

# Section S Manual

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## S0120. Residence Prior to Admission

### Intent:

To document location the resident's last community address.

### Definition:

**Prior Primary Residence** - The community address where the resident last resided prior to nursing facility admission. A primary residence includes a primary home or apartment, board and care home, assisted living, or group home. If the resident was admitted to your facility from another nursing facility or institutional setting, the prior primary residence is the address of the resident's home prior to entering the other nursing facility, etc.

### Process:

Review resident's admission records and transmittal records as necessary. Ask resident and family members as appropriate. Check with your facility's admissions office.

### Coding:

Enter first five digits of the zip code. Enter one digit per box beginning with the left most box. For example, Augusta, ME 04330 should be entered as

|   |   |   |   |   |
|---|---|---|---|---|
| 0 | 4 | 3 | 3 | 0 |
|---|---|---|---|---|

## S8010. Payment Source

### Intent:

To determine payment source(s) that covers the daily per diem or ancillary services for the resident's stay in the nursing facility over the last 30 days.

### Definition:

#### C3. MaineCare per diem

Room, board, nursing care, activities, and services included in the routine daily charge. Do NOT check this item if MaineCare is pending.

#### F3. MaineCare resident liability

MaineCare payment for resident's liability during a non-Medicaid stay.

#### G3. MaineCare pays Medicare Co-pay

MaineCare payment for resident's co-pay during Medicare stay.

**Process:**

Check with the billing office to review current payment sources. Do not rely exclusively on information recorded in the resident's clinical record, as the resident's clinical condition may trigger different sources of payment over time. Usually business offices track such information.

**Coding:**

Check all that apply. We recognize that many facility staff have a lot of difficulty in reporting payment source. To a great extent, the problems are the result of lack of information; business office staff is more aware of payment source(s) than clinical staff.

**S8099. None of Above**

If none of the listed payment sources apply, check S8099 None of Above.