

680 - NURSING FACILITIES

EFFECTIVE DATE: 11/27/18, 07/22/25

APPROVAL DATE: 09/06/18, 05/23/25

I. PURPOSE

This Policy applies to AHCCCS registered Nursing Facilities (NFs) and establishes requirements for the Resident Assessment Instrument (RAI) and Federal standards for Nurse Aide Training and Competency Evaluation Programs (NATCP) as approved by the Arizona State Board of Nursing (ASBN).

II. DEFINITIONS

Refer to the [AHCCCS Contract and Policy Dictionary](#) for common terms found in this Policy.

For purposes of this Policy, the following terms are defined as:

RESIDENT ASSESSMENT INSTRUMENT (RAI)	A standardized tool used to gather information about a resident's needs, strengths, and preferences to develop individualized care plans.
NURSE AIDE TRAINING AND COMPETENCY EVALUATION PROGRAM	Refers to the certification process for individuals who provide basic nursing care to Nursing Facility (NF) residents.

POLICY

A NF shall meet the requirements for participation in the Medicaid program as specified in 42 CFR Part 483. Throughout this Policy residents are referred to as members when applicable.

A. REQUIREMENTS FOR USE OF THE RESIDENT ASSESSMENT INSTRUMENT

1. A facility shall make a comprehensive assessment of a member's needs, strengths, goals, life history, and preferences, using the RAI as specified in 42 CFR 483.20. The RAI uses three components including:
 - a. The Minimum Data Set (MDS) - A core set of screening, clinical, and functional status elements, including common definitions and coding categories, which forms the foundation of a comprehensive assessment for all members of nursing homes certified to participate in Medicare or Medicaid,

- b. The Care Area Assessment (CAA) – A process that is designed to assist the assessor to systematically interpret the information recorded on the MDS. 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 member. Specific components of the CAA process as outlined in the Long-Term Care Facility Resident Assessment Instrument User’s Manual include:
 - i. The Care Area Triggers (CATs),
 - ii. The CAA as specified in 42 CFR 483.315 (d)(2), and
 - iii. The CAA member assessment as specified in 42 CFR 483.20.
 - c. The Utilization Guidelines provide instructions for when and how to use the RAI. These include instructions for completion of the RAI as well as structured frameworks for synthesizing MDS and other clinical information.
 2. The RAI shall be conducted or coordinated by a Registered Nurse (RN) in collaboration with an interdisciplinary team at the time of a member’s admission into the facility and ongoing as appropriate. Information regarding specific needs shall be used to develop the member’s individualized care plan:
 - a. An RN shall sign and certify that the assessment is completed, and
 - b. Each individual who completes a portion of the assessment shall sign and certify the accuracy of that portion of the assessment.
 3. A facility shall conduct a comprehensive assessment of the member within the following timeframes as specified in 42 CFR 413.343(b):
 - a. A facility shall complete a RAI for each member within 14 calendar days after admission, excluding readmissions in which there is no significant change in the member’s physical or mental condition. For purposes of this policy, “readmission” refers to a return to the facility following a temporary absence for hospitalization or for therapeutic leave,
 - b. A facility shall complete an RAI within 14 calendar days after the facility determines, or should have determined, that there has been a significant change in the member’s physical or mental condition. A “significant change” refers to a major decline in the member’s status that will not normally resolve itself without further intervention by staff or by implementing standard disease-related clinical interventions, that has an impact on more than one area of the member’s health status, and requires interdisciplinary review or revision of the care plan,
 - c. Within 14 calendar days of a documented improvement in the member’s physical or mental condition, and
 - d. No less than once every 12 months.
 4. A member’s comprehensive assessment shall be reviewed by an RN at least once every three months after the date of the current comprehensive assessment, and if there is a significant change in the resident’s condition.
 5. A facility shall maintain all member assessments completed within the previous 15 months in the member’s active record and use the results of the assessments to develop, review, and revise the member’s comprehensive plan of care.

6. A facility shall coordinate assessments with the AHCCCS Preadmission Screening and Resident Review (PASRR) program to avoid duplicative evaluation and effort.

B. REQUIREMENTS FOR NURSE AIDE TRAINING AND COMPETENCY EVALUATION PROGRAMS

1. AHCCCS registered NFs shall comply with Federal standards and ensure that nurse aides employed by the NF have completed necessary training and competency evaluation programs approved by the ASBN. Nurse aides shall also be included in the ASBN nurse aide registry.
2. The ASBN is responsible for compliance with Federal standards in administering the nurse aide competency evaluation, approval of nurse aide training programs, and establishing a nurse aide registry. The Arizona Department of Health Services (ADHS) is responsible for investigating complaints alleging abuse and/or neglect by nurse aides.