

OBRA Discharge Assessment Determination



Purpose: The purpose of this fact sheet is to clarify when an OBRA Discharge assessment is required under the *MDS 3.0 RAI User's Manual v1.20.1* and to address common areas of confusion related to emergency department (ED) visits, observation stays, and leave of absence (LOA).

FAQ When is an OBRA Discharge assessment required?

Discharge Criteria Must Be Met (Primary Rule)

A Discharge assessment is required only when the resident meets one of the outlined criteria (Ch. 2, pg. 2-11):

- Admission to a hospital or other care setting
- Hospital observation stay greater than 24 hours
- Discharge to a private residence
- Transfer to a non-certified bed

If none of these criteria are met, a Discharge assessment is not required.

ED Visits Alone are Not a Trigger

An ED visit by itself does not trigger a Discharge assessment, regardless of duration.

A Discharge assessment is only required if the ED visit results in:

- Hospital admission, or
- Observation stay greater than 24 hours

Time spent in the ED alone is not a determining factor.

LOA Does Not Trigger Discharge

LOA guidance clarifies when an individual remains a resident, including (Ch. 2, pg. 2-14):

- Temporary absences (e.g., home visits)
- Hospital observation stays less than 24 hours (no admission)

These scenarios do not require a Discharge assessment or Entry Tracking.

Unplanned Discharge Examples are Not Triggers

Unplanned discharge examples (Ch. 2, pg. 2-41):

- Describe types of discharges
- Do not determine whether a discharge is required

Correct process:

1. Determine if discharge criteria are met, then
2. Classify as planned or unplanned

A common misconception is that a resident out of the facility for more than 24 hours requires a Discharge assessment.