Home Health Line Tool

Discharge Function: Quick Guide to GG0130A (Eating)

CMS has noted it plans to add the OASIS-based Discharge Function Score to the Home Quality of Patient Care Star Rating in the near future, according to the 2027 Home Health Prospective Payment System Proposed Rule. (*See story, p. 1.*) This is the first in a series of one-page tools sharing expert tips and CMS instructions to help address challenges clinicians face with accurate scoring for the Discharge Function measures.

_____ **GG0130A. 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 patient.

Scoring

Remember: If helper assistance is required because the patient's performance is unsafe or of poor quality, score according to the amount of assistance provided. Activities may be completed with or without assistive devices.

6. **Independent** – Patient completes the activity by themself with no assistance from a helper.
5. **Setup or clean-up assistance** – Helper sets up or cleans up; patient completes activity. Helper assists only prior to or following the activity.
4. **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.
3. **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.
2. **Substantial/maximal assistance** – Helper does MORE THAN HALF the effort. Helper lifts or holds trunk or limbs and provides more than half the effort.
1. **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:

7. **Patient refused**
9. **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 condition or safety concerns**

Important notes

- This item doesn't include the ability to prepare food.
- If the patient does not eat or drink by mouth, relying on tube feeding or total parental nutrition, then you would assign "88 — Not attempted due to medical condition of safety concerns" if new onset or "09 — Not applicable" if the patient did not eat by mouth prior to the current illness.
- The adequacy of the patient's nutrition or hydration is not considered for GG0130A. (*HHL 4/28/22*)

Relation to M1870 response

The clinician needs to first assess the patient's ability to feed himself at M1870 and then assess how much assistance they require at GG0130A. (*HHL 3/24/25*)

- If the M1870 response is independent then the GG should be "06 — Independent."
- If the M1870 is requiring intermittent assistance or meal setup, then the GG item should be either "05 — Setup or clean up assistance" or "03 — Partial/moderate assistance" based on the amount of assistance required with getting the food from the plate to mouth.
- If the caregiver has to do more than half of the work required to eat then code "02 — Substantial/maximal assistance" should be assigned but if the caregiver has to do all of the work from cutting up the food to spooning it into their mouth then "01 — Dependent" should be used.

Scenarios

Scenario 1: An 88-year-old is admitted to home health following a long hospitalization for bowel obstruction. The patient currently is on a regular diet. Upon interviewing his wife, she states that she must prepare all the meals, cut the meat into bite-size pieces and that the patient will then start feeding himself but the caregiver will usually start assisting the patient in finishing the meal due to his extreme weakness. She estimates that the patient feeds himself less than half of the meal.

How would you score this patient? The correct scoring for GG0130A would be "02 — Substantial/maximal assistance."

The caregiver states that the patient feeds himself less than half of the meal so the caregiver is doing more than half of the effort of feeding.

Scenario 2: The patient does not have any food consistency restrictions, but often needs to swallow two or three times so that the food clears their throat due to difficulty with pharyngeal peristalsis. They require verbal cues to use the compensatory strategy of extra swallows to clear the food.

How would you score this patient? The correct scoring for GG0130A would be "04 — Supervision or touching assistance."

The patient swallows all types of food consistencies and requires verbal cueing (supervision) from the helper. Code based on assistance from the helper. The coding is not based on whether the patient had restrictions related to food consistency.

Editor's note: Scenario one was provided by Diane Link, owner of Link Healthcare Advantage based in Littlestown, Pa. Scenario two comes from CMS' *OASIS-E2 Guidance Manual.*