

1.2 Content of the RAI for Nursing Homes

The RAI consists of three basic components: The Minimum Data Set (MDS) Version 3.0, the Care Area Assessment (CAA) process and the RAI Utilization Guidelines. The utilization of the three components of the RAI yields information about a resident's functional status, strengths, weaknesses, and preferences, as well as offering guidance on further assessment once problems have been identified. Each component flows naturally into the next as follows:

- **Minimum Data Set (MDS).** A core set of screening, clinical, and functional status data elements, including common definitions and coding categories, which form the foundation of a comprehensive assessment for all residents of nursing homes certified to participate in Medicare or Medicaid. The data elements (also referred to as “items”) in the MDS standardize communication about resident problems and conditions within nursing homes, between nursing homes, and between nursing homes and outside agencies. The required subsets of data elements for each MDS assessment and tracking document (e.g., Comprehensive, Quarterly, OBRA Discharge, Entry Tracking, PPS item sets) can be found on CMS’s website at <https://www.cms.gov/medicare/quality/nursing-home-improvement/resident-assessment-instrument-manual>.
- **Care Area Assessment (CAA) Process.** This process is designed to assist the assessor to systematically interpret the information recorded on the MDS. Once a care area has been identified or “triggered,” nursing home providers use current, evidence-based clinical resources to conduct an assessment of the potential problem and determine whether or not to care plan for it. The CAA process helps the clinician to focus on key issues identified during the assessment process so that decisions as to whether and how to intervene can be explored with the resident. The CAA process is explained in detail in Chapter 4. Specific components of the CAA process include:
 - **Care Area Triggers (CATs)** are specific coding responses for one or a combination of MDS data elements. The triggers identify residents who have or are at risk for developing specific problems and require further assessment.
 - **Care Area Assessment** is the further investigation of triggered areas, to determine if the care area triggers require interventions and care planning. The CAA resources are provided as a courtesy to facilities in Appendix C. These resources include a compilation of checklists and Web links that may be helpful in performing the assessment of a triggered care area. The use of these resources is not mandatory and the list of Web links is neither all-inclusive nor government endorsed.
 - **CAA Summary (Section V of the MDS 3.0)** provides a location for documentation of the care area(s) that have triggered from the MDS and the decisions made during the CAA process regarding whether or not to proceed to care planning.
- **Utilization Guidelines.** The Utilization Guidelines provide instructions for when and how to use the RAI. The Utilization Guidelines, also known as the Long-Term Care Facility Resident Assessment Instrument 3.0 User’s Manual, includes instructions for completion of the RAI as well as structured frameworks for synthesizing MDS and other clinical information (available from <https://www.cms.gov/medicare/quality/nursing-home-improvement/resident-assessment-instrument-manual>).

CMS's RAI Version 3.0 Manual

CH 1: Resident Assessment Instrument (RAI)