



Home Health Quality Reporting Program Provider Training

Section GG: Functional Abilities and Goals

Kathryn D. Roby and Charlotte Steniger
Qualidigm

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 - Home Health Quality Reporting Training page:
<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/HomeHealthQualityInits/Home-Health-Quality-Reporting-Training.html>
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Today's Presenters



**Kathryn D. Roby, M.Ed., M.S., R.N.,
CHCE, CHAP/ACHC**
Senior Consultant, Home Health Services
Qualidigm



**Charlotte Steniger, R.N., M.S.N., COS-C,
COQ-S, CHAP/ACHC**
Consultant, Home Health Services
Qualidigm

Acronyms in This Presentation

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



Acronyms in This Presentation (cont. 1)

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



Acronyms in This Presentation (cont. 2)

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



Learning Objectives

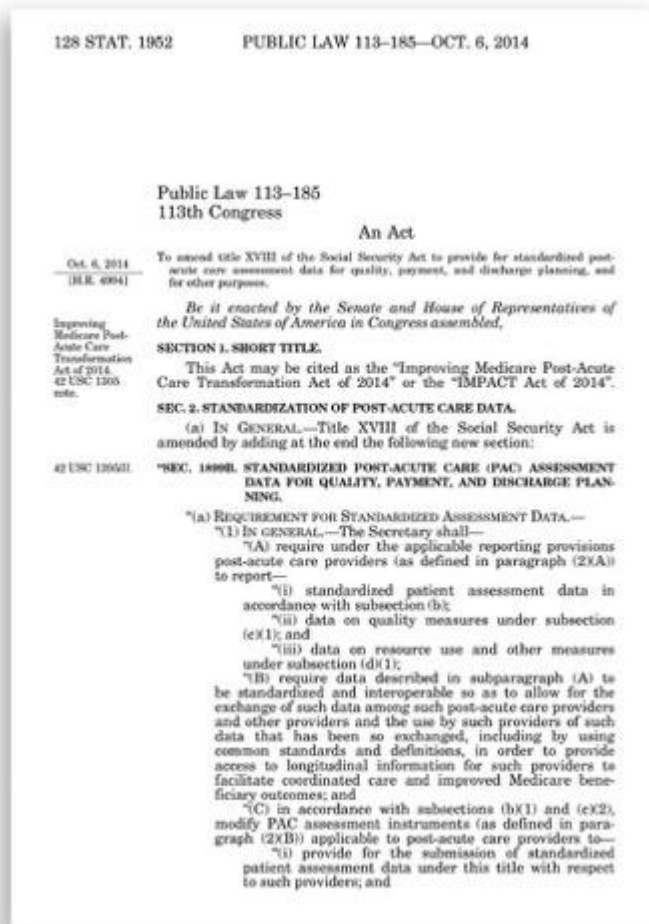
- 1** Describe the new assessment items in Section GG: Functional Abilities and Goals
- 2** Apply coding instructions to accurately code practice scenarios
- 3** Identify resources available to guide utilization of Outcome and Assessment Information Set D (OASIS-D)



Overview of Section GG, Effective January 1, 2019

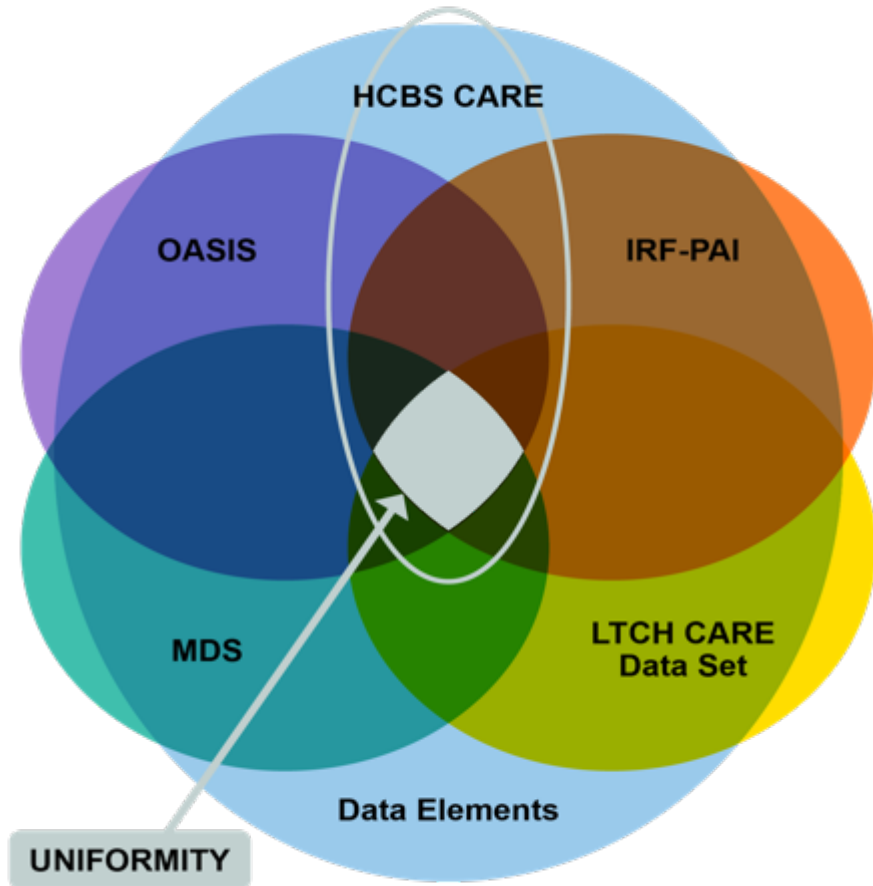
Section	Item	Time Points Completed
Section GG: Functional Abilities and Goals	<ul style="list-style-type: none"> GG0100. Prior Functioning: Everyday Activities GG0110. Prior Device Use 	<ul style="list-style-type: none"> Start of Care (SOC) Resumption of Care (ROC)
	<ul style="list-style-type: none"> GG0130. Self-Care GG0170. Mobility 	<ul style="list-style-type: none"> SOC ROC Follow-up Discharge from agency – not to an inpatient facility

Why is Section GG Being Added to OASIS?



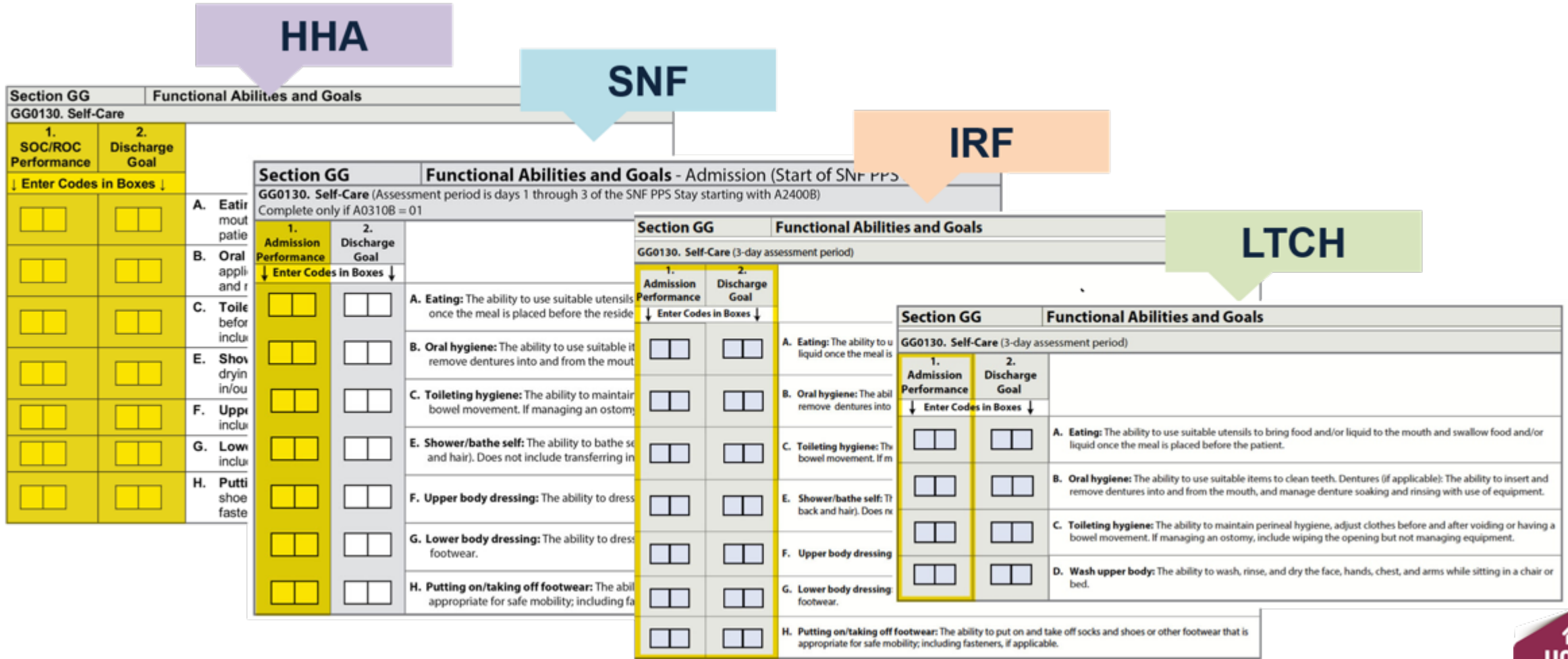
- CMS is aligning quality measurement across post-acute care (PAC) assessment instruments to meet the provisions of the Improving Medicare Post-Acute Care Transformation (IMPACT) Act of 2014
- The move toward standardized assessment data elements facilitates cross-setting:
 - Data collection
 - Quality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

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



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

Section GG Across PAC Settings



Differences Between Section GG and M-Items

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



How will Section GG Be Used?



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

GG0100

Prior Functioning: Everyday Activities

GG0100 Intent

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



GG0100. Prior Functioning: Everyday Activities

GG0100. Prior Functioning: Everyday Activities: Indicate the patient's usual ability with everyday activities prior to the current illness, exacerbation, or injury.

Coding:

- 3. Independent** – Patient completed the activities by him/herself, with or without an assistive device, with no assistance from a helper.
- 2. Needed Some Help** – Patient needed partial assistance from another person to complete activities.
- 1. Dependent** – A helper completed the activities for the patient.
- 8. Unknown**
- 9. Not Applicable**

↓ **Enter Codes in Boxes**

<input type="checkbox"/>	A. Self Care: Code the patient's need for assistance with bathing, dressing, using the toilet, or eating prior to the current illness, exacerbation, or injury.
<input type="checkbox"/>	B. Indoor Mobility (Ambulation): Code the patient's need for assistance with walking from room to room (with or without a device such as cane, crutch or walker) prior to the current illness, exacerbation, or injury.
<input type="checkbox"/>	C. Stairs: Code the patient's need for assistance with internal or external stairs (with or without a device such as cane, crutch, or walker) prior to the current illness, exacerbation or injury.
<input type="checkbox"/>	D. Functional Cognition: Code the patient's need for assistance with planning regular tasks, such as shopping or remembering to take medication prior to the current illness, exacerbation, or injury.

Complete only at SOC/ROC



GG0100A. Self Care

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

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

GG0100B. Indoor Mobility (Ambulation)

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

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



GG0100C. Stairs

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

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



GG0100D. Functional Cognition

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

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

GG0100 Response-Specific Instructions



**Interview the patient
or family**



**Review the patient's
medical records
describing the patient's
prior functioning with
everyday activities**

GG0100 Coding Instructions

**Code 3,
Independent**

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

**Code 2,
Needed Some Help**

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

**Code 1,
Dependent**

If the helper completed the activities for the patient

**Code 8,
Unknown**

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

**Code 9,
Not Applicable**

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

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

Coding Tip



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

GG0110

Prior Device Use

GG0110 Intent

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



GG0110. Prior Device Use

Complete only
at SOC/ROC

Section GG	Functional Abilities and
GG0110. Prior Device Use. Indicate devices and aids exacerbation, or injury.	
↓ Check all that apply	
<input type="checkbox"/>	A. Manual wheelchair
<input type="checkbox"/>	B. Motorized wheelchair and/or scooter
<input type="checkbox"/>	C. Mechanical lift
<input type="checkbox"/>	D. Walker
<input type="checkbox"/>	E. Orthotics/Prosthetics
<input type="checkbox"/>	Z. None of the above

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

GG0110 Response-Specific Instructions



Interview the patient or family



Review the patient's medical records describing the patient's use of prior devices and aids

GG0110 Coding Instructions

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

GG0110C. Mechanical Lift

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



GG0110D. Walker

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



GG0130: Self-Care and GG0170: Mobility

GG0130 and GG0170 Intent

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



Eating



Bathing



Dressing



Transferring



Toileting



Walking or Moving Around

Time Points GG0130 and GG0170 Completed

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

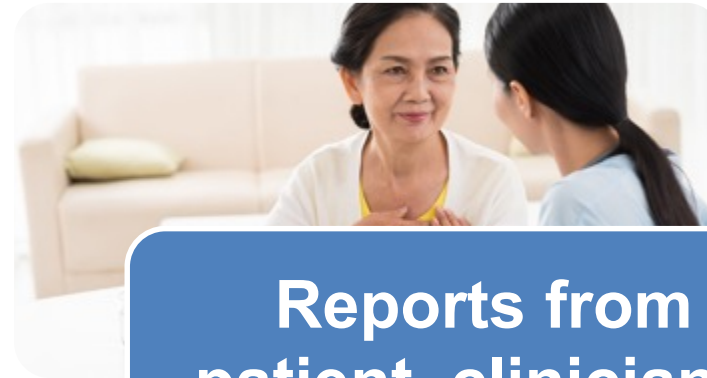


Response-Specific Instructions: Performance Assessment

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



**Direct observation
(preferred)**



**Reports from
patient, clinicians,
care staff, and/or
family**

When possible, CMS invites a multidisciplinary approach
to patient assessment

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

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



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

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

GG0130. Self-Care

SOC/ROC Performance Assessment

Section GG		Functional Abilities and Goals
GG0130. Self-Care		
1. SOC/ROC 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 and/or liquid to the mouth and swallow food and/or liquid once the meal is placed before the patient.
<input type="text"/> <input type="text"/>	<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 voiding or having a bowel movement. If managing an ostomy, include wiping the opening but not managing equipment.
<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	E. Shower/bathe self: The ability to bathe self, including washing, rinsing, and drying self (excludes washing of back and hair). Does not include transferring in/out of tub/shower
<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	F. Upper body dressing: The ability to dress and undress above the waist; including fasteners, if applicable.
<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	G. Lower body dressing: The ability to dress and undress below the waist, including fasteners; does not include footwear.
<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	H. Putting on/taking off footwear: The ability to put on and take off socks and shoes or other footwear that is appropriate for safe mobility; including fasteners, if applicable.

GG0170. Mobility

SOC/ROC Performance Assessment

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



Response-Specific Instructions: SOC/ROC Performance Assessment

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

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

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

Assessment Timeframe

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

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

Usual Performance/Ability

- A patient's usual performance is his/her ability greater than 50 percent of the assessment timeframe
- A patient's performance is impacted by the environment or situation
- Observations and circumstances within the assessment timeframe provide a comprehensive understanding of the patient's usual status
 - If the patient's status varies during the assessment timeframe, record his or her **usual ability** to perform each activity
 - Do not record the patient's best performance and worst performance; instead, record the patient's usual performance

GG0130 SOC/ROC Discharge Goal

Section GG		Functional Abilities and Goals
GG0130. Self-Care		
1. SOC/ROC 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 and/or liquid to the mouth and swallow food and/or liquid once the meal is placed before the patient.
<input type="text"/>	<input type="text"/>	B. 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 voiding or having a bowel movement. If managing an ostomy, include wiping the opening but not managing equipment.
<input type="text"/>	<input type="text"/>	E. Shower/bathe self: The ability to bathe self, including washing, rinsing, and drying self (excludes washing of back and hair). Does not include transferring in/out of tub/shower
<input type="text"/>	<input type="text"/>	F. Upper body dressing: The ability to dress and undress above the waist; including fasteners, if applicable.
<input type="text"/>	<input type="text"/>	G. Lower body dressing: The ability to dress and undress below the waist, including fasteners; does not include footwear.
<input type="text"/>	<input type="text"/>	H. Putting on/taking off footwear: The ability to put on and take off socks and shoes or other footwear that is appropriate for safe mobility; including fasteners, if applicable.

Complete only at SOC/ROC



GG0170 SOC/ROC Discharge Goal

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

Complete only at SOC/ROC

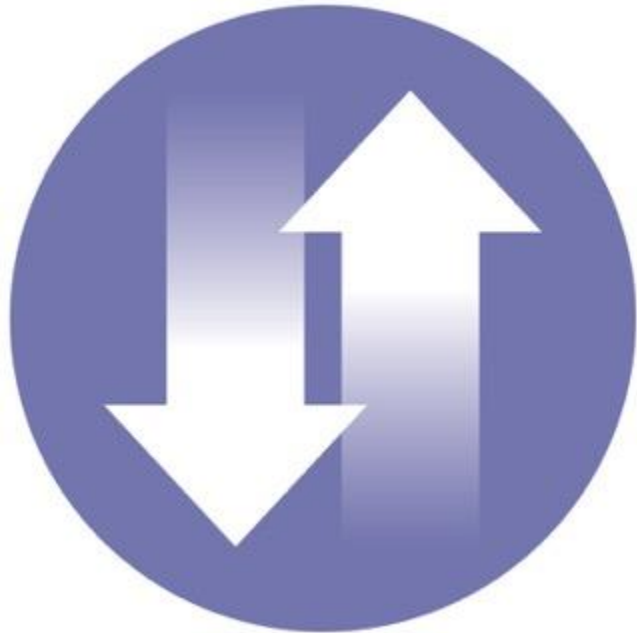


Response-Specific Instructions: SOC/ROC Discharge Goal(s)



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

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



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

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

- Licensed clinicians can establish a patient's discharge goal(s) at the time of SOC/ROC based on:
 - Patient's prior medical condition
 - SOC/ROC assessment
 - Self-care and mobility status
 - Discussions with the patient and family
 - Professional judgment
 - Profession's practice standards
 - Expected treatments
 - Patient motivation to improve
 - Anticipated length of stay
 - The discharge plan
- Goals should be established as part of the patient's care plan

GG0130 Follow-Up Performance

Section GG	Functional Abilities and Goals
GG0130. Self-Care	
4. Follow-Up Performance	
↓ Enter Codes in Boxes	
<input type="text"/> <input type="text"/>	A. Eating: The ability to use suitable utensils to bring food and/or liquid to the mouth and swallow food and/or liquid once the meal is placed before the patient.
<input type="text"/> <input type="text"/>	B. Oral Hygiene: The ability to use suitable items to clean teeth. Dentures (if applicable): The ability to insert and remove dentures into and from the mouth, and manage denture soaking and rinsing with use of equipment.
<input type="text"/> <input type="text"/>	C. Toileting Hygiene: The ability to maintain perineal hygiene, adjust clothes before and after voiding or having a bowel movement. If managing an ostomy, include wiping the opening but not managing equipment.

Complete only these activities at Follow-Up



GG0170 Follow-Up Performance

Section GG	Functional Abilities and Goals
GG0170. Mobility	
4.	
Follow-Up Performance	
Enter Codes in Boxes	
<input type="text"/>	A. Roll left and right: The ability to roll from lying on back to left and right side, and roll from lying on back to lying on back on the bed.
<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 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 come to a standing position from sitting in a chair, wheelchair, or on the side of the bed.
<input type="text"/>	E. Chair/bed-to-chair transfer: The ability to transfer to and from a bed to a chair (or wheelchair).
<input type="text"/>	F. Toilet transfer: The ability to get on and off a toilet or commode.
<input type="text"/>	I. Walk 10 feet: Once standing, the ability to walk at least 10 feet in a room, corridor, or similar space. <i>If Follow-Up performance is coded 07, 09, 10 or 88 → skip to GG0170M, 1 step (curb).</i>
<input type="text"/>	J. Walk 50 feet with two turns: Once standing, the ability to walk 50 feet and make two turns.
<input type="text"/>	L. Walking 10 feet on uneven surfaces: The ability to walk 10 feet on uneven or sloping surfaces (indoor or outdoor), such as turf or gravel.
<input type="text"/>	M. 1 step (curb): The ability to go up and down a curb and/or up and down one step. <i>If Follow-up performance is coded 07, 09, 10 or 88, skip to GG0170Q, Does patient use wheelchair and/or scooter?</i>
<input type="text"/>	N. 4 steps: The ability to go up and down four steps with or without a rail.
<input type="text"/>	Q. Does patient use wheelchair and/or scooter? 0. No → Skip GG0170R 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, the ability to wheel at least 50 feet and make two turns.

Complete only these activities at Follow-Up

Response Specific Instructions: Follow-Up Performance



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

GG0130 Discharge Performance

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

Complete only these activities at Discharge

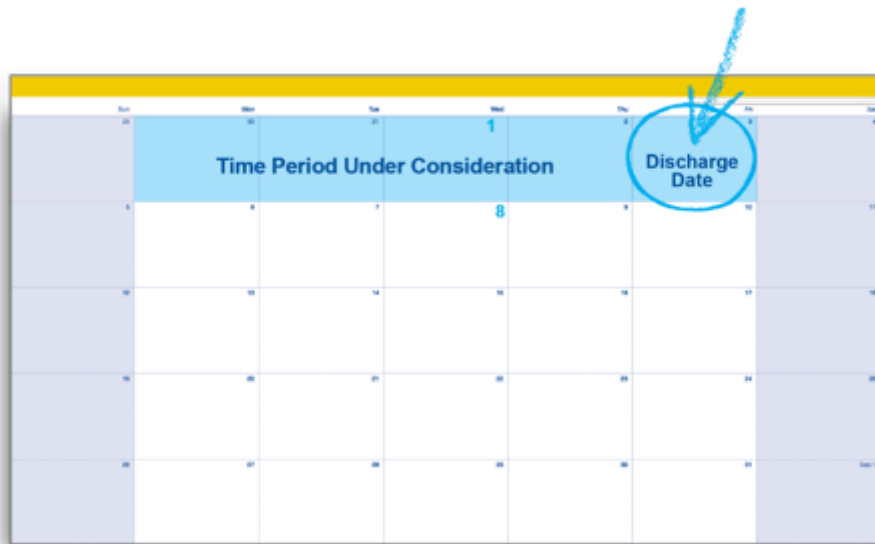
GG0170 Discharge Performance

Complete only these activities at Discharge

Section GG	Functional Abilities and Goals	Section GG	Functional Abilities and Goals
GG0170. Mobility		GG0170. Mobility	
3. Discharge Performance		3. Discharge Performance	
Enter Codes in Boxes		Enter Codes in Boxes	
<input type="text"/>	A. Roll left and right: The ability to roll from lying on back to left and right side lying on back on the bed.	<input type="text"/>	N. 4 steps: The ability to go up and down four steps with or without a rail. <i>If Discharge performance is coded 07, 09, 10 or 88, skip to GG0170P, Picking up object.</i>
<input type="text"/>	B. Sit to lying: The ability to move from sitting on side of bed to lying flat on back.	<input type="text"/>	O. 12 steps: The ability to go up and down 12 steps with or without a rail.
<input type="text"/>	C. Lying to sitting on side of bed: The ability to move from lying on the back side of the bed with feet flat on the floor, and with no back support.	<input type="text"/>	P. Picking up object: The ability to bend/stoop from a standing position to pick up a small object, such as a spoon, from the floor.
<input type="text"/>	D. Sit to stand: The ability to come to a standing position from sitting in a chair on the side of the bed.	<input type="text"/>	Q. Does patient use wheelchair and/or scooter? 0. No → Skip to J1800 Any falls since SOC/ROC, whichever is more recent. 1. Yes → Continue to GG0170R, Wheel 50 feet with two turns.
<input type="text"/>	E. Chair/bed-to-chair transfer: The ability to transfer to and from a bed to a wheelchair).	<input type="text"/>	R. Wheel 50 feet with two turns: Once seated in wheelchair/scooter, the ability to wheel at least 50 feet and make two turns.
<input type="text"/>	F. Toilet transfer: The ability to get on and off a toilet or commode.	<input type="text"/>	RR3. Indicate the type of wheelchair or scooter used. 1. Manual 2. Motorized
<input type="text"/>	G. Car Transfer: The ability to transfer in and out of a car or van on the passenger side. Do not include the ability to open/close door or fasten seat belt.	<input type="text"/>	S. Wheel 150 feet: Once seated in wheelchair/scooter, the ability to wheel at least 150 feet in a corridor or similar space.
<input type="text"/>	I. Walk 10 feet: Once standing, the ability to walk at least 10 feet in a room, hallway, or similar space. <i>If Discharge performance is coded 07, 09, 10 or 88, skip to GG0170M, 1 step (curb).</i>	<input type="text"/>	SS3. Indicate the type of wheelchair or scooter used. 1. Manual 2. Motorized
<input type="text"/>	J. Walk 50 feet with two turns: Once standing, the ability to walk 50 feet around a room or similar space.	<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"/>	L. Walking 10 feet on uneven surfaces: The ability to walk 10 feet on uneven surfaces (indoor or outdoor), such as turf or gravel.	<input type="text"/>	
<input type="text"/>	M. 1 step (curb): The ability to go up and down a curb and/or up and down a ramp. <i>If Discharge performance is coded 07, 09, 10 or 88, skip to GG0170M, 1 step (curb).</i>	<input type="text"/>	



Response Specific Instructions: Discharge Performance



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

Time Period Under Consideration

A calendar grid with a blue header row labeled "Time Period Under Consideration" spanning from the 1st to the 5th. A blue circle highlights the 5th, labeled "Discharge Date". A blue arrow points to the 5th. The grid shows days 1 through 31.

- The discharge **time period under consideration** includes the last 5 days of care
 - This includes the last 5 days of care plus the day of assessment
- Code that is based on an event that occurs on or after the discharge date
 - The span of time for data collection and assessment. For most OASIS items, this is the day of assessment.
 - For other items, item wording or related guidance will specify the time period under consideration, such as, since the most recent SOC/ROC

GG0130 and GG0170 Coding Instructions: 6-Point Scale

Code 06	Independent
Code 05	Setup or Clean-up Assistance
Code 04	Supervision or Touching Assistance
Code 03	Partial/Moderate Assistance
Code 02	Substantial/Maximal Assistance
Code 01	Dependent

GG0130 and GG0170 Coding Instructions: Activity Was Not Attempted

Code 07

Patient Refused

Code 09

Not Applicable

Code 10

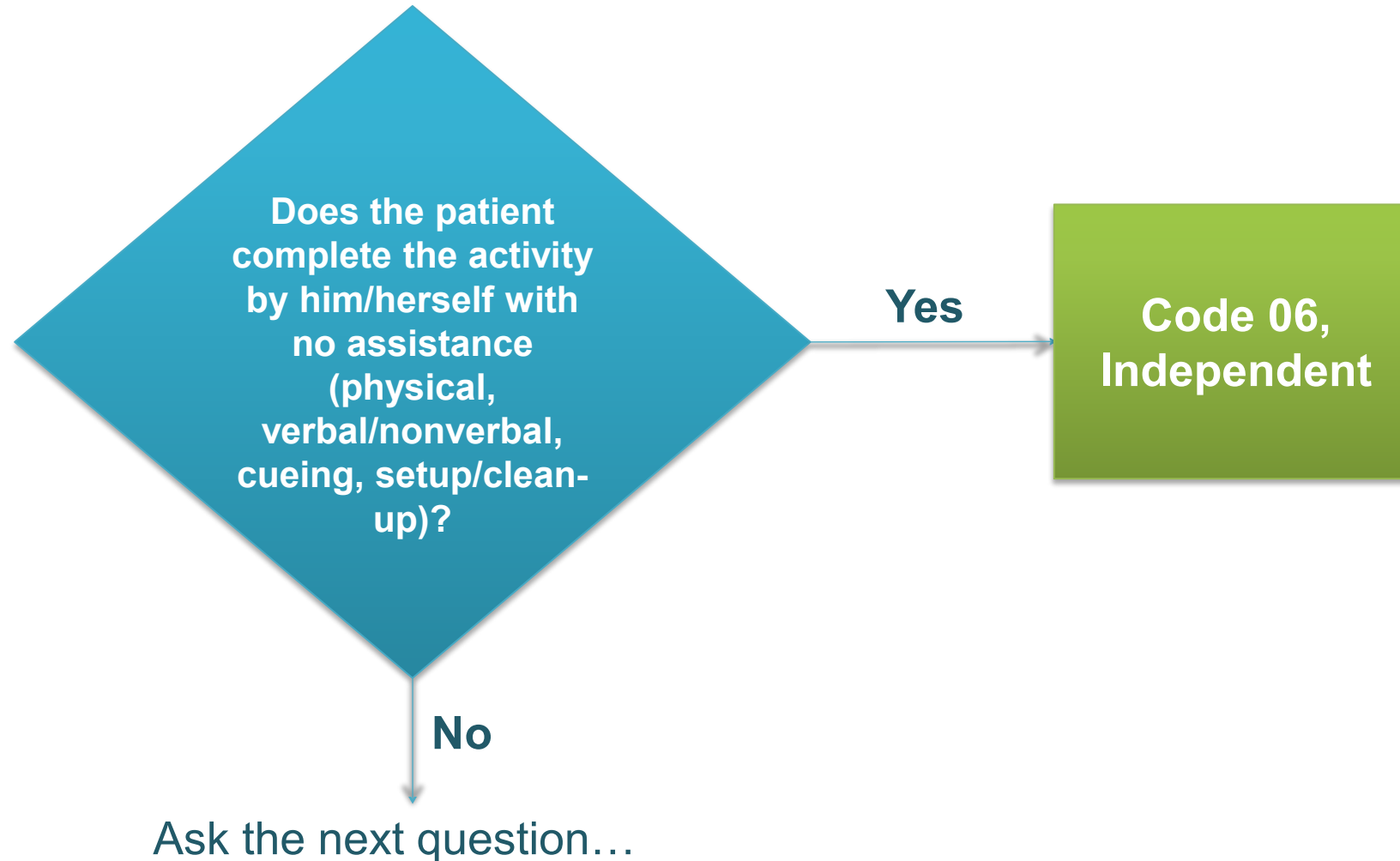
Not Attempted Due to Environmental Limitations

Code 88

Not Attempted Due to Medical Conditions or Safety Concerns

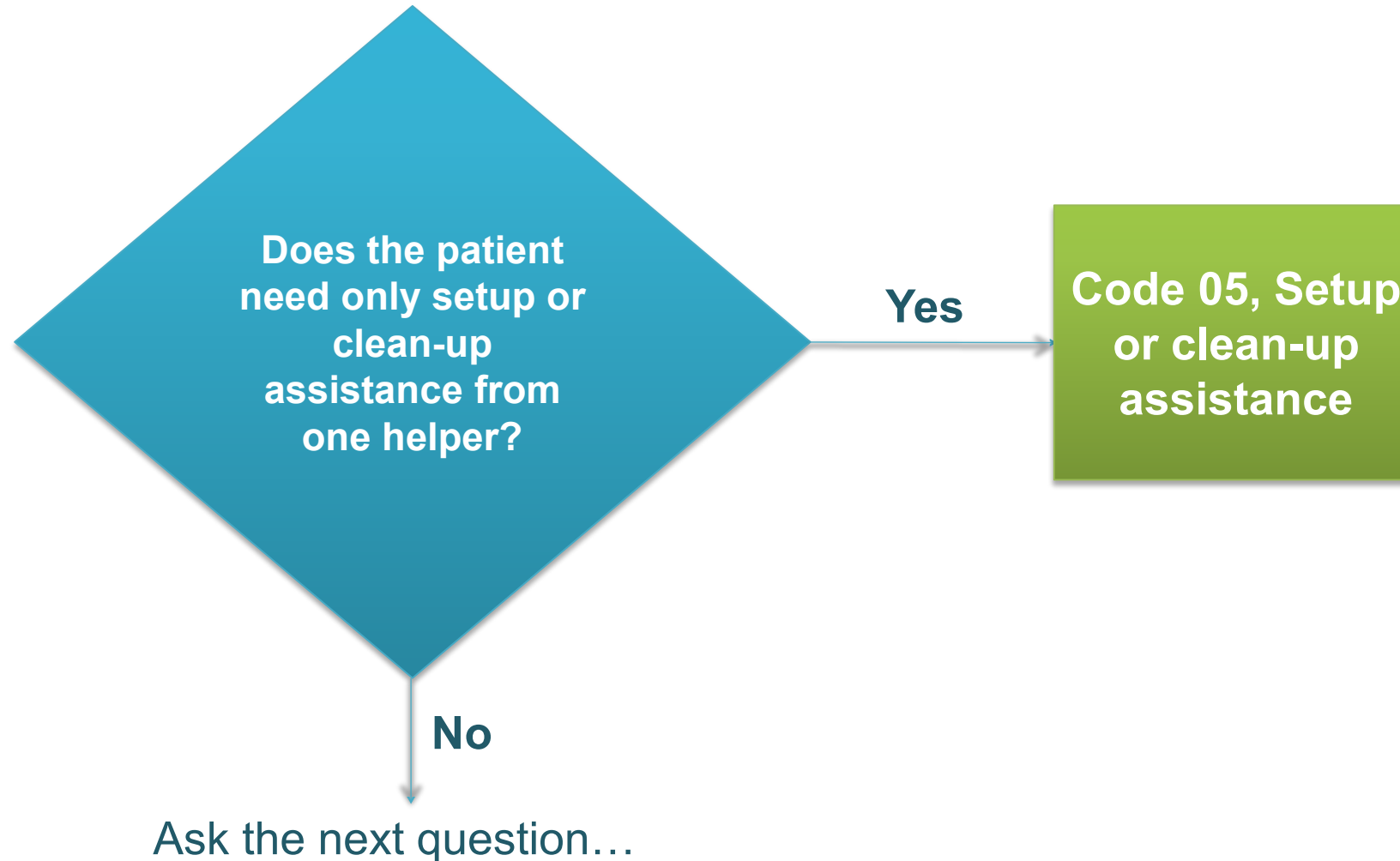
A **dash** is a valid response for this item. CMS expects dash use to be a rare occurrence.

GG0130 and GG0170 Key Coding Questions



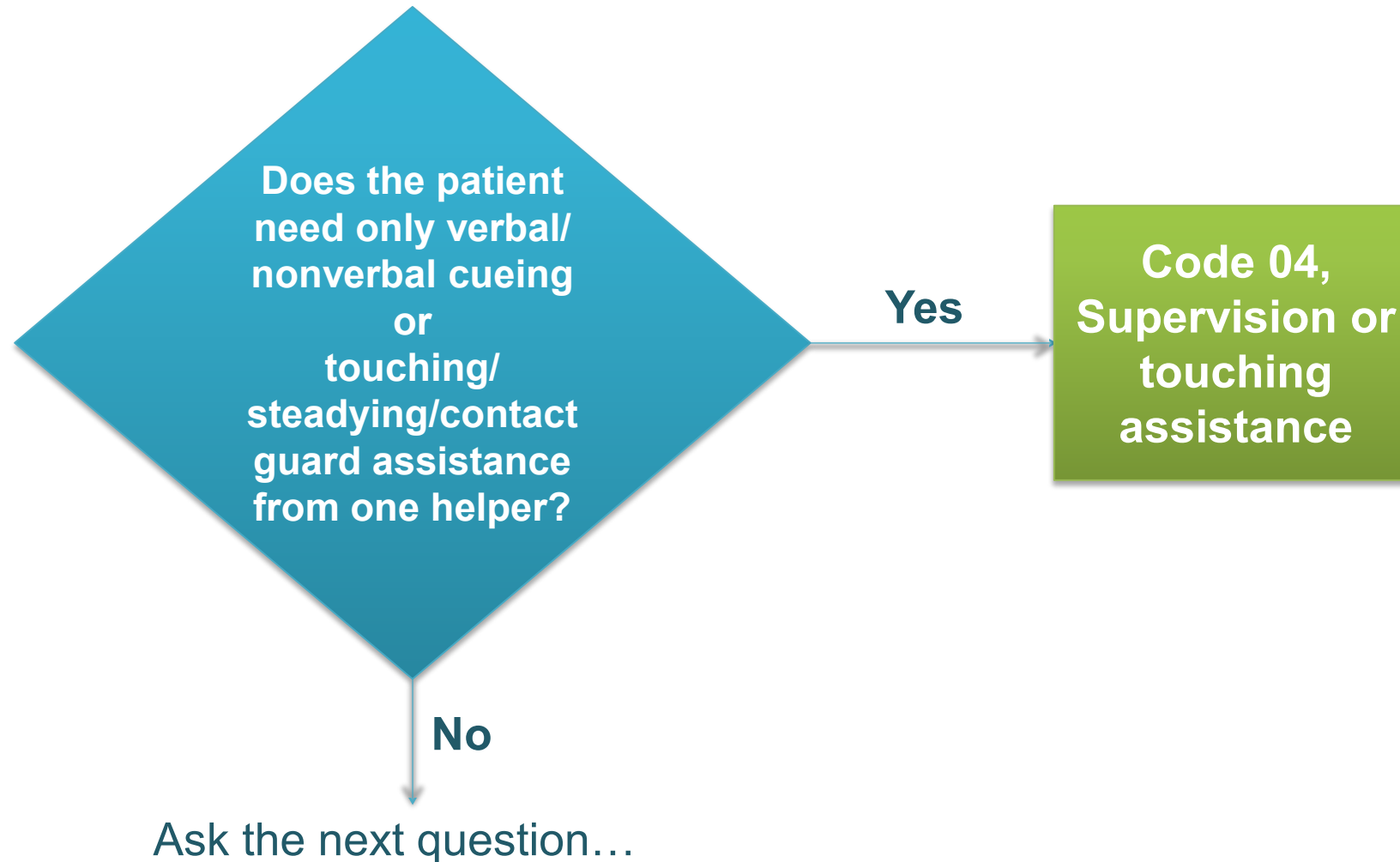
GG0130 and GG0170

Key Coding Questions (cont. 1)



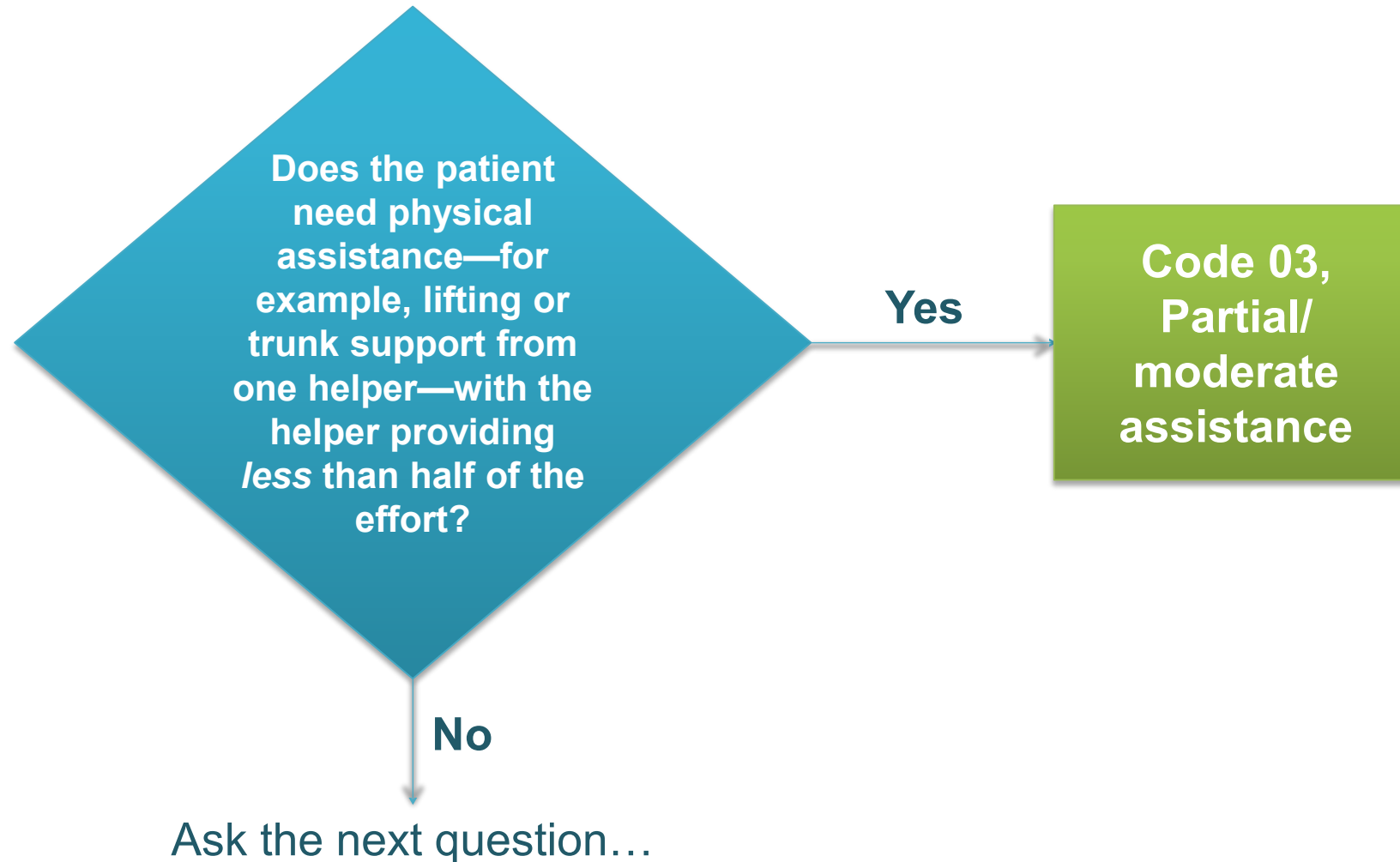
GG0130 and GG0170

Key Coding Questions (cont. 2)



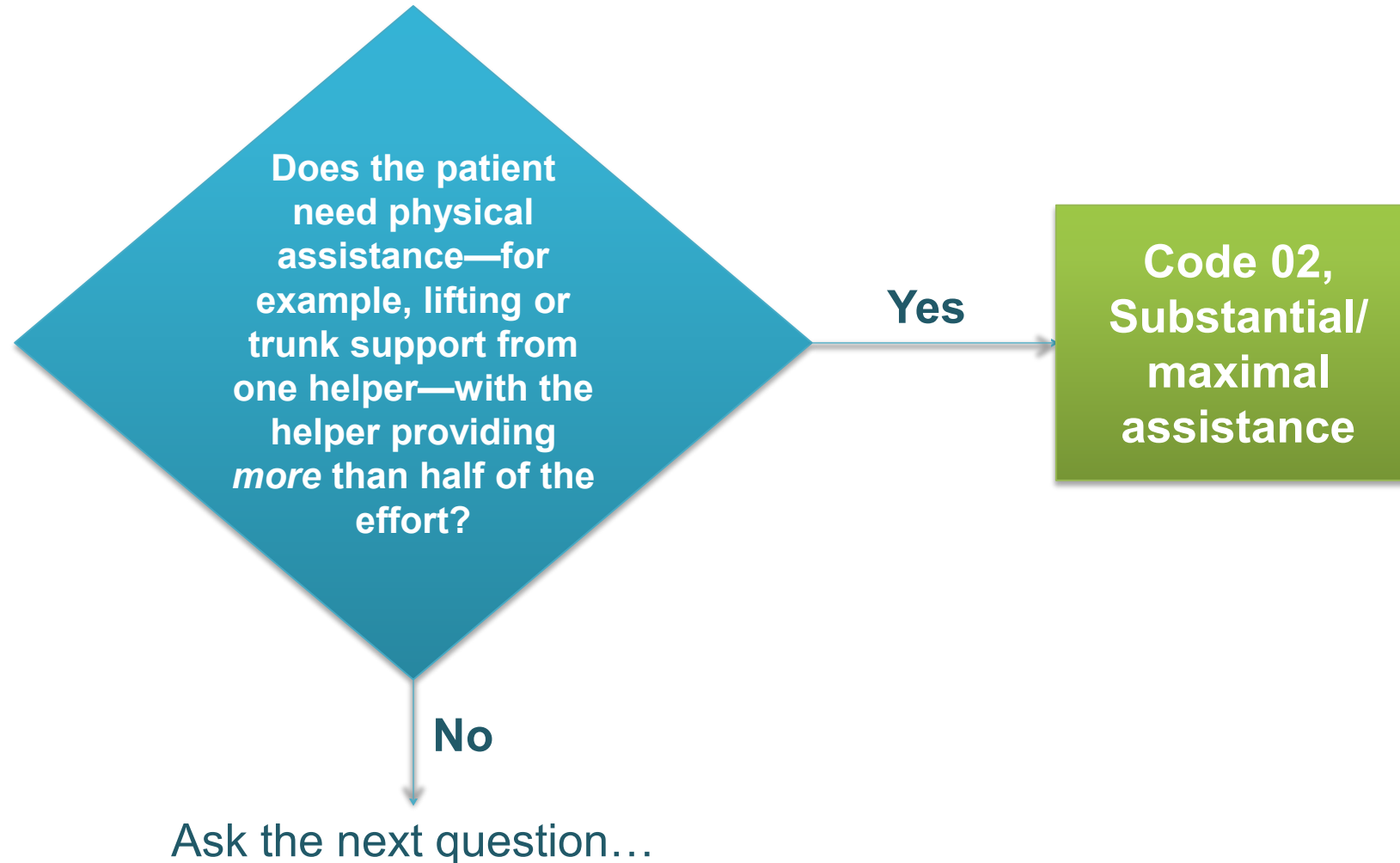
GG0130 and GG0170

Key Coding Questions (cont. 3)



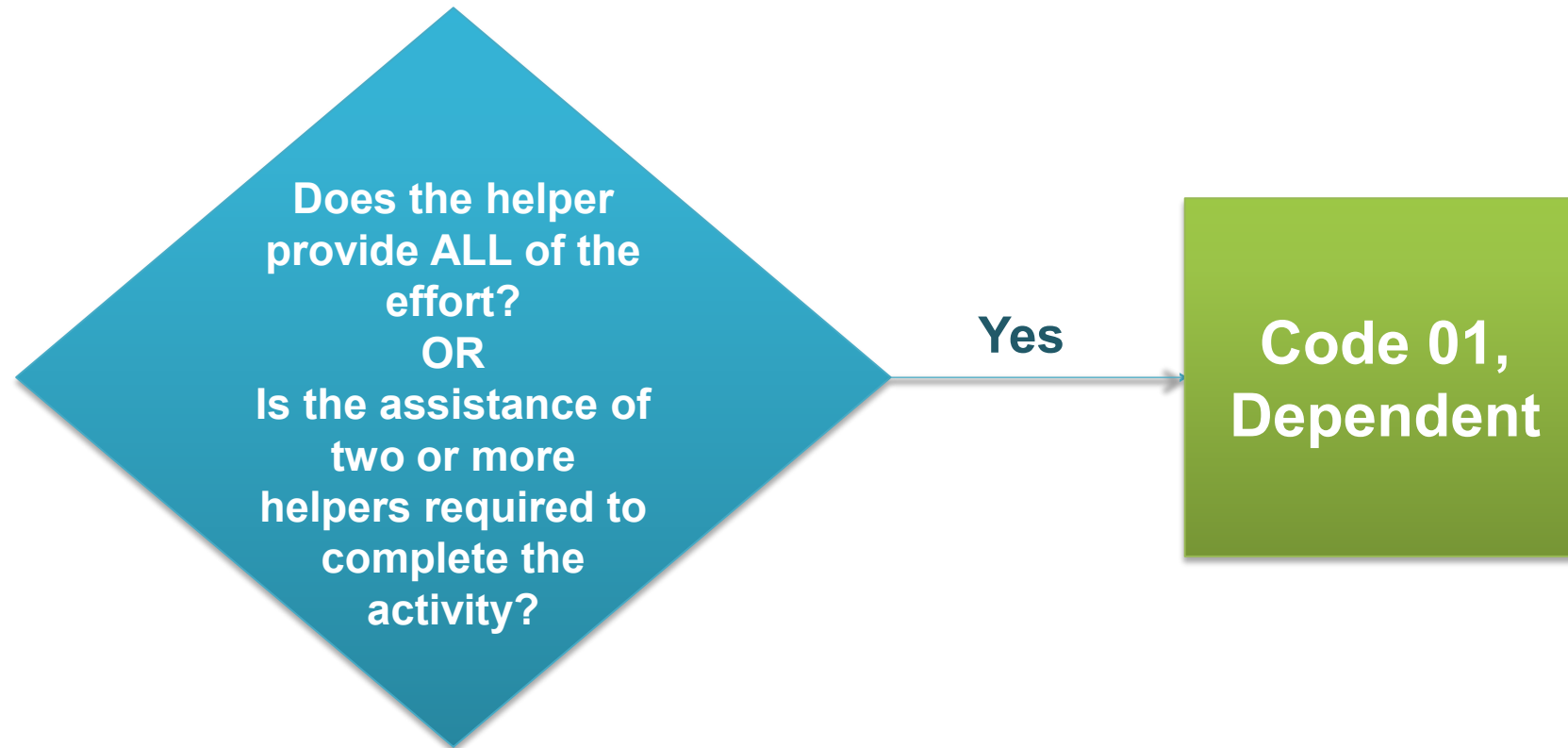
GG0130 and GG0170

Key Coding Questions (cont. 4)



GG0130 and GG0170

Key Coding Questions (cont. 5)



GG0130 and GG0170

Key Coding Questions (cont. 6)

Indicate the reason activity was not attempted

Code 07, Patient refused

Patient refused to complete the activity

Code 09, Not applicable

Not attempted and the patient did not perform this activity prior to the current illness, exacerbation, or injury

Code 10, Not attempted due to environmental limitations

For example, lack of equipment, weather constraints

New Code!

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

Activity was not attempted due to medical conditions or safety concerns

GG0130 and GG0170

General Coding Tips

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

GG0130 and GG0170

General Coding Tips (cont. 1)



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

GG0130 and GG0170

General Coding Tips (cont. 2)

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



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

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



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

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



Knowledge Check 1: Rationale

- Licensed clinicians may assess the patient's performance based on direct observation (preferred) as well as reports from patient, clinicians, care staff, and/or family



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

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



Knowledge Check 2: Which example below best demonstrates allowing the patient to function “as independently as possible”? (cont.)

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



Knowledge Check 2: Rationale

- Allowing the patient to brush her own teeth as much as possible supports the patient's goal toward independence. It allows her to participate in the activity to the fullest extent possible, only receiving assistance from the caregiver as needed
- Patients should be allowed to perform activities **as independently as possible**, as long as they are safe
- Agency staff and/or family should allow independence whenever possible to promote quality of life and a sense of well-being

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

A. True

B. False



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

A. True

✓ B. False



Knowledge Check 3: Rationale

- Use of assistive device(s) and adaptive equipment required to complete the activity **should not** affect coding of Section GG items

GG0130. Self-Care

Item-Specific Guidance and Practice Scenarios

GG0130A. Eating

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

Section GG		Functional Abilities and Goals
GG0130. Self-Care		
1. SOC/ROC 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 and/or liquid to the mouth and swallow food and/or liquid once the meal is placed before the patient.
<input type="text"/>	<input type="text"/>	B. 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 voiding or having a bowel movement. If managing an ostomy, include wiping the opening but not managing equipment.
<input type="text"/>	<input type="text"/>	E. Shower/bathe self: The ability to bathe self, including washing, rinsing, and drying self (excludes washing of back and hair). Does not include transferring in/out of tub/shower
<input type="text"/>	<input type="text"/>	F. Upper body dressing: The ability to dress and undress above the waist; including fasteners, if applicable.
<input type="text"/>	<input type="text"/>	G. Lower body dressing: The ability to dress and undress below the waist, including fasteners; does not include footwear.
<input type="text"/>	<input type="text"/>	H. Putting on/taking off footwear: The ability to put on and take off socks and shoes or other footwear that is appropriate for safe mobility; including fasteners, if applicable.



GG0130. Eating Coding Tips

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



GG0130. Eating Coding Tips (cont.)



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

GG0130A Practice Coding Scenario 1

Eating:

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

How would you code GG0130A SOC/ROC Performance?

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



How would you code GG0130A SOC/ROC Performance? (cont.)

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



GG0130A Practice

Coding Scenario 1 (cont.)

- **Coding:** GG0130A. Eating would be coded **88, Not attempted due to medical conditions or safety concerns**
- **Rationale:**
 - Mr. R does not eat or drink by mouth at this time due to a recent-onset medical condition (his recent-onset stroke)
 - This item includes eating and drinking by mouth only

GG0130B. Oral Hygiene

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

Section GG		Functional Abilities and Goals
GG0130. Self-Care		
1. SOC/ROC 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 and/or liquid to the mouth and swallow food and/or liquid once the meal is placed before the patient.
<input type="text"/>	<input type="text"/>	B. 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 voiding or having a bowel movement. If managing an ostomy, include wiping the opening but not managing equipment.
<input type="text"/>	<input type="text"/>	E. Shower/bathe self: The ability to bathe self, including washing, rinsing, and drying self (excludes washing of back and hair). Does not include transferring in/out of tub/shower
<input type="text"/>	<input type="text"/>	F. Upper body dressing: The ability to dress and undress above the waist; including fasteners, if applicable.
<input type="text"/>	<input type="text"/>	G. Lower body dressing: The ability to dress and undress below the waist, including fasteners; does not include footwear.
<input type="text"/>	<input type="text"/>	H. Putting on/taking off footwear: The ability to put on and take off socks and shoes or other footwear that is appropriate for safe mobility; including fasteners, if applicable.

GG0130B. Oral Hygiene Coding Tip



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

GG0130B Practice Coding Scenario 2

Oral Hygiene:

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

How would you code GG0130B SOC/ROC Performance?

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



How would you code GG0130B SOC/ROC Performance? (cont.)

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



GG0130B Practice

Coding Scenario 2 (cont.)

- **Coding:** GG0130B. Oral Hygiene would be coded **05, Setup or clean-up assistance**
- **Rationale:** The helper provides setup assistance (putting toothpaste on the toothbrush) before Mr. S brushes his teeth. Do not consider assistance provided to get to or from the bathroom to score Oral Hygiene

GG0130C. Toileting Hygiene

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

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

GG0130E. Shower/Bathe Self

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

Section GG		Functional Abilities and Goals
GG0130. Self-Care		
1. SOC/ROC 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 and/or liquid to the mouth and swallow food and/or liquid once the meal is placed before the patient.
<input type="text"/>	<input type="text"/>	B. 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 voiding or having a bowel movement. If managing an ostomy, include wiping the opening but not managing equipment.
<input type="text"/>	<input type="text"/>	E. Shower/bathe self: The ability to bathe self, including washing, rinsing, and drying self (excludes washing of back and hair). Does not include transferring in/out of tub/shower
<input type="text"/>	<input type="text"/>	F. Upper body dressing: The ability to dress and undress above the waist; including fasteners, if applicable.
<input type="text"/>	<input type="text"/>	G. Lower body dressing: The ability to dress and undress below the waist, including fasteners; does not include footwear.
<input type="text"/>	<input type="text"/>	H. Putting on/taking off footwear: The ability to put on and take off socks and shoes or other footwear that is appropriate for safe mobility; including fasteners, if applicable.

GG0130F. Upper Body Dressing

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

Section GG		Functional Abilities and Goals
GG0130. Self-Care		
1. SOC/ROC 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 and/or liquid to the mouth and swallow food and/or liquid once the meal is placed before the patient.
<input type="text"/>	<input type="text"/>	B. 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 voiding or having a bowel movement. If managing an ostomy, include wiping the opening but not managing equipment.
<input type="text"/>	<input type="text"/>	E. Shower/bathe self: The ability to bathe self, including washing, rinsing, and drying self (excludes washing of back and hair). Does not include transferring in/out of tub/shower
<input type="text"/>	<input type="text"/>	F. Upper body dressing: The ability to dress and undress above the waist; including fasteners, if applicable.
<input type="text"/>	<input type="text"/>	G. Lower body dressing: The ability to dress and undress below the waist, including fasteners; does not include footwear.
<input type="text"/>	<input type="text"/>	H. Putting on/taking off footwear: The ability to put on and take off socks and shoes or other footwear that is appropriate for safe mobility; including fasteners, if applicable.

GG0130G. Lower Body Dressing

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

Section GG		Functional Abilities and Goals
GG0130. Self-Care		
1. SOC/ROC 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 and/or liquid to the mouth and swallow food and/or liquid once the meal is placed before the patient.
<input type="text"/>	<input type="text"/>	B. 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 voiding or having a bowel movement. If managing an ostomy, include wiping the opening but not managing equipment.
<input type="text"/>	<input type="text"/>	E. Shower/bathe self: The ability to bathe self, including washing, rinsing, and drying self (excludes washing of back and hair). Does not include transferring in/out of tub/shower
<input type="text"/>	<input type="text"/>	F. Upper body dressing: The ability to dress and undress above the waist; including fasteners, if applicable.
<input type="text"/>	<input type="text"/>	G. Lower body dressing: The ability to dress and undress below the waist, including fasteners; does not include footwear.
<input type="text"/>	<input type="text"/>	H. Putting on/taking off footwear: The ability to put on and take off socks and shoes or other footwear that is appropriate for safe mobility; including fasteners, if applicable.



GG0130H. Putting On/Taking Off Footwear

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

Section GG		Functional Abilities and Goals
GG0130. Self-Care		
1. SOC/ROC 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 and/or liquid to the mouth and swallow food and/or liquid once the meal is placed before the patient.
<input type="text"/>	<input type="text"/>	B. 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 voiding or having a bowel movement. If managing an ostomy, include wiping the opening but not managing equipment.
<input type="text"/>	<input type="text"/>	E. Shower/bathe self: The ability to bathe self, including washing, rinsing, and drying self (excludes washing of back and hair). Does not include transferring in/out of tub/shower
<input type="text"/>	<input type="text"/>	F. Upper body dressing: The ability to dress and undress above the waist; including fasteners, if applicable.
<input type="text"/>	<input type="text"/>	G. Lower body dressing: The ability to dress and undress below the waist, including fasteners; does not include footwear.
<input type="text"/>	<input type="text"/>	H. Putting on/taking off footwear: The ability to put on and take off socks and shoes or other footwear that is appropriate for safe mobility; including fasteners, if applicable.

GG0170. Mobility

Item-Specific Guidance and Practice Scenarios

GG0170. Mobility

Section GG		Functional Abilities and Goals
GG0170. Mobility		
1. SOC/ROC Performance	2. Discharge Goal	
↓ Enter Codes in Boxes ↓		
<input type="text"/>	<input type="text"/>	A. Roll left and right: The ability to roll from lying on back to left and right side, and return to lying on back on the bed.
<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 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 come to a standing position from sitting in a chair, wheelchair, or on the side of the bed.
<input type="text"/>	<input type="text"/>	E. Chair/bed-to-chair transfer: The ability to transfer to and from a bed to a chair (or wheelchair).
<input type="text"/>	<input type="text"/>	F. Toilet transfer: The ability to get on and off a toilet or commode.
<input type="text"/>	<input type="text"/>	G. Car Transfer: The ability to transfer in and out of a car or van on the passenger side. Does not include the ability to open/close door or fasten seat belt.
<input type="text"/>	<input type="text"/>	I. Walk 10 feet: Once standing, the ability to walk at least 10 feet in a room, corridor, or similar space. <i>If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170M, 1 step (curb)</i>
<input type="text"/>	<input type="text"/>	J. Walk 50 feet with two turns: Once standing, the ability to walk 50 feet and make two turns.



GG0170. Mobility (cont.)

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

GG0170A.

Roll Left and Right

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

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

GG0170A Practice Coding Scenario 3

Roll left and right:

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

How would you code GG0170A SOC/ROC Performance?

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



How would you code GG0170A SOC/ROC Performance? (cont.)

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



How would you code GG0170A Discharge Goal?

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



How would you code GG0170A Discharge Goal? (cont.)

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



GG0170A Practice

Coding Scenario 3 (cont.)

- **Coding:**

- GG0170A. Roll left and right, **SOC/ROC Performance** would be coded **04, Supervision or touching assistance**
- GG0170A. Roll left and right, **Discharge Goal** would be coded **06, Independent**

- **Rationale:**

- At SOC, the physical therapist provides verbal cues (i.e., instructions) to Mr. R as he rolls from his back to his right side and returns to lying on his back. The physical therapist does not provide any physical assistance
- After assessment and considering his current condition, the therapist expects Mr. R will be independently rolling left and right at discharge

GG0170B. Sit to Lying

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

Section GG		Functional Abilities and Goals
GG0170. Mobility		
1. SOC/ROC Performance	2. Discharge Goal	
↓ Enter Codes in Boxes ↓		
<input type="text"/>	<input type="text"/>	A. Roll left and right: The ability to roll from lying on back to left and right side, and return to lying on back on the bed.
<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 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 come to a standing position from sitting in a chair, wheelchair, or on the side of the bed.
<input type="text"/>	<input type="text"/>	E. Chair/bed-to-chair transfer: The ability to transfer to and from a bed to a chair (or wheelchair).
<input type="text"/>	<input type="text"/>	F. Toilet transfer: The ability to get on and off a toilet or commode.
<input type="text"/>	<input type="text"/>	G. Car Transfer: The ability to transfer in and out of a car or van on the passenger side. Does not include the ability to open/close door or fasten seat belt.
<input type="text"/>	<input type="text"/>	I. Walk 10 feet: Once standing, the ability to walk at least 10 feet in a room, corridor, or similar space. <i>If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170M, 1 step (curb)</i>
<input type="text"/>	<input type="text"/>	J. Walk 50 feet with two turns: Once standing, the ability to walk 50 feet and make two turns.

GG0170C. Lying to Sitting on Side of Bed

Existing Item!

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

Section GG		Functional Abilities and Goals
GG0170. Mobility		
1. SOC/ROC Performance	2. Discharge Goal	
↓ Enter Codes in Boxes ↓		
<input type="text"/>	<input type="text"/>	A. Roll left and right: The ability to roll from lying on back to left and right side, and return to lying on back on the bed.
<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 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 come to a standing position from sitting in a chair, wheelchair, or on the side of the bed.
<input type="text"/>	<input type="text"/>	E. Chair/bed-to-chair transfer: The ability to transfer to and from a bed to a chair (or wheelchair).
<input type="text"/>	<input type="text"/>	F. Toilet transfer: The ability to get on and off a toilet or commode.
<input type="text"/>	<input type="text"/>	G. Car Transfer: The ability to transfer in and out of a car or van on the passenger side. Does not include the ability to open/close door or fasten seat belt.
<input type="text"/>	<input type="text"/>	I. Walk 10 feet: Once standing, the ability to walk at least 10 feet in a room, corridor, or similar space. <i>If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170M, 1 step (curb)</i>
<input type="text"/>	<input type="text"/>	J. Walk 50 feet with two turns: Once standing, the ability to walk 50 feet and make two turns.



GG0170C. Lying to Sitting Coding Tips



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

GG0170A-C “Lying” Coding Tips

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



GG0170A-C “Lying” Coding Tips (cont.)



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

GG0170D. Sit to Stand

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

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

GG0170E. Chair/Bed-to-Chair Transfer

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

Section GG		Functional Abilities and Goals
GG0170. Mobility		
1. SOC/ROC Performance	2. Discharge Goal	
↓ Enter Codes in Boxes ↓		
<input type="text"/>	<input type="text"/>	A. Roll left and right: The ability to roll from lying on back to left and right side, and return to lying on back on the bed.
<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 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 come to a standing position from sitting in a chair, wheelchair, or on the side of the bed.
<input type="text"/>	<input type="text"/>	E. Chair/bed-to-chair transfer: The ability to transfer to and from a bed to a chair (or wheelchair).
<input type="text"/>	<input type="text"/>	F. Toilet transfer: The ability to get on and off a toilet or commode.
<input type="text"/>	<input type="text"/>	G. Car Transfer: The ability to transfer in and out of a car or van on the passenger side. Does not include the ability to open/close door or fasten seat belt.
<input type="text"/>	<input type="text"/>	I. Walk 10 feet: Once standing, the ability to walk at least 10 feet in a room, corridor, or similar space. <i>If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170M, 1 step (curb)</i>
<input type="text"/>	<input type="text"/>	J. Walk 50 feet with two turns: Once standing, the ability to walk 50 feet and make two turns.

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



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

GG0170E Practice Coding Scenario 4

Chair/bed-to-chair transfer:

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

How would you code GG0170E SOC/ROC Performance?

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



How would you code GG0170E SOC/ROC Performance? (cont.)

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



How would you code GG0170E Discharge Goal?

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



How would you code GG0170E Discharge Goal? (cont.)

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



GG0170E Practice

Coding Scenario 4 (cont.)

- **Coding:**

- GG0170E. Chair/bed-to-chair transfer, **SOC/ROC Performance** would be coded **05, Setup or clean-up assistance**
- GG0170E. Chair/bed-to-chair transfer, **Discharge Goal** would be coded **05, Setup or clean-up assistance**

- **Rationale:**

- A helper must provide setup assistance only. Once set up is provided, Mr. L transfers safely and does not need supervision or physical assistance during the transfer
- The nurse expects Mr. L will continue to need wheelchair setup assistance for this transfer at discharge

GG0170F. Toilet Transfer

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

Section GG		Functional Abilities and Goals
GG0170. Mobility		
1. SOC/ROC Performance	2. Discharge Goal	
↓ Enter Codes in Boxes ↓		
<input type="text"/>	<input type="text"/>	A. Roll left and right: The ability to roll from lying on back to left and right side, and return to lying on back on the bed.
<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 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 come to a standing position from sitting in a chair, wheelchair, or on the side of the bed.
<input type="text"/>	<input type="text"/>	E. Chair/bed-to-chair transfer: The ability to transfer to and from a bed to a chair (or wheelchair).
<input type="text"/>	<input type="text"/>	F. Toilet transfer: The ability to get on and off a toilet or commode.
<input type="text"/>	<input type="text"/>	G. Car Transfer: The ability to transfer in and out of a car or van on the passenger side. Does not include the ability to open/close door or fasten seat belt.
<input type="text"/>	<input type="text"/>	I. Walk 10 feet: Once standing, the ability to walk at least 10 feet in a room, corridor, or similar space. <i>If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170M, 1 step (curb)</i>
<input type="text"/>	<input type="text"/>	J. Walk 50 feet with two turns: Once standing, the ability to walk 50 feet and make two turns.

GG0170F. Toilet Transfer Coding Tip



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

GG0170G. Car Transfer

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

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

GG0170G Car Transfer Coding Tips

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



GG0170G Practice Coding Scenario 5

Car Transfer:

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

How would you code GG0170G SOC/ROC Performance?

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



How would you code GG0170G SOC/ROC Performance? (cont.)

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



GG0170G Practice

Coding Scenario 5 (cont.)

- **Coding:** GG0170G. Car Transfer, **SOC/ROC Performance** would be coded **04, Supervision or touching assistance**
- **Rationale:**
 - The therapist provides touching assistance only as the patient transfers in the passenger seat of the car
 - Assistance with opening and closing the car door is not included in the definition of this item and is not considered when coding this item

GG0170I. Walk 10 Feet

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

Section GG		Functional Abilities and Goals
GG0170. Mobility		
1. SOC/ROC Performance	2. Discharge Goal	
↓ Enter Codes in Boxes ↓		
<input type="text"/>	<input type="text"/>	A. Roll left and right: The ability to roll from lying on back to left and right side, and return to lying on back on the bed.
<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 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 come to a standing position from sitting in a chair, wheelchair, or on the side of the bed.
<input type="text"/>	<input type="text"/>	E. Chair/bed-to-chair transfer: The ability to transfer to and from a bed to a chair (or wheelchair).
<input type="text"/>	<input type="text"/>	F. Toilet transfer: The ability to get on and off a toilet or commode.
<input type="text"/>	<input type="text"/>	G. Car Transfer: The ability to transfer in and out of a car or van on the passenger side. Does not include the ability to open/close door or fasten seat belt.
<input type="text"/>	<input type="text"/>	I. Walk 10 feet: Once standing, the ability to walk at least 10 feet in a room, corridor, or similar space. <i>If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170M, 1 step (curb)</i>
<input type="text"/>	<input type="text"/>	J. Walk 50 feet with two turns: Once standing, the ability to walk 50 feet and make two turns.

GG0170J. Walk 50 Feet With Two Turns

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

Section GG		Functional Abilities and Goals
GG0170. Mobility		
1. SOC/ROC Performance	2. Discharge Goal	
↓ Enter Codes in Boxes ↓		
<input type="text"/>	<input type="text"/>	A. Roll left and right: The ability to roll from lying on back to left and right side, and return to lying on back on the bed.
<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 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 come to a standing position from sitting in a chair, wheelchair, or on the side of the bed.
<input type="text"/>	<input type="text"/>	E. Chair/bed-to-chair transfer: The ability to transfer to and from a bed to a chair (or wheelchair).
<input type="text"/>	<input type="text"/>	F. Toilet transfer: The ability to get on and off a toilet or commode.
<input type="text"/>	<input type="text"/>	G. Car Transfer: The ability to transfer in and out of a car or van on the passenger side. Does not include the ability to open/close door or fasten seat belt.
<input type="text"/>	<input type="text"/>	I. Walk 10 feet: Once standing, the ability to walk at least 10 feet in a room, corridor, or similar space. <i>If SOC/ROC performance is coded 07, 09, 10 or 88, skip to GG0170M, 1 step (curb)</i>
<input type="text"/>	<input type="text"/>	J. Walk 50 feet with two turns: Once standing, the ability to walk 50 feet and make two turns.

GG0170J. Walk 50 Feet With Two Turns

Coding Tips



90° Turn

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

GG0170J Practice

Coding Scenario 6

Walk 50 feet with two turns:

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

How would you code GG0170J SOC/ROC Performance?

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



How would you code GG0170J SOC/ROC Performance? (cont.)

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



How would you code GG0170J Discharge Goal?

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



How would you code GG0170J Discharge Goal? (cont.)

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



GG0170J Practice

Coding Scenario 6 (cont.)

- **Coding:**

- GG0170J. Walk 50 feet with two turns, **SOC/ROC Performance** would be coded **88, Not attempted due to medical conditions or safety concerns**
- GG0170J. Walk 50 feet with two turns, **Discharge Goal** would be coded **04, Supervision or touching assistance**

- **Rationale:**

- Mr. B is ambulatory but was not able to walk the entire distance because of his new medical condition (stroke). Since the patient is unable to complete the activity at SOC, but was completing the activity prior to the recent stroke, Code 88 is appropriate
- Although not able to complete the activity at SOC, the therapist anticipates Mr. B will be able to walk 50 feet with two turns safely with the assistance of a caregiver for verbal cues and contact guarding at discharge

GG0170K. Walk 150 Feet

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

GG0170K. Walk 150 Feet Coding Tip



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

GG0170L. Walking 10 Feet on Uneven Surfaces

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

GG0170L. Walking 10 Feet on Uneven Surfaces

Coding Tip



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

GG0170L Practice

Coding Scenario 7

Walking 10 feet on uneven surfaces:

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

How would you code GG0170L SOC/ROC Performance?

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



How would you code GG0170L SOC/ROC Performance? (cont.)

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



GG0170L Practice

Coding Scenario 7 (cont.)

- **Coding:** GG0170L. Walking 10 feet on uneven surfaces, **SOC/ROC Performance** would be coded **03**, **Partial/moderate assistance**
- **Rationale:** Per patient report, Mrs. N requires help provide some weight-bearing support, and assist in advancing the walker as she walked 10 feet on uneven surfaces. The helper does less than half the effort for walking 10 feet on uneven surfaces

GG0170M. 1 Step (Curb)

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



GG0170M Practice

Coding Scenario 8

1 step (curb):

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

How would you code GG0170M SOC/ROC Performance?

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



How would you code GG0170M SOC/ROC Performance? (cont.)

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



GG0170M Practice

Coding Scenario 8 (cont.)

- **Coding:** GG0170M. 1 step (curb), **SOC/ROC Performance** would be coded **04, Supervision or touching assistance**
- **Rationale:** The patient needs only verbal cueing to complete the activity of stepping up and down one step

GG0170N. 4 Steps

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

GG0170N Practice Coding Scenario 9

4 steps:

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

How would you code GG0170N SOC/ROC Performance?

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



How would you code GG0170N SOC/ROC Performance? (cont.)

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



GG0170N Practice

Coding Scenario 9 (cont.)

- **Coding:** GG0170N. 4 steps, **SOC/ROC Performance** would be coded **03, Partial/moderate assistance**
- **Rationale:**
 - The therapist provides touching assistance as Mr. J ascends 4 steps
 - The therapist provides minimal trunk support when he descends the 4 steps, providing less than half the effort to complete the activity
 - The patient requires partial/moderate assistance to go up and down 4 steps

GG01700. 12 Steps

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

GG0170N-O “Steps” Coding Tip



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

GG0170P. Picking up Object

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

GG0170P. Picking up Object Coding Tip



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

GG0170P Practice

Coding Scenario 10

Picking up object:

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

How would you code GG0170P SOC/ROC Performance?

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



How would you code GG0170P SOC/ROC Performance? (cont.)

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



GG0170P Practice

Coding Scenario 10 (cont.)

- **Coding:** GG0170P. Picking up object, **SOC/ROC Performance** would be coded **05, Setup or clean-up assistance**
- **Rationale:** The daughter provides setup assistance only by retrieving the reacher, and then the patient is able use the device to pick up the hairbrush safely

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

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

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

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

GG0170R. Wheel 50 Feet With Two Turns

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

GG0170R. Wheel 50 Feet With Two Turns

Coding Tips



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

GG0170RR1 and GG0170SS1.

Indicate the Type of Wheelchair and/or Scooter Used

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

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



GG0170S. Wheel 150 Feet

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

GG0170S. Wheel 150 Feet Coding Tip



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

GG0170S Practice Coding Scenario 11

Wheel 150 feet:

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

How would you code GG0170S SOC/ROC Performance?

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



How would you code GG0170S SOC/ROC Performance? (cont.)

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



GG0170S Practice

Coding Scenario 11 (cont.)

- **Coding:** GG0170S. Wheel 150 feet, **SOC/ROC Performance** would be coded **04, Supervision or touching assistance**
- **Rationale:** Mr. N requires the helper to provide verbal cues for his safety when using a wheelchair for 150 feet

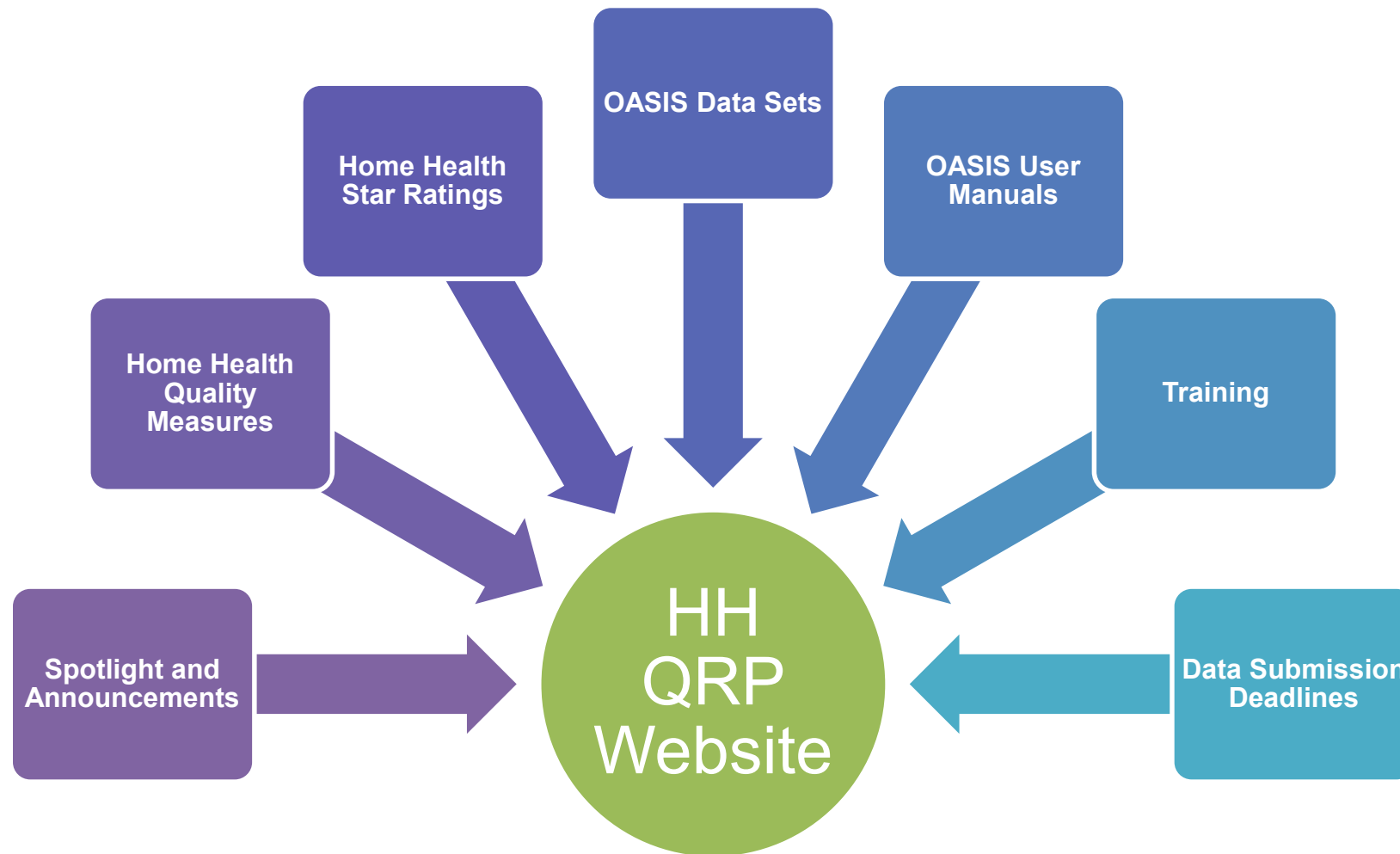
Summary



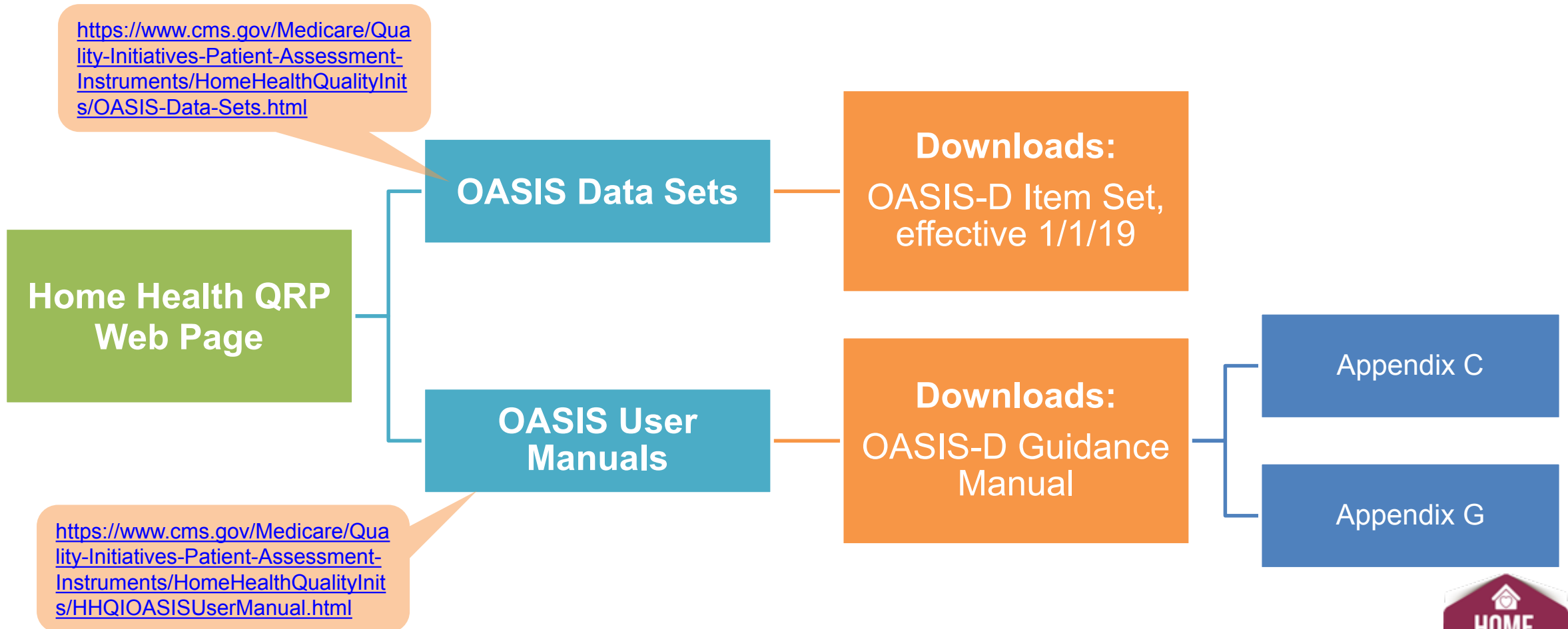
- Section GG assesses the need for assistance with self-care and mobility activities
- Added to OASIS-D for standardization and alignment with other PAC settings
- Section GG items are different from M-Items
- GG0130 and GG0170:
 - Use a 6-level rating scale and “activity was not attempted” codes
 -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

Training and Resources

HH Quality Reporting Program (QRP) Website



OASIS-D Item Set and Guidance Manual



OASIS Educational Coordinators

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

Training in the OASIS data set administration for assessing patients

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

Technical support in answering questions on the clinical aspects of OASIS

Find your OASIS Education Coordinator:

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

Help Desks

For HH QRP and OASIS
Guidance related
questions

Home Health Quality
Help Desk

[homehealthqualityquestions@cms
.hhs.gov](mailto:homehealthqualityquestions@cms.hhs.gov)

For Condition of
Participation related
questions

Home Health Agency
Survey Protocols Mailbox

hhasurveyprotocols@cms.hhs.gov

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

Home Health Policy
Mailbox

HomehealthPolicy@cms.hhs.gov

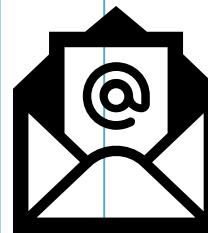


Technical Help Desk

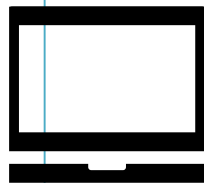
- Data Submission & Certification and Survey Provider Enhancement Reports (CASPER): Quality Improvement and Evaluation System (QIES) Technical Support Office (QTSO) Help Desk



Phone:
(800) 339-9313



Email:
help@qtso.com



Website:
<https://qtso.cms.gov>

Help Desk Disclaimer

IMPORTANT NOTICE

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

Rulemaking

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

Stay Connected: Medicare Learning Network (MLN)



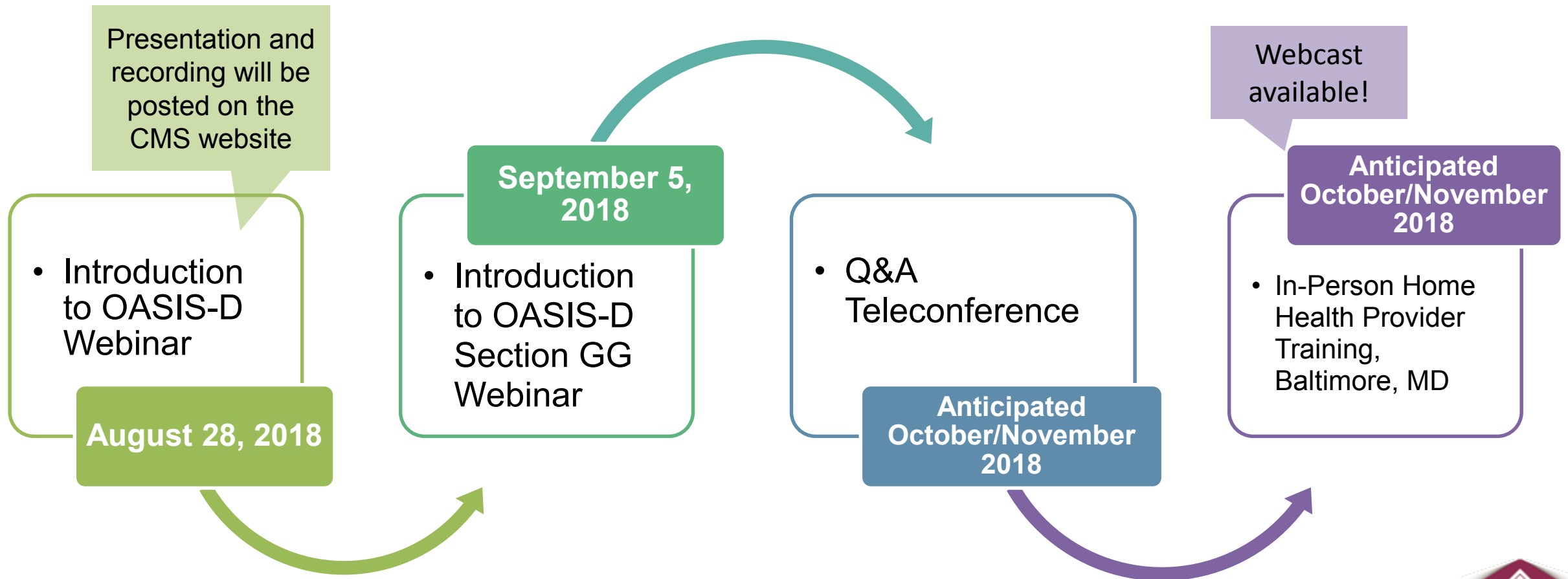
- Free educational materials for healthcare professionals on CMS programs, policies, and initiatives:
 - <https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNGenInfo/Index.html>
- Subscribe to MLN Connects weekly email newsletter for healthcare professionals:
 - <https://public.govdelivery.com/accounts/USCMS/subscriber/new>

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

- The Home Health, Hospice & Durable Medical Equipment Open Door Forum addresses the concerns of three unique health care areas within the Medicare & Medicaid programs
- Issues related to Home Health PPS, the newly proposed competitive bidding for Durable Medical Equipment and the Medicare Hospice benefit are all topics the forum has covered:
 - https://www.cms.gov/Outreach-and-Education/Outreach/OpenDoorForums/ODF_HHHDME.html
- Subscribe to the email newsletter:
 - https://public.govdelivery.com/accounts/USCMS/subscriber/new?topic_id=USCMS_502



OASIS-D Training Opportunities



Training Information and Updates

Spotlight and Announcements

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

Home Health Quality Reporting Training

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

