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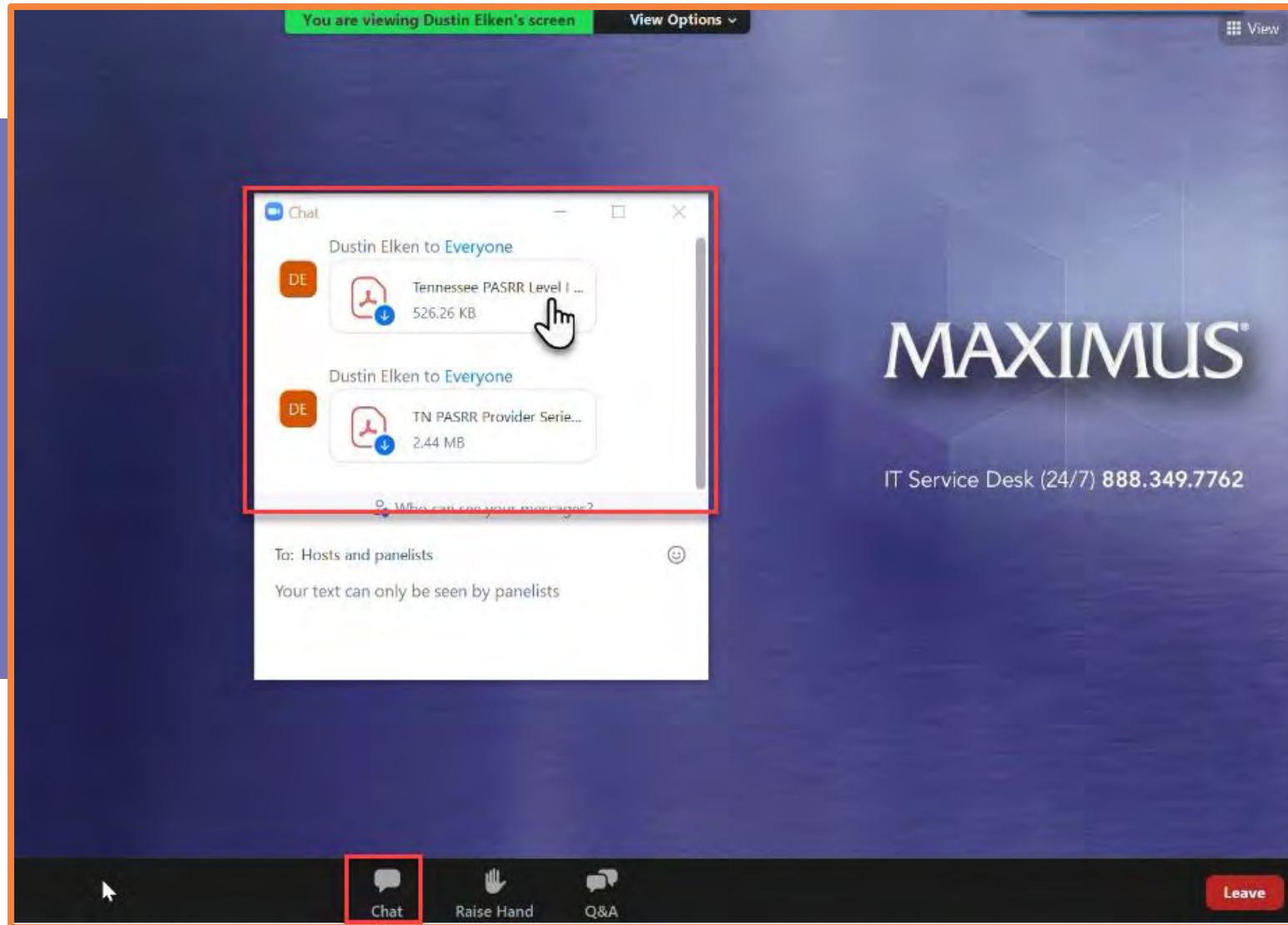
TN PASRR TRAINING SERIES

PASRR 101

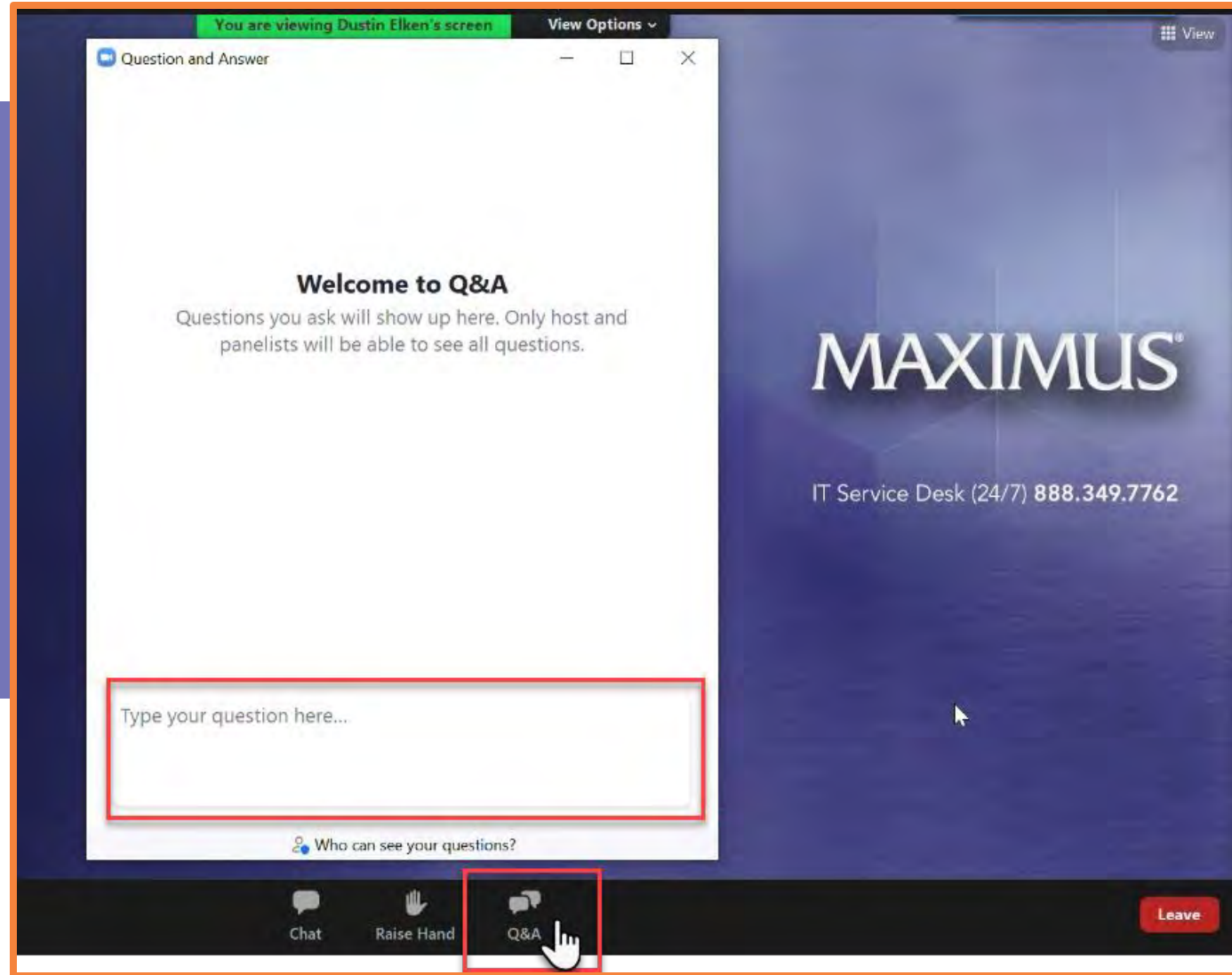
■ April 2023



Accessing Handouts



Sending Questions



Introductions



Kandy Templeton
TN Project Director, Maximus



Keisha Scott
TN PASRR Supervisor, Maximus



PASRR OVERVIEW

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Structure & Purpose of PASRR

Preadmission Screening & Resident Review

- Administered by Centers for Medicare and Medicaid Services (CMS)
 - Created in 1987
- Anyone in Medicaid-certified Nursing Facility (NF) screened for:
 - Serious Mental Illness (SMI), Intellectual/Developmental Disability (ID/DD), or Related Condition (RC)
- Known or suspected condition = evaluation
 - To ensure NF is most appropriate placement
 - To ensure Community Informed Choice and Person-Centered Planning
 - To ensure receipt of needed services

PASRR History and Implications

- ✓ 1987 – Establishment of PASRR
- ✓ 1989 – Required start of PASRR
- ✓ 1990 – Americans with Disabilities Act (ADA)
 - prohibits discrimination against people with disabilities in employment, transportation, public accommodation, communications, and governmental activities
- ✓ 1992 - Publication of PASRR Final Rule
 - between establishment of the 1987 Law and the Final Rule many PASRR variations occurred among the States
- ✓ 1997 – Elimination of Annual RR (now PASRR)
- ✓ 1999 – Olmstead v. L.C. Supreme Court Decision
 - unjustified segregation of persons with disabilities constitutes discrimination in violation of title II of the Americans with Disabilities Act

PASRR History and Implications

- ✓ 2005 – Establishment of MFP Demonstration Grant
 - **Increase the use of home and community-based services (HCBS) and reduce the use of institutionally-based services**
 - **January 2018, the activities once done by MFP were transitioned to our Managed Care Organizations**
- ✓ 2010 – Rollout of MDS 3.0 w/Q.A1500 and Section Q
- ✓ 2014 – CMS HCBS Final Rule
 - Enumerated the characteristics of settings that are truly community based
- ✓ 2016 – Final Rule: Requirements for LTC Facilities
 - NF's must notify State promptly after significant change of status
 - Resident care plans must include SS or SRS as the result of PASRR or indicate rational for why not in the medical record

“PASRR provides perhaps the most powerful lever in all of Medicaid law to encourage diversion and transition.”

PASRR Technical Assistance Center's (PTAC) September 2013 Report to CMS Review of State PASRR Policies and Procedures.

Four Questions of PASRR

1

Does the individual have a PASRR condition?

2

What is the most appropriate placement for this individual? (acute enough/too acute)

3

Might this individual be a candidate for transition to the community? What supports or services would be necessary to return to his/her community?

4

What unique disability supports and services does this individual need while a resident of a NF to ensure safety, health, and well-being?

Optimize an individual's placement success, treatment success, and QUALITY OF LIFE



Goal of PASRR

Regardless of Pay Source

Persons with MI and/or IDD in NFs receive the services they need.

100% of the time.

Regardless of Diagnosis

The Level I screening detects the potential presence of MI and/or IDD so that a more in-depth assessment can take place.

Regardless of Location

The Level I screen must be so sensitive that it doesn't miss anyone who should receive a comprehensive PASRR Level II evaluation.

Who is affected by this process?



Nursing Facilities

- Access to PASRR records for those screened in the MAXIMUS system
- Ease of submitting new Level I screens
- Access to records and information for 90-day reviews



Hospitals

- Submitting every Level I screen prior to NF admission
- Seamless access to facility-wide screening records to reduce discharge delays



Individuals and Providers

- Fast and accessible outcomes
- Clear, person-centered summaries

TN PASRR Workflow

Level I
Submitters



Hospitals



Nursing
Facilities



Enter Level I
online



Clinical Review by
MAXIMUS nurse



YES

Requests for additional
info or supporting
documents



Onsite
assessment



MAXIMUS quality
review. Determination
by DMH & DIDD



Outcome accessible
online to submitter



Community Services



Nursing Facilities



Institutional



Hospitals: Give
PASRR to the NF.
NFs: Add PASRR to
individual's record



MAXIMUS mails
outcomes to
individual/guardian
& PCP

When providers should submit a Level I screen

A circular icon with a green border and a white center containing the letters 'PAS' in blue.

PAS

- New NF admission
- Typically completed in hospital or community

A circular icon with a green border and a white center containing the letters 'RR' in blue.

RR

Completed for recent or current NF Residents

- Expiration of a Time-Limited Stay
- Status Change
 - Triggered by increased symptoms
 - First time identification of PASRR diagnosis



HOW TO COMPLETE A LEVEL I

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Researching Level I Information

- History and Physical (H&P) conducted within the past year*
- MAR
- MDS
- Psych notes/evaluation*
- Physician's orders
- Therapy notes
- Discharge summaries
- Individual
- Legal guardianship Paperwork*
- POA Paperwork*
- Service providers
- Family members

A healthcare professional in blue scrubs is smiling and hugging a patient. The patient is wearing a light blue button-down shirt over a striped t-shirt. The background is a blurred clinical setting.

COMPLETING A LEVEL I VIDEO

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Section 1: Demographics

- Full name & Mailing Address
- State of Residence
- Social Security Number
- Date of Birth
- Gender
- Marital Status
- Current Location & Address
- Method of payment for NF
- Typical Living Situation

Section 2: Guardian/Interpreter

- Legal Guardian / Medical POA / Conservator / Medical Advance Directives
- Verification of Legal Documentation
- Upload the court order or POA documents
- Need for interpreter - Yes or No

Section 3: Mental Health Diagnoses

- Diagnosed or Suspected
- May lead to chronic disability

Section 4: Substance-Related Diagnoses

- Substance-related disorder
- Most recent use
- NF admission related to substance use

Section 5: Dementia/Neurocognitive Disorders

History of psychiatric services

- Inpatient psychiatric hospitalization
- Partial hospitalization / day treatment
- Residential treatment
- Diagnosis of disorder
- Testing results
 - Dementia Work Up
 - Comprehensive Mental Status Exam
 - Other

Section 6: Interpersonal Behaviors

- Difficulty interacting with others
- Altercations, evictions, or unstable employment
- Excessive isolation/avoidance of others

Section 7: Concentration/Task Completion

- Thinking through and completing tasks
- Physically capable

Section 8: Mental Health Symptoms

- Self-injurious/self-mutilation
- Suicidal talk
- History of suicide attempt/gestures
- Physical violence
- Physical threats (with/without potential for harm)
- Severe appetite disturbance
- Hallucinations/delusions
- Serious loss of interest
- Excessive tearfulness
- Excessive irritability
- Other symptoms, describe

Section 9: Behavioral Health Symptoms

- Inpatient psychiatric hospitalization
- Partial hospitalization
- Residential treatment
- Mental health crisis services
- Other intensive services

Section 10: Behavioral Health Impact

- Legal Interventions
- Housing changes
- Suicide attempts
- Homelessness
- Life disruptions
- Psychiatric stability

Section 11: Psychotropic Medications

- Current and recent medications used for mental health conditions
- Do not list medications given for medical diagnoses

Section 12: Intellectual & Developmental Disabilities

Known or suspected diagnosis

- Impairment prior to age 18
- Receipt of agency services
- Presently or previously on Tennessee's IDD waiver

Diagnosis that affects intellectual or adaptive functioning

- Condition present prior to age 22
- Substantial functional limitations

Section 13: Categorical Decisions

- Must have a PASRR Condition
- Psychiatrically/Behaviorally Stable
- Meets the Criteria for the Categorical Decisions
- Requires the Practitioner Certification for Exemptions and Categoricals

Section 14: Submitter Attestation/Signature

By checking this box, I attest that I have reviewed all information contained herein and that I take responsibility for the completeness and accuracy of information reported throughout this submission. I attest that I am a health care professional working in a clinical capacity for this provider. I understand that approved submitters include clinical professionals such as nurses, LPNs, social workers (with a B.S. degree or higher), physicians, or home health agency clinical staff. Social service staff are not required to be licensed to submit information. I understand that administrative staff are not permitted to submit clinical information to Maximus. I understand that Tennessee Medicaid Enterprise considers knowingly submitting inaccurate, incomplete or misleading Level I information to be Medicaid fraud, and I have completed this form to the best of my knowledge.

Additional Information

Additional Information Request Date:

Additional Information Comments:

Additional Information Received Date:

Additional Information Sent:

Comments:

Tennessee Monitoring of PASRR Pre- Admission & Status Change Compliance

1

Failure to complete a PASRR prior to admission to the nursing facility.

2

Failure to secure an approved (new) PASRR prior to a expiration of a categorical and / or other short term PASRR Level II approval.

3

Failure to submit a new Level I when the individual meets the criteria for a significant change in status, (MDS 3.0).



LEVEL I DETERMINATIONS

Level I Determinations

Negative screen = No PASRR condition

- This is an Approved PASRR
- They Can Admit to the NF
- 82% of the time the Negative Screens are Approved
- 73% Instantaneous Approved
- 10% Clinician Approved (Averages 3 business hours)
- Exemptions & Categorical
 - 11% Clinician Approved - (Averages 3 business hours)

**Refer for Level II =
known/suspected PASRR
condition**

- Requires onsite Level II
- 7% of the time this outcome is given.
- Average =
5 Business Days

Categoricals and Hospital Exemption

Exempted
Hospital
Discharge
(30 days)

Respite (Up
to 30 days)

Severe
Physical
Illness

60 day
Convalescent
Care

Terminal
Illness (up to
6 months)

Dementia &
ID

A caregiver in a white uniform is assisting an elderly woman with a walker. The woman is seated in a floral-patterned chair, and the caregiver is leaning over her, holding the walker's handle. The scene is set in a home with a plaid sofa and floral curtains in the background. The overall tone is warm and supportive.

PASRR LEVEL II

Level II

The Level II Assessment:

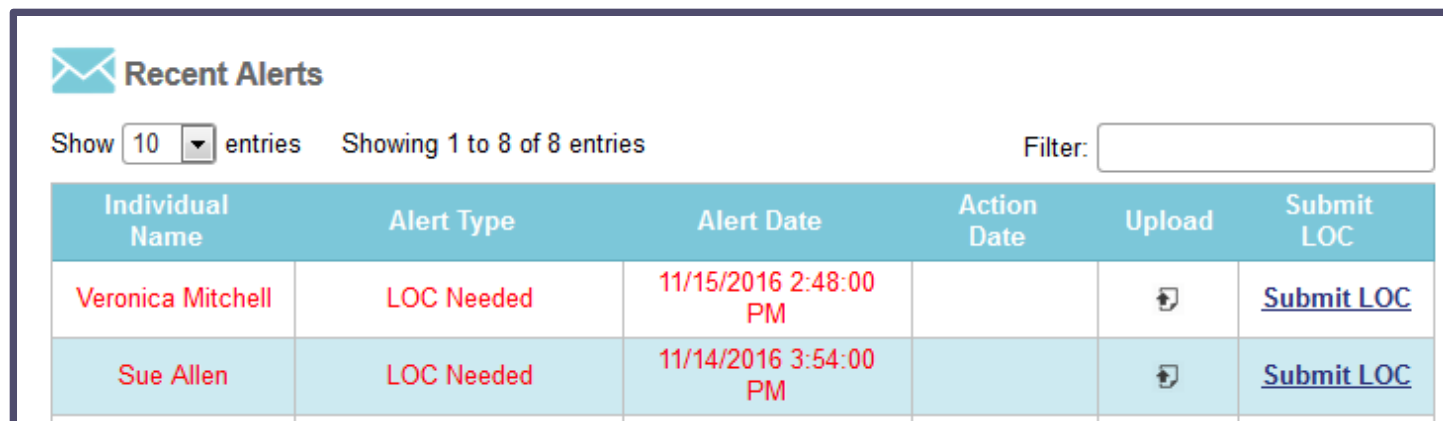
- Capturing more community options
- Promoting Community Informed Choice
- Updating Specialized Services
- Continuing to engage individuals in person-centered planning
- TennCare offers an array of community-based services through the Choices Program
- CMS and TennCare continue to be committed to offering alternatives to inpatient care
- Individual Choice remains key in a successful placement and the PASRR process

Importance of the Level II

- In-depth assessment
 - Meet the person for bio/psycho/social interview
 - Interview support/care providers
 - Review medical records
- Tells who the person is
 - Likes/dislikes
 - History
 - Needs
 - Diagnoses
- State and Federally required
- Person-Centered Planning

Level II Needed – Level of Care Submission- Hospital View

- If an individual has, or is suspected of having PASRR condition, and the individual does not qualify for a categorical or exemption, the individual must have a Level II assessment.
- A Level of Care screen is required for all individuals that need a Level II assessment.
- You will receive an alert in your Recent Alerts queue that a Level of Care screen is needed. Click on Submit LOC to complete the LOC.




Recent Alerts

Show entries Showing 1 to 8 of 8 entries Filter:


Individual Name	Alert Type	Alert Date	Action Date	Upload	Submit LOC
Veronica Mitchell	LOC Needed	11/15/2016 2:48:00 PM			Submit LOC
Sue Allen	LOC Needed	11/14/2016 3:54:00 PM			Submit LOC


Level II Needed – Level of Care Submission- NF View

- The review will also be in our Recent Activity queue with the outcome → *“Hold for LOC/LII Needed.”*


 **Recent Alerts**

Show entries Showing 1 to 1 of 1 entries Filter:

Individual Name	Alert Type	Alert Date	Action Date	Upload	Submit LOC
[REDACTED]	LOC Needed	2/7/2017 3:50:00 PM			Submit LOC

 **Recent Activity**

Show entries Showing 1 to 10 of 12 entries Filter:

Individual Name	Review Type	SSN	Status/Outcome	Referral Date	Print	Upload
[REDACTED]	Preadmission	[REDACTED]	No Level II Condition-Level I Negative	2/6/2017 1:54:00 PM		
[REDACTED]	Resident Review	[REDACTED]	Hold for LOC-Level II needed	2/7/2017 2:48:00 PM		
[REDACTED]	Preadmission	[REDACTED]	No Level II Condition-Level I Negative	1/27/2017 11:26:00 AM		
[REDACTED]	Preadmission	[REDACTED]	No Level II Condition-Level I Negative	2/1/2017 1:21:00 PM		

Level of Care Payer Sources

Nursing Facility LOC (Medicaid/Medicaid Pending)-

- Must have a total acuity score of at least 9 on the TennCare NF LOC Acuity Scale or be at risk of NF placement and have an approved safety determination.

At-Risk LOC (Medicare, Private Pay, Self-Pay, and LOC-Hospice)-

- Must have at least one significant deficit in an activity of daily living or related function on the TennCare NF LOC Acuity Scale.
- *Note:* Submissions for Medicaid grandfathered members require only one significant functional deficit. These are members receiving CHOICES Group 1 reimbursed services continually since 7/1/2012.

Level II Process the Beginning



After the LOC is submitted, Maximus will start the Level II process. Maximus will refer the LII to an Independent Contractor Assessor to conduct.



The IC assessor will conduct a face-to-face and/or telehealth assessment within 48 hours of receipt of the LOC.



After the face-to-face and/or telehealth assessment is complete, Maximus completes a quality review and writes a draft Summary of Findings.

Summary of Findings

Report of PASRR identified services

- Specialized Services
- Rehab Services
- Community Placement Supports

MUST:

- Remain in active chart
- Be a clinically accurate representation of the individual
- Be captured in the plan of care

Level II Process Final Steps



The assessment is sent to DMH/DIDD for the PASRR determination.



After DMH/DIDD makes the determination, Maximus finalizes the assessment and mails PASRR notifications to the individual/guardian and PCP.



Total Level II timeframe: 5 business days

LEVEL II OUTCOMES

A photograph of a caregiver in a teal uniform leaning over an elderly woman. The woman is sitting and holding a brown mug, smiling warmly. The caregiver has her hands on the woman's shoulders, providing comfort. The scene is set indoors with a window in the background and pink flowers in the foreground.

COMMON LEVEL II OUTCOMES **APPLIES WHEN**

<i>Long Term Approval (LT)</i>	Individual was approved for long-term nursing facility services.
<i>Short Term Approval (ST)</i>	Individual was approved for short-term nursing facility services.
<i>Halted Outcome (Ruled Out)</i>	Individual doesn't have a serious mental illness or has a primary diagnosis of Dementia and/or Neurocognitive Disorder.
<i>Denied</i>	Individual was determined not to meet nursing facility level of care (LOC) or doesn't have any significant deficits.
<i>Cancelled/Withdrawn</i>	The LII was cancelled (i.e. no longer seeking NF placement or passed away). The LII was withdrawn at the request of the Provider.

LEVEL II OUTCOMES	APPLIES WHEN
<i>Approved SS</i>	Individual was approved for nursing facility services and needs specialized services.
<i>Approved SS - Reconsideration</i>	Individual was approved for nursing facility services as a result of reconsideration or appeal and needs specialized services.
<i>Approved No SS</i>	Individual was approved for nursing facility services and specialized services are not needed.
<i>Approved No SS - Reconsideration</i>	Individual was approved for nursing facility services as a result of reconsideration or appeal and specialized services are not needed.
<i>Approved SS - ST</i>	Individual was approved for short-term nursing facility services and specialized services are needed.

LEVEL II OUTCOMES

APPLIES WHEN

***Approved SS –
Reconsideration - ST***

Individual was approved for short-term nursing facility services as a result of reconsideration or appeal and specialized services are needed.

Approved No SS - ST

Individual was approved for short-term nursing facility services and specialized services are not needed.

***Approved No SS –
Reconsideration- ST***

Individual was approved for short-term nursing facility services as a result of reconsideration or appeal and specialized services are not needed.

***Halted Outcome – No SMI/ID/RC
(Ruled Out)***

This individual doesn't have a serious mental illness.

***Halted Outcome - Primary
Neurocognitive Disorder
(Ruled Out)***

This individual has a primary diagnosis of Dementia and/or Neurocognitive Disorder.

Cancelled/Withdrawn

The LII was cancelled (i.e. no longer seeking NF placement or passed away). The LII was withdrawn at the request of the Provider.

LEVEL II OUTCOMES	APPLIES WHEN
<i>Denied – Medical Necessity</i>	Individual was determined not to meet nursing facility level of care or doesn't have any significant deficits.
<i>Denied – Medical Necessity - Reconsideration</i>	Individual was determined not to meet level of care for NF services as a result of reconsideration or appeal.
<i>Denied – Requires Inpatient Psychiatric Services</i>	Individual was determined not to meet level of care for NF services because they need inpatient psychiatric services.
<i>Denied – Requires Inpatient Psychiatric Services - Reconsideration</i>	Individual was determined to not meet level of care for NF services because they need inpatient psychiatric services as a result of reconsideration or appeal.

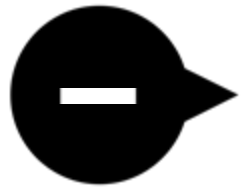
Specialized Services

Examples:

- Partial Hospitalization
- Peer Recovery
- Psychiatric Evaluation and medication
- Mental Health Counseling
- Socialization
- Training in Community Living Skills
- Dental or Vision evaluation
- Higher Education and Training
- Assistance with Conservatorship and Counseling
- Pre-Vocational Services
- Development of Person-Centered Plan and Support Initiatives
- Employment Training and Technical Assistance for individual diagnosed with ID/DD who desire to transition to Community
- Behavioral Health Crisis Services
- Transition to Community Living
- In Home personal care visits
- Adult Day Care
- Assistive Technology

These are just some examples; all specialized services should be individualized based on individual preference and need.

PASRR Flow Charts



Negative PASRR



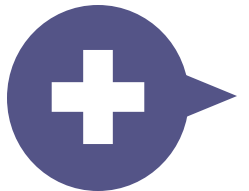
PAE in PERLSS if Medicaid pending or Medicaid receiving



Positive PASRR



Level of Care submitted to Maximus



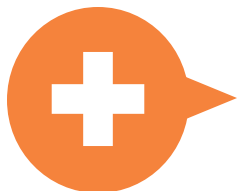
Positive PASRR



Level of Care submitted as non-Medicaid



PAE in PERLSS if they become Medicaid pending or Medicaid receiving



Positive PASRR



Level of Care submitted as Medicaid



Done. No further action required unless LOC is denied

If the Level II is halted for primary neurocognitive disorder, a PAE will need to be submitted into PERLSS if they have Medicaid or Medicaid pending.



A group of elderly people, both men and women, are seated in a room, likely a community center or a care facility. They are all smiling and clapping their hands, with some raising their arms in the air. The atmosphere is joyful and celebratory. The background shows a well-lit room with tables and chairs, suggesting a communal space.

LOC REVISION PROCESS

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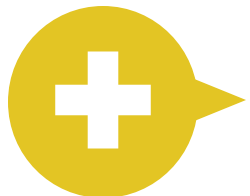
Important Updates: LOC Revision Process



As of **June 19, 2019**, the following updates were made to **LOC process for Level II PASRRs** that have received a **Denial**. The LOC Revisions Process gives Providers the opportunity to correct mistakes and address specific functional areas denied which may be able to be approved.



Timeframes: Providers will be able to submit **up to three (3) revisions** per LOC Denial **within 60 days** of the original PASRR Determination. The first LOC revision must be initiated **within 30 days of the original LOC Denial**, and all subsequent revisions must be initiated within 30 days of the previously requested revision, and **cannot exceed 60 days from the original PASRR Determination Date.**



Safety Determinations: Providers will also be able to **request safety determinations through the LOC Revision Process** following the timeframes listed above. If the LOC is submitted with a **score below 9, no safety is requested**, and if the revised submitted LOC score is still less than 9, and safety is not requested, **the PASRR will be denied again.**

LOC Revision Scenario #1

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1	2	3	4	5 Original LOC Denial Issued	6 LOC Revision #1 Submitted	7
8	9	10 LOC Revision #1 Denied	11 LOC Revision #2 Submitted	12	13	14
15	16 LOC Revision #2 Denied	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

LOC Revision Scenario #1 Continued

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28					

LOC
Revision #3
Submitted

LOC/
PASRR
Approval

LOC Revision Scenario #2

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1	2	3	4 Original LOC Denial Issued	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24 LOC Revision #1 Submitted	25 LOC Revision #1 Denied	26	27	28
29	30					

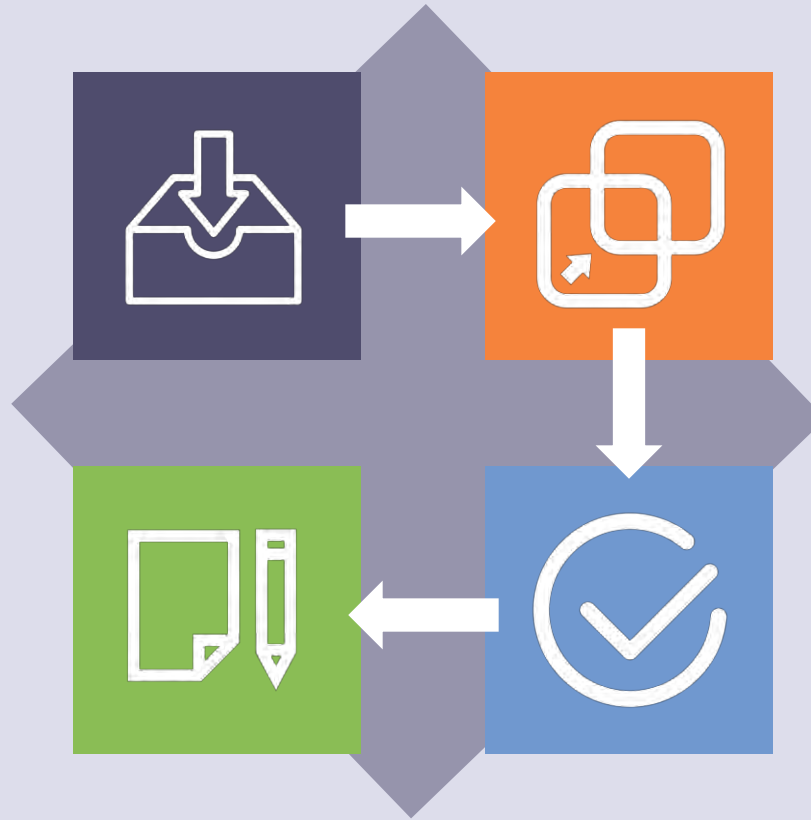
LOC Revision Scenario #2 Continued

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28					



Status Change Process

1. **Submit a new Level I to initiate the process**



2. **Level II completed**

- Level II not always required; only if PASRR condition exists or suspected

3. **New summary of findings generated**

4. **Revise care plan based on findings and arrange/discontinue identified services, as appropriate**

Status Change – with No Existing PASRR Condition

1

Exhibits behavioral, psychiatric, or mood related symptoms suggesting the presence of MI where dementia is not the primary diagnosis

2

ID/RC not previously identified and evaluated through PASRR

3

For NF residents who are psychiatrically hospitalized and plan to return to NF

Status Change – If PASRR Condition is Present

1

Increased behavioral, psychiatric, or mood-related symptoms

2

Behavioral, psychiatric, or mood related symptoms that have not responded to ongoing treatment

3

Improved medical condition such that the plan of care or placement recommendations may require modifications

4

Physical change with behavioral, psychiatric, or mood-related symptoms, or cognitive abilities, that may influence adjustment to an altered pattern of daily living

5

Indicates a preference to leave the facility

6

Condition or treatment is or will be significantly different than described in the resident's most recent PASRR Level II evaluation and determination



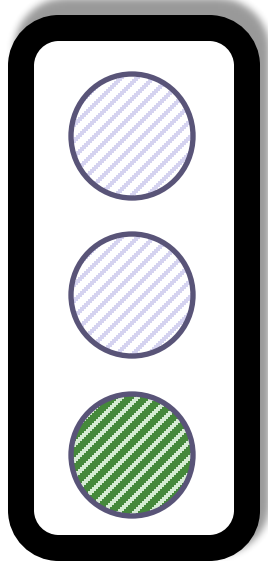
PATHTRACKER

maximus

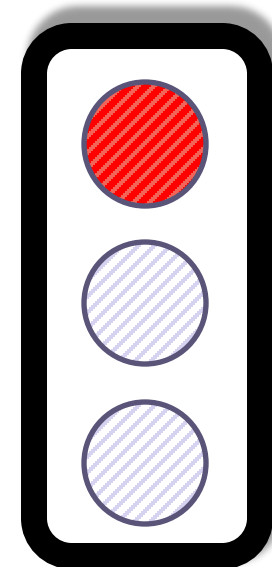
Important Points about PathTracker

You **MUST** fill out the admission notice **(within 2 days)**
This **STARTS** payment

Complete discharge notice when person permanently leaves or hospitalized for 11 days or more **(within 2 days)**
This **STOPS** payment



Do not accept a resident through the review queue until they are in your facility



Additional Important Points

This Information is what is presented to Nursing Facilities – Others do not use PathTracker

- Complete an Admission Notice, Discharge Notice or Transfer timely (within 2 days)
- No Discharge notice is needed if the person goes to the hospital for less than 10 days
- The Admission Date is the MOPD Date (*Medicaid Only Payer Date*)
- Use accurate provider/NPI numbers
- If you don't admit the person, don't submit an admission notice

PHE Ending May 11, 2023



MEMO

DATE: February 21, 2023

TO: Medicaid Nursing Facility (NF) Providers
Tennessee Hospitals
TennCare Health Plans

FROM: Karen Gonzales, RN, BSN Assistant Deputy of LTSS Clinical Operations

CC: Katie Moss, Chief of LTSS
Kristeena Ashby, Senior Assistant Deputy Chief of LTSS Operations

SUBJECT: **30-day PASRR Waiver Update --End of Public Health Emergency**

Effective December 22, 2020, as part of Tennessee's COVID-19 related 1135 Emergency Waiver pertaining to the COVID-19 Public Health Emergency (PHE), all new Nursing Facility admissions were allowed to apply the 30-day PASRR waiver approved by CMS. To date, this has allowed all new NF admissions to be treated like exempted hospital discharges through the PHE.

The Department of Health and Human Services is planning for the federal PHE for COVID-19 to expire at the end of the day on May 11, 2023. **Based on this information, the 30-day PASRR suspension period will terminate on May 11, 2023.** Starting on May 12, 2023, all PASRR processes must resume with full compliance with federal PASRR processes. Although May 12, 2023 is the date required for compliance, we encourage all entities to begin re-implementing PASRR processes in order to ensure all staff is trained on PASRR requirements and processes prior to May 12, 2023.

Hybrid In-Person Assessment Model

The **State of Tennessee** continues to offer a hybrid model of virtual/in-person Level II assessments for the **PASRR** program.

- This plan includes an option for virtual assessments using HIPAA compliant Zoom video conferencing as well as in-person assessments. Level II Assessors will be calling Facilities prior to scheduling assessments to determine the best option to complete the Level II Assessment. Please call the TN Help Desk with any questions.

Resources and Help

<https://maximusclinicalservices.com/>

- State User Tools
- How to complete PASRR Level I screen instructional video
- <https://maximusclinicalservices.com/svcs/tennessee>

Tennessee PASRR Helpdesk

- Maximus-TNPASRR@maximus.com | 833.617.2777

TennCare

- LTSS website: <https://www.tn.gov/tenncare/long-term-services-supports.html>
- LTSS Training site: <https://www.tn.gov/tenncare/long-term-services-supports/partners-program-updates/ltss-training.html>

TennCare Help Desk

- 1-877-224-0219

Tools and Resources Updates:

Maximus.com

- <https://maximusclinicalservices.com/svcs/tennessee>

NEW RESOURCES

- [TN DIDD Website](#)
- [TN Council on Developmental Disabilities](#)

*ATTN Providers - Scroll down for new helpful links under *Provider Tools*.

Are you a master's level clinician or Registered Nurse with behavioral health experience interested in working with our TN PASRR program? Contact our Recruiting team to learn more: Recruiting@maximus.com

Attention Providers: If you would like access to complete Level I Referrals, please call 833.617.2777 or email the Help Desk: Ascend-TNPASRR@maximus.com.

[System Log In](#)

Provider Tools

Department of Housing and Development Press Release - 8.24.22 - NEW [↗](#)

ABLE Age Adjustment Act Advocacy Toolkit Overview - NEW [↗](#)

TN Commission on Aging and Disability - NEW [↗](#)

DIDD Conservatorship Information Packet - NEW [↗](#)

H.R.454 - Protect Patriot Parents Act - NEW [↗](#)

Council on Developmental Disabilities - Supported Decision Making - NEW [↗](#)

TN Employment Pathways - NEW [↗](#)

H.R.2373 - Transformation to Competitive Integrated Employment Act - NEW [↗](#)

Tennessee Believes Program - NEW [↗](#)

TennesseeWorks - NEW [↗](#)

Available Maximus Resources

Announcements

Sep 19, 2022

TN PASRR Quarterly Newsletter: Important Process Update | Register for Informative Training Sessions Throughout October | Review Training Sessions on Tools & Resources Site



Jun 8, 2022

System Update: IP Address for AscendAMI to be Updated on Wed 2022

Jun 2, 2022

TN PASRR Learning Opportunities: Register for Upcoming Training and October 2022 | Best Practices + Branding Update Notice

Apr 4, 2022

TN PASRR Quarterly Newsletter: Changes Coming to Level II Tool | Register for April Training Sessions | Best Practice Reminders



Mar 14, 2022

Learning Opportunities: Register for Upcoming Spring Training Series | April 26 - 27



Resources

PTAC Director's Corner: Why HIPAA is Not a Barrier to Getting PASRR Done [↗](#)

Tennessee PASRR Glossary of Terms [↗](#)

2021 Announcements - Archive [↗](#)

2020 Announcements - Archive [↗](#)

Guides & Forms

Tennessee PASRR System Training Checklist [↗](#)

Tennessee PASRR PAE Certification Form [↗](#)

Tennessee PASRR Practitioner Certification Form [↗](#)

Tennessee PASRR Document-Based Review Form [↗](#)

2023 Training Dates

August 15-16, 2023

October 24-25, 2023

More information and registration will come later this year.

Training Evaluation Form:

Please take the time to complete the Training Evaluation Form that will appear after closing this webinar session.

Use this link to access a certificate of participation:

<https://maximus.surveymonkey.com/r/TNPASRRProviderCert2022>



QUESTIONS & ANSWERS

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