

Your PDPM Resource



Section GG – At a Glance

The Patient-Driven Payment Model (PDPM) takes effect on October 1, 2019. It represents a significantly different approach to reimbursement for care in Skilled Nursing Facilities (SNFs). One of the primary goals of PDPM was to begin the shift towards reimbursement based on quality of healthcare. A key way to demonstrate that relates to the measurement of function using Section GG of the MDS.

Section GG of the MDS was introduced in 2015 and has gradually expanded over subsequent years. It measures function in seven different components of self-care such as eating, hygiene, and dressing as well as 15 various components of mobility such as bed mobility, transfers, and ambulation. Function is to be measured and reported in these areas at admission and at discharge. CMS will also offer an optional opportunity to measure and report on function using Section GG on an Interim Payment Assessment (IPA).

Additionally, the function ratings from Section GG help to determine the case-mix (and subsequent payment) classification for the PT, OT, and Nursing components of the per-diem. In general, a resident that functions at a higher level may drive PT and OT case-mix higher while it drives Nursing case-mix lower. Changes in function that are noted by frequent Section GG re-measures will be needed to inform interdisciplinary collaboration and treatment planning. A significant change in function may also trigger consideration of an optional IPA assessment.

Another aspect regarding Section GG that needs to be considered is how it is being used in other settings and other CMS initiatives. Section GG function ratings have also been introduced in all of the other primary Post-Acute Care (PAC) settings such as Long-Term Acute Care Hospital (LTACH), Inpatient Rehabilitation Facility (IRF) and Home Health. In addition, the Quality Reporting Program (QRP) is now capturing and reporting the amount of **change** in self-care and mobility scores, as well as the eventual **discharge function** in those areas. The inclusion and expansion of Section GG ratings across PAC settings and in the QRP initiative suggest that CMS has enhanced plans for utilization of these functional measures in future cross-setting payment and/or placement decisions.