guidance:**
  - Consider an item that covers all or part of the foot as footwear, even if it extends up the leg, and do not also consider it as a lower body dressing item.
  - If the patient wears just shoes or just socks (e.g., grip socks) that are safe for mobility, then GG0130H. Putting on/taking off footwear may be coded.
- **Revised Guidance:**
  - If a patient requires assistance with dressing, including assistance with buttons, fasteners, and/or fastening a bra, code based on the type and amount of assistance required to complete the entire dressing activity.

Note: Additional coding tips were removed from the guidance. Review the IRF-PAI 4.0 for more information.

# Changes to GG0170. Mobility Items for IRF and LTCH

# New GG0170. Mobility Items for LTCH



- GG0170G. Car transfer.
- GG0170L. Walking 10 feet on uneven surfaces.
- GG0170M. 1 step (curb).
- GG0170N. 4 steps.
- GG0170O. 12 steps.
- GG0170P. Picking up object.

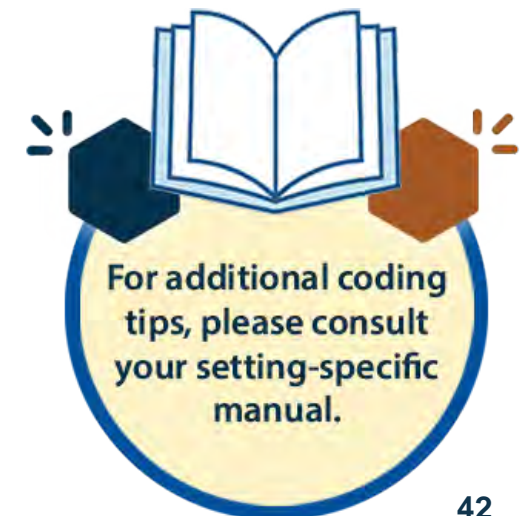
[Video Tutorial](#)

[Video Tutorial](#)

# GG0170: Bed Mobility Items – Clarified Guidance



- For GG0170A. Roll left and right, GG0170B. Sit to lying, and GG0170C. Lying to sitting on side of bed, 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 a patient.
- 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 condition or safety concerns.
  - For example, if a clinician determines that a patient’s new medical need requires that the patient sit in an upright sitting position rather than a slightly elevated position, then code GG0170A. Roll left and right as 88, Not attempted due to medical condition or safety concerns.





# GG0170A. Roll Left and Right – New and Clarified Guidance

- **New Guidance:** The activity includes the patient rolling to both the left and to the right while in a lying position, on their preferred or necessary sleeping surface.
- **Revised Guidance:** If the clinician determines that bed mobility cannot be assessed because of the degree to which the head of the bed must be elevated due to the patient's medical condition, code GG0170A, Roll left and right using the appropriate “activity not attempted” code.



# GG0170B. Sit to Lying – New and Clarified Guidance

- **New Guidance:**

- The activity includes the ability to move from sitting on side of bed to lying flat on the bed, or on their preferred or necessary sleeping surface.
- If the patient does not sleep in a bed, assess the patient's ability to move from sitting on the side of the patient's preferred or necessary sleeping surface to lying flat on the patient's preferred or necessary sleeping surface.

- **Revised Guidance:**

- If the clinician determines that bed mobility cannot be assessed because of the degree to which the head of the bed must be elevated because of a medical condition, then code the [activity](#) GG0170B. Sit to lying [using the appropriate “activity not attempted” code](#).



# GG0170C: Data Element Changes

## GG0170C. Lying to sitting on side of bed

Current version:

**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.

Revised version:

- Removed language/concept of “feet flat on floor” from item and guidance.

**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 no back support.

# GG0170D. Sit to Stand – New and Clarified Guidance

- **New Guidance:**

- The activity for GG0170D. Sit to stand includes the patient coming to a standing position from any sitting surface.
- Code 05, Setup or clean-up assistance, if the only help a patient requires to complete the sit to stand activity is for a helper to retrieve an assistive device or adaptive equipment, such as a walker or ankle foot orthosis.

- **Revised Guidance:**

- If a mechanical lift is used to assist in transferring a patient for a chair/bed-to-chair transfer, and **even with assistance** the patient is not able to complete the sit to stand activity, code GG0170D. Sit to stand **with the appropriate “activity not attempted” code**.
- If a sit to stand lift is used and **the patient requires the assistance of** two helpers to get from a sitting to standing position, code as 01, Dependent.

# GG0170E. Chair/Bed-to-Chair Transfer – New and Revised Guidance

- **New Guidance:**

- Depending on the patient's abilities, the transfer may be a stand-pivot, squat-pivot, or a slide board transfer.
- When possible, the transfer should be assessed in an environmental situation where taking more than a few steps would not be necessary to complete the transfer.
- If the patient uses a recliner as the patient's "bed" (preferred or necessary sleeping surface), assess the patient's need for assistance using that sleeping surface when coding GG0170E. Chair/bed-to-chair transfer.

- **Revised Guidance:**

- When assessing the patient getting out of bed, the assessment begins with the patient sitting at the edge of the bed (or alternative sleeping surface) and ends with the patient sitting in a chair or wheelchair.



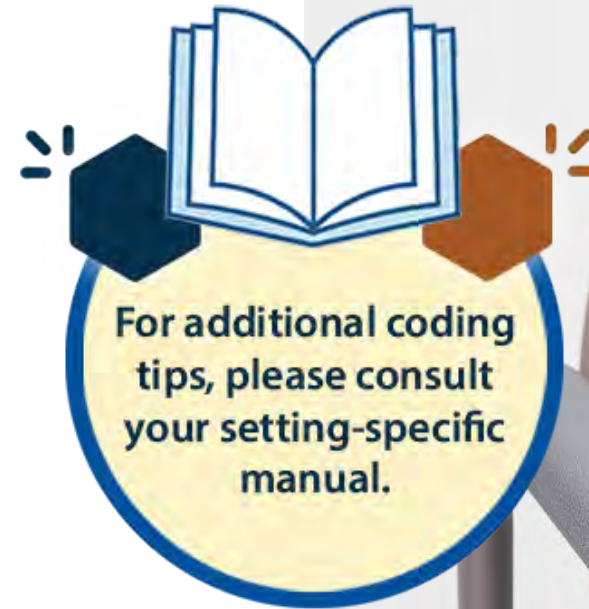
# GG0170F. Toilet Transfer – New and Clarified Guidance

- **New Guidance:**

- The toilet transfer activity can be assessed and coded regardless of the patient's need to use a toilet or commode to void or have a bowel movement in conjunction with the toilet transfer assessment.

- **Revised Guidance:**

- Toileting hygiene, clothing management, and transferring on and off a bedpan are not considered part of the toilet transfer activity.



# GG0170G. Car Transfer – New Guidance for LTCH, Revised Guidance for IRF



GG0170. Mobility (3-day assessment period)		
1. Admission Performance	2. Discharge Goal	
↓ Enter Codes in Boxes ↓		
		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.

- The activity includes the patient’s ability to transfer in and out of a car or van seat on the passenger side. Any vehicle model available may be used for the assessment of GG0170G. Car transfer.

# GG0170G. Car Transfers – New and Clarified Guidance



- **Clarified Guidance:**

- The car transfer does not include ~~transfers into the driver's seat getting to or from the vehicle~~, opening/closing the car door, or fastening/unfastening the seat belt.



- **New Guidance:**

- If the patient remains in a wheelchair and does not transfer in and out of a car or van seat, then the activity is not considered completed and the appropriate “activity not attempted” code would be used.
- The setup and/or clean-up of an assistive device that is used for walking to and from the car, but not used for the transfer in and out of the car seat, would not be considered when coding the car transfer activity.



# GG0170G. Car Transfers – New Guidance



- Clinicians may use clinical judgment to determine if observing a patient performing a portion of the car transfer activity (e.g., getting into the car) allows the clinician to adequately assess the patient's ability to complete the entire GG0170G. Car transfer activity (transferring in and out of a car). If the clinician determines that this observation is adequate, code based on the type and amount of assistance required to complete the activity.
- Assessment of a car transfer can still be completed while accommodating medical restrictions such as long sitting.
- Use of an “activity not attempted” code should only occur after determining that the car transfer is not completed, and the performance code cannot be determined based on patient/caregiver report, collaboration with other facility staff, or assessment of similar activities.





# GG0170 Walking Items – New Guidance



- Assessment of the walking activities starts with the patient in a standing position.
- A walking activity cannot be completed without some level of patient participation that allows patient ambulation to occur for the entire stated distance. A helper cannot complete a walking activity for a patient.
- During a walking activity, a patient may take a brief standing rest break. If the patient needs to sit to rest during a GG walking activity, consider the patient unable to complete that walking activity.
- Clinicians can use clinical judgment to determine how the actual patient assessment of walking is conducted. If a clinician chooses to combine the assessment of multiple walking activities, use clinical judgment to determine the type and amount of assistance needed for each individual activity.

# GG0170 Walking Items – Clarified and New Guidance

- Use clinical judgment when assessing activities that overlap or occur sequentially to determine the type and amount of assistance needed for each individual activity.
- All of the GG walking activities do not need to occur during a single session.
- **Do not code** walking activities with the use of a device that is restricted to patient use during therapy sessions (e.g., parallel bars, exoskeleton, or overhead track and harness systems).
- If the patient, who participates in walking, requires the assistance of two helpers to complete the activity, code **01. Dependent**.
- If the only help a patient requires to complete the walking activity is for a helper to retrieve and place the walker and/or put it away after patient use, then enter code **05. Setup or clean-up assistance**.

# GG0170L. Walking 10 Feet on Uneven Surfaces



GG0170. Mobility (3-day assessment period)		
1. Admission Performance	2. Discharge Goal	
↓ Enter Codes in Boxes ↓		
		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.

- Starting from standing, the activity includes the patient’s ability to walk 10 feet on uneven surfaces.

# GG0170L. Walking 10 Feet on Uneven Surfaces – New Guidance

- This activity can be assessed inside or outside.
  - Examples of uneven surfaces include uneven or sloping surfaces, turf, or gravel.
  - Use clinical judgment to determine if a surface is uneven.





# GG0170 Stair/Step Items



		<b>M. 1 step (curb):</b> The ability to go up and down a curb or up and down one step. <i>If admission performance is coded 07, 09, 10, or 88 → Skip to GG0170P, Picking up object</i>
		<b>N. 4 steps:</b> The ability to go up and down four steps with or without a rail. <i>If admission performance is coded 07, 09, 10, or 88 → Skip to GG0170P, Picking up object</i>
		<b>O. 12 steps:</b> The ability to go up and down 12 steps with or without a rail.

- Completing the stair activities indicates that a patient goes up and down the stairs by any safe means, with or without any assistive devices (for example, railing or stair lift) and with or without some level of assistance.

# GG0170 Step and Stairs Items – New Guidance



- Going up and down stairs by any safe means includes the patient walking up and down stairs on their feet or bumping or scooting up and down stairs on their buttocks.
- Ascending and descending stairs does not have to occur sequentially or during one session. If the assessment of going up the stairs and then down the stairs occurs sequentially, the patient may take a standing or seated rest break between ascending and descending the 4 steps or 12 steps.
- A patient who is a wheelchair user may be assessed going up and down stairs (including 1 step/curb) in a wheelchair. Code based on the type and amount of assistance required from the helper.
- Getting to/from the stairs is not included when coding the curb/step activities.



# GG0170M. 1 Step (Curb) – Data Element Changes



**GG0170M.1 step (curb):** Revised for IRF and new for LTCH.

Current Version:

**M. 1 step (curb):** The ability to go up and down a curb **and/or** up and down one step.

*If admission/discharge performance is coded 07, 09, 10, or 88 → Skip to GG0170P, Picking up object*



Revised Version:

- Removed “and” from the item: “...a curb **and/or** up and down one step.”

**M. 1 step (curb):** The ability to go up and down a curb or up and down one step.

*If admission performance is coded 07, 09, 10, or 88 → Skip to GG0170P, Picking up object*



# GG0170M. 1 Step (Curb) – New Guidance



- Assess the patient going up and down 1 step or up and down a curb. If both are assessed and the patient's performance going up and down a curb is different than their performance going up and down one step (e.g., because the step has a railing), code GG0170M. 1 step (curb) based on the activity with which the patient requires the most assistance.





# GG0170P. Picking Up Object



**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.

- The activity includes the patient bending/stooping from a standing position to pick up a small object, such as a spoon, from the floor.

# GG0170P. Picking Up Object – New Guidance



- GG0170P. Picking up object must be assessed while the patient is in a standing position.
  - If the patient is not able to stand, the activity did not occur and the appropriate “activity not attempted” code would be used.
- If a standing patient is unable to pick up a small object from the floor, therefore requiring the helper to pick up the object, code 01, 02, or 03, depending on whether the helper is providing all the effort, more than half of the effort, or less than half of the effort. Clinicians should use clinical judgment to apply guidance regarding the patient’s degree of participation in picking up an object.
- Assistive device(s) and adaptive equipment may be used, for example a cane to support standing balance and/or a reacher to pick up the object.



# GG0170Q1. Does the Patient Use a Wheelchair/Scooter?

- **Clarified Guidance:**
  - The intent of the wheelchair mobility items is to assess the ability of patients who are ~~learning how to self-mobilize~~ using a wheelchair ~~under any condition~~.
- **New Guidance:**
  - Only code **0. No** if at the time of the assessment the patient does not use a wheelchair or scooter under any condition.



# GG0170. Wheelchair/Scooter Items – New Guidance



- A helper can assist a patient to complete the wheelchair distance or make turns if required.
  - When a patient is unable to wheel the entire distance themselves, the activity can still be completed and a performance code can be determined based on the type and amount of assistance required from the helper to complete the entire activity.
- If a patient uses both a manual and a motorized wheelchair or scooter at the time of the assessment, code the activity based on the type of wheelchair/scooter with which the patient requires the most assistance.





# Summary



- There have been revisions to some of the Section GG Prior Functioning, Self-Care and Mobility items and associated guidance.
- There are new GG0170 Mobility items for LTCH.

# Submitting Questions

- If you have questions about this presentation, please submit them to [PACTraining@Econometricalnc.com](mailto:PACTraining@Econometricalnc.com) by June 3, 2022.
- Select questions will be answered in a Q&A session during the June 2022 virtual live event.

