



Skilled Nursing Facility

Quality Reporting Program Provider Training



Application of Percent of Long-Term Care Hospital Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function and Associated MDS 3.0 Items

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Objectives

Upon completion of the training, participants will be able to:

- Define the following associated with the quality measure (QM):
 - Numerator
 - Denominator
 - Complete stay
 - Incomplete stay
 - QM calculation algorithm
 - Risk adjustment
- Describe the intent of Section GG



Objectives (continued)

Upon completion of the training, participants will be able to:

- Define a “helper”
- Explain the rationale for each Section GG item
- Describe the timeframe associated with each Section GG item
- Discuss the steps for assessment for each Section GG item
- Accurately code Section GG scenarios



Application of Percent of Long-Term Care Hospital Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function

Application of Percent of Long-Term Care Hospital Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function

- CMS has adopted this measure to satisfy the IMPACT Act requirements for CMS to specify QMs and post acute care (PAC) providers to report standardized data regarding functional status, cognitive function, and changes in function and cognitive function.
- This QM reports the percent of patients/residents with an admission and a discharge functional assessment and a goal that addresses function.



Application of Percent of Long-Term Care Hospital Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function

(continued)

Numerator

The number of Medicare Part A covered resident stays with functional assessment data for each self-care and mobility activity and at least one self-care or mobility goal

Denominator

The number of Medicare Part A covered resident stays

Application of Percent of Long-Term Care Hospital Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function

(continued)

- When a patient/resident has an incomplete stay, collection of discharge functional status data might not be feasible.
- For patients/residents with incomplete stays, admission functional status data and at least one treatment goal would be required, discharge functional status data would not be required to be reported.



Incomplete Stays

- Patients/residents who have incomplete stays are defined as those patients/residents:
 - With incomplete stays due to a medical emergency,
 - Who leave the skilled nursing facility (SNF) against medical advice, or
 - Who die while in the SNF.



Complete Stays

- All patients/residents not meeting the criteria for incomplete stays will be considered complete stays.



Quality Measure Calculation Algorithm

Step One:

For each provider, the records of Medicare Part A covered resident stays meeting the inclusion criteria (i.e., denominator) discharged during the 12 month target time period are identified and counted. This count is the denominator.



Quality Measure Calculation Algorithm (continued)

Step Two:

The records of Medicare Part A covered resident stays with complete stays are identified and the number of these Medicare Part A covered resident stays with complete admission functional assessment data (codes 1 through 6 or 7, 9 or 88) AND at least one self-care or mobility goal (codes 1 through 6) AND complete discharge functional assessment data (codes 1 through 6 or 7, 9 or 88) are counted.



Quality Measure Calculation Algorithm (continued)

Step Three:

The records of Medicare Part A covered resident stays with incomplete stays are identified, and the number of these resident records with complete admission functional status data (codes 1 through 6 or 7, 9 or 88) AND at least one self-care or mobility goal (codes 1 through 6) are counted.



Quality Measure Calculation Algorithm (continued)

Step Four:

The counts from Step Two (complete stays) and Step Three (incomplete stays) are summed. The sum is the numerator count.



Quality Measure Calculation Algorithm (continued)

Step Five:

The numerator count is divided by the denominator count to calculate this quality measure, and converted to a percent value by multiplying by 100.



Risk Adjustment

- Risk adjustment of this quality measure is not warranted.



QM Calculation Example

- Nursing Home A had 225 residents that meet the inclusion criteria discharged during the 12 month target time period.
- Denominator = 225



QM Calculation Example (continued)

- There were 175 residents with complete stays. Of these residents, 165 had complete functional status data, at least one self-care or mobility goal, and complete discharge functional status data.
- There were 50 residents with incomplete stays. Of these residents, 45 had complete admission functional status data and at least one self-care or mobility goal.
- The numerator is the sum of complete stays (165) plus incomplete stays (45).
- Numerator = 210



QM Calculation Example (continued)

- Numerator (210) is divided by the denominator (225) = 0.933
- 0.933 is converted to a percent value by multiplying it by 100 = 93.3%
- This QM is not risk adjusted.



Section GG: Functional Abilities and Goals

Section GG: Functional Abilities and Goals – Intent

- The Improving Medicare Post-Acute Care Transformation Act of 2014 (IMPACT Act) requires that CMS implement cross-setting quality measures, and the items in Section GG are used to calculate this measure.
- These items assess the need for assistance with self-care and mobility activities.
- Items focus on resident's self-care and mobility:
 - Admission performance
 - Discharge goals
 - Discharge performance



Section GG: Which Staff Members Should Complete This Section?

- Refer to facility, Federal, and State policies and procedures to determine which staff member may complete an assessment, as resident assessments are to be done in compliance with facility, Federal, and State requirements.
- Physical therapists, occupational therapists, speech language pathologists, and nurses are the typical staff involved in the assessment of self-care and mobility items.



Section GG – Key Definition: Helper

- For the purposes of completing Section GG, a “helper” is defined as facility staff who are direct employees and facility-contracted employees (e.g., rehabilitation staff, nursing agency staff).
- Does not include individuals hired, compensated or not, by individuals outside of the facility’s management and administration such as hospice staff, nursing/CNA students, etc.
- Therefore, when helper assistance is required because a resident’s performance is unsafe or of poor quality, only consider facility staff assistance when scoring according to amount of assistance provided.



GG0130: Self-Care – Admission (Start of SNF PPS Stay)

GG0130. Self-Care (Assessment period is days 1 through 3 of the SNF PPS Stay starting with A2400B)
Complete only if A0310B = 01

Code the resident's usual performance at the start of the SNF PPS stay for each activity using the 6-point scale. If activity was not attempted at the start of the SNF PPS stay, code the reason. Code the patient's end of SNF PPS stay goal(s) using the 6-point scale.

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 him/herself with no assistance from a helper.

05. **Setup or clean-up assistance** - Helper SETS UP; resident completes activity. Helper assists with following the activity.

If activity was not attempted, code reason:

07. **Resident refused.**

09. **Not applicable.**

Not attempted due to medical condition.

1. Admission Performance	2. Discharge Goal	
↓ Enter Codes in Boxes ↓		
<input type="text"/>	<input type="text"/>	A. Eating: The ability to use suitable utensils to bring food to the mouth and swallow food once the meal is presented on a table/tray. Includes modified food consistency.
<input type="text"/>	<input type="text"/>	B. Oral hygiene: The ability to use suitable items to clean teeth. [Dentures (if applicable): The ability to remove and replace dentures from and to the mouth, and manage equipment for soaking and rinsing them.]
<input type="text"/>	<input type="text"/>	C. Toileting hygiene: The ability to maintain perineal hygiene, adjust clothes before and after using the toilet, commode, bedpan, or urinal. If managing an ostomy, include wiping the opening but not managing equipment.

GG0130: Self-Care – Discharge (End of SNF PPS Stay)

GG0130. Self-Care (Assessment period is the last 3 days of the SNF PPS Stay ending on A2400C)

Complete only if A0310G is not = 2 **and** A0310H = 1 **and** A2400C minus A2400B is greater than 2 **and** A2100 is not = 03

Code the resident's usual performance at the end of the SNF PPS stay for each activity using the 6-point scale. If an activity was not attempted at the end of the SNF PPS stay, code the reason.

Coding:

Safety and Quality of Performance - If helper assisted because resident's performance is unsafe, code the reason. If activity was not attempted, code the reason.

3. Discharge Performance	
Enter Code <input type="text"/> <input type="text"/>	A. Eating: The ability to use suitable utensils to bring food to the mouth and swallow food once the meal is presented on a table/tray. Includes modified food consistency.
Enter Code <input type="text"/> <input type="text"/>	B. Oral hygiene: The ability to use suitable items to clean teeth. [Dentures (if applicable): The ability to remove and replace dentures from and to the mouth, and manage equipment for soaking and rinsing them.]
Enter Code <input type="text"/> <input type="text"/>	C. Toileting hygiene: The ability to maintain perineal hygiene, adjust clothes before and after using the toilet, commode, bedpan, or urinal. If managing an ostomy, include wiping the opening but not managing equipment.

GG0130. Self Care – Item Rationale

During a Medicare Part A SNF stay, residents may have self-care limitations on admission. In addition, residents may be at risk of further functional decline during their stay in the SNF.



GG0130: Self-Care – Steps for Assessment

1. Assess the resident's self-care status based on direct observation, the resident's self-report, family reports, and direct care staff reports documented in the resident's medical record during the 3-day assessment period, which is days 1 through 3, starting with the date in A2400B, Start of most recent Medicare stay.
2. Residents should be allowed to perform activities as independently as possible, as long as they are safe.



GG0130: Self-Care – Steps for Assessment (continued)

3. If helper assistance is required because resident's performance is unsafe or of poor quality, only consider staff assistance when scoring according to amount of assistance provided.
4. Activities may be completed with or without assistive device(s). Use of assistive device(s) to complete an activity should not affect coding of the activity.



GG0130: Self-Care – Steps for Assessment (continued)

5. Residents should be coded performing activities based on their “usual performance,” or baseline performance, which is identified as the resident’s usual activity/performance for any of the self-care or mobility activities, **not** the most independent performance and **not** the most dependent performance over the assessment period.
6. Refer to facility, Federal, and State policies and procedures to determine which staff members may complete an assessment. Resident assessments are to be done in compliance with facility, Federal, and State requirements.



GG0130 – Admission or Discharge Performance Coding Instructions

*Complete only if A0310B = 01, PPS 5-day assessment
or A0310G = 1, Planned and A0310H = 1, Part A PPS
Discharge.*

06. Independent

Code the resident's usual performance at the start of the SNF PPS stay for each activity. If the resident did not attempt at the start of the SNF PPS stay, code the reason. Code the patient's end of SNF PPS stay goal(s) using the 6-point scale.	
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.	If activity was not attempted, code reason:
06. Independent - Resident completes the activity by him/herself with no assistance from a helper.	07. Resident refused.
05. Setup or clean-up assistance - Helper SETS UP or CLEANS UP; resident completes activity. Helper assists only prior to or following the activity.	09. Not applicable.
	88. Not attempted due to medical condition or safety concerns.

Code 06, Independent: if the resident completes the activity by him/herself with no assistance from a helper.

GG0130 – Admission or Discharge Performance Coding Instructions (continued)

05. Setup or clean-up assistance

Code the resident's usual performance at the start of the SNF PPS stay, code the reason. Code the patient's end of SNF PPS stay goal(s) using the 6-point scale.	
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 him/herself 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.	If activity was not attempted, code reason: 07. Resident refused. 09. Not applicable. 88. Not attempted due to medical condition or safety concerns.

Code 05, Setup or clean-up assistance: if the helper SETS UP or CLEANS UP; resident completes activity. Helper assists only prior to or following the activity, but not during the activity.

GG0130 – Admission or Discharge Performance Coding Instructions (continued)

04. Supervision or touching assistance

Code the resident's usual performance at the start of the SNF PPS stay for each activity using the 0-point scale. If activity was not attempted at the start of the SNF PPS stay, code the reason. Code the patient's end of SNF PPS stay goal(s) using the 6-point scale.

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 him/herself 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 or TOUCHING/STEADYING 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.

If activity was not attempted, code reason:

- 07. **Resident refused.**
- 09. **Not applicable.**
- 88. Not attempted due to **medical condition or safety concerns.**

Code 04, Supervision or touching assistance: if the helper provides VERBAL CUES or TOUCHING/STEADYING assistance as resident completes activity. Assistance may be provided throughout the activity or intermittently.

GG0130 – Admission or Discharge Performance Coding Instructions (continued)

03. Partial/moderate assistance

Code the resident's usual performance at the start of the SNF PPS stay, code the reason. Code the patient's end of SNF PPS stay goal(s) using the 6-point scale.	
Coding:	
<p>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.</p> <p><i>Activities may be completed with or without assistive devices.</i></p> <ul style="list-style-type: none">06. Independent - Resident completes the activity by him/herself 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 or TOUCHING/STEADYING 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.	<p>If activity was not attempted, code reason:</p> <ul style="list-style-type: none">07. Resident refused.09. Not applicable.88. Not attempted due to medical condition or safety concerns.

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.

GG0130 – Admission or Discharge Performance Coding Instructions (continued)

02. Substantial/maximal assistance

Code the resident's usual performance at the start of the SNF PPS stay, code the reason. Code the patient's end of SNF PPS stay goal(s) using the 6-point scale.	
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 him/herself 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 or TOUCHING/STEADYING 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.	If activity was not attempted, code reason: 07. Resident refused. 09. Not applicable. 88. Not attempted due to medical condition or safety concerns.

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.

GG0130 – Admission or Discharge Performance Coding Instructions (continued)

01. Dependent

Code the resident's usual performance at the start of the SNF PPS stay for each activity at the start of the SNF PPS stay, code the reason. Code the patient's end of SNF PPS stay goal(s) using the 6-point scale.	
Coding:	
<p>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.</p> <p><i>Activities may be completed with or without assistive devices.</i></p> <p>06. Independent - Resident completes the activity by him/herself with no assistance from a helper.</p> <p>05. Setup or clean-up assistance - Helper SETS UP or CLEANS UP; resident completes activity. Helper assists only prior to or following the activity.</p> <p>04. Supervision or touching assistance - Helper provides VERBAL CUES or TOUCHING/STEADYING assistance as resident completes activity. Assistance may be provided throughout the activity or intermittently.</p> <p>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.</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>	<p>If activity was not attempted, code reason:</p> <p>07. Resident refused.</p> <p>09. Not applicable.</p> <p>88. Not attempted due to medical condition or safety concerns.</p>

Code 01, Dependent: if the helper does ALL of the effort. Resident does none of the effort to complete the activity, or the assistance of two or more helpers is required for the resident to complete the activity.

GG0130 – Admission or Discharge Performance Coding Instructions (continued)

07. Resident refused.

Code the resident's usual performance at the start of the SNF PPS stay for the activity. If the resident did not attempt at the start of the SNF PPS stay, code the reason. Code the patient's end of SNF PPS stay goal(s) using the 6-point scale.

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 him/herself 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 or TOUCHING/STEADYING 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.

If activity was not attempted, code reason:

- 07. **Resident refused.**
- 09. **Not applicable.**
- 88. Not attempted due to **medical condition or safety concerns.**

Code 07, Resident refused: if the resident refused to complete the activity.

GG0130 – Admission or Discharge Performance Coding Instructions (continued)

09. Not applicable.	
Code the resident's usual performance at the start of the SNF PPS stay for each activity. If the resident did not attempt at the start of the SNF PPS stay, code the reason. Code the patient's end of SNF PPS stay goal(s) using the 6-point scale.	
Coding:	
<p>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.</p> <p><i>Activities may be completed with or without assistive devices.</i></p> <ul style="list-style-type: none">06. Independent - Resident completes the activity by him/herself 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 or TOUCHING/STEADYING 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.	<p>If activity was not attempted, code reason:</p> <ul style="list-style-type: none">07. Resident refused.09. Not applicable.88. Not attempted due to medical condition or safety concerns.

Code 09, Not applicable: if the resident did not perform this activity prior to the current illness, exacerbation, or injury.

GG0130 – Admission or Discharge Performance Coding Instructions (continued)

88. Not attempted due to medical condition or safety concerns.	
Code the resident's usual performance at the start of the SNF PPS stay, code the reason for not attempted at	not attempted at
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> <ul style="list-style-type: none">06. Independent - Resident completes the activity by him/herself 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 or TOUCHING/STEADYING 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.	If activity was not attempted, code reason: <ul style="list-style-type: none">07. Resident refused.09. Not applicable.88. Not attempted due to medical condition or safety concerns.

Code 88, Not attempted due to medical condition or safety concerns: if the activity was not attempted due to medical condition or safety concerns.

GG0130 – Key Coding Questions

- Does the resident need assistance (physical, verbal/non-verbal cueing, setup/clean-up) to complete the self-care activity?
 - If no, **Code 06, Independent**
 - If yes...
- Does the resident need only setup or clean-up assistance?
 - If yes, **Code 05, Setup or clean-up**
 - If no...



GG0130 – Key Coding Questions

(continued)

- Does the resident need only verbal/non-verbal cueing, or steadying/touching assistance?
 - If yes, **Code 04, Supervision or touching assistance**
 - If no...
- Does the resident need lifting assistance or trunk support with the helper providing **less** than half of the effort?
 - If yes, **Code 03, Partial/moderate assistance**
 - If no...



GG0130 – Key Coding Questions

(continued)

- Does the resident need lifting assistance or trunk support with the helper providing **more** than half of the effort?
 - If yes, **Code 02, Substantial/maximal assistance**
 - If no...
- Does the helper provide **all** of the effort to complete the activity **OR** is the assistance of two or more helpers required?
 - If yes, **Code 01, Dependent**



GG0130 – Key Coding Questions

(continued)

- Was the activity not attempted? Indicate why.
 - **Code 07, Resident refused**, if the resident refused to complete the activity.
 - **Code 09, Not applicable**, if the resident did not perform this activity prior to the current illness, exacerbation, or injury.
 - **Code 88, Not attempted due to medical condition or safety concerns**, if the activity was not attempted due to medical condition or safety concerns.



GG0130 – Admission or Discharge Performance Coding Tips

- The 5-day PPS assessment (A0310B = 01) is the first Medicare-required assessment to be completed when the resident is admitted under SNF Part A.
- On the Part A PPS Discharge assessment (A0310H = 1), the Self-Care items in GG0130 are completed only if the Type of Discharge is Planned (A0310G = 1).



GG0130 – Admission or Discharge Performance Coding Tips (continued)

- When reviewing the medical record, interviewing staff, and observing the resident, be familiar with the definition for each activity (e.g., eating, oral hygiene). For example, when assessing Eating (item GG0130A), determine the type and amount of assistance required to bring food to the mouth and swallow food once the meal is presented on a table/tray.
- When coding the resident's usual performance, use the 6-point scale or code the reason why an activity was not attempted.



GG0130 – Admission or Discharge Performance Coding Tips (continued)

- At admission, when coding for the resident's discharge goal(s), use the 6-point scale.
- Record the resident's usual ability to perform each activity (e.g., eating). Do not record the resident's best performance and do not record the resident's worst performance, but rather record the resident's usual performance during the assessment period.



GG0130 – Admission or Discharge Performance Coding Tips (continued)

- Do not record the staff's assessment of the resident's potential capability to perform the activity.
- If the resident does not attempt the activity and a helper does not complete the activity for the resident, code the reason the activity was not attempted. For example, code 07 if the resident refused to attempt the activity, code 09 if the activity is not applicable for the resident, or code 88 if the resident was not able to attempt the activity due to medical condition or safety concerns.



GG0130 – Admission or Discharge Performance Coding Tips (continued)

- If two or more helpers are required to assist the resident to complete the activity, code as 01, Dependent.
- To clarify your own understanding of the resident's performance of an activity, ask probing questions to staff about the resident, beginning with the general and proceeding to the more specific.



GG0130 – Admission or Discharge Performance Coding Tips (continued)

- Coding a dash (“-”) in these items indicates “No information.” CMS expects dash use for SNF QRP items to be a rare occurrence. Use of dashes for these items may result in a 2% reduction in the annual payment update.
- If the reason the item was not assessed was that the resident refused (code 07), the item is not applicable (code 09), or the activity was not attempted due to medical condition or safety concerns (code 88), use these codes instead of a dash (“-”).



GG0130A. Eating

1. Admission Performance	2. Discharge Goal	
↓ Enter Codes in Boxes ↓		A. Eating
<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	A. Eating: The ability to use suitable utensils to bring food to the mouth and swallow food once the meal is presented on a table/tray. Includes modified food consistency.
<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	B. Oral hygiene: The ability to use suitable items to clean teeth. [Dentures (if applicable): The ability to remove and replace dentures from and to the mouth, and manage equipment for soaking and rinsing them.]
<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	C. Toileting hygiene: The ability to maintain perineal hygiene, adjust clothes before and after using the toilet, commode, bedpan, or urinal. If managing an ostomy, include wiping the opening but not managing equipment.

GG0130A. Eating: The ability to use suitable utensils to bring food to the mouth and swallow food once the meal is presented on a table/tray. Includes modified food consistency.

GG0130A. Eating Coding Scenario

Ms. S has multiple sclerosis, affecting her endurance and strength. Ms. S prefers to feed herself as much as she is capable. After eating three-fourths of her meal by herself, Ms. S usually becomes extremely fatigued and requests assistance from the certified nursing assistant (CNA) to feed her the remainder of the meal.

- **How would you code GG0130A?**
- **What is your rationale?**



GG0130A. Eating Coding Scenario

(continued)

- **Coding:** GG0130A. Eating would be coded 03, Partial/moderate assistance.
- **Rationale:** The CNA provides less than half the effort for the resident to complete the activity of eating for all meals.



GG0130A. Eating Polling Scenario

Mr. R is unable to eat by mouth due to his medical condition. He receives nutrition through a gastrostomy tube (G-tube), which is administered by nurses.



GG0130A. Eating

Polling Question:

How would you code GG0130A. Eating for Mr. R?

- A. Code 88, Not attempted due to medical condition or safety concerns
- B. Code 02, Substantial/maximal assistance
- C. Code 03, Partial/moderate assistance
- D. Code 09, Not applicable



GG0130B. Oral Hygiene

1. Admission Performance	2. Discharge Goal	
↓ Enter Codes in Boxes ↓		
<input type="text"/>	<input type="text"/>	A. Eating: The ability to use suitable utensils to bring food to the mouth and swallow food once the meal is presented on a table/tray. Includes modified food consistency.
<input type="text"/>	<input type="text"/>	B. Oral hygiene: The ability to use suitable items to clean teeth. [Dentures (if applicable): The ability to remove and replace dentures from and to the mouth, and manage equipment for soaking and rinsing them.]
<input type="text"/>	<input type="text"/>	C. Toileting hygiene: The ability to maintain perineal hygiene, adjust clothes before and after using the toilet, commode, bedpan, or urinal. If managing an ostomy, include wiping the opening but not managing equipment.

GG0130B. Oral hygiene: The ability to use suitable items to clean teeth. [Dentures (if applicable): The ability to remove and replace dentures from and to the mouth, and manage equipment for soaking and rinsing them.]

GG0130B. Oral Hygiene Coding Scenario

Mr. W is edentulous (without teeth) and his dentures no longer fit his gums. Mr. W begins to brush his upper gums after the helper applies toothpaste onto his toothbrush. He brushes his upper gums, but cannot finish due to fatigue. The helper completes the activity of oral hygiene by brushing his back upper gums and his lower gums.

- **How would you code GG0130B?**
- **What is your rationale?**

GG0130B. Oral Hygiene

Coding Scenario (continued)

- **Coding:** GG0130B. Oral hygiene would be coded 02, Substantial/maximal assistance.
- **Rationale:** The resident begins the activity. The helper completes the activity by performing more than half the effort.



GG0130B. Oral Hygiene

Polling Scenario

- **Nurse:** “Does Mrs. K help with brushing her teeth?”
- **CNA:** “She can help clean her teeth.”
- **Nurse:** “How much help does she need to brush her teeth?”
- **CNA:** “She usually gets tired after starting to brush her upper teeth. I have to brush most of her teeth.”

GG0130B. Oral Hygiene

Polling Question:

How would you code GG0130B. Oral Hygiene for Mrs. K?

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



GG0130C. Toileting Hygiene

1. Admission Performance	2. Discharge Goal	
↓ Enter Codes in Boxes ↓		
<input type="text"/>	<input type="text"/>	A. Eating: The ability to use suitable utensils to bring food to the mouth and swallow food once the meal is presented on a table/tray. Includes modified food consistency.
<input type="text"/>	<input type="text"/>	B. Oral hygiene: The ability to use suitable items to clean teeth. [Dentures (if applicable): The ability to remove and replace dentures from and to the mouth, and manage equipment for soaking and rinsing them.]
<input type="text"/>	<input type="text"/>	C. Toileting hygiene: The ability to maintain perineal hygiene, adjust clothes before and after using the toilet, commode, bedpan, or urinal. If managing an ostomy, include wiping the opening but not managing equipment.

GG0130C. Toileting hygiene: The ability to maintain perineal hygiene, adjust clothes before and after using the toilet, commode, bedpan, or urinal. If managing an ostomy, include wiping the opening but not managing equipment.

GG0130C. Toileting Hygiene

Coding Scenario

Mrs. J uses a bedside commode. The CNA provides steadying (touching) assistance as Mrs. J pulls down her pants and underwear before sitting down on the toilet. When Mrs. J is finished voiding or having a bowel movement, the CNA provides steadying assistance as Mrs. J wipes her perineal area and pulls up her pants and underwear without assistance.

- **How would you code GG0130C?**
- **What is your rationale?**

GG0130C. Toileting Hygiene

Coding Scenario (continued)

- **Coding:** GG0130C. Toileting hygiene would be coded 04, Supervision or touching assistance.
- **Rationale:** The helper provides steadying (touching) assistance to the resident to complete toileting hygiene.



GG0130C. Toileting Hygiene

Polling Scenario

Mr. C has Parkinson's disease and significant tremors that cause intermittent difficulty for him to perform perineal hygiene after having a bowel movement in the toilet. He walks to the bathroom with close supervision and lowers his pants, but asks the CNA to help him with perineal hygiene after moving his bowels. He then pulls up his pants without assistance.

GG0130C. Toileting Hygiene

Polling Question:

How would you code GG0130C. Toileting Hygiene for Mr. C?

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



GG0130. Self-Care – Discharge Goal

GG0130. Self-Care (Assessment period is days 1 through 3 of the SNF PPS Stay starting with A2400B)

Complete only if A0310B = 01

Code the resident's usual performance at the start of the SNF PPS stay for each activity using the 6-point scale. If activity was not attempted at the start of the SNF PPS stay, code the reason. Code the patient's end of SNF PPS stay goal(s) using the 6-point scale.

Coding:

1. Admission Performance	2. Discharge Goal	
↓ Enter Codes in Boxes ↓		
<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	A. Eating: The ability to use suitable utensils to bring food to the mouth and swallow food once the meal is presented on a table/tray. Includes modified food consistency.
<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	B. Oral hygiene: The ability to use suitable items to clean teeth. [Dentures (if applicable): The ability to remove and replace dentures from and to the mouth, and manage equipment for soaking and rinsing them.]
<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	C. Toileting hygiene: The ability to maintain perineal hygiene, adjust clothes before and after using the toilet, commode, bedpan, or urinal. If managing an ostomy, include wiping the opening but not managing equipment.

Discharge Goal: Coding Tips

- Use the 6-point scale to code the resident's discharge goal(s). Do not use codes 07, 09, or 88 to code discharge goal(s).
- Licensed clinicians can establish a resident's discharge goal(s) at the time of admission based on discussions with the resident and family, professional judgment, and the professional's standard of practice. Goals should be established as part of the resident's care plan.



Discharge Goal: Coding Tips (continued)

- A minimum of one self-care or mobility goal must be coded per resident stay on the 5-day PPS assessment.
- Clinicians may code one goal for each self-care and mobility item included in Section GG at the time of the 5-day PPS assessment.



GG0130. Discharge Goal

Discharge Goal Code Is Higher than 5-Day PPS Assessment Admission Performance Code

If the 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.



GG0130. Discharge Goal (continued)

Discharge Goal Code Is the Same as 5-Day PPS Assessment Admission Performance Code

The 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 clinician determines that the resident would be able to maintain her admission functional performance level. The clinician discusses functional status goals with the resident and her family and they agree that maintaining function is a reasonable goal. In this scenario, the discharge goal is coded at the same level as the resident's admission performance code.



GG0130. Discharge Goal (continued)

Discharge Goal Code Is Lower than 5-Day PPS Assessment Admission Performance Code

The clinician determines that a resident is expected to rapidly decline and that skilled therapy services may slow, but not prevent, the decline of function. In this scenario, the discharge goal code is lower than the resident's 5-day PPS assessment admission performance code.



Coding Scenario: GG0130



- Please work in groups at your table to code the Admission Performance and Discharge Goals for GG0130 on Mrs. J's Admission (Start of SNF PPS Stay) assessment.
- We will debrief in 10 minutes.

Coding Scenario: GG0130

Answers and Discussion

- How would you code **Admission Performance** for **GG0130. Self-Care** on Mrs. J's Admission (Start of SNF PPS Stay) assessment?
 - **GG0130A: Eating** –
 - **GG0130B: Oral Hygiene** –
 - **GG0130C: Toileting Hygiene** –



Coding Scenario: GG0130

Answers and Discussion

- How would you code **Discharge Goals** for **GG0130. Self-Care** on Mrs. J's Admission (Start of SNF PPS Stay) assessment?
 - **GG0130A: Eating** –
 - **GG0130B: Oral Hygiene** –
 - **GG0130C: Toileting Hygiene** –



GG0170: Mobility (3-Day Assessment Period) Admission (Start of SNF PPS Stay)

Code the resident's usual performance at the start of the SNF PPS stay for each activity using the 6-point scale. If activity was not attempted at the start of the SNF PPS stay, code the reason. Code the patient's end of SNF PPS stay goal(s) using the 6-point scale.

Coding:

1. Admission Performance ↓ Enter Codes in Boxes ↓	2. Discharge Goal	
<input type="text"/>	<input type="text"/>	B. Sit to lying: The ability to move from sitting on side of bed to lying flat on the bed.
<input type="text"/>	<input type="text"/>	C. Lying to sitting on side of bed: The ability to safely 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.
<input type="text"/>	<input type="text"/>	D. Sit to stand: The ability to safely come to a standing position from sitting in a chair or on the side of the bed.
<input type="text"/>	<input type="text"/>	E. Chair/bed-to-chair transfer: The ability to safely transfer to and from a bed to a chair (or wheelchair).
<input type="text"/>	<input type="text"/>	F. Toilet transfer: The ability to safely get on and off a toilet or commode.
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> H1. Does the resident walk? 0. No, and walking goal is <u>not</u> clinically indicated → Skip to GG0170Q1, Does the resident use a wheelchair/scooter? 1. No, and walking goal <u>is</u> clinically indicated → Code the resident's discharge goal(s) for items GG0170J and GG0170K 2. Yes → Continue to GG0170J, Walk 50 feet with two turns
<input type="text"/>	<input type="text"/>	J. Walk 50 feet with two turns: Once standing, the ability to walk at least 50 feet and make two turns.
<input type="text"/>	<input type="text"/>	K. Walk 150 feet: Once standing, the ability to walk at least 150 feet in a corridor or similar space.
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Q1. Does the resident use a wheelchair/scooter? 0. No → Skip to GG0130, Self Care 1. Yes → Continue to GG0170R, Wheel 50 feet with two turns
<input type="text"/>	<input type="text"/>	R. Wheel 50 feet with two turns: Once seated in wheelchair/scooter, can wheel at least 50 feet and make two turns.
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> RR1. Indicate the type of wheelchair/scooter used. 1. Manual 2. Motorized
<input type="text"/>	<input type="text"/>	S. Wheel 150 feet: Once seated in wheelchair/scooter, can wheel at least 150 feet in a corridor or similar space.
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> SS1. Indicate the type of wheelchair/scooter used. 1. Manual 2. Motorized

GG0170: Mobility (3-Day Assessment Period) Discharge (End of SNF PPS Stay)

Code the resident's usual performance at the end of the SNF PPS stay for each activity using the 6-point scale. If an activity was not attempted at the end of the SNF PPS stay, code the reason.

Coding:

3. Discharge Performance	
Enter Codes in Boxes	
<input type="text"/>	B. Sit to lying: The ability to move from sitting on side of bed to lying flat on the bed.
<input type="text"/>	C. Lying to sitting on side of bed: The ability to safely 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.
<input type="text"/>	D. Sit to stand: The ability to safely come to a standing position from sitting in a chair or on the side of the bed.
<input type="text"/>	E. Chair/bed-to-chair transfer: The ability to safely transfer to and from a bed to a chair (or wheelchair).
<input type="text"/>	F. Toilet transfer: The ability to safely get on and off a toilet or commode.
<input type="text"/>	<input type="checkbox"/> H3. Does the resident walk? 0. No → Skip to GG0170Q3, Does the resident use a wheelchair/scooter? 2. Yes → Continue to GG0170J, Walk 50 feet with two turns
<input type="text"/>	J. Walk 50 feet with two turns: Once standing, the ability to walk at least 50 feet and make two turns.
<input type="text"/>	K. Walk 150 feet: Once standing, the ability to walk at least 150 feet in a corridor or similar space.
<input type="text"/>	<input type="checkbox"/> Q3. Does the resident use a wheelchair/scooter? 0. No → Skip to H0100, Appliances 1. Yes → Continue to GG0170R, Wheel 50 feet with two turns
<input type="text"/>	R. Wheel 50 feet with two turns: Once seated in wheelchair/scooter, can wheel at least 50 feet and make two turns.
<input type="text"/>	<input type="checkbox"/> RR3. Indicate the type of wheelchair/scooter used. 1. Manual 2. Motorized
<input type="text"/>	S. Wheel 150 feet: Once seated in wheelchair/scooter, can wheel at least 150 feet in a corridor or similar space.
<input type="text"/>	<input type="checkbox"/> SS3. Indicate the type of wheelchair/scooter used. 1. Manual 2. Motorized

GG0170. Mobility – Item Rationale

Residents in Medicare Part A SNF stays may have mobility limitations on admission. In addition, residents may be at risk of further functional decline during their stay in the SNF.



GG0170. Mobility – Steps for Assessment

1. Assess the resident's mobility abilities based on direct observation, the resident's self-report, and reports from the clinician, care staff, or family as documented in the medical record during the 3-day assessment period, which is days 1 through 3, starting with the date in A2400B, Start of most recent Medicare stay.
2. Residents should be allowed to perform activities as independently as possible, as long as they are safe.



GG0170. Mobility – Steps for Assessment (continued)

3. If helper assistance is required because the resident's performance is unsafe or of poor quality, score according to amount of assistance provided.
4. Activities may be completed with or without assistive device(s). Use of assistive device(s) to complete an activity should not affect coding of the activity.

GG0170. Mobility – Steps for Assessment (continued)

5. If the resident's mobility performance varies during the assessment period, report the resident's usual status, not the resident's most independent performance and not the resident's most dependent episode.
6. Refer to facility, Federal, and State policies and procedures to determine which SNF staff members may complete an assessment. Resident assessments are to be done in compliance with facility, Federal, and State requirements.



GG0170 – Admission or Discharge Performance Coding Instructions

Complete only if A0310B = 01, PPS 5-day assessment or A0310G = 1, Planned and A0310H = 1, Part A PPS Discharge.

Code the resident's usual performance at the end of the SNF PPS stay for each activity at the end of the SNF PPS stay, code the reason.	
Coding:	
<p>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.</p> <p>06. Independent - Resident completes the activity by him/herself with no assistance from a helper.</p> <p>05. Setup or clean-up assistance - Helper SETS UP or CLEANS UP; resident completes activity. Helper assists only prior to or following the activity.</p> <p>04. Supervision or touching assistance - Helper provides VERBAL CUES or TOUCHING/STEADYING assistance as resident completes activity. Assistance may be provided throughout the activity or intermittently.</p> <p>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.</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>	<p>06. Independent</p> <p>If activity was not attempted, code reason:</p> <p>07. Resident refused.</p> <p>09. Not applicable.</p> <p>88. Not attempted due to medical condition or safety concerns.</p>

Code 06, Independent: if the resident completes the activity by him/herself with no assistance from a helper.

GG0170 – Admission or Discharge Performance Coding Instructions (continued)

05. Setup or clean-up assistance	
Code the resident's usual performance at the end of the SNF PPS stay, code the reason.	
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>	If activity was not attempted, code reason:
06. Independent - Resident completes the activity by him/herself with no assistance from a helper.	07. Resident refused.
05. Setup or clean-up assistance - Helper SETS UP or CLEANS UP; resident completes activity. Helper assists only prior to or following the activity.	09. Not applicable.
04. Supervision or touching assistance - Helper provides VERBAL CUES or TOUCHING/STEADYING assistance as resident completes activity. Assistance may be provided throughout the activity or intermittently.	88. Not attempted due to medical condition or safety concerns.
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.	

Code 05, Setup or clean-up assistance: if the helper SETS UP or CLEANS UP; resident completes activity. Helper assists only prior to or following the activity, but not during the activity.

GG0170 – Admission or Discharge Performance Coding Instructions (continued)

04. Supervision or touching assistance	
Code the resident's usual performance at the end of the SNF PPS stay, code the reason.	
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>	If activity was not attempted, code reason:
06. Independent - Resident completes the activity by him/herself with no assistance from a helper.	07. Resident refused.
05. Setup or clean-up assistance - Helper SETS UP or CLEANS UP; resident completes activity. Helper assists only prior to or following the activity.	09. Not applicable.
04. Supervision or touching assistance - Helper provides VERBAL CUES or TOUCHING/STEADYING assistance as resident completes activity. Assistance may be provided throughout the activity or intermittently.	88. Not attempted due to medical condition or safety concerns.
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.	

Code 04, Supervision or touching assistance: if the helper provides VERBAL CUES or TOUCHING/STEADYING assistance as resident completes activity. Assistance may be provided throughout the activity or intermittently.

GG0170 – Admission or Discharge Performance Coding Instructions (continued)

03. Partial/moderate assistance

Code the resident's usual performance at the end of the SNF PPS stay, code the reason.

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 him/herself 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 or TOUCHING/STEADYING 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.

If activity was not attempted, code reason:

- 07. **Resident refused.**
- 09. **Not applicable.**
- 88. Not attempted due to **medical condition or safety concerns.**

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.

GG0170 – Admission or Discharge Performance Coding Instructions (continued)

02. Substantial/maximal assistance	
Code the resident's usual performance at the end of the SNF PPS stay, code the reason.	
Coding:	
<p>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.</p> <p><i>Activities may be completed with or without assistive devices.</i></p> <ul style="list-style-type: none"> 06. Independent - Resident completes the activity by him/herself 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 or TOUCHING/STEADYING 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>If activity was not attempted, code reason:</p> <ul style="list-style-type: none"> 07. Resident refused. 09. Not applicable. 88. Not attempted due to medical condition or safety concerns.

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.

GG0170 – Admission or Discharge Performance Coding Instructions (continued)

Code the resident's usual performance at the end of the SNF PPS stay for each activity at the end of the SNF PPS stay, code the reason.	
Coding:	
<p>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.</p> <p><i>Activities may be completed with or without assistive devices.</i></p> <p>06. Independent - Resident completes the activity by him/herself with no assistance from a helper.</p> <p>05. Setup or clean-up assistance - Helper SETS UP or CLEANS UP; resident completes activity. Helper assists only prior to or following the activity.</p> <p>04. Supervision or touching assistance - Helper provides VERBAL CUES or TOUCHING/STEADYING assistance as resident completes activity. Assistance may be provided throughout the activity or intermittently.</p> <p>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.</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>	<p>01. Dependent</p> <p>If activity was not attempted, code reason:</p> <p>07. Resident refused.</p> <p>09. Not applicable.</p> <p>88. Not attempted due to medical condition or safety concerns.</p>

Code 01, Dependent: if the helper does ALL of the effort. Resident does none of the effort to complete the activity, or the assistance of two or more helpers is required for the resident to complete the activity.

GG0170 – Admission or Discharge Performance Coding Instructions (continued)

Code the resident's usual performance at the end of the SNF PPS stay at the end of the SNF PPS stay, code the reason.	07. Resident refused.	as not attempted
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 him/herself 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 or TOUCHING/STEADYING 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.	If activity was not attempted, code reason: 07. Resident refused. 09. Not applicable. 88. Not attempted due to medical condition or safety concerns.	

Code 07, Resident refused: if the resident refused to complete the activity.

GG0170 – Admission or Discharge Performance Coding Instructions (continued)

09. Not applicable.	
Code the resident's usual performance at the end of the SNF PPS stay at the end of the SNF PPS stay, code the reason.	
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 him/herself 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 or TOUCHING/STEADYING 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.	If activity was not attempted, code reason: 07. Resident refused. 09. Not applicable. 88. Not attempted due to medical condition or safety concerns.

Code 09, Not Applicable: if the resident did not perform this activity prior to the current illness, exacerbation, or injury.

GG0170 – Admission or Discharge Performance Coding Instructions (continued)

<div>88. Not attempted due to medical condition or safety concerns.</div>		as not attempted
Code the resident's usual performance at the end of the SNF PPS stay, code the reason for not attempted		
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 him/herself 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 or TOUCHING/STEADYING 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.		If activity was not attempted, code reason: 07. Resident refused. 09. Not applicable. 88. Not attempted due to medical condition or safety concerns.

Code 88, Not attempted due to medical condition or safety concerns: if the activity was not attempted due to medical condition or safety concerns.

GG0170 – Admission or Discharge Performance Coding Tips

- The 5-day PPS assessment is the first Medicare-required assessment to be completed when the resident is admitted for a SNF Part A stay.
- On the Part A PPS Discharge assessment (A0310H = 1), the Mobility items in GG0170 are completed only if the Type of Discharge is Planned (A0310G = 1).



GG0170 – Admission or Discharge Performance Coding Tips (continued)

- When reviewing the health records, interviewing staff, and observing the resident, be familiar with the definition of each activity. For example, when assessing Walk 50 feet with 2 turns (item GG0170J), determine the level of assistance required to walk 50 feet while making 2 turns.
- On the 5-day PPS assessment, code the resident's usual performance using the 6-point scale or code the reason an activity was not attempted, as well as the resident's discharge goal(s) using the 6-point scale. Instructions above related to coding Discharge Goals for the mobility items (GG0170) are the same as those for coding Discharge Goals for the self-care items (GG0130).



GG0170 – Admission or Discharge Performance Coding Tips (continued)

- On the Part A PPS Discharge assessment, code the resident's usual performance using the 6-point scale or code the reason an activity was not attempted.
- Record the resident's usual ability to perform each activity. Do not record the resident's best performance and do not record the resident's worst performance, but rather record the resident's usual performance.



GG0170 – Admission or Discharge Performance Coding Tips (continued)

- Do not record the staff's assessment of the resident's potential capability to perform the activity.
- If the resident does not attempt the activity and a helper does not complete the activity for the resident, code the reason the activity was not attempted. For example, code 07 if the resident refused to attempt the activity, code 09 if the activity is not applicable for the resident, or code 88 if the resident was not able to attempt the activity due to medical condition or safety concerns.



GG0170 – Admission or Discharge Performance Coding Tips (continued)

- If two or more helpers are required to assist the resident to complete the activity, code as 01, Dependent.
- To clarify your own understanding and observations about a resident's performance of an activity, ask probing questions, beginning with the general and proceeding to the more specific.



GG0170 – Admission or Discharge Performance Coding Tips (continued)

- Coding a dash (“-”) indicates “No information.” CMS expects dash use for SNF QRP items to be a rare occurrence. Use of dashes for these items may result in a 2% reduction in the annual payment update.
- If the reason that the activity was not attempted is that the resident refused (code 07), the item is not applicable (code 09), or the activity was not attempted due to medical condition or safety concerns (code 88), use these codes instead of a dash (“-”).



GG0170 – Key Coding Questions

- Does the resident need assistance (physical, verbal/non-verbal cueing, setup/clean-up) to complete the mobility activity?
 - If no, **Code 06, Independent**
 - If yes...
- Does the resident need only setup or clean-up assistance?
 - If yes, **Code 05, Setup or clean-up**
 - If no...



GG0170 – Key Coding Questions

(continued)

- Does the resident need only verbal/non-verbal cueing, or steadying/touching assistance?
 - If yes, **Code 04, Supervision or touching assistance**
 - If no...
- Does the resident need lifting assistance or trunk support with the helper providing **less** than half of the effort?
 - If yes, **Code 03, Partial/moderate assistance**
 - If no...



GG0170 – Key Coding Questions

(continued)

- Does the resident need lifting assistance or trunk support with the helper providing **more** than half of the effort?
 - If yes, **Code 02, Substantial/maximal assistance**
 - If no...
- Does the helper provide **all** of the effort to complete the activity or is the assistance of 2 or more helpers required to complete the activity?
 - If yes, **Code 01, Dependent**



GG0170 – Key Coding Questions

(continued)

- Was the activity not attempted? Indicate why.
 - **Code 07, Resident refused**, if the resident refused to complete the activity.
 - **Code 09, Not applicable**, if the resident did not perform this activity prior to the current illness, exacerbation, or injury.
 - **Code 88, Not attempted due to medical condition or safety concerns**, if the activity was not attempted due to medical condition or safety concerns.



GG0170B. Sit to Lying

1. Admission Performance	2. Discharge Goal	
↓ Enter Codes in Boxes ↓		
<input type="text"/>	<input type="text"/>	B. Sit to lying: The ability to move from sitting on side of bed to lying flat on the bed.
<input type="text"/>	<input type="text"/>	C. Lying to sitting on side of bed: The ability to safely 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.
<input type="text"/>	<input type="text"/>	D. Sit to stand: The ability to safely come to a standing position from sitting in a chair or on the side of the bed.
<input type="text"/>	<input type="text"/>	E. Chair/bed-to-chair transfer: The ability to safely transfer to and from a bed to a chair (or wheelchair).
<input type="text"/>	<input type="text"/>	F. Toilet transfer: The ability to safely get on and off a toilet or commode.

GG0170B. Sit to lying: The ability to move from sitting on side of bed to lying flat on the bed.

GG0170B. Sit to Lying Polling Scenario

Mrs. H requires assistance from a nurse to transfer from sitting at the edge of the bed to lying flat on the bed because of paralysis on her right side. The nurse lifts and positions Mrs. H's right leg. Mrs. H uses her arms to position her upper body. Overall, Mrs. H performs more than half of the effort.



GG0170B. Sit to Lying

Polling Question:

How would you code GG0170B. Sit to Lying for Mrs. H?

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



GG0170C. Lying to Sitting on Side of Bed

1. Admission Performance	2. Discharge Goal	
↓ Enter Codes in Boxes ↓		
<input type="text"/>	<input type="text"/>	C. Lying to sitting on side of bed
<input type="text"/>	<input type="text"/>	B. Sit to lying: The ability to move from sitting on side of bed to lying flat on the bed.
<input type="text"/>	<input type="text"/>	C. Lying to sitting on side of bed: The ability to safely 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.
<input type="text"/>	<input type="text"/>	D. Sit to stand: The ability to safely come to a standing position from sitting in a chair or on the side of the bed.
<input type="text"/>	<input type="text"/>	E. Chair/bed-to-chair transfer: The ability to safely transfer to and from a bed to a chair (or wheelchair).
<input type="text"/>	<input type="text"/>	F. Toilet transfer: The ability to safely get on and off a toilet or commode.

GG0170C. Lying to sitting on side of bed: The ability to safely 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.

GG0170C. Lying to Sitting on Side of Bed Coding Scenario

Ms. P is being treated for sepsis and has multiple infected wounds on her lower extremities. Full assistance from the CNA is needed to move Ms. P from a lying position to sitting on the side of her bed because she usually has pain in her lower extremities upon movement.

- **How would you code GG0170C?**
- **What is your rationale?**



GG0170C. Lying to Sitting on Side of Bed Coding Scenario (continued)

- **Coding:** GG0170C. Lying to sitting on side of bed would be coded 01, Dependent.
- **Rationale:** The helper fully completed the activity of lying to sitting on the side of bed for the resident.



GG0170D. Sit to Stand

1. Admission Performance	2. Discharge Goal	
↓ Enter Codes in Boxes ↓		
<input type="text"/>	<input type="text"/>	D. Sit to stand
<input type="text"/>	<input type="text"/>	B. Sit to lying: The ability to move from sitting on side of bed to lying flat on the bed.
<input type="text"/>	<input type="text"/>	C. Lying to sitting on side of bed: The ability to safely 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.
<input type="text"/>	<input type="text"/>	D. Sit to stand: The ability to safely come to a standing position from sitting in a chair or on the side of the bed.
<input type="text"/>	<input type="text"/>	E. Chair/bed-to-chair transfer: The ability to safely transfer to and from a bed to a chair (or wheelchair).
<input type="text"/>	<input type="text"/>	F. Toilet transfer: The ability to safely get on and off a toilet or commode.

GG0170D. Sit to stand: The ability to safely come to a standing position from sitting in a chair or on the side of the bed.

GG0170D. Sit to Stand Coding Scenario

Mr. M has osteoarthritis and is recovering from sepsis. Mr. M transitions from a sitting to a standing position with the steadying (touching) assistance of the nurse's hand on Mr. M's trunk.

- **How would you code GG0170D?**
- **What is your rationale?**



GG0170D. Sit to Stand Coding Scenario (continued)

- **Coding:** GG0170D. Sit to stand would be coded 04, Supervision or touching assistance.
- **Rationale:** The helper provides touching assistance only.



GG0170E. Chair/Bed-to-Chair Transfer

1. Admission Performance	2. Discharge Goal	
↓ Enter Codes in Boxes ↓		
<input type="text"/>	<input type="text"/>	E. Chair/bed-to-chair transfer
<input type="text"/>	<input type="text"/>	B. Sit to lying: The ability to move from sitting on side of bed to lying flat on the bed.
<input type="text"/>	<input type="text"/>	C. Lying to sitting on side of bed: The ability to safely 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.
<input type="text"/>	<input type="text"/>	D. Sit to stand: The ability to safely come to a standing position from sitting in a chair or on the side of the bed.
<input type="text"/>	<input type="text"/>	E. Chair/bed-to-chair transfer: The ability to safely transfer to and from a bed to a chair (or wheelchair).
<input type="text"/>	<input type="text"/>	F. Toilet transfer: The ability to safely get on and off a toilet or commode.

GG0170E. Chair/bed-to-chair transfer:

The ability to safely transfer to and from a bed to a chair (or wheelchair).

GG0170E. Chair/Bed-to-Chair Transfer Coding Scenario

Mr. F's medical conditions include morbid obesity, diabetes mellitus, and sepsis, and he recently underwent bilateral above-the-knee amputations. Mr. F requires full assistance with transfers from the bed to the wheelchair using a lift device. Two CNAs are required for safety when using the device to transfer Mr. F from the bed to a wheelchair. Mr. F is unable to assist in the transfer from his bed to the wheelchair.

- **How would you code GG0170E?**
- **What is your rationale?**

GG0170E. Chair/Bed-to-Chair Transfer Coding Scenario (continued)

- **Coding:** GG0170E. Chair/bed-to-chair transfer would be coded 01, Dependent.
- **Rationale:** The two helpers completed all the effort for the activity of chair/bed-to-chair transfer. If two or more helpers are required to assist the resident to complete an activity, code as 01, Dependent.



GG0170F. Toilet Transfer

1. Admission Performance	2. Discharge Goal	
↓ Enter Codes in Boxes ↓		
<input type="text"/>	<input type="text"/>	B. Sit to lying: The ability to move from sitting on side of bed to lying flat on the bed.
<input type="text"/>	<input type="text"/>	C. Lying to sitting on side of bed: The ability to safely 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.
<input type="text"/>	<input type="text"/>	D. Sit to stand: The ability to safely come to a standing position from sitting in a chair or on the side of the bed.
<input type="text"/>	<input type="text"/>	E. Chair/bed-to-chair transfer: The ability to safely transfer to and from a bed to a chair (or wheelchair).
<input type="text"/>	<input type="text"/>	F. Toilet transfer: The ability to safely get on and off a toilet or commode.

F. Toilet transfer

GG0170F. Toilet transfer: The ability to safely get on and off a toilet or commode.

GG0170F. Toilet Transfer Polling Scenario

The CNA provides steadying (touching) assistance as Mrs. Z transfers onto the toilet and lowers her underwear. After voiding, Mrs. Z cleanses herself. She then stand up as the helper steadies her and Mrs. Z pulls up her underwear as the helper steadies her to ensure Mrs. Z does not lose her balance.

GG0170F. Toilet Transfer

Polling Question:

How would you code GG0170F. Toilet transfer for Mrs. Z?

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



GG0170F. Toilet Transfer Coding Scenario

- **Coding:** GG0170F. Toilet transfer would be coded 04, Supervision or touching assistance.
- **Rationale:** The helper provides steadying assistance as the resident transfers onto and off the toilet. Assistance with managing clothing and cleansing is coded under GG130C Toileting hygiene and is not considered when rating the Toilet transfer item.

GG0170H1. Does the Resident Walk?

1. Admission Performance	2. Discharge Goal		
↓ Enter Codes in Boxes ↓			
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	H1. Does the resident walk? 0. No , and walking goal is <u>not</u> clinically indicated → Skip to GG0170Q1, Does the resident use a wheelchair/scooter? 1. No , and walking goal <u>is</u> clinically indicated → Code the resident's discharge goal(s) for items GG0170J and GG0170K 2. Yes → Continue to GG0170J, Walk 50 feet with two turns
<input type="text"/>	<input type="text"/>	J. Walk 50 feet with two turns: Once standing, the ability to walk at least 50 feet and make two turns.	

GG0170H1. Does the resident walk?

0. No, and walking goal is not clinically indicated → Skip to GG0170Q1, Does the resident use a wheelchair/scooter?

1. No, and walking goal is clinically indicated → Code the resident's discharge goal(s) for items GG0170J and GG0170K

2. Yes → Continue to GG0170J, Walk 50 feet with two turns

GG0170H1 is done with Admission (Start of SNF PPS Stay)

GG0170H1. Does the Resident Walk?

Coding Scenario

Mr. Z currently does not walk, but a walking goal is clinically indicated.

- How would you code GG0170H1?
- What is your rationale?



GG0170H1. Does the Resident Walk?

Coding Scenario (continued)

- **Coding:** GG0170H1. Does the resident walk? would be coded 1, No, and walking goal is clinically indicated. Discharge goal(s) for items GG0170I. Walk 10 feet, J. Walk 50 feet with two turns, and K. Walk 150 feet may be coded.
- **Rationale:** The resident does not currently walk, so no admission performance code is entered for the walking items. However, a walking goal is clinically indicated and walking goals may be coded.



GG0170H3. Does the Resident Walk?

3. Discharge Performance	H3. Does the resident walk?
Enter Codes in Boxes	
<input type="text"/>	F. Toilet transfer: The ability to safely get on and off a toilet or commode.
<input type="text"/>	<input type="checkbox"/> H3. Does the resident walk? 0. No → Skip to GG0170Q3, Does the resident use a wheelchair/scooter? 2. Yes → Continue to GG0170J, Walk 50 feet with two turns
<input type="text"/>	J. Walk 50 feet with two turns: Once standing, the ability to walk at least 50 feet and make two turns.

GG0170H3. Does the resident walk?

0. No → Skip to GG0170Q3, Does the resident use a wheelchair/scooter?

2. Yes → Continue to GG0170J, Walk 50 feet with two turns

GG0170H3 is done with Discharge (End of SNF PPS Stay)

GG0170H3. Does the Resident Walk?

Coding Scenario

At the end of her SNF PPS stay, Ms. H is walking with a quad cane to all destinations in the facility and safely walks outside in the courtyard with her walker.

- **How would you code GG0170H3?**
- **What is your rationale?**



GG0170H3. Does the Resident Walk?

Coding Scenario (continued)

- **Coding:** GG0170H3. Does the resident walk? would be coded 2, Yes, and each walking discharge performance item (GG0170J. Walk 50 feet with two turns and GG0170K. Walk 150 feet) would then be coded.
- **Rationale:** The resident currently walks to all destinations inside the facility and in the facility courtyard.



GG0170J.

Walk 50 Feet With Two Turns

1. Admission Performance	2. Discharge Goal	
↓ Enter Codes in Boxes ↓		
<input type="text"/>	<input type="text"/>	J. Walk 50 feet with two turns
<input type="text"/>	<input type="text"/>	J. Walk 50 feet with two turns: Once standing, the ability to walk at least 50 feet and make two turns.
<input type="text"/>	<input type="text"/>	K. Walk 150 feet: Once standing, the ability to walk at least 150 feet in a corridor or similar space.
		<input type="checkbox"/> Q1. Does the resident use a wheelchair/scooter? 0. No → Skip to GG0130, Self Care 1. Yes → Continue to GG0170R, Wheel 50 feet with two turns

GG0170J. Walk 50 feet with two turns:
 Once standing, the ability to walk at least 50 feet and make two turns.

GG0170J. Walk 50 Feet With Two Turns Polling Scenario

Mrs. L is unable to bear her full weight on her left leg. As she walks 60 feet down the hall with her crutches and makes two turns, the CNA supports her trunk and provides less than half the effort.



GG0170J. Walk 50 Feet With Two Turns Polling Question: How would you code GG0170J. Walk 50 Feet With Two Turns for Mrs. L?

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



GG0170K. Walk 150 Feet

1. Admission Performance	2. Discharge Goal	
↓ Enter Codes in Boxes ↓		
<input type="text"/>	<input type="text"/>	K. Walk 150 feet
<input type="text"/>	<input type="text"/>	J. Walk 50 feet with two turns: Once standing, the ability to walk at least 50 feet and make two turns.
<input type="text"/>	<input type="text"/>	K. Walk 150 feet: Once standing, the ability to walk at least 150 feet in a corridor or similar space.
		<input type="checkbox"/> Q1. Does the resident use a wheelchair/scooter? 0. No → Skip to GG0130, Self Care 1. Yes → Continue to GG0170R, Wheel 50 feet with two turns

GG0170K. Walk 150 feet: Once standing, the ability to walk at least 150 feet in a corridor or similar space.

GG0170K. Walk 150 Feet

Coding Scenario

Mr. R has endurance limitations due to heart failure and has only walked about 30 feet during the 3-day assessment period. He has not walked 150 feet or more during the assessment period, including with the physical therapist who has been working with Mr. R. The therapist speculates that Mr. R could walk this distance in the future with additional assistance.

- **How would you code GG0170K?**
- **What is your rationale?**



GG0170K. Walk 150 Feet

Coding Scenario

- **Coding:** GG0170K. Walk 150 feet would be coded 88, Activity not attempted due to medical or safety concerns.
- **Rationale:** The activity was not attempted.



GG0170Q1. Does the Resident Use a Wheelchair/Scooter?

1. Admission Performance	2. Discharge Goal	
↓ Enter Codes in Boxes ↓		
<input type="text"/>	<input type="text"/>	J. Walk 50 feet with two turns: Once standing, the ability to walk at least 50 feet and make two turns.
<input type="text"/>	<input type="text"/>	K. Walk 150 feet: Once standing, the ability to walk at least 150 feet in a corridor or similar space.
		<input type="checkbox"/> Q1. Does the resident use a wheelchair/scooter? 0. No → Skip to GG0130, Self Care 1. Yes → Continue to GG0170R, Wheel 50 feet with two turns

GG0170Q1. Does the resident use a wheelchair/scooter?

0. No → Skip to GG0130, Self Care

1. Yes → Continue to GG0170R, Wheel 50 feet with two turns

*GG0170Q1 is done with Admission
(Start of SNF PPS Stay)*

GG0170Q3. Does the Resident Use a Wheelchair/Scooter?

3. Discharge Performance	
Enter Codes in Boxes	
<div><div></div><div></div></div>	<div><input type="checkbox"/> Q3. Does the resident use a wheelchair/scooter? 0. No → Skip to H0100, Appliances 1. Yes → Continue to GG0170R, Wheel 50 feet with two turns</div> <div><input type="checkbox"/> R. Wheel 50 feet with two turns: Once seated in wheelchair/scooter, can wheel at least 50 feet and make two turns.</div> <div><input type="checkbox"/> RR3. Indicate the type of wheelchair/scooter used. 1. Manual 2. Motorized</div>

GG0170Q3. Does the resident use a wheelchair/scooter?

- 0. No → Skip to H0100, Appliances
- 1. Yes → Continue to GG0170R, Wheel 50 feet with two turns

*GG0170Q3 is done with Discharge
(End of SNF PPS Stay)*

GG0170R. Wheel 50 Feet With Two Turns

1. Admission Performance	2. Discharge Goal	
↓ Enter Codes in Boxes ↓		
<input type="text"/>	<input type="text"/>	<div style="border: 1px solid black; padding: 5px; display: inline-block;"> R. Wheel 50 feet with two turns </div>
		R. Wheel 50 feet with two turns: Once seated in wheelchair/scooter, can wheel at least 50 feet and make two turns.
		<input type="checkbox"/> RR1. Indicate the type of wheelchair/scooter used. 1. Manual 2. Motorized

GG0170R. Wheel 50 feet with two turns:

Once seated in wheelchair/scooter, can wheel at least 50 feet and make two turns.

GG0170R. Wheel 50 Feet With Two Turns Coding Scenario

Once seated in the manual wheelchair, Ms. R wheels about 10 feet, then asks the therapist to push the wheelchair an additional 40 feet into her room and her bathroom.

- **How would you code GG0170R?**
- **What is your rationale?**



GG0170R. Wheel 50 Feet With Two Turns Coding Scenario (continued)

- **Coding:** GG0170R. Wheel 50 feet with two turns would be coded 02, Substantial/maximal assistance.
- **Rationale:** The helper provides more than half the effort.



GG0170RR1. Indicate the Type of Wheelchair/Scooter Used

1. Admission Performance	2. Discharge Goal	RR1. Indicate the type of wheelchair/scooter used.
↓ Enter Codes in Boxes ↓		
<input type="text"/>	<input type="text"/>	R. Wheel 50 feet with two turns: Once seated in wheelchair/scooter, can wheel at least 50 feet and make two turns.
		<input type="checkbox"/> RR1. Indicate the type of wheelchair/scooter used. 1. Manual 2. Motorized
<input type="text"/>	<input type="text"/>	S. Wheel 150 feet: Once seated in wheelchair/scooter, can wheel at least 150 feet in a corridor or similar space.

GG0170RR1. Indicate the type of wheelchair/scooter used.

1. Manual
2. Motorized

*GG0170RR1 is done with Admission
(Start of SNF PPS Stay)*

GG0170RR3. Indicate the Type of Wheelchair/Scooter Used

3. Discharge Performance	RR3. Indicate the type of wheelchair/scooter used.	
Enter Codes in Boxes	R. Wheel 50 feet with two turns: Once seated in wheelchair/scooter, can wheel at least 50 feet and make two turns.	
<input type="text"/> <input type="text"/>	<input type="checkbox"/> RR3. Indicate the type of wheelchair/scooter used. 1. Manual 2. Motorized	
<input type="text"/> <input type="text"/>	S. Wheel 150 feet: Once seated in wheelchair/scooter, can wheel at least 150 feet in a corridor or similar space.	

GG0170RR3. Indicate the type of wheelchair/scooter used.

1. Manual
2. Motorized

*GG0170RR3 is done with Discharge
(End of SNF PPS Stay)*

GG0170S. Wheel 150 Feet

3. Discharge Performance	<div style="border: 2px solid blue; padding: 5px; display: inline-block;">S. Wheel 150 feet</div>	
Enter Codes in Boxes		
<input type="text"/> <input type="text"/>	R. Wheel 50 feet with two turns: Once seated in wheelchair/scooter, can wheel at least 50 feet and make two turns.	
<input type="checkbox"/>	RR3. Indicate the type of wheelchair/scooter used. 1. Manual 2. Motorized	
<input type="text"/> <input type="text"/>	S. Wheel 150 feet: Once seated in wheelchair/scooter, can wheel at least 150 feet in a corridor or similar space.	

GG0170S. Wheel 150 feet: Once seated in wheelchair/scooter, can wheel at least 150 feet in a corridor or similar space.

GG0170S. Wheel 150 Feet Coding Scenario

Mr. G always uses a motorized scooter to mobilize himself down the hallway and the therapist provides cues due to safety issues (to avoid running into the walls).

- **How would you code GG0170S?**
- **What is your rationale?**



GG0170S. Wheel 150 Feet Coding Scenario (continued)

- **Coding:** GG0170S. Wheel 150 feet would be coded 04, Supervision or touching assistance.
- **Rationale:** The helper provides verbal cues to complete the activity.



GG0170SS1. Indicate the Type of Wheelchair/Scooter Used

1. Admission Performance	2. Discharge Goal	SS1. Indicate the type of wheelchair/scooter used.	
↓ Enter Codes in Boxes ↓			
<div style="border: 1px solid black; width: 30px; height: 30px; margin: 0 auto;"></div>	<div style="border: 1px solid black; width: 30px; height: 30px; margin: 0 auto;"></div>	S. Wheel 150 feet: Once seated in wheelchair/scooter, can wheel at least 150 feet in a corridor or similar space.	
		<input type="checkbox"/>	SS1. Indicate the type of wheelchair/scooter used. 1. Manual 2. Motorized

GG0170SS1. Indicate the type of wheelchair/scooter used.

1. Manual
2. Motorized

*GG0170SS1 is done with Admission
(Start of SNF PPS Stay)*

GG0170. Mobility – Discharge Goal

Code the resident's usual performance at the start of the SNF PPS stay for each activity using the 6-point scale. If activity was not attempted at the start of the SNF PPS stay, code the reason. Code the patient's end of SNF PPS stay goal(s) using the 6-point scale.

Coding:

1. Admission Performance	2. Discharge Goal	
↓ Enter Codes in Boxes ↓		
<input type="text"/>	<input type="text"/>	B. Sit to lying: The ability to move from sitting on side of bed to lying flat on the bed.
<input type="text"/>	<input type="text"/>	C. Lying to sitting on side of bed: The ability to safely 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.
<input type="text"/>	<input type="text"/>	D. Sit to stand: The ability to safely come to a standing position from sitting in a chair or on the side of the bed.
<input type="text"/>	<input type="text"/>	E. Chair/bed-to-chair transfer: The ability to safely transfer to and from a bed to a chair (or wheelchair).
<input type="text"/>	<input type="text"/>	F. Toilet transfer: The ability to safely get on and off a toilet or commode.
		<input type="checkbox"/> H1. Does the resident walk? 0. No, and walking goal is <u>not</u> clinically indicated → Skip to GG0170Q1, Does the resident use a wheelchair/scooter? 1. No, and walking goal <u>is</u> clinically indicated → Code the resident's discharge goal(s) for items GG0170J and GG0170K 2. Yes → Continue to GG0170J, Walk 50 feet with two turns
<input type="text"/>	<input type="text"/>	J. Walk 50 feet with two turns: Once standing, the ability to walk at least 50 feet and make two turns.
<input type="text"/>	<input type="text"/>	K. Walk 150 feet: Once standing, the ability to walk at least 150 feet in a corridor or similar space.
		<input type="checkbox"/> Q1. Does the resident use a wheelchair/scooter? 0. No → Skip to GG0130, Self Care 1. Yes → Continue to GG0170R, Wheel 50 feet with two turns
<input type="text"/>	<input type="text"/>	R. Wheel 50 feet with two turns: Once seated in wheelchair/scooter, can wheel at least 50 feet and make two turns.
		<input type="checkbox"/> RR1. Indicate the type of wheelchair/scooter used. 1. Manual 2. Motorized
<input type="text"/>	<input type="text"/>	S. Wheel 150 feet: Once seated in wheelchair/scooter, can wheel at least 150 feet in a corridor or similar space.
		<input type="checkbox"/> SS1. Indicate the type of wheelchair/scooter used. 1. Manual 2. Motorized

*Applies to Admission
(Start of PPS Stay)*

GG0170SS3. Indicate the Type of Wheelchair/Scooter Used

3. Discharge Performance	SS3. Indicate the type of wheelchair/scooter used.	
Enter Codes in Boxes		
<input type="text"/> <input type="text"/>	S. Wheel 150 feet: Once seated in wheelchair/scooter, can wheel at least 150 feet in a corridor or similar space.	
	<input type="checkbox"/>	SS3. Indicate the type of wheelchair/scooter used. 1. Manual 2. Motorized

GG0170SS3. Indicate the type of wheelchair/scooter used.

1. Manual
2. Motorized

*GG0170SS3 is done with Discharge
(End of SNF PPS Stay)*

GG0170. Mobility – Discharge Goal

(continued)

- Instructions for coding Discharge Goals for the mobility items (GG0170) are the same as those for coding Discharge Goals for the self-care items (GG0130).
- See slides 65–70 for more information.



Coding Scenario: GG0170



- Please work in groups at your table to code the Admission Performance for GG0170 on Mrs. J's Admission (Start of SNF PPS Stay) assessment.
- We will debrief in 10-15 minutes.

Coding Scenario: GG0170

Answers and Discussion

- How would you code **Admission Performance** for **GG0170. Mobility** on Mrs. J's Admission (Start of SNF PPS Stay) assessment?
 - **GG0170B: Sit to Lying** –
 - **GG0170C: Lying to Sitting on Side of Bed** –
 - **GG0170D: Sit to Stand** –
 - **GG0170E: Chair/Bed to Chair Transfer** –

Coding Scenario: GG0170

Answers and Discussion

- How would you code **Admission Performance** for **GG0170. Mobility** on Mrs. J's Admission (Start of SNF PPS Stay) assessment?
 - **GG0170F: Toilet Transfer** –
 - **GG0170H1: Does the Resident Walk?** –
 - **GG0170J: Walk 50 Feet with 2 Turns** –
 - **GG0170K: Walk 150 Feet** –



Coding Scenario: GG0170

Answers and Discussion

- How would you code **Admission Performance** for **GG0170. Mobility** on Mrs. J's Admission (Start of SNF PPS Stay) assessment?
 - **GG0170Q1: Does the resident use a wheelchair/scooter? –**
 - **GG0170R: Wheel 50 Feet with Two Turns –**
 - **GG0170RR1: Indicate Type of Wheelchair/Scooter Used –**



Coding Scenario: GG0170

Answers and Discussion

- How would you code **Admission Performance** for **GG0170. Mobility** on Mrs. J's Admission (Start of SNF PPS Stay) assessment?
 - **GG0170S: Wheel 150 Feet –**
 - **GG0170SS1: Indicate the Type of Wheelchair/Scooter Used –**



Section GG: Summary

- The items in Section GG are used to calculate the SNF QRP Function quality measure.
- During a Medicare Part A SNF stay, residents may have self-care and mobility limitations on admission. In addition, residents may be at risk of further functional decline during their stay in the SNF.
- Section GG assesses the need for assistance with, and establishes goals for, self-care and mobility activities.



Questions and Answers

