

Eli's Rehab Report

Practice Pointers: Get Your G-Code Ducks in a Row for the 'Other' Category

If your patient's limitations don't fit a G-code description, CMS has a solution for you.

Starting this year, outpatient therapists must report functional limitation G-codes for Medicare patients at specific intervals throughout the episode of care.

The G-codes you have to choose among are grouped into several categories. For example, under PT and OT functional limitations, these categories include:

Mobility

Changing & maintaining body position

Carrying, moving & handling objects

Self care, and

Other.

Transmittal 2622 included "extensive clarification on the selection of the 'other' category for PTs and OTs," points out **Heather Smith, PT, MPH**, program director of quality for the **American Physical Therapy Association**.

What it says: The transmittal instructs you to use the "Other PT/OT" G-codes when:

One of the other four categories does not define the patient's functional limitation;

Your therapy services are not intended to treat a functional limitation; or

You've used a functional assessment tool and the overall, composite, or other score from the tool doesn't clearly represent a functional limitation defined by one of the other four categories.

For speech-language pathology: SLPs are to report one of eight G-code categories for their Medicare patients. Seven of these G-code categories are based on the American Speech-Language Hearing Association's National Outcomes Measurement System (NOMS), while the eighth category is "Other SLP."

(NOMS includes a total of fifteen functional communication measures, seven of which CMS adopted for SLP G-code categories.)

CMS says you are to use the "Other SLP" category when:

The patient presents with one of the other eight NOMS-defined functional measures (not described by the existing G-code sets); or

An overall, composite or other score from an assessment tool does not clearly represent one of the seven categorical SLP functional measures.

Helpful: "NOMS is currently being reconfigured to include the G-codes and modifiers and also offers data for recommending a projected goal," says **Lisa Satterfield, MS, CCC/A**, director of health care regulatory advocacy for the

American Speech-Language-Hearing Association. "If SLPs are looking for a streamlined approach to meeting the CMS requirements, they should look into NOMS registration and participation."