

**Track Changes
from Title Page v1.14
to Title Page v1.15**

Chapter	Section	Page	Change
—	—	1	Version 1.145
—	—	1	October 20167
—	—	2	<p style="text-align: center;">Centers for Medicare & Medicaid Services’ Long-Term Care Facility Resident Assessment Instrument (RAI) User’s Manual October 2017 For Use Effective October 1, 2017</p>

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Chapter	Section	Page	Change												
—	—	2	<p>The <i>Long-Term Care Facility Resident Assessment Instrument User’s Manual</i> for Version 3.0 is published by the Centers for Medicare & Medicaid Services (CMS) and is a public document. It may be copied freely, as our goal is to disseminate information broadly to facilitate accurate and effective resident assessment practices in long-term care facilities.</p> <p>According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. (Note: The RAI mandated by OBRA is exempt from this requirement.) The valid OMB control number for the Medicare Prospective Payment System SNF and Swing Bed information collection is 0938-1140 and forms have been approved through January 30, 2020. The times required to complete the information collection for the item sets are as follows:</p> <table><tr><th>Item Set</th><th>Estimated response time</th></tr><tr><td>NP</td><td>51 minutes</td></tr><tr><td>NOD</td><td>39 minutes</td></tr><tr><td>NO/SO</td><td>26.52 minutes</td></tr><tr><td>NSD</td><td>34.17 minutes</td></tr><tr><td>NS/SS</td><td>14.03 minutes</td></tr></table> <p>These times are estimated per response, including completion, encoding, and transmission of the information collection.</p> <p>If you have comments concerning the accuracy of the time estimates or suggestions for improving these forms, please write to: CMS, 7500 Security Boulevard, N2-14-26, Baltimore, Maryland 21244-1850.</p>	Item Set	Estimated response time	NP	51 minutes	NOD	39 minutes	NO/SO	26.52 minutes	NSD	34.17 minutes	NS/SS	14.03 minutes
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