

# Functional Limitation Reporting

Case Report on PQRS and  
G-Code reporting

# Patient Demographics

- 66 year old male referred by Dr. Schriefer, a neurologist, for PT evaluation and treatment
- Chief Complaint: vertigo that occurs when arising from bed, or when rolling in bed. Symptom duration is a few seconds and never occurs while he is standing or walking. He denies imbalance.

# Patient Demographics cont.

- PMH: no history of migraines, depression, and skin CA (melanoma), no recent colds or ear infections
- Medications: Allopurinol, Trazodone, Atenolol, and Citalopram
- Social Hx: Independent with all activities, does not use AD. Patient is very active in the community and enjoys volunteering at the VA hospital, watching TV, and reading. He is a retired logistics engineer. He lives with his spouse in a house without stairs.

# Evaluation: Subjective History

- Symptoms started 3/2/13 following a fall. The patient was exiting his truck, his foot got caught and he fell out of his truck striking his head on the pavement. Positive LOC and he was transported to the ER via ambulance. CT scan at the ER showed a “blood clot in the brain”. Since that time all other symptoms have resolved except vertigo and he continues to follow-up with his neurologist regularly.
- Patient denies any other falls in the last year.

# Evaluation: Objective Findings

- Range of Motion: cervical rotation limited to the left by 50% and the right by 25%. No pain reported, just stiffness.
- Strength, Coordination, and Posture all WNL
- Gait: Preferred gait speed = 4.32 ft/sec which is WNL. Mild path deviation noted with vertical head movements added to gait.
- Positional Testing: Vertebral artery test WNL. Dix Hallpike testing positive for left posterior canalithiasis BPPV.
- Balance Tests: 4-Item DGI = 11/12
- DHI = 18/100



# Functional Limitations

- Unable to perform bed mobility without symptoms
- Brief vertigo and unsteadiness when getting out of bed or chair, especially when done quickly

# Assessment

- Etiology is consistent with left posterior canalithiasis BPPV secondary to head injury after fall. Patient treated with a modified Epley maneuver. Barriers to treatment include limited cervical ROM. Positive factors include prior level of activity, generally in good health, and motivation to improve.

# PQRS Reporting

- Only done at evaluation
- 130 Medications
  - G8427: Attest to documenting medication is accurate to best of your knowledge
- 154 Falls: Risk Assessment:
  - CPTII 3288FF & CPTII 1100FF: Has history of 2+ falls or 1 fall with injury in the past year
- 155 Falls: Plan of Care:
  - CPTII 0518F: Falls plan of care documented. Plan of care included: consideration of AD (deemed not necessary), balance/gait training, modification of environmental hazards, and Falls Prevention Booklet
- 182 Functional Outcome Measure:
  - G8539 Tool completed and documented POC based on this. DHI was included in evaluation.



# Functional Limitation Reporting: G-Codes

- Reported at time of evaluation:
  - Patient's primary functional limitation was determined to be: *Changing and Maintaining Body Position*. This limitation was selected because the patient's chief complaint and functional limitations were regarding getting out of bed, rolling in bed, or getting up from a chair. He did demonstrate mild path deviation with ambulation with vertical head motion, but this was not his primary limitation.
    - G8981 (current): CI, at least 1 percent limited, but less than 20
      - Severity modifier was selected based on patient's DHI score of 18/100 and therapist's observation and clinical judgment during evaluation. Patient was able to perform mobility, but did report mild symptoms that were short in duration and only limited him to a mild degree.
    - G8982 (projected): CH, no limitation

# Treatment Course

- After 3 sessions, BPPV cleared
- Patient feels much better, no further limitation with bed mobility or getting out of a chair
- Does report feeling “off” while walking at the VA hospital. “Just doesn’t feel right”
- Occasionally has to sit due to symptoms

# Treatment Course

## ■ Session 3

- BPPV testing negative
- 4-Item DGI repeated and scored the same, 11/12
- Oculomotor Exam WNL
- FGA 25/30 with mild path deviation with HV nods, slight veer with EC, slowed speed with retrowalking, and uses railing with stairs
- DVA WNL
- SOT composite score 60% with mild impairments in use of both visual and vestibular cues for balance. No falls.

# Treatment Course

## ■ Session 3

- G Codes reported this visit:
- Functional Limitation of Changing and Maintaining Body Position
  - G8982 (projected) CH, no limitation
  - G8983 (discharge) CH, no limitation
    - Severity modifier was selected based on negative Hallpike testing, no symptoms with testing, and patient reports no limitations with bed mobility or getting in/out of chairs.

# Treatment Course

- Session 3
- Changing and Maintaining Body Position is now being discharged. Patient continues to have other limitations though, so at the NEXT visit, a subsequent functional limitation will be initiated. This MUST be done on the next visit because you cannot report on 2 separate functional limitations on the same visit.
- You can still update your POC, goals, etc on the day you perform the testing.



# Treatment Course

- Session 4:
- Treatment was initiated for the imbalance that was observed and measured the previous session.
- G Codes reported this visit:
- Functional limitation of Mobility Walking & Moving Around
  - G8978 (current): CI, at least 1 percent, but not 20 percent impaired
    - Severity modifier was selected based on FGA and SOT scores
  - G8979 (projected): CH, no limitation
- This can be done by a PTA. The treating PT should write in the plan on session 3 to specifically document and report the above GCodes. The PTA would then carry out the plan with documented justification being “per previous therapist’s objective findings and plan”

# Treatment Course

- Session 7:
- Patient has completed 7 sessions with the last 3 focused on his balance. Balance has significantly improved and he is now ready for retesting.
  - FGA 30/30
  - SOT comp score 81%, all WNL
- Patient met all goals, no further therapy is indicated. Chart held open 2 months if BPPV should recur.

# Treatment Course

- Session 7
- G Codes reported this visit:
- Functional Limitation of Mobility Walking & Moving Around
  - G8979 (projected): CH, no limitation
  - G8980 (discharge): CH, no limitation
    - Severity modifier selected based on FGA and SOT scores both WNL. All goals met.