

A1805. Entered From

Enter Code

01. **Home/Community** (e.g., private home/apt., board/care, assisted living, group home, transitional living, other residential care arrangements)
02. **Nursing Home** (long-term care facility)
03. **Skilled Nursing Facility** (SNF, swing beds)
04. **Short-Term General Hospital** (acute hospital, IPPS)
05. **Long-Term Care Hospital** (LTCH)
06. **Inpatient Rehabilitation Facility** (IRF, free standing facility or unit)
07. **Inpatient Psychiatric Facility** (psychiatric hospital or unit)
08. **Intermediate Care Facility** (ID/DD facility)
09. **Hospice** (home/non-institutional)
10. **Hospice** (institutional facility)
11. **Critical Access Hospital** (CAH)
12. **Home under care of organized home health service organization**
99. **Not listed**

Item Rationale

- Knowing the setting the individual was in immediately prior to facility admission/entry or reentry informs the delivery of services and care planning that the resident receives during their stay and may also inform discharge planning. See the Glossary and Common Acronyms in Appendix A for additional descriptions of these settings.
- Demographic information.

Steps for Assessment

- Review transfer and admission records.
- Ask the resident and/or family member, significant other, and/or guardian/legally authorized representative.

Coding Instructions

Enter the two-digit code that best describes the setting the resident was in immediately preceding this admission/entry or reentry.

- Code 01, Home/Community:** if the resident was admitted from a private home, apartment, board and care, assisted living facility, group home, transitional living, or adult foster care. A community residential setting is defined as any house, condominium, or apartment in the community, whether owned by the resident or another person; retirement communities; or independent housing for the elderly.
- Code 02, Nursing Home (long-term care facility):** if the resident was admitted from an institution that is primarily engaged in providing medical and non-medical care to people who have a chronic illness or disability.

DEFINITIONS

PRIVATE HOME OR APARTMENT

Any house, condominium, or apartment in the community whether owned by the resident or another person. Also included in this category are retirement communities and independent housing for the elderly.

BOARD AND CARE/ ASSISTED LIVING/ GROUP HOME

A non-institutional community residential setting that includes services of the following types: home health services, homemaker/ personal care services, or meal services.

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- **Code 03, Skilled Nursing Facility (SNF, swing bed):** if the resident was admitted from a nursing facility with staff and equipment for the provision of skilled nursing services, skilled rehabilitative services, and/or other related health services. This category also includes residents admitted from a SNF swing bed in a swing bed hospital. A swing bed hospital is a hospital or critical access hospital (CAH) participating in Medicare that has CMS approval to provide posthospital SNF care and meets certain requirements.
- **Code 04, Short-Term General Hospital (acute hospital/IPPS):** if the resident was admitted from a hospital that is contracted with Medicare to provide acute inpatient care and accepts a predetermined rate as payment in full.
- **Code 05, Long-Term Care Hospital (LTCH):** if the resident was admitted from a Medicare certified acute care hospital that focuses on patients who stay, on average, more than 25 days. Most patients in LTCHs are chronically and critically ill and have been transferred there from an intensive or critical-care unit.
- **Code 06, Inpatient Rehabilitation Facility (IRF, free standing facility or unit):** if the resident was admitted from a rehabilitation hospital or a distinct rehabilitation unit of a hospital that provides an intensive rehabilitation program to inpatients. This category also includes residents admitted from a rehabilitation unit of a critical access hospital.
- **Code 07, Inpatient Psychiatric Facility (psychiatric hospital or unit):** if the resident was admitted from an institution that provides, by or under the supervision of a physician, psychiatric services for the diagnosis and treatment of mentally ill patients. This category also includes residents admitted from a psychiatric unit of a critical access hospital.
- **Code 08, Intermediate Care Facility (ID/DD):** if the resident was admitted from an institution that is engaged in providing, under the supervision of a physician, any health and rehabilitative services for individuals with intellectual disabilities (ID) or developmental disabilities (DD).
- **Code 09, Hospice (home/non-institutional):** if the resident was admitted from a community-based program for terminally ill persons.
- **Code 10, Hospice (institutional facility):** if the resident was admitted from an inpatient program for terminally ill persons where an array of services is necessary for the palliation and management of terminal illness and related conditions. The hospice must be licensed by the State as a hospice provider and/or certified under the Medicare program as a hospice provider.
- **Code 11, Critical Access Hospital (CAH):** if the resident was admitted from a Medicare-participating hospital located in a rural area or an area that is treated as rural and that meets all of the criteria to be designated by CMS as a CAH and was receiving acute care services from the CAH at the time of discharge.
- **Code 12, Home under care of organized home health service organization:** if the resident was admitted from home under care of an organized home health service organization. This includes only skilled services provided by a home health agency.

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- **Code 99, Not listed:** if the resident was admitted from none of the above.

Coding Tips and Special Populations

- If an individual was enrolled in a home-based hospice program enter **09, Hospice**, instead of **01, Home/Community**.