

Question of the Month

February 2025

A2105, Discharge Status.

Question: I have a resident who will be discharged to an assisted living facility with skilled services provided by a home health agency. In this situation, would A2105 be coded “01 – Home/Community,” which includes assisted living, or “12 – Home under care of organized home health service organization?”

Answer: A2105 would be coded “12 – Home under care of organized home health service organization” for a resident who was discharged to an assisted living facility with skilled services provided by a home health agency. The term “Home” includes all locations specified in item A2105, “01 – Home/Community.”

GG0130E, Shower/bathe self.

Question: Residents in our facility are placed on a schedule to receive a complete bath/shower twice a week. Since item “GG0130E – shower/bathe self” only has a three-day assessment window, many residents’ scheduled bath/showers do not fall within the assessment period. When this happens, the facility is forced to use a dash to code GG0130E on their PPS assessments. This use of a dash is causing the facility to fall below the 90% compliance threshold, which can negatively affect the facility’s Annual Payment Update. Are there any suggestions for how to reduce the use of a dash for this item?

Answer: If the facility did not assess an activity or item with the resident during the assessment period, then entering a dash for the activity or item on the MDS 3.0 is the appropriate response. Definitions of the section GG items have not changed due to the potential negative effect on the facility’s Annual Payment Update compliance threshold.

The Centers for Medicare and Medicaid services provided further guidance for section GG items. If during the assessment period a resident completes a portion of the activity (e.g., performs a partial bath or transfers into but not out of a vehicle) and does not complete the entire activity, the assessor can use clinical judgment to determine if the situation allows the clinician to adequately assess the patient’s ability to complete the activity. If the clinician determines that this observation is adequate, they should code the item based on the type and amount of assistance the patient requires to complete the ENTIRE activity. If the clinician determines the partial activity does not provide adequate information to support determination of a performance code, they should select an appropriate “activity not attempted” code or dash the item as applicable.

00110M1, Isolation or quarantine for active infectious disease.

Question: Do parasitic infections such as body/head lice qualify as an active infection for coding 00100M1? The resident is on contact precautions and in a room alone with all services provided in their room.

Answer: No. Lice would not meet the requirements for coding isolation due to an active infectious disease. They are not an active, highly transmissible infection. They are not considered epidemiologically significant pathogens that have been acquired by physical contact or via airborne or droplet transmission.

If you have a Question of the Month to submit, please email Cheryl.Moya@odh.ohio.gov and place Question of the Month in the subject line.