

## Seek Consistency Between Mobility Goals (GG0170I-P) and Prior Mobility Functioning (GG0100B)

If you're going to provide physical therapy for rehabilitation of ambulation and/or transferring, the obvious goal of treatment should be the patient's prior ability before this particular illness/injury. The patient's prior mobility status is documented on GG0100B.

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

3. Independent – Patient completed the activities by him/herself, with or without an assistive device, with no assistance from a helper.	3	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.	2	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.	2	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 9. Not Applicable	2	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.

## How to Answer GG0100B

GG0100B identifies the patient's usual indoor mobility (ambulation) ability **prior** to the current illness, exacerbation or injury. This question DOES NOT CONSIDER if the patient uses a wheelchair for mobility. If the patient uses a wheelchair, the answer should be 9 – Not Applicable.

### Coding Instructions

- **Code 3**, Independent, if the patient completed the activities by him/herself, with or without an assistive device, with no assistance from a helper. THIS WILL BE THE DISCHARGE GOAL on GG0170.
- **Code 2**, Needed Some Help, if the patient needed partial assistance from another person to complete activities. THIS WILL BE THE DISCHARGE GOAL on GG0170.
- **Code 1**, Dependent, if the helper completed the activities for the patient. If the patient was already dependent prior to this illness, S/HE IS NOT A CANDIDATE FOR PHYSICAL THERAPY.
- **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 the current illness, exacerbation or injury.
- Dash (**answer is left blank**). CMS expects a dash used in rare occurrences.

### Coding Tips

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

## OASIS-D Therapy Wizard Guidance for GG0100B > GG0170

### When to Code “Not Applicable”

Mr. S uses a wheelchair for mobility. Coding: GG0100B: Mobility, would be coded 9, Not Applicable. **Rationale:** Mr. S does not walk, he uses a wheelchair. So, he did not perform this activity.

### GG0170 Mobility Goals

If GG0100B Prior Mobility was **3 - independent** or **2 – needed help** prior to the current illness AND (M1860) Ambulation/Mobility is WORSE than prior ability, the patient is a candidate for Physical Therapy.

The goal for items GG0170I2 - GG0170P2 should MATCH the patient PRIOR ability as documented on GG0170B.

For example, if the patient’s prior mobility was a ‘2’ (needed some help), the appropriate goal for items GG0170I2 - GG0170P2 would be 03 or 04.

If the patient’s prior mobility was a ‘3’ (independent), the appropriate goal for items GG0170I2 - GG0170P2 would be 05 or 06.

If Prior Mobility was ‘Needed some help’...

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

<b>3. Independent</b> – Patient completed the activities by him/herself, with or without an assistive device, with no assistance from a helper.	<div style="border: 1px solid black; padding: 5px; width: 30px; margin: 0 auto;">3</div>	<b>A. Self Care:</b> Code the patient’s need for assistance with bathing, dressing, using the toilet, or eating prior to the current illness, exacerbation, or injury.
<b>2. Needed Some Help</b> – Patient needed partial assistance from another person to complete activities.	<div style="border: 1px solid black; padding: 5px; width: 30px; margin: 0 auto;">2</div>	<b>B. Indoor Mobility (Ambulation):</b> Code the patient’s need for assistance with walking from room to room (with or without a device such as cane, crutch or walker) prior to the current illness, exacerbation, or injury.
<b>1. Dependent</b> – A helper completed the activities for the patient.	<div style="border: 1px solid black; padding: 5px; width: 30px; margin: 0 auto;">2</div>	<b>C. Stairs:</b> Code the patient’s need for assistance with internal or external stairs (with or without a device such as cane, crutch, or walker) prior to the current illness, exacerbation or injury.
<b>8. Unknown.</b> <b>9. Not Applicable</b>	<div style="border: 1px solid black; padding: 5px; width: 30px; margin: 0 auto;">2</div>	<b>D. Functional Cognition:</b> Code the patient’s need for assistance with planning regular tasks, such as shopping or remembering to take medication prior to the current illness, exacerbation, or injury.

...and if physical therapy will be provided, make sure the discharge goal for GG0170 I2 – P2 is comparable to GG0100B Prior Functioning. In this case, the goals for mobility questions GG0170 I2 – P2 should be 04 or 05 (see next page).

## OASIS-D Therapy Wizard Guidance for GG0100B > GG0170

**GG0170. Mobility:** Code the patient's usual performance at SOC/ROC for each activity using the 6-point scale. If activity was not attempted at SOC/ROC, code the reason. Code the patient's discharge goal(s) using the 6-point scale. Use of codes 07, 09, 10 or 88 is permissible to code discharge goal(s).

06. Independent – Patient completes the activity by him/herself with no assistance from a helper.
05. Setup or clean-up assistance – Helper sets up or cleans up; patient completes activity. Helper assists only prior to or following the activity.
04. Supervision or touching assistance – Helper provides verbal cues and/or touching/steadying and/or contact guard assistance as patient completes activity. Assistance may be provided throughout the activity or intermittently.
03. Partial/moderate assistance – Helper does LESS THAN HALF the effort. Helper lifts, holds or supports trunk or limbs, but provides less than half the effort.
02. Substantial/maximal assistance – Helper does MORE THAN HALF the effort. Helper lifts or holds trunk or limbs and provides more than half the effort.
01. Dependent – Helper does ALL of the effort. Patient does none of the effort to complete the activity. Or, the assistance of 2 or more helpers is required for the patient to complete the activity.

If activity was not attempted, code reason:

07. Patient refused
09. Not applicable – Not attempted and the patient did not perform this activity prior to the current illness, exacerbation or injury.
10. Not attempted due to environmental limitations (e.g., lack of equipment, weather constraints)
88. Not attempted due to medical conditions or safety concerns

### SOC Perf. Disch Goal

02	03	<b>I. Walk 10 feet:</b> Once standing, the ability to walk at least 10 feet in a room, corridor, or similar space.
03	04	<b>J. Walk 50 feet with two turns:</b> Once standing, the ability to walk 50 feet and make two turns.
02	03	<b>K. Walk 150 feet:</b> Once standing, the ability to walk at least 150 feet in a corridor or similar space.
02	04	<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.
03	04	<b>M. 1 step (curb):</b> The ability to go up and down a curb and/or up and down one step.
02	04	<b>N. 4 steps:</b> The ability to go up and down four steps with or without a rail.
03	04	<b>O. 12 steps:</b> The ability to go up and down 12 steps with or without a rail.
02	04	<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.