Casamba Skilled Updates to Section GG

Information and Transition Plan
## Regulatory Updates to Section GG For October 2018

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REGULATORY UPDATES TO SECTION GG FOR OCTOBER 2018

UPDATES TO SELF-CARE AND MOBILITY ACTIVITY ITEMS

GG0130. SELF-CARE ITEM ADDITIONS

Effective October 1, 2018 Skilled Nursing Facilities will be required to collect and report on four (4) additional activity items in GG1030. Self-Care as follows:

- **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.
- **F. Upper body dressing:** The ability to dress and undress above the waist; including fasteners, if applicable.
- **G. Lower body dressing:** The ability to dress and undress below the waist, including fasteners; does not include 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.

GG0130. SELF-CARE ITEM REVISIONS TO VERBIAGE

Effective October 1, 2018 the verbiage used in select GG0130. Self-Care items has been updated as follows:

**2016 Self-Care Items:**

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

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.]

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

**2018 Self-Care Items:**

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 resident.

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.

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.
GG0170. MOBILITY ITEM ADDITIONS

Effective October 1, 2018 Skilled Nursing Facilities will be required to collect and report on eight (8) additional activity items in GG1070. Mobility as follows:

- **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.
- **G. Car transfer**: The ability to transfer in and out of a car or van on the passenger side. Does not include the ability to open/close door or fasten seat belt.
- **I. Walk 10 feet**: Once standing, the ability to walk at least 10 feet in a room, corridor, or similar space. If admission performance is coded 07, 09, 10, or 88 → Skip to GG1070M, 1 step (curb)
- **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.
- **N. 4 steps**: The ability to go up and down four steps with or without a rail.
- **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.

GG0170. MOBILITY ITEM REMOVALS

Effective October 1, 2018 the GG1070. Mobility H1. and H3. “Does the resident walk?” items will be retired.

GG0170. MOBILITY ITEM REVISIONS TO VERBIAGE

Effective October 1, 2018 the verbiage used in select GG0130. Self-Care items has been updated as follows:

**2016 Mobility Items:**

- **C. Lying to sitting on side of bed**: The ability to safely move from lying on the back to sitting on the side of the bed with feet flat on the floor, and with no back support.
- **D. Sit to stand**: The ability to safely come to a standing position from sitting in a chair or on the side of the bed.
- **E. Chair/bed-to-chair transfer**: The ability to safely transfer to and from a bed to a chair (or wheelchair).
- **F. Toilet transfer**: The ability to safely get on and off a toilet or commode.

**2018 Mobility Items:**

- **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.
UPDATES TO SAFETY AND QUALITY OF PERFORMANCE SCALE

ADDITIONS TO SAFETY AND QUALITY OF PERFORMANCE RATING SCALE

Effective October 1, 2018 an additional rating selection is offered in the Safety and Quality of Performance Scale to clarify if an activity was not attempted related to environmental factors as follows:

- “10. Not attempted due to environmental limitations (e.g., lack of equipment, weather constraints)”

REVISIONS TO VERBIAGE IN SAFETY AND QUALITY OF PERFORMANCE RATING SCALE

2016 Rating Scale:

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

07. Resident refused.
09. Not applicable.
88. Not attempted due to medical condition or safety concerns.
### 2018 Rating Scale:

06. **Independent** - Resident completes the activity by him/herself with no assistance from a helper.

05. **Setup or clean-up assistance** - Helper sets up or cleans up; resident completes activity. Helper assists only prior to or following the activity.

04. **Supervision or touching assistance** - Helper provides verbal cues and/or touching/steadying and/or contact guard assistance as resident completes activity. Assistance may be provided throughout the activity or intermittently.

03. **Partial/moderate assistance** - Helper does LESS THAN HALF the effort. Helper lifts, holds, or supports trunk or limbs, but provides less than half the effort.

02. **Substantial/maximal assistance** - Helper does MORE THAN HALF the effort. Helper lifts or holds trunk or limbs and provides more than half the effort.

01. **Dependent** - Helper does ALL of the effort. Resident does none of the effort to complete the activity. Or, the assistance of 2 or more helpers is required for the resident to complete the activity.

07. **Resident refused.**

09. **Not applicable** - Not attempted and the resident did not perform this activity prior to the current illness, exacerbation, or injury.

10. **Not attempted due to environmental limitations** (e.g., lack of equipment, weather constraints).

88. **Not attempted due to medical condition or safety concerns.**

### NEW PRIOR LEVEL SECTIONS

Two new sections will be required to capture the resident’s function prior to admission related to everyday activities and prior device use. These sections will be added to Functional Deficits in Documentation / POC and will be added to the Planner Set ARD Section GG Screen for the 5-day Assessment.

**GG0100. PRIOR FUNCTIONING: EVERYDAY ACTIVITIES**

Effective October 1, 2018 Skilled Nursing Facilities will need to indicate the resident’s usual ability with everyday activities prior to the current illness, exacerbation, or injury for the following activities:

- **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.

**GG0110. PRIOR DEVICE USE**

Effective October 1, 2018 Skilled Nursing Facilities will need to indicate devices and aids used by the resident prior to the current illness, exacerbation, or injury as follows:

- A. Manual wheelchair
- B. Motorized wheelchair and/or scooter
- C. Mechanical lift
- D. Walker
PRIOR LEVEL RATING SCALES

A new rating scale will be utilized to code Prior Functioning: Everyday Activities in the MDS. To note, this rating set differs from the Safety and Quality of Performance scale utilized to code the Self Care and Mobility Items in that it offers 3 selections to identify the level of independence versus 6 with the current Safety and Quality of Performance scale as follows:

1. **Dependent** - A helper completed the activities for the resident
2. **Needed Some Help** - Resident needed partial assistance from another person to complete activities.
3. **Independent** - Resident completed the activities by him/herself, with or without an assistive device, with no assistance from a helper.

8. **Unknown.**
9. **Not Applicable.**

Prior Device Use Items will not be rated with a scale, but rather will be a check box selection on the MDS to check all that apply.
DISCHARGE GOALS

The October 2018 Version 1.16 RAI Manual has updated the Discharge Goal(s): Coding Tips section to change the policy regarding the use of Activity Not Attempted codes. In the October 2017 Version 1.15 RAI Manual Activity Not Attempted codes were not able to be utilized to code Discharge Goals. See below from page 308/1419:

“Discharge Goal(s): Coding Tips

Use the 6-point scale to code the resident’s Discharge Goal(s). Do not use the “activity was not attempted” codes (07, 09, or 88) to code Discharge Goal(s). Use a dash (-) to indicate that a specific activity is not a Discharge Goal. Of note, at least one Discharge Goal must be indicated for either Self-Care or Mobility. Using the dash in this allowed instance does not affect APU determination.”

In the October 2018 Version 1.16 RAI Manual this policy has been updated to allow for use of the Activity Not Attempted codes to code discharge goal(s). See below from page 324/1517:

“Discharge Goals: Coding Tips

Discharge goals are coded with each Admission (Start of SNF PPS Stay) assessment.

For the SNF Quality Reporting Program (QRP), a minimum of one self-care or mobility discharge goal must be coded. However, facilities may choose to complete more than one self-care or mobility discharge goal. Code the resident’s discharge goal(s) using the six point scale. Use of the “activity was not attempted” codes (07, 09, 10, and 88) is permissible to code discharge goal(s). Use of a dash is permissible for any remaining self care or mobility goals that were not coded. Of note, at least one Discharge Goal must be indicated for either Self-Care or Mobility. Using the dash in this allowed instance after the coding of at least one goal does not affect Annual Payment Update (APU) determination.”

SECTION GG UPDATES IN CASAMBA SKILLED

UPDATES TO DOCUMENTATION / POC

SELF-CARE AND MOBILITY REVISIONS TO MATCH MDS

Section GG Functional Deficits have been updated to match the new modifications made to the October 2018 Section GG Self-Care and Section GG Mobility fields. These new Functional Deficit Items were uploaded into client’s servers on Thursday August 30 as ‘inactive’ in order to ensure they will not be offered as selections in current documentation. (Please see the Transition Plan section for more details regarding activating Functional Deficits prior to October 1).
Revisions to the Safety and Quality of Performance rating scale verbiage plus the addition of the “10. Not attempted due to environmental limitations...” rating value will be activated in each client’s server in the evening of Sunday September 30, 2018.

Please see below screen shots of new Section GG Self Care and Section GG Mobility items that will display in Functional Deficits once the new Section GG Functional deficits items are activated.

NEW EVERYDAY ACTIVITIES AND DEVICE USE SECTIONS
Two new Groups, “Everyday Activities” and “Device Use” + their corresponding Sub Group fields, will be added to Functional Deficits to allow for reporting on the new Section GG Prior Functioning: Everyday Activities and Section GG Prior Device Use items required for submission to the MDS in October 2018. Although only the prior level statuses are required for MDS submission with these new rating items, Casamba Skilled will also display current and anticipated level fields as well to support continued documentation of the patient’s progress in these areas throughout their course of stay.

The rating scale used for the Everyday Activities Group in documentation is the condensed 3-point level of independence scale used for the MDS, compared to the 6-point level of independence scale used for Section GG Self-Care and Mobility items. The verbiage of the new rating scale will match that used for the MDS; however in the documentation module the rating scale will display in present tense to communicate Current and Anticipated level statuses if desired. Information documented under Prior Level will auto populate to display in the Planner Section GG screen in past tense to exactly match the MDS rating scale.

The Device Use Group under documentation will offer a Yes or No selection to indicate if the named device was / is used for functional tasks. To note: the ‘Z. None of the Above’ selection will not be offered under documentation, as this is assumed if all Device Use Sub Group fields have a ‘No’ entry. If all Prior Level entries for items A through E are ‘No’ in the Prior Device Use section of the POC, then Casamba Skilled will auto populate the selection of ‘Z. None of the Above’ to the 5-day Assessment field in the Set ARD Section GG Screen.

NEW SECTION GG FD ITEMS TO AUTO POPULATE TO SECTION GG SCREEN

Casamba Skilled has been updated to ensure all new Section GG Functional Deficit items activated to display in documentation will map entry values to the Set ARD > Section GG Screen when the app setting to auto populate Section GG items is activated. Items will map as follows:

- Section GG Self-Care and Mobility Current entry values in the POC and SPOC will map to the corresponding new Section GG Self-Care and Mobility Admission Performance fields in the Set ARD > Section GG screen if the POC / SPOC activity date equals Payor Days 1, 2, or 3.

- Section GG Self-Care and Mobility Anticipated entry values in the POC and SPOC will map to the corresponding new Section GG Self-Care and Mobility Discharge Goal fields of the Set ARD > Section GG Screen if the POC / SPOC activity date equals Payor Days 1, 2, or 3.

- Section GG Self-Care and Mobility Current entry values in the discharge summary will map to the corresponding new Section GG Self-Care and Mobility Discharge Performance fields of the Set ARD > Section GG Screen if the POC / SPOC activity date equals the last three days of the patients stay + the day after the Medicare EOC date → Payor Days 3, 2, 1 + the day after Medicare EOC date.
• Everyday Activity and Device Use PRIOR entry values in the POC and SPOC will to map to the corresponding new Prior Functioning: Everyday Activities and Prior Device Use fields of the Set ARD > Section GG Screen. These values will map for any activity date, even if the activity date is set after days 1, 2, or 3.

CARE TOOL FD ITEMS CORRELATED WITH NEW GG ITEMS TO AUTO POPULATE TO SECTION GG SCREEN

Casamba Skilled has been updated to ensure all current Care Tool Functional Deficit items that correlate with the new October 2018 Section GG items will map rating entries to the corresponding new Section GG items in the Set ARD > Section GG Screen. Care Tool items have been mapped to the following Section GG items on the Set ARD > Section GG Screen as follows:

CARE Tool: Mobility Items

1. Care Tool Rolling left and right → GG0170A Section GG 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
2. Care Tool Picking up object → GG0170P Section GG 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.
3. Care Tool Car Transfer → GG0170G Section GG 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.
4. Care Tool Walking 10 feet on uneven surfaces → GG0170L Section GG 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.
5. Care Tool Walk in room once standing; 10 feet but less than 49 → GG1070I Section GG Walk 10 feet: Once standing, the ability to walk at least 10 feet in a room, corridor, or similar space.
6. Care Tool 1 step (curb) → GG0170M Section GG 1 step (curb): The ability to go up and down a curb and/or up and down one step.
7. Care Tool 4 steps → GG0170N Section GG 4 steps: The ability to go up and down four steps with or without a rail.
8. Care Tool 12 steps → GG0170O Section GG 12 steps: The ability to go up and down 12 steps with or without a rail.

CARE Tool: Self Care Items

1. Care Tool Upper body dressing → GG0130F Section GG Upper body dressing: The ability to dress and undress above the waist; including fasteners, if applicable
2. Care Tool Lower body dressing → GG0130G Section GG Lower body dressing: The ability to dress and undress below the waist, including fasteners; does not include footwear.
3. Care Tool Shower or bathe self → GG0130E Section GG 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.
4. Care Tool Putting on or taking off footwear → GG0130H Section GG 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.

5.
Mandatory Functionality for Separate Sub Group Fields

Because only the Prior Level values are required for the MDS, Casamba will offer new functionality which will allow organizations to separately require an entry for Prior, Current, and/or Anticipated levels in documentation. After each organization is updated with the new Summer Release, Functional Deficit Sub Group fields can be separately identified to be required (mandatory) under the Facility > Tables tab in each client’s server as desired.

<table>
<thead>
<tr>
<th>Sub Group</th>
<th>Scale Name</th>
<th>Precheck</th>
<th>Prior Mand</th>
<th>Prior Mand Eff</th>
<th>Current …</th>
<th>Current …</th>
<th>Ant Mand</th>
<th>Ant Mand Eff</th>
<th>Active</th>
</tr>
</thead>
<tbody>
<tr>
<td>E. Shower/bathe self</td>
<td>Section GG Scale</td>
<td>-</td>
<td>✓</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>F. Upper body dressing</td>
<td>Section GG Scale</td>
<td>-</td>
<td>✓</td>
<td>7/29/2018</td>
<td>✓</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>G. Lower body dressing</td>
<td>Section GG Scale</td>
<td>-</td>
<td></td>
<td></td>
<td>7/29/2018</td>
<td>✓</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>H. Putting on/taking off footwear</td>
<td>Section GG Scale</td>
<td>-</td>
<td></td>
<td></td>
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<td></td>
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</tbody>
</table>

In the below example only the Prior Level has been flagged as mandatory for all Sub Groups under Everyday Activities, however Current and Anticipated levels are not required.

<table>
<thead>
<tr>
<th>Sub Group</th>
<th>Scale Name</th>
<th>Precheck</th>
<th>Prior Mand</th>
<th>Prior Mand Eff</th>
<th>Current …</th>
<th>Current …</th>
<th>Ant Mand</th>
<th>Ant Mand Eff</th>
<th>Active</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Self-Care</td>
<td>Section GG Functional Abilities and Goals ...</td>
<td>✓</td>
<td>✓</td>
<td>7/15/2018</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>B. Indoor mobility (ambulation)</td>
<td>Section GG Functional Abilities and Goals ...</td>
<td>✓</td>
<td>✓</td>
<td>7/15/2013</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>C. Stairs</td>
<td>Section GG Functional Abilities and Goals ...</td>
<td>✓</td>
<td>✓</td>
<td>7/15/2013</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>D. Functional cognition</td>
<td>Section GG Functional Abilities and Goals ...</td>
<td>✓</td>
<td>✓</td>
<td>7/15/2013</td>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

Upon opening the POC the clinician will see the Sub Group Fields identified in red text for those Sub Group items with mandated fields.
However, once an entry has been selected for the required Sub Group field(s), the Sub Group text will turn black, consistent with Casamba Skilled documentation workflow.

In the example above the Self-Care text turned black after the user selected an entry for the Prior Level. The text remains red for the other Sub Group fields (Indoor Mobility, Stairs, and Functional Cognition) even though Current and/or Anticipated entries have been entered because the Prior Levels are still blank. Text will remain red for each of those Sub Groups until an entry is made in the Prior Level field because the Prior Level field is flagged as mandatory.

Outlined below is the workflow for documentation prior to and after the Casamba Skilled Summer Release:

**Documentation workflows prior to Casamba Skilled Summer Release:**

- **Mandatory Sub Groups:** Requires an entry in all Sub Group fields or else the document will draft. The clinician is unable to uncheck the Sub Group check box, therefore the document will always draft until each Sub Group field (Prior, Current, and Anticipated) has an entry.

- **Precheck Sub Groups:** Prechecked Sub Group items require entries in all Sub Group fields or else the document will draft. The clinician is able to uncheck Prechecked Sub Group items if desired; if unchecked all Sub Group fields will be grayed out so that no entries can be made and the document will no longer draft.

- **Manual check:** If a clinician manually checks a Sub Group item an entry in Prior and in Current Sub Group fields will be required or else the document will draft.

**Documentation workflows after Casamba Skilled Summer Release:**

- **Mandatory Sub Groups:** Requires an entry in only those fields that are flagged as mandatory on or after the established effective date in the Functional Deficits table; once those fields have an entry the document will save without drafting (allows for entry in a single field if only one field is flagged as mandatory). Unable to uncheck the Sub Group check box.

- **Precheck Sub Groups:** Same functionality as Prior to Casamba Summer Release
- **Manual check**: If a clinician manually checks a Sub Group item an entry in Prior and in Current Sub Group fields will be required or else the document will draft.

**Note that workflow will remain the same for Precheck and Manually checked Sub Group fields prior to and after the Casamba Skilled Summer Release.**

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**DOCUMENTATION REPORT UPDATES**

Printed documentation reports will display any new Section GG Groups and Sub Groups that have been activated in the functional deficits table on printed reports in the same method / format as all other Functional Deficits. If a subgroup field has been flagged as mandatory and does not have an entry selected on the screen, then the report will print with a DRAFT watermark across each page of the printed document.

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**UPDATES TO OUTCOMES**

Casamba Skilled has updated the Outcomes / Measures section of documentation to auto populate entry selections in the Care Tool to corresponding new Section GG activity items in the Set ARD Section GG Screen. This feature is available to organizations that have the Auto Populate Measures to Section GG application setting activated, and will automatically occur with entries made in POCs with an activity date on or after October 1, 2018.

New Section GG items linked to the Care Tool in Measures are as follows:

**CARE Tool: Mobility Items**

1. **Care Tool** Rolling left and right → **GG0170A Section GG** 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.
2. **Care Tool** Picking up object → **GG0170P Section GG** 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.
3. **Care Tool** Car Transfer → **GG0170G Section GG** 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.
4. **Care Tool** Walking 10 feet on uneven surfaces → **GG0170L Section GG** 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.
5. **Care Tool** Walk in room once standing; 10 feet but less than 49 → **GG1070I Section GG** Walk 10 feet: Once standing, the ability to walk at least 10 feet in a room, corridor, or similar space.
6. **Care Tool** 1 step (curb) → **GG0170M Section GG** 1 step (curb): The ability to go up and down a curb and/or up and down one step.
7. **Care Tool** 4 steps → **GG0170N Section GG** 4 steps: The ability to go up and down four steps with or without a rail.
8. **Care Tool** 12 steps → **GG0170O Section GG** 12 steps: The ability to go up and down 12 steps with or without a rail.

**CARE Tool: Self Care Items**

1. **Care Tool** Upper body dressing → **GG0130F Section GG** Upper body dressing: The ability to dress and undress above the waist; including fasteners, if applicable.
2. **Care Tool** Lower body dressing → **GG0130G Section GG** Lower body dressing: The ability to dress and undress below the waist, including fasteners; does not include footwear.

3. **Care Tool** Shower or bathe self → **GG0130E Section GG** 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.

4. **Care Tool** Putting on or taking off footwear → **GG0130H Section GG** 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.

### UPDATES TO MOBILE

The Mobile application will be updated to follow the desktop screen enhancements to display any newly activated Groups and Sub Groups for Section GG in documentation. Mobile will also follow the new Functional Deficit functionality to separately flag Prior, Current, and Anticipated levels as required / mandatory based on the Functional Deficit table settings activated by your organization.

As in current functionality, Sub Group Fields flagged as mandatory will display the word ‘mandatory’ in red text to identify which fields require entry. With the Summer Release mobile devices will display only those fields identified as mandatory with the ‘mandatory’ verbiage to indicate which filed requires an entry. (See example below where the Indoor Mobility Sub Group has ‘Prior Level’ flagged as mandatory, but Current and Anticipated fields are not).

![Example of Mobile Application](image)

For these mandatory fields, if the user clicks ‘Done’ without entering a value in the Sub Group Field, an error message will display stating which value must be selected in order to proceed forward.

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SECTION GG 9_2018 16
Once the user selects OK then the screen will return to the Sub Group value pop up menu to allow for an entry selection. Once all items mandatory fields have been completed, the checklist will no longer display the Functional Deficits Sub Group, as in current functionality.

Precheck functionality will remain the same where the user will have the option to ‘Uncheck’ any Sub Group identified as Precheck; however, if the user decides to proceed forward with entering values for the Precheck items, then all three fields will require an entry.
UPDATES TO INTERFACES

The current vendors that receive Section GG information from Casamba are Matrix, PCC, and SOS. Casamba has collaborated with these vendors to ensure that all new Section GG data elements will interface to their corresponding MDS fields effective for ARDs as of October 1, 2018.

UPDATES TO SET ARD > SECTION GG SCREEN

SELF-CARE AND MOBILITY REVISIONS TO MATCH MDS

The Section GG Screen, accessed through Tx > Resident > Set ARD or via Planner > Set ARD, will display all new October 2018 Section GG Self-Care and Mobility activity items and verbiage revisions effective October 1, 2018 and moving forward. In concordance with the new October 2018 updates, the H1 / H3 values of “Does the Resident Walk” will no longer display on the screen for any ARD entries after September 30th.

Information will display in the same format, verbiage, and order found in the October 2018 MDS to facilitate consistent workflow. The Safety and Quality of Performance rating scale will also display with new revisions to verbiage and with
the additional “10. Not attempted due to environmental limitations (e.g., lack of equipment, weather constraints)” value as of October 1, 2018 to ensure accurate independence levels can be communicated with the interdisciplinary team.
**Discharge Goal(s): Coding Tips**

“...Use of a dash is permissible for any remaining selfcare or mobility goals that were not coded. Of note, at least one Discharge Goal must be indicated for either Self-Care or Mobility. Using the dash in this allowed instance after the coding of at least one goal does not affect Annual Payment Update (APU) determination.”

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**DISCHARGE GOAL ACTIVITY NOT ATTEMPTED**

With the October 2018 Version 1.16 RAI Manual updates to the Discharge Goal(s): Coding Tips section, CMS now allows for Activity Not Attempted codes to be submitted as entries for the discharge goals.

Casamba Skilled has now updated the Set ARD > Section GG screen to display the activity not attempted codes of ‘07. Resident Refused’, ‘09. Not Applicable’, ‘10. Not attempted due to environmental limitations’, or ‘88. Not attempted due to medical condition or safety concerns’ to the drop downs in the Set ARD > Section GG screen for selection under the Discharge Goal column. Additionally, if these values are selected under Functional Deficits in the POC, Casamba Skilled will pull entry values to the Set ARD Section GG screen accordingly if the app setting to auto populate values from Functional Deficits is activated.

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**SKIP PATTERNS IN SECTION GG**

Casamba Skilled will support the Section GG skip patterns by not requiring entries for selected activity items if the setting to require entries for Section GG is activated. Entries will not be required for selected skip patterns with activity items as follows:

- Admission Performance, Discharge Goal, and Discharge Performance entries will not be required for GG1070R “Wheel 50 feet with two turns” and GG1070RR1 / RR3 “Indicate the type of wheelchair / scooter used” activity items if the selected value for GG1070Q1 / Q3 “Does the resident use a wheelchair/scooter?” is NO.

- Admission Performance, Discharge Goal, and Discharge Performance entries will not be required for GG1070J “Walk 50 feet with two turns...”, GG1070K “Walk 150 feet...”, and GG1070L “Walking 10 feet on uneven surfaces” if the selected value for GG1070I is “07. Resident Refused”, “09. Not Applicable”, “10. Not attempted due to environmental limitations” or “88. Not attempted due to medical condition or safety concerns”.

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The two new “Prior Functioning: Everyday Activities” and “Prior Device Use” sections added to Section GG will also display in the Set ARD > Section GG screen for all ARDs set on or after October 1, 2018 to allow for entry of the prior levels / device use for the MDS. Casamba Skilled will display these new items in the same Section GG screen below the Self-Care and Mobility Items, accessible through the vertical scroll bar to the left of the Section GG screen.

Since these two new sections only require prior level values, these items will only be displayed under the 5-Day Assessment Section GG screen, and will only have a single entry field to identify the status prior to admission (i.e., there will be no Discharge Goal column to complete).
The rating scale for “Prior Functioning: Everyday Activities” will match the new MDS rating scale with only 3 levels of independence plus unknown and not applicable selections, as opposed to the 6-point scale found in the Safety and Quality of Performance Rating tool. The rating scale for “Prior Device Use” will display Yes or No selections to indicate if a device were used prior to admission (= Yes), or not (= No). Any ‘Yes’ value entries will interface with vendors that support Section GG to check the associated device used check box in the MDS.

To note: Self-Care and Mobility items are rated based on the patient’s usual status during days 1, 2, or 3 of the patient’s admission to the facility, and on the patient’s usual status during days 3, 2, and 1 prior to discharge. Since the “Prior Functioning: Everyday Activities” and “Prior Device Use” ratings are not dependent on levels presented during this 3 day time frame Casamba will auto populate entries from the POC into the Section GG Screen for these two sections even if the POC activity date is not within days 1-3 of the patients stay.

SECTION GG AVAILABLE FOR DIFFERENT PAYOR TYPES

Starting October 1, 2018 Casamba Skilled will offer a new application setting to display the Section GG screen for identified payor types other than Med A and Med A like. When activated Casamba Skilled will display the 5-Day and PPS Part A Discharge Assessment Section GG screens for the identified payor types (listed in under Facility > Maintenance >
Payor Type Column) based on the effective dates anchoring off the Set ARD. The Payor Setup Listing Excel report can also be utilized to determine Payors you wish to activate.

**ASSESSMENT WINDOW**

Due to the potential variability in the 3-day assessment window defined in the RAI manual as the 2 days prior to the date entered in A2400C, Casamba Skilled will incorporate Section GG performance from PT and/or OT Discharge Summaries completed within 2 days before, the day of, and one day after the Medicare End Date as entered on the Resident Calendar screen (i.e., the date of the payer change from Medicare Part A). This information will auto-populate the ARD screen for clients who have this functionality enabled. It is the responsibility of the interdisciplinary team to ensure data inclusion is compliant with the requirements stated in the RAI manual.

**SET ARD REPORT UPDATES**

The ARD report has been updated to display the new Section GG additions to Self-Care and Mobility on the ARD Report for the corresponding 5-Day and PPS Part A Discharge Assessments. The report has also been updated to remove the retired GG0170H1/ H3 items, and the rating ‘Key’ will now display the new rating score of “10. Not attempted due to environmental limitations (e.g., lack of equipment, weather constraints)”.

Casamba Skilled has also added new labels to indicate the Group Name corresponding with the defined Sub Group value to ensure clarity between different activity items associated with the same alpha character.
The new GG0100. Prior Functioning: Everyday Activities and GG0110. Prior Device Use sections will display in table format with a Key to detail the separate rating scale used to code these items.
TRANSITIONING TO OCTOBER 2018 SECTION GG

TRANSITIONING WITH DOCUMENTATION / POC

UPLOADING FUNCTIONAL DEFICITS AND RATING SCALES INTO SERVERS

Casamba inserted all new Section GG Functional Deficit Groups and Sub Groups and the new Prior Functioning Everyday Activities and Prior Device Use rating scales into client’s servers in the evening of Thursday August 30 2018. These Groups and Sub Groups and new rating scales were loaded as inactive meaning they will not display in any current documentation, they will simply be available for activation under the Functional Deficits Table if / when desired. These new Section GG items were uploaded into each clients Set ID ‘0’ (the default set of functional deficits used by most organizations) and any other Set ID that contains Section GG Mobility and / or Self Care Functional Deficit Items.

New ‘Everyday Activities’ and ‘Device Use’ Functional Deficit Groups were uploaded into each client’s server as inactive in the Functional Deficit Table.

The newly added October 2018 Section GG: Self Care and Section GG: Mobility Sub Groups were also uploaded into clients servers as inactive (the ‘Active’ check box will not be flagged).
ACTIVATING NEW FUNCTIONAL DEFICITS AND RATING SCALES

Casamba will automate the activation of new Section GG Groups and Sub Groups in each client’s set ID ‘0’ and any other Set ID containing Section GG Groups for those clients that currently have Section GG activated in the evening of September 30th according to the following parameters per each discipline:

1. If the Section GG: Self Care Group is currently active in the server, then Casamba will activate the new 2018 Self Care Sub Groups

2. If the Section GG: Mobility Group is currently active in the server, then Casamba will activate the new 2018 Mobility Sub Groups

3. If either Section GG: Care or Section GG: Mobility is currently active in the server, then Casamba will activate new Everyday Activities and Device Use Groups and their Sub Groups

Since the October 1st mandates will anchor off of the Set ARD, some clients may wish to activate the new Section GG Functional Deficits to be active as of September 24th to ensure assessment items can be documented in the POC for an October 1st 5-Day ARD that may occur on day 8 of the patient’s stay. Clients can choose to activate the Functional Deficits prior to September 30 if desired by going to Facility > Tables > Functional Deficits and flagging the ‘Active’ check boxes. This will allow for organizations to rate new Section GG items in documentation prior to the October 1 mandates.

To make new Groups or Sub Groups active, go to Facility > Tables > Functional Deficit and select the desired Group or Sub Group, then flag (check) the check boxes for the items you would like to display in documentation.
To note, the Safety and Quality of Performance rating scale will not be updated with the new verbiage and the new “10. Activity not attempted due to environmental limitations” option in the documentation screens until the evening of September 30. This means that Functional Deficits selected under documentation screens will use the 2016 rating scale to rate activity levels for all documentation through September 30, regardless of when new Functional Deficit items are activated to display. If the new “10. Activity not attempted due to environmental limitations” value is desired for MDS submission of ARDs set in the first week of October users will be able to manually enter this value into the Set ARD screen when applicable. The NEW rating scales for the Everyday Activity and Device Use Groups will be available for selection in the documentation screen under Functional Deficits once these new Groups / Sub Groups are activated in the Functional Deficits Table since these are separate new rating scales that do not affect or entail modifications to currently used rating scales.

**PRECHECK AND MANDATORY SUB GROUP TRANSITIONING**

Casamba will automate flagging all Sub Group fields (Prior, Current, and Anticipated) as mandatory for any existing mandatory Functional Deficit Sub Groups in client’s servers with the currently established Mandatory Effective Date so that documentation workflow will remain the same. All new October 2018 Section GG Groups and Sub Groups inserted into clients’ servers as of August 30 were not flagged as Prechecked or Mandatory.

To flag Sub Group fields as Prechecked or Mandatory, go to Facility > Tables > Functional Deficit and select the desired Set ID. Click on the desired Group field to display the associated Sub Group fields. For each Sub Group field Casamba Skilled will display a separate Mand Eff column to insert an effective date for each separate field. To set any field as mandatory, flag (check) the applicable Prior, Current, and / or Mandatory check boxes to identify those fields to be required.

*To note, upon flagging the Mandatory checkboxes both the Precheck and the Mandatory boxes wil display as checked. This is non consequential and can be left with both boxes checked, or the Precheck box can be unchecked if desired.*

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It is recommended that Mandatory Effective dates be inserted for future dates to avoid confusion in the field for clinicians who are actively documenting in the system.

Once the field is identified as mandatory, Casamba Skilled will display the Sub Group fields in the red text and the clinican will not be able to uncheck the check box next to the Sub Group item. The Sub Group will remain in red text and will print with a draft watermark until the mandatory field(s) have a value entered.
For more information on how to customize Functional Deficits in Documentation, please contact customer support at support@casamba.net.

**TRANSITIONING WITH SET ARD SECTION GG SCREEN**

Casamba will activate the display of the new Section GG Self Care and Mobility Items, removal of the H1 / H3 “Does the resident walk?” item, and will display the new Prior Functioning: Everyday Activities and Prior Device Use sections on the Set ARD screen in the evening of September 30. Rating Scale changes / additions will also be activated accordingly so that effective October 1, 2018 users will be able to appropriately rate the patient’s level of independence for MDS submission. Also effective on October 1, 2018 users will have access to select a Dash (-) value for Discharge Goals to indicate that the activity was not able to be assessed.

Assessment entries dated prior to October 1, 2018 will continue to display the Section GG Screen without the new Section GG October 2018 revisions to ensure accuracy of Section GG contents related to dates supporting different versions required for the MDS.

**FAQS**

1. How does the documentation workflow change when adding or retiring active items from Functional Deficits?
   **ANSWER:** If changing an item within Functional Deficits to / from being active or inactive, Casamba Skilled will display the newly active items effective immediately when opening up any documentation report. Casamba Skilled will also continue to display those inactivated functional deficit items that were originally active and reported on in the POC / SPOC in subsequent documentation for the remainder of the patient’s therapy admission. Once a new therapy admission starts, only active items will display.

2. Will the workflow for documentation change other than the ability to separately require Sub Group fields if desired?
   **ANSWER:** Workflow will not change for documentation other than the separately mandated Sub Group fields.

3. How soon can we activate the Anticipated Column with its new capabilities of activating as mandatory or not in the Facility Tables?
   **ANSWER:** Clients can activate the separate Sub Group fields as mandatory once clients receive the Casamba Skilled Summer update.

4. Will Sigmacare and AOD interface Section GG information?
   **ANSWER:** Casamba is able to push the Section GG data to vendors, however Sigmacare and AOD currently do not receive Section GG information at this time.

5. Can Section GG still be completed on ARD screen even if not in Functional Deficits?
**ANSWER:** Yes, as long as the Section GG Customer Activation is activated then any user with permission to access the Planner module or the Set ARD tab under Tx > Resident will be able to view and enter values in the Section GG screen.

6. What happens if the same GG activity items are activated for different disciplines, and those activity items are then rated / answered differently in the POC or discharge summary?

**ANSWER:** The MDS accepts only one rating for each activity item, therefore the Set ARD Section GG screen only follows this requirement with only one available field for entry. If the same Section GG questions have been activated to display in documentation and the disciplines document different levels of assist, then for Section GG: Mobility Items and Section GG: Self Care Items Casamba Skilled has established a priority level as follows:

- **Section GG Mobility:** answers are fetched from PT first, then OT if PT does not answer.
- **Section GG: Self Care:** answers are fetched from OT first, then PT if OT does not answer.

For Prior Functioning: Everyday Activities and / or Prior Device Use sections the priority has been established for selected values as follows:

- **Prior Functioning Everyday Activities:**
  - Self-Care and Functional Cognition → answers are fetched from OT if both PT and OT answer; answers are fetched from PT if OT does not answer.
  - Indoor Mobility (Ambulation) and Stairs → answers are fetched from PT if both PT and OT answer; answers are fetched from OT if PT does not answer.
- **Prior Device:** Answers are fetched from PT if both PT and OT answer; answers are fetched from OT if PT does not answer

7. If we prefer to have a different priority for answers than listed above, can Casamba customize this for our organization?

**ANSWER:** We do not provide the ability to customize which answers are fetched to the Set ARD Section GG screens when different disciplines report on the same activity item(s) with different answers. Priority has been established to best meet the needs of the majority of our clients. If the activity item is activated to display for multiple disciplines and the activity item is rated differently by the different disciplines, then clients have the ability to manually update the Set ARD screen with the desired answer.

8. If the setting to require an answer for Section GG items in the Set ARD > Section GG Screen is activated will it also now require answer for the new Prior Functioning Everyday Activities and Prior Device Use items?

**ANSWER:** Yes, the setting to require an entry for all Section GG items is inclusive of the new Prior Functioning Everyday Activities and Prior Device Use sections. Please refer to “Skip Patterns in Section GG” section of this manual for details on how Casamba Skilled will support MDS skip patterns when this setting is activated.
9. Will the clinical panel show prior functioning information?

**ANSWER:** Yes, if the settings are activated to display clinical information in the Clinical Panel of the Set ARD > Section GG Screen then the Clinical Panel will display all functional deficit information entered into documentation for days 1, 2, 3 of the patients admission and days 3, 2, 1 for the days prior to discharge.

10. Will the ‘Refresh GG’ function for all new fields?

**ANSWER:** Yes, Refresh GG will continue to pull information from documentation within the corresponding observation days (days 1, 2, and 3 of the patient’s stay or days 3, 2, and 1 upon discharge) for Self Care and Mobility items. Casamba Skilled will also pull newly entered information from new Prior Level fields for POC activity dates on or after days 1, 2, 3 of the patient’s stay since these values are not dependent on the assessment timeframes required for Self-Care and Mobility activities.

11. How do we change from Prechecked for all Sub Group fields to Mandatory for only selected Sub Group fields?

**ANSWER:** If a client currently has a Sub Group flagged as Precheck, and after R2 they would like for ONLY a selected field to be flagged as mandatory then: once the server is updated the Corporate Clinical Team will be able to uncheck the Precheck box in the Functional Deficits Table for the desired Sub Group, and will then flag the Anticipated check box and enter the Ant Mand Eff date as the next day. It is strongly recommended that table settings occur at the end of the day for a future date to prevent confusion for clinicians actively documenting during the daytime hours.

12. If our server is currently Prechecked for certain Sub Group items for different disciplines will Casamba update the new Section GG items to mirror our current set up?

**ANSWER:** Casamba is not able to account for the varied customizations of each client’s server, therefore all new Section GG Sub Group fields will be activated without any Mandatory or Precheck requirements.

13. If I activate the new Functional Deficit items prior to September 30 and establish a different set up of Sub Group items being active or not, will our current set up be overridden by Casamba’s updates to activate servers on September 30, 2018?

**ANSWER:** Casamba is updating servers based on looking for rules of how each client’s current server is set up with Section GG items. Since the update may not be able to account for specialized customizations on every level, it is strongly encouraged that members of the clinical corporate teams review the Functional Deficit tables after the update on September 30 to account for possible variations from their standard set up.

14. Will there be a CBT available to better understand the new changes to Section GG?

**ANSWER:** Yes, each server currently has a Section GG video to understand how to enter Section GG information into the Set ARD screen. On September 1, 2018, Casamba Skilled will also offer a new CBT reviewing the changes occurring with October 2018 mandates.