

Track Changes
from Chapter 3 Section GG v1.18.11
to Chapter 3 Section GG v1.19.1

Chapter	Section	Page(s) in version 1.19.1	Change
3	—	GG-1	<p>SECTION GG: FUNCTIONAL ABILITIES AND GOALS</p> <p>Intent: This section includes items about functional abilities and goals. It includes items focused on prior function, admission and discharge performance, discharge goals, performance throughout a resident’s stay, mobility device use, and range of motion. Functional status is assessed based on the need for assistance when performing self-care and mobility activities.</p>

Track Changes
from Chapter 3 Section GG v1.18.11
to Chapter 3 Section GG v1.19.1

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3	GG0130	GG-11	<div>Replaced screenshot.</div> <div>OLD</div> <div><p>GG0130. Self-Care (Assessment period is the first 3 days of the stay) Complete column 1 when A0310A = 01. Complete columns 1 and 2 when A0310B = 01. When A0310B = 01, the stay begins on A2400B. When A0310B = 99, the stay begins on A1600.</p><p>Code the resident's usual performance at the start of the stay (admission) for each activity using the 6-point scale. If activity was not attempted at the start of the stay (admission), code the reason. Code the resident's end of SNF PPS stay (discharge) goal(s) using the 6-point scale. Use of codes 07, 09, 10, or 88 is permissible to code end of SNF PPS stay (discharge) goal(s).</p><p>Coding: Safety and Quality of Performance - If helper assistance is required because resident'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. Independent - Resident completes the activity by themselves with no assistance from a helper. 05. Setup or clean-up assistance - Helper sets up or cleans up; resident completes activity. Helper assists only prior to or following the activity. 04. Supervision or touching assistance - Helper provides verbal cues and/or touching/steadying and/or contact guard assistance as resident completes activity. Assistance may be provided throughout the activity or intermittently. 03. Partial/moderate assistance - Helper does LESS THAN HALF the effort. Helper lifts, holds, or supports trunk or limbs, but provides less than half the effort. 02. Substantial/maximal assistance - Helper does MORE THAN HALF the effort. Helper lifts or holds trunk or limbs and provides more than half the effort. 01. Dependent - Helper does ALL of the effort. Resident does none of the effort to complete the activity. 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3	GG0130	GG-12	<p>Replaced screenshot.</p> <p>OLD</p> <p>GG0130. Self-Care (Assessment period is the last 3 days of the stay) Complete column 3 when A0310F = 10 or 11 or when A0310H = 1. When A0310C is not = 2 and A0310H = 1 and A2400C minus A2400B is greater than 2 and A2105 is not = 04, the stay ends on A2400C. For all other Discharge assessments, the stay ends on A2000.</p> <p>Code the resident's usual performance at the end of the stay for each activity using the 6-point scale. If an activity was not attempted at the end of the stay, code the reason.</p> <p>Coding: Safety and Quality of Performance - If helper assistance is required because resident'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> 05. Independent - Resident completes the activity by themselves with no assistance from a helper. 05. Setup or clean-up assistance - Helper sets up or cleans up; resident completes activity. Helper assists only prior to or following the activity. 04. Supervision or touching assistance - Helper provides verbal cues and/or touching/steadying and/or contact guard assistance as resident completes activity. Assistance may be provided throughout the activity or intermittently. 03. Partial/moderate assistance - Helper does LESS THAN HALF the effort. Helper lifts, holds, or supports trunk or limbs, but provides less than half the effort. 02. Substantial/maximal assistance - Helper does MORE THAN HALF the effort. Helper lifts or holds trunk or limbs and provides more than half the effort. 01. Dependent - Helper does ALL of the effort. Resident does none of the effort to complete the activity. Or, the assistance of 2 or more helpers is required for the resident to complete the activity.</p> <p>If activity was not attempted, code reason: 07. Resident refused 09. Not applicable - Not attempted and the resident did not perform this activity prior to the current illness, exacerbation, or injury. 10. Not attempted due to environmental limitations (e.g., lack of equipment, weather constraints) 88. Not attempted due to medical condition or safety concerns</p> <p>NEW</p> <p>GG0130. Self-Care (Assessment period is the last 3 days of the stay) Complete column 3 when A0310F = 10 or 11 or when A0310H = 1. When A0310H = 1 and A2400C minus A2400B is greater than 2 and A2105 is not = 04, the stay ends on A2400C. For all other Discharge assessments, the stay ends on A2000.</p> <p>Code the resident's usual performance at the end of the stay for each activity using the 6-point scale. If an activity was not attempted at the end of the stay, code the reason.</p> <p>Coding: Safety and Quality of Performance - If helper assistance is required because resident'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> 05. Independent - Resident completes the activity by themselves with no assistance from a helper. 05. Setup or clean-up assistance - Helper sets up or cleans up; resident completes activity. Helper assists only prior to or following the activity. 04. Supervision or touching assistance - Helper provides verbal cues and/or touching/steadying and/or contact guard assistance as resident completes activity. Assistance may be provided throughout the activity or intermittently. 03. Partial/moderate assistance - Helper does LESS THAN HALF the effort. Helper lifts, holds, or supports trunk or limbs, but provides less than half the effort. 02. Substantial/maximal assistance - Helper does MORE THAN HALF the effort. Helper lifts or holds trunk or limbs and provides more than half the effort. 01. Dependent - Helper does ALL of the effort. Resident does none of the effort to complete the activity. Or, the assistance of 2 or more helpers is required for the resident to complete the activity.</p> <p>If activity was not attempted, code reason: 07. Resident refused 09. Not applicable - Not attempted and the resident did not perform this activity prior to the current illness, exacerbation, or injury. 10. Not attempted due to environmental limitations (e.g., lack of equipment, weather constraints) 88. Not attempted due to medical condition or safety concerns</p>

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3	GG0130	GG-13	<p>Replaced screenshot.</p> <p>OLD</p> <p>GG0130. Self-Care (Assessment period is the ARD plus 2 previous calendar days) Complete column 5 when A0310A = 02 - 06 and A0310B = 99 or when A0310B = 08. Code the resident's usual performance for each activity using the 6-point scale. If an activity was not attempted, code the reason.</p> <p>Coding: Safety and Quality of Performance - If helper assistance is required because resident's performance is unsafe or of poor quality, score according to amount of assistance provided. Activities may be completed with or without assistive devices. 06. Independent - Resident completes the activity by themselves with no assistance from a helper. 05. Setup or clean-up assistance - Helper sets up or cleans up; resident completes activity. Helper assists only prior to or following the activity. 04. Supervision or touching assistance - Helper provides verbal cues and/or touching/assisting and/or contact guard assistance as resident completes activity. Assistance may be provided throughout the activity or intermittently. 03. Partial/moderate assistance - Helper does LESS THAN HALF the effort. Helper lifts, holds, or supports trunk or limbs, but provides less than half the effort. 02. Substantial/maximal assistance - Helper does MORE THAN HALF the effort. Helper lifts or holds trunk or limbs and provides more than half the effort. 01. Dependent - Helper does ALL of the effort. Resident does none of the effort to complete the activity. Or, the assistance of 2 or more helpers is required for the resident to complete the activity.</p> <p>If activity was not attempted, code reason: 07. Resident refused 09. Not applicable - Not attempted and the resident did not perform this activity prior to the current illness, exacerbation, or injury. 10. Not attempted due to environmental limitations (e.g., lack of equipment, weather constraints) 88. Not attempted due to medical condition or safety concerns</p> <p>NEW</p> <p>GG0130. Self-Care (Assessment period is the ARD plus 2 previous calendar days) Complete column 5 when A0310A = 02 - 06 and A0310B = 99. Code the resident's usual performance for each activity using the 6-point scale. If an activity was not attempted, code the reason.</p> <p>Coding: Safety and Quality of Performance - If helper assistance is required because resident's performance is unsafe or of poor quality, score according to amount of assistance provided. Activities may be completed with or without assistive devices. 06. Independent - Resident completes the activity by themselves with no assistance from a helper. 05. Setup or clean-up assistance - Helper sets up or cleans up; resident completes activity. Helper assists only prior to or following the activity. 04. Supervision or touching assistance - Helper provides verbal cues and/or touching/assisting and/or contact guard assistance as resident completes activity. Assistance may be provided throughout the activity or intermittently. 03. Partial/moderate assistance - Helper does LESS THAN HALF the effort. Helper lifts, holds, or supports trunk or limbs, but provides less than half the effort. 02. Substantial/maximal assistance - Helper does MORE THAN HALF the effort. Helper lifts or holds trunk or limbs and provides more than half the effort. 01. Dependent - Helper does ALL of the effort. Resident does none of the effort to complete the activity. Or, the assistance of 2 or more helpers is required for the resident to complete the activity.</p> <p>If activity was not attempted, code reason: 07. Resident refused 09. Not applicable - Not attempted and the resident did not perform this activity prior to the current illness, exacerbation, or injury. 10. Not attempted due to environmental limitations (e.g., lack of equipment, weather constraints) 88. Not attempted due to medical condition or safety concerns</p>

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3	GG0130	GG-15	<p>Steps for Assessment</p> <ol style="list-style-type: none"> 1. Assess the resident’s self-care performance based on direct observation, incorporating resident self-reports and reports from qualified clinicians, care staff, or family documented in the resident’s medical record during the assessment period. CMS anticipates that an interdisciplinary team of qualified clinicians is involved in assessing the resident during the assessment period. <ul style="list-style-type: none"> • For residents in a Medicare Part A stay, the admission assessment period is the first 3 days of the Part A stay starting with the date in A2400B, the Start of Most Recent Medicare Stay. The admission assessment period for residents who are not in a Medicare Part A stay is the first 3 days of their stay starting with the date in A1600, Entry Date. <ul style="list-style-type: none"> ○ Note: If A0310B = 01 and A0310A = 01 – 06 indicating a 5-day PPS assessment combined with an OBRA assessment, the assessment period is the first 3 days of the stay beginning on A2400Band both columns are required. In these scenarios, do not complete Column 5. OBRA/Interim Performance.
3	GG0130	GG-16	<p>Coding Instructions</p> <ul style="list-style-type: none"> • When coding the resident’s usual performance and discharge goal(s), use the six-point scale, or use one of the four “activity was not attempted” codes to specify the reason why an activity was not attempted.

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3	GG0130	GG-32	<p>Examples for GG0130I, Personal hygiene</p> <ol style="list-style-type: none"> 1. A certified nursing assistant takes Resident L’s comb, razor, and shaving cream from the drawer and places them at the bathroom sink. Resident L combs their hair and shaves daily. During the observation period, they required cueing to complete their shaving tasks. <p>Coding: GG01304I would be coded 04, Supervision or touching assistance.</p> <p>Rationale: A certified nursing assistant placed grooming devices at sink for the resident’s use and provided cueing during the observation period.</p> 2. Resident J completed all hygiene tasks independently two out of six times during the observation period. The other four times they iswere unable to complete brushing and styling their hair orand washing and drying their face due tobecause of elbow pain after initiating the tasks, so a staff member completed these tasks. A certified nursing assistant completes these tasks for them. <p>Coding: GG0130I would be coded 02, Substantial/moderatemoderatemaximal assistance.</p> <p>Rationale: Although Resident J was unable to complete their personal hygiene tasks independently on two of the six occasions the activity occurred, and required a certified nursing assistant, staff member had to complete their personal hygiene tasks after the resident initiated them on four of the six occasions. Because the staff had to complete Resident J’s personal hygiene tasks on four of the six occasions the activity occurred during the assessment observation period. The certified nursing assistantthe staff provided more than half the effort to complete the personal hygiene tasks.</p>
3	GG0170	GG-34–GG-73	Page length changed due to revised content.

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3	GG0130	GG-34	<p>Discharge Goals: Coding Tips</p> <p><i>Discharge goals are coded with each Admission assessment when A0310B – 01, indicating the start of a PPS stay. Discharge goals are not required with stand-alone OBRA assessments.</i></p> <ul style="list-style-type: none"> For the SNF Quality Reporting Program (QRP), a minimum of one self-care or mobility discharge goal must be coded. However, facilities may choose to complete more than one self-care or mobility discharge goal. Code the resident’s discharge goal(s) using the six-point scale. Identifying multiple goals helps to ensure that the assessment accurately reflects resident status and facilitates person-centered individualized care planning. Use of the “activity was not attempted” codes (07, 09, 10, and 88) is permissible to code discharge goal(s). Use of a dash is permissible for any remaining self-care or mobility goals that were not coded. Of note, at least one Discharge Goal must be indicated for either Self-Care or Mobility. Using the dash in this allowed instance after the coding of at least one goal does not affect Annual Payment Update (APU) determination.
3	GG0130	GG-34	<ul style="list-style-type: none"> Licensed, qualified clinicians can establish a resident’s Discharge Goal(s) at the time of admission based on the resident’s prior medical condition, admission assessment self-care and mobility status, discussions with the resident and family, professional judgment, practice standards, expected treatments, the resident’s motivation to improve, anticipated length of stay, and the resident’s discharge plan. Goals should be established as part of the resident’s care plan. If the admission performance of an activity was coded 88, Not attempted due to medical condition or safety concern during the admission assessment, a Discharge Goal may be entered using the 6-point scale if the resident is expected to be able to perform the activity by discharge.

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3	GG0130	GG-34	<p>Discharge Goal: Coding Examples</p> <p>1. Discharge Goal Code Is Higher than 5-Day PPS Assessment Admission Performance Code</p> <p>If the qualified clinician determines that the resident is expected to make gains in function by discharge, the code reported for Discharge Goal will be higher than the admission performance code.</p>

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3	GG0130	GG-34	<p>2. Discharge Goal Code Is the Same as 5-Day PPS Assessment Admission Performance Code</p> <p>The qualified clinician determines that a medically complex resident is not expected to progress to a higher level of functioning during the SNF Medicare Part A stay; however, the qualified clinician determines that the resident would be able to maintain their admission functional performance level. The qualified clinician discusses functional status goals with the resident and their family and they agree that maintaining functioning is a reasonable goal. In this example, the Discharge Goal is coded at the same level as the resident's admission performance code.</p> <p>Oral Hygiene 5-Day PPS Assessment Admission Performance: In this example, the qualified clinician anticipates that the resident will have the same level of function for oral hygiene at admission and discharge. The resident's 5-Day PPS admission performance code is coded and the Discharge Goal is coded at the same level. Resident E has stated their preference for participation twice daily in their oral hygiene activity. Resident E has severe arthritis, Parkinson's disease, diabetic neuropathy, and renal failure. These conditions result in multiple impairments (e.g., limited endurance, weak grasp, slow movements, and tremors). The qualified clinician observes Resident E's 5-Day PPS admission performance and discusses their usual performance with qualified clinicians, caregivers, and family to determine the necessary interventions for skilled therapy (e.g., positioning of an adaptive toothbrush cuff, verbal cues, lifting, and supporting Resident E's limb). The qualified clinician codes Resident E's 5-Day PPS assessment admission performance as 02, Substantial/maximal assistance. The helper performs more than half the effort when lifting or holding their limb.</p>

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3	GG0130	GG-34	<p>Oral Hygiene 5-Day PPS Assessment Discharge Goal: The qualified clinician anticipates Resident E's discharge performance will remain 02, Substantial/maximal assistance. Due to Resident E's progressive and degenerative condition, the qualified clinician and resident feel that, while Resident E is not expected to make gains in oral hygiene performance, maintaining their function at this same level is desirable and achievable as a Discharge Goal.</p>
3	GG0130	GG-34	<p>3. Discharge Goal Code Is Lower than 5-Day PPS Assessment Admission Performance Code</p> <p>The qualified clinician determines that a resident with a progressive neurologic condition is expected to rapidly decline and that skilled therapy services may slow the decline of function. In this scenario, the Discharge Goal code is lower than the resident's 5-Day PPS assessment admission performance code.</p> <p>Toileting Hygiene: Resident T's participation in skilled therapy is expected to slow down the pace of their anticipated functional deterioration. The resident's Discharge Goal code will be lower than the 5-Day PPS Admission Performance code.</p>

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to Chapter 3 Section GG v1.19.1

Chapter	Section	Page(s) in version 1.19.1	Change
3	GG0130	GG-34	<p>Toileting Hygiene 5-Day PPS Assessment Admission Performance: Resident T has a progressive neurological illness that affects their strength, coordination, and endurance. Resident T prefers to use a bedside commode rather than incontinence undergarments for as long as possible. The certified nursing assistant currently supports Resident T while they are standing so that Resident T can release their hand from the grab bar (next to their bedside commode) and pull down their underwear before sitting onto the bedside commode. When Resident T has finished voiding, they wipe their perineal area. Resident T then requires the helper to support their trunk while Resident T pulls up their underwear. The qualified clinician codes the 5-Day PPS assessment admission performance as 03, Partial/moderate assistance. The certified nursing assistant provides less than half the effort for Resident T's toileting hygiene.</p> <p>Toileting Hygiene Discharge Goal: By discharge, it is expected that Resident T will need assistance with toileting hygiene and that the helper will perform more than half the effort. The qualified clinician codes their Discharge Goal as 02, Substantial/maximal assistance.</p>

Track Changes
from Chapter 3 Section GG v1.18.11
to Chapter 3 Section GG v1.19.1

3

GG0170

GG-34

Replaced screenshot.

OLD

GG0170. Mobility (Assessment period is the first 3 days of the stay)
Complete column 1 when A0310A = 01. Complete columns 1 and 2 when A0310B = 01.
When A0310B = 01, the stay begins on A2400B. When A0310B = 99, the stay begins on A1600.

Code the resident's usual performance at the start of the stay (admission) for each activity using the 6-point scale. If activity was not attempted at the start of the stay (admission), code the reason. Code the resident's end of SNF PPS stay (discharge) goal(s) using the 6-point scale. Use of codes 07, 09, 10, or 88 is permissible to code end of SNF PPS stay (discharge) goal(s).

Coding:
Safety and Quality of Performance - If helper assistance is required because resident's performance is unsafe or of poor quality, score according to amount of assistance provided.
Activities may be completed with or without assistive devices.
06. **Independent** - Resident completes the activity by themselves with no assistance from a helper.
05. **Setup or clean-up assistance** - Helper sets up or cleans up; resident completes activity. Helper assists only prior to or following the activity.
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02. **Substantial/maximal assistance** - Helper does MORE THAN HALF the effort. Helper lifts or holds trunk or limbs and provides more than half the effort.
01. **Dependent** - Helper does ALL of the effort. Resident does none of the effort to complete the activity. Or, the assistance of 2 or more helpers is required for the resident to complete the activity.

If activity was not attempted, code reason:
07. **Resident refused**
09. **Not applicable** - Not attempted and the resident did not perform this activity prior to the current illness, exacerbation, or injury.
10. **Not attempted due to environmental limitations** (e.g., lack of equipment, weather constraints)
88. **Not attempted due to medical condition or safety concerns**

1. Admission Performance	2. Discharge Goal
Enter Codes in Boxes	
<div><div></div><div></div></div>	<div><div></div><div></div></div>
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 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 transfer: The ability to get on and off a toilet or commode.
FF.	Tub/shower transfer: The ability to get in and out of a tub/shower.
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 admission 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 at least 50 feet and make two turns.
K.	Walk 150 feet: Once standing, the ability to walk at least 150 feet in a corridor or similar space.

NEW

GG0170. Mobility (Assessment period is the first 3 days of the stay)
Complete column 1 when A0310A = 01 or when A0310B = 01.
When A0310B = 01, the stay begins on A2400B. When A0310B = 99, the stay begins on A1600.

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Not attempted due to medical condition or safety concerns</p><div style="border: 1px solid black; padding: 5px; margin-top: 5px;"><table style="width: 100%; border-collapse: collapse;"><thead><tr><th style="width: 10%; text-align: center;">1 Admission Performance</th><th style="width: 10%; text-align: center;">2 Discharge Goal</th><th></th></tr></thead><tbody><tr><td colspan="3" style="padding-top: 5px;">Enter Codes in Boxes</td></tr><tr><td style="text-align: center;">[][]</td><td style="text-align: center;">[][]</td><td>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.</td></tr><tr><td style="text-align: center;">[][]</td><td style="text-align: center;">[][]</td><td>M. 1 step (curb): The ability to go up and down a curb and/or up and down one step. 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Track Changes
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Helper lifts, holds, or supports trunk or limbs, but provides less than half the effort.</p><p>02. Substantial/maximal assistance - Helper does MORE THAN HALF the effort. Helper lifts or holds trunk or limbs and provides more than half the effort.</p><p>01. Dependent - Helper does ALL of the effort. Resident does none of the effort to complete the activity. Or, the assistance of 2 or more helpers is required for the resident to complete the activity.</p></div><p style="margin: 0;">If activity was not attempted, code reason:</p><p>07. Resident refused</p><p>09. Not applicable - Not attempted and the resident did not perform this activity prior to the current illness, exacerbation, or injury.</p><p>10. Not attempted due to environmental limitations (e.g., lack of equipment, weather constraints)</p><p>88. Not attempted due to medical condition or safety concerns</p></div><div style="border-top: 1px solid black; padding-top: 5px; margin-top: 10px;"><div style="background-color: #f0f0f0; padding: 5px; margin-bottom: 5px;"><p style="margin: 0; text-align: center;">3. Discharge Performance</p><p style="margin: 0; text-align: center;">Enter Codes in Boxes</p></div><div style="margin-bottom: 5px;"><div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center; margin-bottom: 2px;"><div style="width: 10px; height: 10px; border: 1px solid black; margin: 0 2px;"></div><div style="width: 10px; height: 10px; border: 1px solid black; margin: 0 2px;"></div></div><div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center; margin-bottom: 2px;"><div style="width: 10px; height: 10px; border: 1px solid black; margin: 0 2px;"></div><div style="width: 10px; height: 10px; border: 1px solid black; margin: 0 2px;"></div></div><div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center; margin-bottom: 2px;"><div style="width: 10px; height: 10px; border: 1px solid black; margin: 0 2px;"></div><div style="width: 10px; 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Track Changes
from Chapter 3 Section GG v1.18.11
to Chapter 3 Section GG v1.19.1

3	GG0170	GG-37	<div>Replaced screenshot.</div> <div>OLD</div> <div><p>GG0170. Mobility (Assessment period is the last 3 days of the stay) Complete column 3 when A0310F = 10 or 11 or when A0310H = 1. When A0310G is not = 2 and A0310H = 1 and A2400C minus A2400B is greater than 2 and A2105 is not = 04, the stay ends on A2400C. For all other Discharge assessments, the stay ends on A2000.</p><p>Code the resident's usual performance at the end of the stay for each activity using the 6-point scale. If an activity was not attempted at the end of the stay, code the reason.</p><p>Coding: Safety and Quality of Performance - If helper assistance is required because resident'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. Independent - Resident completes the activity by themselves with no assistance from a helper. 05. Setup or clean-up assistance - Helper sets up or cleans up; resident completes activity. Helper assists only prior to or following the activity. 04. Supervision or touching assistance - Helper provides verbal cues and/or touching/steadying and/or contact guard assistance as resident completes activity. Assistance may be provided throughout the activity or intermittently. 03. Partial/moderate assistance - Helper does LESS THAN HALF the effort. Helper lifts, holds, or supports trunk or limbs, but provides less than half the effort. 02. Substantial/maximal assistance - Helper does MORE THAN HALF the effort. Helper lifts or holds trunk or limbs and provides more than half the effort. 01. Dependent - Helper does ALL of the effort. Resident does none of the effort to complete the activity. Or, the assistance of 2 or more helpers is required for the resident to complete the activity.</p><p>If activity was not attempted, code reason: 07. Resident refused 09. Not applicable - Not attempted and the resident did not perform this activity prior to the current illness, exacerbation, or injury. 10. Not attempted due to environmental limitations (e.g., lack of equipment, weather constraints) 88. Not attempted due to medical condition or safety concerns</p></div> <div><div>3. Discharge Performance</div><div>Enter Codes in Boxes</div><div><div><div></div><div></div></div>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.</div><div><div><div></div><div></div></div>M. 1 step (curb): The ability to go up and down a curb and/or up and down one step. If discharge performance is coded 07, 09, 10, or 88 → Skip to GG0170P; Picking up object</div><div><div><div></div><div></div></div>N. 4 steps: The ability to go up and down four steps with or without a rail. If discharge performance is coded 07, 09, 10, or 88 → Skip to GG0170P; Picking up object</div><div><div><div></div><div></div></div>O. 12 steps: The ability to go up and down 12 steps with or without a rail.</div><div><div><div></div><div></div></div>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.</div><div><div>Q3. Does the resident use a wheelchair and/or scooter?</div><div><div><div></div><div></div></div>0. No → Skip to H0100, Appliances 1. Yes → Continue to GG0170R, Wheel 50 feet with two turns</div><div><div><div></div><div></div></div>R. Wheel 50 feet with two turns: Once seated in wheelchair/scooter, the ability to wheel at least 50 feet and make two turns.</div><div><div>RR3. Indicate the type of wheelchair or scooter used.</div><div><div><div></div><div></div></div>1. Manual 2. Motorized</div><div><div><div></div><div></div></div>S. Wheel 150 feet: Once seated in wheelchair/scooter, the ability to wheel at least 150 feet in a corridor or similar space.</div><div><div>SS3. Indicate the type of wheelchair or scooter used.</div><div><div><div></div><div></div></div>1. Manual 2. Motorized</div></div></div><div>NEW</div><div><p>GG0170. Mobility (Assessment period is the last 3 days of the stay) Complete column 3 when A0310F = 10 or 11 or when A0310H = 1. When A0310H = 1 and A2400C minus A2400B is greater than 2 and A2105 is not = 04, the stay ends on A2400C. For all other Discharge assessments, the stay ends on A2000.</p><p>Code the resident's usual performance at the end of the stay for each activity using the 6-point scale. 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Track Changes from Chapter 3 Section GG v1.18.11 to Chapter 3 Section GG v1.19.1

Chapter	Section	Page(s) in version 1.19.1	Change
3	GG0170	GG-38	<p>Replaced screenshot.</p> <p>OLD</p> <p>GG0170. Mobility (Assessment period is the ARD plus 2 previous calendar days) Complete column 5 when A0310A = 02 - 06 and A0310B = 99 or when A0310B = 08. Code the resident's usual performance for each activity using the 6-point scale. If an activity was not attempted, code the reason.</p> <p>Coding: Safety and Quality of Performance - If helper assistance is required because resident'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></p> <p>06. Independent - Resident completes the activity by themselves with no assistance from a helper. 05. Setup or clean-up assistance - Helper sets up or cleans up; resident completes activity. Helper assists only prior to or following the activity. 04. Supervision or touching assistance - Helper provides verbal cues and/or touching/steadying and/or contact guard assistance as resident completes activity. Assistance may be provided throughout the activity or intermittently. 03. Partial/moderate assistance - Helper does LESS THAN HALF the effort. Helper lifts, holds, or supports trunk or limbs, but provides less than half the effort. 02. Substantial/maximal assistance - Helper does MORE THAN HALF the effort. Helper lifts or holds trunk or limbs and provides more than half the effort. 01. Dependent - Helper does ALL of the effort. Resident does none of the effort to complete the activity. Or, the assistance of 2 or more helpers is required for the resident to complete the activity.</p> <p>If activity was not attempted, code reason: 07. Resident refused 09. Not applicable - Not attempted and the resident did not perform this activity prior to the current illness, exacerbation, or injury 10. Not attempted due to environmental limitations (e.g., lack of equipment, weather constraints) 98. Not attempted due to medical condition or safety concerns</p> <p>NEW</p> <p>GG0170. Mobility (Assessment period is the ARD plus 2 previous calendar days) Complete column 5 when A0310A = 02 - 06 and A0310B = 99. Code the resident's usual performance for each activity using the 6-point scale. If an activity was not attempted, code the reason.</p> <p>Coding: Safety and Quality of Performance - If helper assistance is required because resident'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></p> <p>06. Independent - Resident completes the activity by themselves with no assistance from a helper. 05. Setup or clean-up assistance - Helper sets up or cleans up; resident completes activity. Helper assists only prior to or following the activity. 04. Supervision or touching assistance - Helper provides verbal cues and/or touching/steadying and/or contact guard assistance as resident completes activity. Assistance may be provided throughout the activity or intermittently. 03. Partial/moderate assistance - Helper does LESS THAN HALF the effort. Helper lifts, holds, or supports trunk or limbs, but provides less than half the effort. 02. Substantial/maximal assistance - Helper does MORE THAN HALF the effort. Helper lifts or holds trunk or limbs and provides more than half the effort. 01. Dependent - Helper does ALL of the effort. Resident does none of the effort to complete the activity. Or, the assistance of 2 or more helpers is required for the resident to complete the activity.</p> <p>If activity was not attempted, code reason: 07. Resident refused 09. Not applicable - Not attempted and the resident did not perform this activity prior to the current illness, exacerbation, or injury 10. Not attempted due to environmental limitations (e.g., lack of equipment, weather constraints) 98. Not attempted due to medical condition or safety concerns</p>

Track Changes
from Chapter 3 Section GG v1.18.11
to Chapter 3 Section GG v1.19.1

Chapter	Section	Page(s) in version 1.19.1	Change
3	GG0170	GG-39	<p>Replaced screenshot.</p> <p>OLD</p> <p>GG0170. Mobility (Assessment period is the ARD plus 2 previous calendar days) Complete column 5 when A0310A = 02 - 06 and A0310B = 99 or when A0310B = 08. Code the resident's usual performance for each activity using the 6-point scale. If an activity was not attempted, code the reason.</p> <p>Coding: Safety and Quality of Performance - If helper assistance is required because resident'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. Independent - Resident completes the activity by themselves with no assistance from a helper. 05. Setup or clean-up assistance - Helper sets up or cleans up; resident completes activity. Helper assists only prior to or following the activity. 04. 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Not attempted due to environmental limitations (e.g., lack of equipment, weather constraints) 88. Not attempted due to medical condition or safety concerns</p> <hr/> <p>S. OBRA/Interim Performance Enter Codes in Boxes</p> <p>Q5. Does the resident use a wheelchair and/or scooter? <input type="checkbox"/> 0. No → Skip to H0100, Appliances <input type="checkbox"/> 1. Yes → Continue to GG0170R, Wheel 50 feet with two turns</p> <p><input type="checkbox"/> R. Wheel 50 feet with two turns: Once seated in wheelchair/scooter, the ability to wheel at least 50 feet and make two turns. RR5. Indicate the type of wheelchair or scooter used. <input type="checkbox"/> 1. Manual <input type="checkbox"/> 2. Motorized</p> <p><input type="checkbox"/> S. Wheel 150 feet: Once seated in wheelchair/scooter, the ability to wheel at least 150 feet in a corridor or similar space. SS5. Indicate the type of wheelchair or scooter used.</p> <p>NEW</p> <p>GG0170. Mobility (Assessment period is the ARD plus 2 previous calendar days) Complete column 5 when A0310A = 02 - 06 and A0310B = 99. Code the resident's usual performance for each activity using the 6-point scale. If an activity was not attempted, code the reason.</p> <p>Coding: Safety and Quality of Performance - If helper assistance is required because resident'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. Independent - Resident completes the activity by themselves with no assistance from a helper. 05. Setup or clean-up assistance - Helper sets up or cleans up; resident completes activity. Helper assists only prior to or following the activity. 04. Supervision or touching assistance - Helper provides verbal cues and/or touching/steadying and/or contact guard assistance as resident completes activity. 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OBRA/Interim Performance Enter Codes in Boxes</p> <p>Q5. Does the resident use a wheelchair and/or scooter? <input type="checkbox"/> 0. No → Skip to H0100, Appliances <input type="checkbox"/> 1. Yes → Continue to GG0170R, Wheel 50 feet with two turns</p> <p><input type="checkbox"/> R. Wheel 50 feet with two turns: Once seated in wheelchair/scooter, the ability to wheel at least 50 feet and make two turns. RR5. Indicate the type of wheelchair or scooter used. <input type="checkbox"/> 1. Manual <input type="checkbox"/> 2. Motorized</p> <p><input type="checkbox"/> S. Wheel 150 feet: Once seated in wheelchair/scooter, the ability to wheel at least 150 feet in a corridor or similar space. SS5. Indicate the type of wheelchair or scooter used. <input type="checkbox"/> 1. Manual <input type="checkbox"/> 2. Motorized</p>

Track Changes
from Chapter 3 Section GG v1.18.11
to Chapter 3 Section GG v1.19.1

Chapter	Section	Page(s) in version 1.19.1	Change
3	GG0170	GG-40	<p>Steps for Assessment</p> <ol style="list-style-type: none"> 1. Assess the resident’s mobility performance based on direct observation, incorporating resident self-reports and reports from qualified clinicians, care staff, or family documented in the resident’s medical record during the assessment period. CMS anticipates that a multidisciplinary team of qualified clinicians is involved in assessing the resident during the assessment period. <ul style="list-style-type: none"> • For residents in a Medicare Part A stay, the admission assessment period is the first 3 days of the Part A stay starting with the date in A2400B, the Start of Most Recent Medicare Stay. The admission assessment period for residents who are not in a Medicare Part A stay is the first 3 days of their stay starting with the date in A1600, Entry Date. <ul style="list-style-type: none"> ○ Note: If A0310B = 01 and A0310A = 01 – 06 indicating a 5-day PPS assessment combined with an OBRA assessment, the assessment period is the first 3 days of the stay beginning on A2400B and both columns are required. In these scenarios, do not complete Column 5. OBRA/Interim Performance.
3	GG0170	GG-41	<p>Coding Instructions</p> <ul style="list-style-type: none"> • When coding the resident’s usual performance and the resident’s discharge goal(s), use the six-point scale, or one of the four “activity was not attempted” codes (07, 09, 10, and 88), to specify the reason why an activity was not attempted.

Track Changes
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to Chapter 3 Section GG v1.19.1

Chapter	Section	Page(s) in version 1.19.1	Change
3	GG0170	GG-58	<p>2. Walk 10 feet: Resident L had bilateral amputations three years ago, and prior to the current admission they used a wheelchair and did not walk. Currently Resident L does not use prosthetic devices and uses only a wheelchair for mobility. Resident L's care plan includes fitting and use of bilateral lower extremity prostheses.</p> <p>Coding: GG0170I would be coded 09, Not applicable, not attempted and the resident did not perform this activity prior to the current illness, exacerbation, or injury.</p> <p>Rationale: When assessing a resident for GG0170I, Walk 10 feet, consider the resident's status prior to the current episode of care and current assessment status. Use code 09, Not applicable, because Resident L did not walk prior to the current episode of care and did not walk during the assessment period. Resident L's care plan includes fitting and use of bilateral prostheses and walking as a goal. A discharge goal for any admission performance item skipped may be entered if a discharge goal is determined as part of the resident's care plan.</p>
3	GG0170	GG-60	<p>2. Walk 150 feet: Resident R has endurance limitations due to heart failure and has only walked about 30 feet during the assessment period. They have not walked 150 feet or more during the assessment period, including with the physical therapist who has been working with Resident R. The therapist speculates that Resident R could walk this distance in the future with additional assistance.</p> <p>Coding: GG0170K would be coded 88, Not attempted due to medical condition or safety concerns, and the resident's ability to walk a shorter distance would be coded in item GG0170I.</p> <p>Rationale: The activity was not attempted. The resident did not complete the activity, and a helper cannot complete the activity for the resident. A resident who walks less than 50 feet would be coded in item GG0170I, Walk 10 feet.</p>

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to Chapter 3 Section GG v1.19.1

Chapter	Section	Page(s) in version 1.19.1	Change
3	GG0170	GG-61	<ul style="list-style-type: none"> If, at the time of the assessment, a resident is unable to complete the activity because of a physician-prescribed restriction (for instance, of no stair climbing for two weeks) but could perform this activity prior to the current illness, exacerbation, or injury, code 88, Not attempted due to medical condition or safety concern, they may be able to complete the stair activities safely by some other means (e.g., stair lift, bumping/scooting on their buttocks). If so, code based on the type and amount of assistance required to complete the activity.
3	GG0170	GG-62	<ul style="list-style-type: none"> If, at the time of assessment, a resident is unable to complete the stair activities because of a physician-prescribed bedrest, code the stair activity using the appropriate “activity not attempted” code. Assess the resident going up and down one step or up and down over a curb. If both are assessed, and the resident’s performance going up and down over a curb is different from 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 resident requires the most assistance. If a resident’s environment does not have 12 steps, the combination of going up and down 4 stairs three times consecutively in a safe manner is an acceptable alternative to comply with the intention and meet the requirements of this activity. While a resident may take a break between ascending or descending the 4 steps or 12 steps, once they start the activity, they must be able to ascend (or descend) all the steps, by any safe means, without taking more than a brief rest break to consider the stair activity completed.

Track Changes
from Chapter 3 Section GG v1.18.11
to Chapter 3 Section GG v1.19.1

Chapter	Section	Page(s) in version 1.19.1	Change
3	GG0170	GG-65	<p>Example for GG0170Q1, Does the resident use a wheelchair/scooter?</p> <p>1. Does the resident use a wheelchair/scooter? On admission, Resident T wheels themselves using a manual wheelchair, but with difficulty due to their severe osteoarthritis and COPD.</p> <p>Coding: GG0170Q1 would be coded 1, Yes. The admission performance codes for wheelchair items GG0170R and GG0170S are coded; in addition, the type of wheelchair Resident T uses for GG0170RR1 is indicated as code 1, Manual. If wheelchair goal(s) are clinically indicated, then wheelchair goals can be coded.</p> <p>Rationale: The resident currently uses a wheelchair. Coding the resident's performance and the type of wheelchair (manual) is indicated. Wheeling goal(s) if clinically indicated may be coded.</p>

Track Changes
from Chapter 3 Section GG v1.18.11
to Chapter 3 Section GG v1.19.1

Chapter	Section	Page(s) in version 1.19.1	Change
3	GG0170	GG-74	<p>Discharge Goals: Coding Tips</p> <p><i>Discharge goals are coded with each Admission assessment when A0310B – 01, indicating the start of a PPS stay. Discharge goals are not required with stand-alone OBRA assessments.</i></p> <ul style="list-style-type: none"> For the SNF QRP, a minimum of one self-care or mobility goal must be coded. However, facilities may choose to complete more than one self-care or mobility discharge goal. Code the resident’s discharge goal(s) using the six-point scale. Identifying multiple goals helps to ensure that the assessment accurately reflects resident status and facilitates person-centered individualized care planning. Use of “activity not attempted” codes (07, 09, 10, and 88) is permissible to code discharge goal(s). The use of a dash is permissible for any remaining self-care or mobility goals that were not coded. Using the dash in this allowed instance after the coding of at least one goal does not affect APU determination. Licensed qualified clinicians can establish a resident’s discharge goal(s) at the time of admission based on the resident’s prior medical condition, admission assessment self-care and mobility status, discussions with the resident and family, professional judgment, practice standards, expected treatments, resident motivation to improve, anticipated length of stay, and the resident’s discharge plan. Goals should be established as part of the resident’s care plan. If the performance of an activity was coded 88, Not attempted due to medical condition or safety concerns, during the Admission assessment, a discharge goal may be coded using the six-point scale if the resident is expected to be able to perform the activity by discharge.