

# MDS Quarterly Forum



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# Welcome

Put questions and comments in the Q&A,  
not the chat box.









# DHS Website Updates


Provider Education

Newsletter Updates through July 2022

## July 2022

- [Design for Care Compare Nursing Home Five-Star Quality Rating System: Technical Users' Guide](#)  (PDF) (July 2022)
- [Nursing Home Staff Turnover and Weekend Staffing Levels](#)  (PDF) (July 2022)
- [Errata V3.00.8 for MDS 3.0-V3.00.1 \(FINAL\) Data Submission Specifications](#)  (PDF) (June 27, 2022)
- [Updates to the Nursing Home Compare Website July 2022 Updates](#)  (PDF) (July 7, 2022)
- SNF Provider Preview Reports Available in CASPER (July 15, 2022 – August 15, 2022)
- [MDS 3.0 RAI User's Manual \(v1.17.1R\) Errata \(v2\)](#)  (PDF) (July 15, 2022)
- [Nursing Home Compare Five-Star Quality Rating System: Technical Users' Guide, State-Level Health Inspection Cut Point Table](#)  (PDF) (July 2022)

## June 2022

- [ICD-10-CM 2023 codes](#)  (October 1, 2022, through September 30, 2023)
- [CMS blanket waivers for COVID-19](#)  provides a list of blanket waivers in the "Coronavirus Disease 2019" section

# Section GG General

- Guidance: Resident Assessment Instrument (RAI) manual and CMS
- Intent of GG
- Staff involvement
- Helper



# Section GG General

- Direct observation, resident self-report, direct care report, family report, ask probing questions, clarify, review medical record
- Independently as possible, with or without assistive devices
- Fluctuating level of functioning means **usual**

# Section GG Timing

Item	Timepoint
<b>GG0100.</b> Prior Functioning: Everyday Activities	<ul style="list-style-type: none"><li>• Admission (Start of Skilled Nursing Facility (SNF) Prospective Payment System (PPS) Medicare Part A stay)</li></ul>
<b>GG0110.</b> Prior Device Use	<ul style="list-style-type: none"><li>• Admission (Start of SNF PPS Medicare Part A stay)</li></ul>
<b>GG0130.</b> Self-Care	<ul style="list-style-type: none"><li>• Admission (Start of SNF PPS Medicare Part A stay)</li><li>• Discharge (End of SNF PPS Medicare Part A stay)</li></ul>
<b>GG0170.</b> Mobility	<ul style="list-style-type: none"><li>• Admission (Start of SNF PPS Medicare Part A stay)</li><li>• Discharge (End of SNF PPS Medicare Part A stay)</li></ul>

# Section GG Timing/Schedule

	OBRA Standalone Assessment	Interim Payment Assessment (IPA)	Discharge (End of SNF PPS stay)	Admission (Start of SNF PPS Stay)
GG0100				X
GG0110				X
GG0130	X (1)	X (5)	X (3)	X (1),(2)
GG0170	X (1)	X (5)	X (3)	X (1),(2)

(#) indicates column coded on MDS data set

# Section GG Assessment Period

Admission Assessment Period		
Mon	Tues	Wed
1	2	3
8	9	10
15	16	17

**Day 1: Admission**

**Day 2**

**Day 3**

5-day PPS

A2400B



# Section GG Assessment Period

PPS Discharge

Discharge Assessment Period		
Mon	Tues	Wed
1	2	3
8	9	10
Day 1	Day 2	Day 3: Discharge
15	16	17

A2400C

# Section GG Assessment Period

	OBRA Standalone Assessment	Interim Payment Assessment (IPA)	Discharge (End of SNF PPS stay)	Admission (Start of SNF PPS Stay)
GG0100				X
GG0110				X
GG0130	A2400C + 2 prior days	A2400C + 2 prior days	A2400C + 2 prior days	A2400B + 2 days
GG0170	A2400C + 2 prior days	A2400C + 2 prior days	A2400C + 2 prior days	A2400B + 2 days

# Section GG0100

## Prior Functioning

### ADMISSION

**GG0100. Prior Functioning: Everyday Activities.** Indicate the resident's usual ability with everyday activities prior to the current illness, exacerbation, or injury  
Complete only if A0310B = 01

#### Coding:

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



#### Enter Codes in Boxes

☐

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

☐

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

☐

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

☐

**D. Functional Cognition:** Code the resident'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 GG0100

## Point Scale

- **Code 3, Independent**, if the resident completed the activities by themselves, with or without an assistive device, with no assistance from a helper.
- **Code 2, Needed some help**, if the resident needed partial assistance from another person to complete activities.
- **Code 1, Dependent**, if the helper completed the activities for the resident.

# Section GG0100 Point Scale

- **Code 8, Unknown**, if the resident'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 resident prior the current illness, exacerbation or injury.
- A dash is a valid response for this item. CMS expects dash use to be a rare occurrence.

# Section GG0110

## Prior Device Use

### ADMISSION

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

Complete only if A0310B = 01



Check all that apply

☐

A. Manual wheelchair

☐

B. Motorized wheelchair and/or scooter

☐

C. Mechanical lift

☐

D. Walker

☐

E. Orthotics/Prosthetics

☐

Z. None of the above



# Section GG Point Scale

**Safety and Quality of Performance:** If helper assistance is required because resident's performance is unsafe or of poor quality, score according to amount of assistance provided.

- **06. Independent:** Resident safely completes the activity by him/herself with no assistance from a helper.
- **05. Setup or clean-up assistance:** Helper sets up or cleans up; resident completes activity. Helper assists only prior to or following the activity.

# Section GG Point Scale

- **04. Supervision or touching assistance:** Helper provides verbal cues and/or touching/steadying and/or contact guard assistance as resident completes activity. Assistance may be provided throughout the activity or intermittently.
- **03. Partial/moderate assistance:** Helper does **less than half** the effort. Helper lifts, holds or supports trunk or limbs, but provides less than half the effort.



# Section GG Point Scale

- 02. **Substantial/maximal assistance:** Helper does **more than half** the effort. Helper lifts or holds trunk or limbs and provides more than half the effort.
- 01. **Dependent:** Helper does **all** the effort. Resident does none of the effort to complete the activity. Or the assistance of two or more helpers is required for the resident to complete the activity.

# Section GG Point Scale

**If activity was not attempted, code reason:**

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

# Section GG0130 Self Care

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

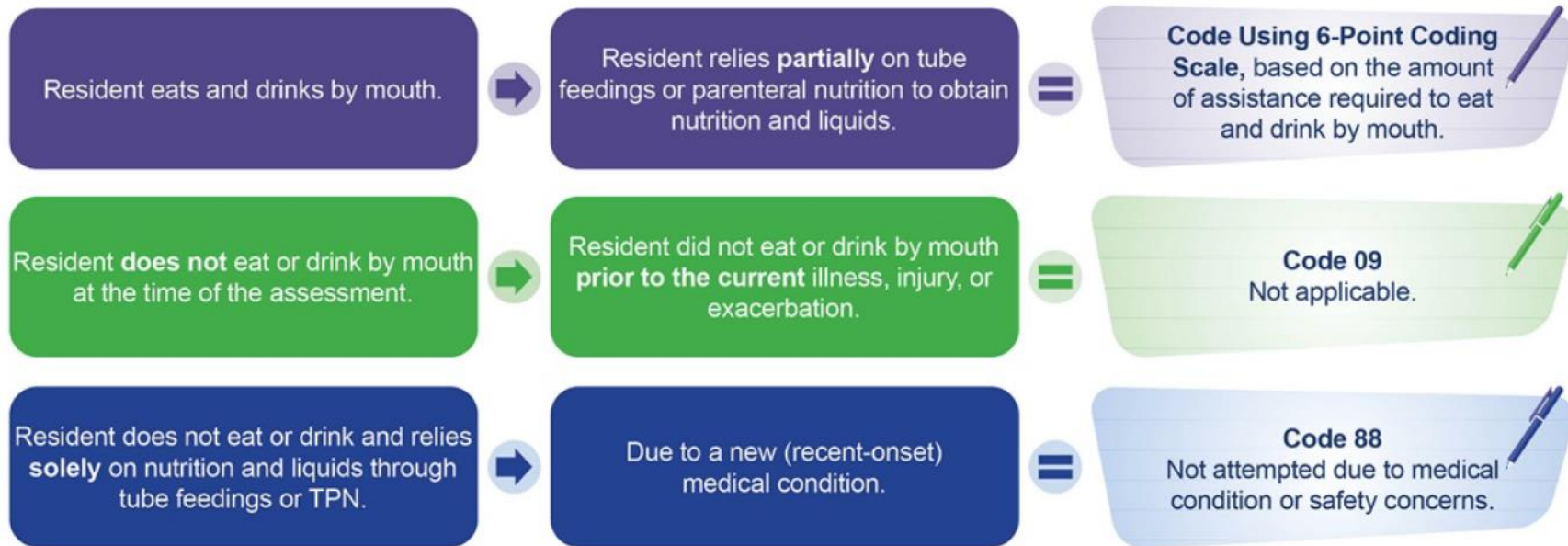
# Section GG0130A Eating

- **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 resident.
- **Timing:** Admission and discharge goal.
- **Tips:** The activity of eating involves bringing food and liquids to the mouth using suitable utensils, and swallowing food and/or liquids once the meal is placed before the resident.

# Section GG0130A Eating

- **Included:** All food and liquids, all diets taken by mouth, including mechanically altered, and setup and clean-up of the meal.
- **Excluded:** Assistance with or administration of tube feedings, parenteral nutrition, or total parenteral nutrition.

# Section GG0130A Eating



# Section GG0130B

## Oral Hygiene

- **Oral hygiene:** The ability to use suitable items to clean teeth. The ability to insert and remove dentures into and from the mouth and manage denture soaking and rinsing with use of equipment.
- **Timing:** Admission and discharge goal.
- **Tips:** Oral hygiene identifies the resident's ability to clean teeth using suitable items. It includes the resident's ability to insert or remove dentures and to manage the soaking and rinsing of dentures with the use of equipment, if applicable.

# Section GG0130B


## Oral Hygiene

- **Included:** Cleaning of teeth and dentures (and gums if edentulous), management of items and equipment used to brush teeth and gums and clean/soak dentures, and insertion and removal of dentures.
- **Excluded:** Walking to or from activity location.



# Section GG0130B

## Oral Hygiene



	Statement 1	Statement 2	Statement 3	Statement 4	Code
Scenario 1	Resident P. prefers to brush their teeth while sitting on the side of the bed.	Each time, the CNA gathers the oral hygiene items and places them on the bedside table.	The CNA leaves the resident's room.	After Resident P. independently brushes their teeth, the CNA returns to gather and put away the items.	Code 05
Scenario 2	Resident B. suffered a recent stroke that resulted in functional and cognitive limitations.	Resident B. is able to brush their teeth at the bathroom sink but is unable to initiate the task on their own, requiring verbal prompts.	Resident B. uses an adaptive toothbrush.	The CNA remains at Resident B.'s side and provides verbal cueing during the activity until they complete the task of brushing their teeth.	Code 04
Scenario 3	Resident Z. has Parkinson's disease. They are edentulous and their dentures no longer fit their gums.	Due to hand tremors, the CNA applies toothpaste onto the toothbrush. Resident Z. begins to brush the front of their upper gums, but fatigues and cannot continue.	Resident Z. asks the CNA for help to lower themselves onto the toilet seat until they recover.	The CNA brushes the remaining portion of Resident Z.'s upper and lower gums to complete the oral hygiene activity.	Code 02

# Section GG0130C

## Toileting Hygiene

- **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 the equipment.
- **Timing:** Admission performance and discharge goal.
- **Tips:** Toileting hygiene takes place before and after voiding and/or having a bowel movement. Consider the resident's need for both managing clothing and perineal/perianal cleansing.

# Section GG0130C

## Toileting Hygiene

- **Included:** Managing undergarments, clothing, and incontinence products, performing perineal/perianal cleansing before and after voiding and/or bowel movements, wiping the opening of an ostomy, and perineal cleansing around a catheter.
- **Excluded:** Managing ostomy equipment, managing catheter equipment, and transferring on/off the toilet, bedside commode, and/or bedpan.

# Section GG0130C

## Toileting Hygiene

	Statement 1	Statement 2	Statement 3	Statement 4	Code
Scenario 1	Resident L. uses the toilet to void.	Resident L. is unsteady & the CNA is present in the bathroom with them in case they need help.	Resident L. finishes voiding.	The CNA is present in the bathroom but does not provide any physical assistance with managing clothes or cleansing.	Code 04
Scenario 2	Resident P. has urinary urgency & uses the toilet to void.	As they are unsteady, Resident P. asks the CNA to lift their gown & pull down their underwear.	Resident P. completes their toileting.	Resident P. wipes themselves, pulls up their underwear, & adjusts their gown.	Code 03
Scenario 3	Resident Q. has balance issues & uses the bedside commode.	They wear a night gown & need assistance to pull down their underwear as they steady themselves.	Resident Q. voids & has a bowel movement.	Resident Q. can wipe themselves, but they fatigue, & the CNA performs perineal/perianal hygiene & pulls up their underwear to complete the task.	Code 02
Scenario 4	Resident J. uses the bedpan when voiding & for bowel movements.	Two CNAs must assist them with pulling their pants & underwear down.	The CNAs help mobilize them on & off the bedpan.	Resident J. is unable to complete any of their perineal/perianal hygiene & both CNAs pull up Resident J.'s underwear and pants.	Code 01

# Section GG0130E

## Shower/Bathe Self

- **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.
- **Timing:** Admission performance and discharge goal.
- **Tips:** The assessment of shower/bathe self can take place in a shower, bath, at a sink, or in bed (that is, full-body sponge bath). The activity can be completed independently with or without the use of devices.

# Section GG0130E

## Shower/Bathe Self

- **Included:** Washing, rinsing, and drying the resident's face, upper and lower body, perineal area, and feet.
- **Excluded:** Washing, rinsing, and drying the resident's back or hair and transferring in/out of tub or shower.

# Section GG0130E

## Shower/Bathe Self

	Statement 1	Statement 2	Statement 3	Code
Scenario 1	Resident J. uses a tub bench to bathe.	Resident J. washes their body, rinses, & dries themselves as the CNA standby to ensure Resident J.'s safety.	The CNA provides lifting assistance as Resident J. transfers off the shower bench.	Code 04
Scenario 2	Resident Y. has cognitive deficits & prefers to bathe at the sink.	After Resident Y. washes their face & arms, the CNA cues them to wash & rinse the rest of their body. Due to Resident Y's fatigue, the CNA helps them dry off.	After the bath, the CNA assists Resident Y. back to their bedside chair.	Code 03
Scenario 3	Resident E. is transferred onto a shower bench with partial/moderate assistance.	Resident E. washes their own arms & chest, then fatigues and cannot continue. The CNA must help wash the remaining parts of Resident E.'s body & rinses & dries them.	With help from the nurse, the CNA transfers Resident E. from the shower bench to a wheelchair.	Code 02

# Section GG0130F

## Upper Body Dressing

- **Upper body dressing:** The ability to dress and undress above the waist; including fasteners, if applicable.
- **Timing:** Admission performance and discharge goal.
- **Tips:** Upper body dressing identifies the resident's need for assistance to dress and undress above the waist, including any assistance needed to manage buttons and/or fasteners.



# Section GG0130F

## Upper Body Dressing

- **Included:** Bra, undershirt, t-shirt, button-down or pullover shirt, dress, sweatshirt, sweater, nightgown (not hospital gown), pajama top, thoracic-lumbar sacrum orthosis, abdominal binder, back brace, stump/sock shrinker, upper body support device, neck support, hand or arm prosthetic/orthotic, and management of buttons and/or fasteners.
- **Excluded:** Upper body dressing cannot be assessed based solely on donning/doffing a hospital gown.

# Section GG0130F

## Upper Body Dressing

	Statement 1	Statement 2	Statement 3	Statement 4	Code
Scenario 1	Resident B. has right-sided upper extremity weakness due to a stroke.	Due to that weakness, Resident B. is unable to retrieve their clothing, so the CNA hands it to them. Resident B. proceeds to put on their bra and top without any further assistance.	The CNA assists Resident B. to put on their socks and shoes.	At night, Resident B. removes the top and bra independently. However, they fatigue, and the CNA must put the clothing away.	Code 05
Scenario 2	Resident Z. has ataxia making it difficult to move their arms. They wear a bra and sweatshirt on most days.	When dressing, the CNA assists Resident Z. with threading their arms into the bra and hooking the bra clasps. Resident Z. independently adjusts the bra and puts on the sweatshirt.	The CNA hands Resident Z. a hairbrush so that they can brush their own hair.	When undressing, Resident Z. requires CNA assistance with removing one sleeve of the sweatshirt and unclasping the bra.	Code 03
Scenario 3	Resident K. sustained a spinal cord injury, affecting movement and strength in both upper extremities.	Resident K. is able to place their arms in the sleeves of their shirt but is unable to pull it over their head and straighten it, so the CNA completes the task for them.	After Resident K. finishes getting dressed, they are fatigued and require two CNAs to assist them into the bedside chair for breakfast.	When undressing, Resident K. partially slips their arm out of one sleeve but is unable to completely remove the shirt without assistance.	Code 02

# Section GG0130G

## Lower Body Dressing

- **Lower body dressing:** The ability to dress and undress below the waist, including fasteners; does not include footwear.
- **Timing:** Admission performance and discharge goal.
- **Tips:** Lower body dressing identifies the resident's need for assistance to dress and undress below the waist, including any assistance needed to manage buttons and/or fasteners. It does not include footwear.

# Section GG0130G

## Lower Body Dressing

- **Included:** Underwear, incontinence briefs, slacks, shorts, capri pants, pajama bottoms, skirts, knee brace, elastic bandage, stump sock/shrinker, lower-limb prosthesis, and management of buttons and/or fasteners.
- **Excluded:** Any clothing or device that covers the foot and is considered footwear.

# Section GG0130G

## Lower Body Dressing

	Statement 1	Statement 2	Statement 3	Statement 4	Code
Scenario 1	Resident G. is required to follow hip precautions due to recent hip surgery and uses adaptive equipment to dress and undress.	After the CNA retrieves their clothing, Resident G. threads their legs into their briefs and pants. When standing, Resident G. requires the CNA to steady them so they can pull up the briefs and pants.	The CNA assists Resident G. to put on their socks and shoes.	When undressing, Resident G. can manage removing their lower body clothing but requires the CNA to steady them when they take off their pants.	Code 04
Scenario 2	Resident K. has a right below-knee amputation and upper/lower extremity peripheral neuropathy.	Resident K. requires the assistance of a CNA to place their right lower limb into a prosthesis. They are otherwise able to dress their lower body independently.	Once dressed, the CNA assists Resident K. to walk to the dining room.	Resident K. needs CNA assistance to remove their lower limb from the prosthesis, and then they are able to undress themselves without help.	Code 03
Scenario 3	Resident P. is recovering from bilateral lower leg fractures due to a motor vehicle accident.	Resident P. is non-weight-bearing and has limited mobility. They require the CNA to turn them and lift each leg while Resident P. pulls up their underpants and slacks.	After dressing, the CNA uses a mechanical lift to place Resident P. into the bedside chair for breakfast.	When undressing, Resident P. requires the CNA to remove their slacks.	Code 02

# Section GG0130H

## Putting On/Taking Off Footwear

- **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.
- **Timing:** Admission performance and discharge goal.
- **Tips:** The assessment of putting on/taking off footwear includes identifying the resident's ability to put on and take off socks and shoes or other footwear that are appropriate for safe mobility.

# Section GG0130H

## Putting On/Taking Off Footwear

- **Included:** Clothing, wraps, or supportive devices that cover all or part of the foot, including socks, shoes, boots and running shoes, ankle foot orthosis, elastic bandages, foot orthotics, orthopedic walking boots, compression stockings, footwear considered safe for mobility, and management of fasteners.
- **Excluded:** Clothing, wraps, or supportive devices that are considered for lower body dressing (such as elastic bandage) and use of prosthetics considered as a part of lower body dressing.

# Section GG0130H

## Putting On/Taking Off Footwear

	Statement 1	Statement 2	Statement 3	Statement 4	Code
Scenario 1	Resident W. has chronic back pain that limits their mobility. They prefer to wear loafers without socks.	The CNA retrieves Resident W.'s loafers and a long-handled shoehorn and provides no other assistance while the resident puts on their shoes.	Resident W. requires the use of the shoehorn to put on and take off their loafers.	In the evening, after Resident W. removes their shoes, the CNA puts away the shoehorn and loafers.	Code 05
Scenario 2	Resident M. is recovering from a recent stroke that resulted in right-sided upper and lower body weakness.	The occupational therapist (OT) is present as Resident M. puts on their socks. Resident M. sways, slightly losing their balance. The OT lightly puts their hands on Resident M.'s shoulder to steady them as Resident M. continues to put on their shoes.	After putting on their shoes, Resident M. applies a knee brace to their right knee.	The medical record indicates that the same level of assistance was provided the night before when Resident M. removed their footwear.	Code 04
Scenario 3	Resident P. has peripheral edema affecting both feet and ankles.	Resident P. struggles to don their compression stockings. The nurse puts them over Resident P.'s toes and pulls the stockings up. Resident P. then puts on their shoes without needing further assistance.	During the day, Resident P. elevates their legs to reduce the swelling to their feet and ankles.	Before bedtime, Resident P. removes their shoes and compression stockings independently.	Code 03



# Section GG0170 Mobility

1. Admission Performance	2. Discharge Goal	
↓ Enter Codes In Boxes ↓		
<input type="text"/>	<input type="text"/>	<b>A. Roll left and right:</b> The ability to roll from lying on back to left and right side, and return to lying on back on the bed.
<input type="text"/>	<input type="text"/>	<b>B. Sit to lying:</b> The ability to move from sitting on side of bed to lying flat on the bed.
<input type="text"/>	<input type="text"/>	<b>C. Lying to sitting on side of bed:</b> The ability to move from lying on the back to sitting on the side of the bed with feet flat on the floor, and with no back support.
<input type="text"/>	<input type="text"/>	<b>D. Sit to stand:</b> The ability to come to a standing position from sitting in a chair, wheelchair, or on the side of the bed.
<input type="text"/>	<input type="text"/>	<b>E. Chair/bed-to-chair transfer:</b> The ability to transfer to and from a bed to a chair (or wheelchair).
<input type="text"/>	<input type="text"/>	<b>F. Toilet transfer:</b> The ability to get on and off a toilet or commode.
<input type="text"/>	<input type="text"/>	<b>G. Car transfer:</b> The ability to transfer in and out of a car or van on the passenger side. Does not include the ability to open/close door or fasten seat belt.
<input type="text"/>	<input type="text"/>	<b>I. Walk 10 feet:</b> Once standing, the ability to walk at least 10 feet in a room, corridor, or similar space. If admission performance is coded 07, 09, 10, or 88 → Skip to GG0170M, 1 step (curb)
<input type="text"/>	<input type="text"/>	<b>J. Walk 50 feet with two turns:</b> Once standing, the ability to walk at least 50 feet and make two turns.
<input type="text"/>	<input type="text"/>	<b>K. Walk 150 feet:</b> Once standing, the ability to walk at least 150 feet in a corridor or similar space.

# Section GG0170 Mobility

1. Admission Performance	2. Discharge Goal	
↓ Enter Codes in Boxes ↓		
<input type="text"/>	<input type="text"/>	<b>L. Walking 10 feet on uneven surfaces:</b> The ability to walk 10 feet on uneven or sloping surfaces (indoor or outdoor), such as turf or gravel.
<input type="text"/>	<input type="text"/>	<b>M. 1 step (curb):</b> The ability to go up and down a curb and/or up and down one step. If admission performance is coded 07, 09, 10, or 88 → Skip to GG0170P, Picking up object
<input type="text"/>	<input type="text"/>	<b>N. 4 steps:</b> The ability to go up and down four steps with or without a rail. If admission performance is coded 07, 09, 10, or 88 → Skip to GG0170P, Picking up object
<input type="text"/>	<input type="text"/>	<b>O. 12 steps:</b> The ability to go up and down 12 steps with or without a rail.
<input type="text"/>	<input type="text"/>	<b>P. Picking up object:</b> The ability to bend/stoop from a standing position to pick up a small object, such as a spoon, from the floor.
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> <b>Q1. Does the resident use a wheelchair and/or scooter?</b> 0. No → Skip to GG0130, Self Care (Discharge) 1. Yes → Continue to GG0170R, Wheel 50 feet with two turns
<input type="text"/>	<input type="text"/>	<b>R. Wheel 50 feet with two turns:</b> Once seated in wheelchair/scooter, the ability to wheel at least 50 feet and make two turns.
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> <b>RR1. Indicate the type of wheelchair or scooter used.</b> 1. Manual 2. Motorized
<input type="text"/>	<input type="text"/>	<b>S. Wheel 150 feet:</b> Once seated in wheelchair/scooter, the ability to wheel at least 150 feet in a corridor or similar space.
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> <b>SS1. Indicate the type of wheelchair or scooter used.</b> 1. Manual 2. Motorized

Min.  
of 1

# Section GG0170(C) Mobility

- Lying to sitting
  - On back to sitting on the side of the bed
  - Feet flat on the floor
  - Without back support



# Section GG0170(D) Mobility

- Sit to stand
  - Standing position from a chair and the side of the bed
  - No back support



# Section GG0170(E) Mobility

- Chair/Bed to chair transfer
  - Transfer to and from a bed to a chair or wheelchair



01, Dependent

# Section GG0170(G) Mobility

- Car transfer
  - Transfer in and out of a car or van
  - Passenger side
  - Doesn't include open/close door or fastening seat belt



# Section GG0170 Mobility

- Walking activities
  - Do not need to occur during one session
  - Allow to rest
  - Different times of the day or different days
  - No parallel bars
  - Walk 50' with two 90-degree turns (same or different directions)



# Section GG0170(L) Mobility

- Walking 10'
  - Uneven or sloping surfaces
  - Inside or outside (grass/gravel)
  - Turning





# Section GG0170(P) Mobility

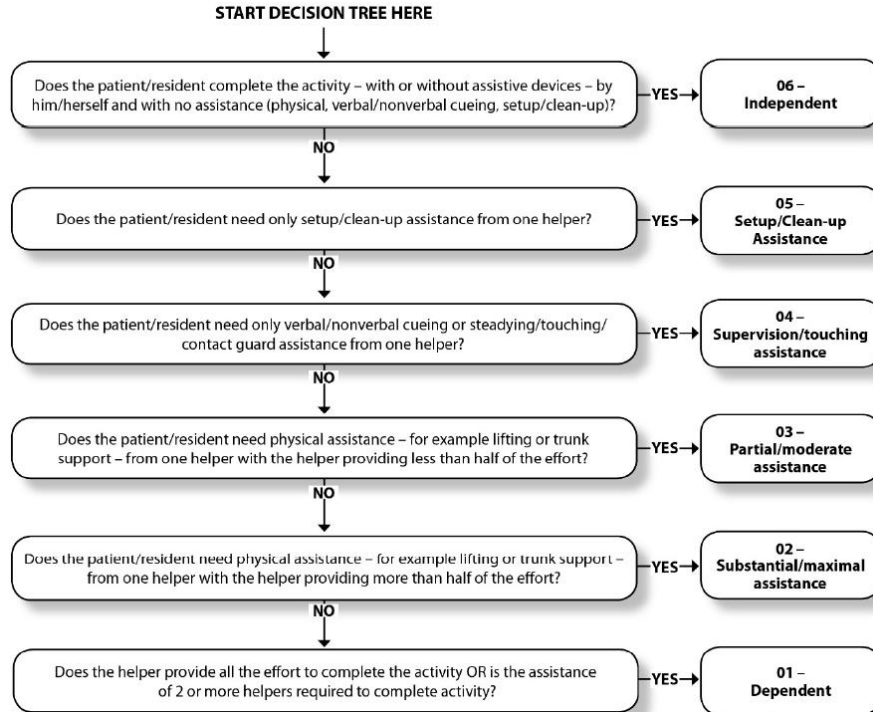
- Picking up object
  - Bend/stoop from a standing position to pick something off the floor
  - Reacher can be used

# Section GG0170(R) Mobility

- Wheel 50' with two turns
  - Self-mobilization
  - Do not code if using to transport between locations within the facility or for staff convenience
  - Two 90-degree turns (same or different directions)



# Section GG



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# Section GG Discharge

3. Discharge Performance	
Enter Codes in Boxes	
<input type="text"/> <input type="text"/>	<b>A. Roll left and right:</b> The ability to roll from lying on back to left and right side, and return to lying on back on the bed.
<input type="text"/> <input type="text"/>	<b>B. Sit to lying:</b> The ability to move from sitting on side of bed to lying flat on the bed.
<input type="text"/> <input type="text"/>	<b>C. Lying to sitting on side of bed:</b> The ability to move from lying on the back to sitting on the side of the bed with feet flat on the floor, and with no back support.
<input type="text"/> <input type="text"/>	<b>D. Sit to stand:</b> The ability to come to a standing position from sitting in a chair, wheelchair, or on the side of the bed.
<input type="text"/> <input type="text"/>	<b>E. Chair/bed-to-chair transfer:</b> The ability to transfer to and from a bed to a chair (or wheelchair).
<input type="text"/> <input type="text"/>	<b>F. Toilet transfer:</b> The ability to get on and off a toilet or commode.
<input type="text"/> <input type="text"/>	<b>G. Car transfer:</b> The ability to transfer in and out of a car or van on the passenger side. Does not include the ability to open/close door or fasten seat belt.
<input type="text"/> <input type="text"/>	<b>I. Walk 10 feet:</b> Once standing, the ability to walk at least 10 feet in a room, corridor, or similar space. If discharge performance is coded 07, 09, 10, or 88 → Skip to GG0170M, 1 step (curb)
<input type="text"/> <input type="text"/>	<b>J. Walk 50 feet with two turns:</b> Once standing, the ability to walk at least 50 feet and make two turns.
<input type="text"/> <input type="text"/>	<b>K. Walk 150 feet:</b> Once standing, the ability to walk at least 150 feet in a corridor or similar space.

# Section GG Discharge

3. Discharge Performance	
Enter Codes in Boxes	
<input type="text"/>	<b>L. Walking 10 feet on uneven surfaces:</b> The ability to walk 10 feet on uneven or sloping surfaces (indoor or outdoor), such as turf or gravel.
<input type="text"/>	<b>M. 1 step (curb):</b> The ability to go up and down a curb and/or up and down one step. If discharge performance is coded 07, 09, 10, or 88 → Skip to GG0170P, Picking up object
<input type="text"/>	<b>N. 4 steps:</b> The ability to go up and down four steps with or without a rail. If discharge performance is coded 07, 09, 10, or 88 → Skip to GG0170P, Picking up object
<input type="text"/>	<b>O. 12 steps:</b> The ability to go up and down 12 steps with or without a rail.
<input type="text"/>	<b>P. Picking up object:</b> The ability to bend/stoop from a standing position to pick up a small object, such as a spoon, from the floor.
<input type="checkbox"/>	<b>Q3. Does the resident use a wheelchair and/or scooter?</b> 0. No → Skip to H0100, Appliances 1. Yes → Continue to GG0170R, Wheel 50 feet with two turns
<input type="text"/>	<b>R. Wheel 50 feet with two turns:</b> Once seated in wheelchair/scooter, the ability to wheel at least 50 feet and make two turns.
<input type="checkbox"/>	<b>RR3. Indicate the type of wheelchair or scooter used.</b> 1. Manual 2. Motorized
<input type="text"/>	<b>S. Wheel 150 feet:</b> Once seated in wheelchair/scooter, the ability to wheel at least 150 feet in a corridor or similar space.
<input type="checkbox"/>	<b>SS3. Indicate the type of wheelchair or scooter used.</b> 1. Manual 2. Motorized

# Section GG Discharge

- End of prospective payment system (PPS) stay
  - Assessment reference date (ARD) for a standalone equals A2400C (end date of most recent Medicare stay)
- Discharge from facility (OBRA discharge required)
  - A2400C occurs on the day of or one day before discharge date (A2000) can be combined
    - ◆ ARD date would be discharge date

# Quality Reporting Program

- What is the SNF quality reporting program (QRP)?
- What happens if quality data isn't reported?
- Who can see the reported data?
- Primary purposes of reviewing reports?

# Quality Reporting Program

- Application of percent of long-term care hospital (LTCH) patients with an admission and discharge functional assessment and a care plan that addresses function.
- SNF functional outcome measure: Discharge self-care score for skilled nursing facility residents.
- SNF functional outcome measure: Discharge mobility score for skilled nursing facility residents.



# Quality Reporting Program

- SNF functional outcome measure: Change in self-care score for skilled nursing facility residents.
- SNF functional outcome measure: Change in mobility score for skilled nursing facility residents.
- Changes in skin integrity post-acute care: pressure ulcer/injury.

# Quality Reporting Program

Application of percent of long-term care hospital (LTCH) patients with an admission and discharge functional assessment and a care plan that addresses function

- NQF #2631, CMS ID: S001.03
- Reports the percentage of Med Part A SNF stays with an admission and discharge functional assessment and a care plan that addresses function.

# Quality Reporting Program

- Admit - GG0130A1-C1, GG0170B1-F1, GG0170I1-K1, GG0170R1-SS1 and at **least one** within GG0130A2-C2, or GG0130E2-H2, or GG0170A2-G2, or GG0170I2-P2, or GG0170R2-S2
- Discharge – GG0130A3-C3, GG0170B3-F3, GG0170I3-K3, GG0170R3-SS3
  - Complete stays only
- Publicly reported

# Quality Reporting Program

SNF functional outcome measure: Discharge self-care score for skilled nursing facility residents

- NQF #2635, CMS ID: S024.02
- Estimates the percentage of Med Part A stays that meet or exceed an expected discharge self-care score.
- Sum of GG0130A3-C3 and E3-H3
- Publicly reported

# Quality Reporting Program

SNF functional outcome measure: Discharge mobility score for skilled nursing facility residents

- NQF #2636, CMS ID: S025.02
- Estimates the percentage of Med Part A stays that meet or exceed an expected discharge mobility score.
- Sum of GG0170A3-G3 and I3-P3
- Publicly reported

# Quality Reporting Program

SNF functional outcome measure: Change in self-care score for skilled nursing facility residents

- NQF #2633, CMS ID: S022.02
- Estimates the risk-adjusted mean change in self-care score between admission and discharge for Med Part A stays.
- Sums of GG0130A1-C1 and E1-H1 compared to those at discharge sum of GG0130A3-C3 and E3-H3
- Publicly reported

# Quality Reporting Program

SNF functional outcome measure: Change in mobility score for skilled nursing facility residents

- NQF #2634, CMS ID: S023.02
- Estimates the risk-adjusted mean change in mobility score between admission and discharge for Med Part A stays.
- Sum of GG0170A1-G1 and I1-P1 compared to those at discharge sum of GG0170A3-G3 and I3-P3
- Publicly reported

# Quality Reporting Program

Changes in skin integrity post-acute care: pressure ulcer/injury

- CMS ID: S038.02
- GG0170C1 is used as a covariate



# Quality Reporting Program

Facility-level quality measure (QM) report

- 12-month period
- MDS 3.0 assessment data and Medicare fee-for service claims

# Quality Reporting Program

Facility ID:   
CCN:   
Facility Name:   
City/State:

Requested Report End Date: 06/30/2022   
Report Run Date: 05/06/2022   
Data Calculation Date: 05/01/2022   
Report Version Number: 2.2

## Table Legend

Dash (-): Data not available or not applicable

Source: Minimum Data Set 3.0 (MDS 3.0)

Measure Name	Report Period	CMS ID	CMS ID Discharge Dates	Numerator	Denominator	Facility Observed Percent	Facility Risk-Adjusted Percent	National Average
Pressure Ulcer/Injury	07/01/2021 - 06/30/2022	S038.02	07/01/2021 - 06/30/2022	2	65	3.1%	3.9%	2.8%

Measure Name	Report Period	CMS ID	CMS ID Discharge Dates	Numerator	Denominator	Facility Percent	National Average
Application of Falls (NQF #0674)	07/01/2021 - 06/30/2022	S013.02	07/01/2021 - 06/30/2022	0	65	0.0%	1.0%
Application of Functional Assessment/Care Plan (NQF #2631)	07/01/2021 - 06/30/2022	S001.03	07/01/2021 - 06/30/2022	66	66	100.0%	98.7%

Measure Name	Report Period	CMS ID	CMS ID Discharge Dates	Average Observed Discharge Score	Average Expected Discharge Score	Numerator	Denominator	Facility Percent	National Average
Functional Status Outcome: Discharge Self-Care Score (NQF #2635)	07/01/2021 - 06/30/2022	S024.03	07/01/2021 - 06/30/2022	26.6	30.4	9	47	19.1%	46.3%
Functional Status Outcome: Discharge Mobility Score (NQF #2636)	07/01/2021 - 06/30/2022	S025.03	07/01/2021 - 06/30/2022	45.9	52.4	15	47	31.9%	39.7%

# Quality Reporting Program

Measure Name	Report Period	CMS ID	CMS ID Discharge Dates	Denominator	Average Observed Admission Score	Average Observed Discharge Score	Average Observed Change	Average Risk-Adjusted Change	National Average
Functional Status Outcome: Change in Self-Care (NQF #2633)	07/01/2021 - 06/30/2022	S022.03	07/01/2021 - 06/30/2022	47	22.7	26.6	3.9	4.0	7.2
Functional Status Outcome: Change in Mobility (NQF #2634)	07/01/2021 - 06/30/2022	S023.03	07/01/2021 - 06/30/2022	47	31.6	45.9	14.3	12.0	16.5

# Quality Reporting Program

<b># of MDS 3.0 Assessments Submitted:</b>	1
<b># of MDS 3.0 Assessments Submitted Complete:</b>	1
<b>% of MDS 3.0 Assessments Submitted Complete:</b>	100%*

# Quality Measures

Measure Description	CMS ID	Data	Num	Denom	Facility Observed Percent	Facility Adjusted Percent	Comparison Group State Average	Comparison Group National Average	Comparison Group National Percentile
Hi-risk/Unstageable Pres Ulcer (L)	N015.03	C	0	16	0.0%	0.0%	0.0%	0.0%	0
Phys restraints (L)	N027.02	C	0	53	0.0%	0.0%	0.0%	0.0%	0
Falls (L)	N032.02	C	0	53	0.0%	0.0%	0.0%	0.0%	0
Falls w/Maj Injury (L)	N013.02	C	0	53	0.0%	0.0%	0.0%	0.0%	0
Antipsych Med (S)	N011.02	C	0	0	-	-	-	-	-
Antipsych Med (L)	N031.03	C	53	53	100.0%	100.0%	100.0%	100.0%	100 *
Antianxiety/Hypnotic Prev (L)	N033.02	C	53	53	100.0%	100.0%	100.0%	100.0%	100 *
Antianxiety/Hypnotic % (L)	N036.02	C	53	53	100.0%	100.0%	100.0%	100.0%	100 *
Behav Sx affect Others (L)	N034.02	C	0	53	0.0%	0.0%	0.0%	0.0%	0
Depress Sx (L)	N030.02	C	53	53	100.0%	100.0%	100.0%	100.0%	100 *
UTI (L)	N024.02	C	0	16	0.0%	0.0%	0.0%	0.0%	0
Cath Insert/Left Bladder (L)	N026.03	C	0	16	0.0%	-	-	-	-
Lo-Risk Lose B/B Con (L)	N025.02	C	0	16	0.0%	0.0%	0.0%	0.0%	0
Excess Wt Loss (L)	N029.02	C	16	16	100.0%	100.0%	100.0%	100.0%	100 *
Incr ADL Help (L)	N028.02	C	0	0	-	-	-	-	-
Move Indep Worsens (L)	N035.03	C	0	0	-	-	-	-	-
Improvement in Function (S)	N037.03	C	0	0	-	-	-	-	-

Measure Description	CMS ID	Numerator	Denominator	Facility Observed Percent	Facility Adjusted Percent	National Average
Pressure Ulcer/Injury <sup>1</sup>	S038.02	94	4,748	2.0%	1.2%	0.2%

# Questions?



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<https://www.dhs.wisconsin.gov/regulations/nh/rai-mds.htm>

# References

- RAI Manual [Appendix R](#)
- [SNF Quality Reporting Program \(QRP\)](#)
- [Care compare](#)
- [Five-star quality rating system guide](#)