

**Federal Long Term Care Regulations for Resident Assessments and Care Plans**

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| §483.20(b)(1) Comprehensive Assessments | F272 | A facility must make a comprehensive assessment of a resident's needs, using the resident assessment instrument (RAI) specified by the state.   |
| 483.20(b)(2)                            | F273 | When required, a facility must conduct a comprehensive assessment of a resident as follows: (i) Within 14 days after admission, excluding readmissions in which there is no significant change in the resident's physical and mental condition.   |
| §483.20(b)(2)(ii)                       | F274 | A facility must conduct a comprehensive assessment of a resident within 14 days after the facility determines, or should have determined, that there has been a significant change in the resident's physical or mental condition.  |
| §483.20(b)(2)(iii)                      | F275 | A facility must conduct a comprehensive assessment of a resident not less than once every 12 months.  |
| §483.20(c)                              | F276 | A facility must assess a resident using the quarterly review assessment instrument specified by the State and approved by CMS not less frequently than once every 3 months.   |
| §483.20(d)                              | F286 | A facility must maintain all resident assessments completed within the previous 15 months in the resident's active record.  |
| §483.20(f)(1) Encoding Data             | F287 | Within 7 days after a facility completes a resident's assessment, a facility must encode the following information for each resident in the facility.   |
| §483.20(f)(2) Transmitting Data         | F287 | Within 7 days after a facility completes a resident's assessment, a facility must be capable of transmitting to the CMS System information for each resident contained in the MDS in a format that conforms to standard record layouts and dictionaries, and that passes standardized edits defined by CMS and the State. |