

QUESTIONS	ANSWERS
	Contact Information
Who is Maximus?	Maximus performs Pre-Admission Screening and Resident Review (PASRR) Level I screens and Level II evaluations on individuals who are applying to or residing in Medicaid-certified nursing homes.
	This federally mandated assessment process is used to determine whether the nursing home is the appropriate placement for individuals with mental illness, intellectual disabilities, or developmental disabilities. PASRR functions as an essential method to help match individuals with the care and services they need. Maximus also performs nursing facility Level of Care Determinations for all Level II evaluations.
How do I get in touch with Maximus?	Contact the Tennessee PASRR Help Desk:
	<ul> <li>Phone: 833.617.2777</li> <li>Fax: 877.431.9568</li> <li>Email: <u>Ascend-TNPASRR@maximus.com</u></li> </ul>
What are Maximus's business hours?	The Tennessee PASRR Program Office operates from 7:00 am - 4:00 pm CST, Monday through Friday.
	PASRR Process
The approval letter says "Your Level I screen is good for 60 calendar days from the Level I Review Date listed above. If you are not admitted to a nursing home that takes Medicaid within 60 calendar days from the Level I Review Date listed above, you will need	No. Once the person's Level I screen is approved, they have 60 calendar days from the Level I Review Date to admit to a Nursing Facility (NF) using this Level I screen. If the person admits to the NF within the 60 day period, their Level I screen is valid and no new Level I is required for as long as the person is in that NF, unless they experience a change in status, discharge home or it is a time-limited approval which will expire prior to the 60th day.
a new Level I screen. After the 60 calendar days, any nursing home you admit to must submit a new Level I screening form to Maximus." Does this mean I have to submit a new Level I screen every 60 days?	If the person is not admitted to a NF that takes Medicaid within that 60 calendar days from the Level I Review Date listed, then you will need to submit a new Level I screen before the person admits to the NF.
When will the Level II evaluation be completed, if it has been over 5 business days?	Our goal is to complete Level II assessments within 5 business days from the date you submit the Level of Care screen. If you have not yet received an outcome on a Level II, reach out to the Maximus Help Desk (833.617.2777). We are happy to give you a status update on the review.
Why won't the determination print out?	If the screen has a determination, you can print the outcome in the system for up to 30 days. If the determination was made more than 14 days ago, contact the Maximus Help Desk (833.617.2777) and we can assist.



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What does this outcome mean?	There are several potential outcomes for Level I screens. You can always refer to the provider manual and FAQs on our website if you need more information:
	Negative Screen: No PASRR condition identified. The person can admit to the NF without additional screening.
	Exempted Hospital Discharge (EHD): A person is currently admitted to the hospital and is going to the NF for treatment of the condition for which s/he received hospital care, and whose physician certifies will likely require 30 days or fewer of NF services.
	Convalescent Care: A person is currently admitted to the hospital and is going to the NF for treatment of the condition for which s/he received hospital care, and whose physician certifies will likely require 60 days or fewer of NF services.
	Respite: A person who resides in a community setting and requires a brief NF admission to provide respite to in-home caregivers.
	Terminal Illness: A person has a terminal illness, and whose physician certifies s/he has a life expectancy of 6 months or less. This outcome provides 180 calendar days in the NF.
	Severe Physical Illness: A person who is in a comatose state, ventilator dependent, functioning at brain stem level, or has diagnoses (COPD, Parkinson's disease, Huntingdon's disease, ALS, or congestive heart failure) which result in a level of impairment so severe that the individual could not be expected to benefit from specialized services. This is not a time-limited stay, although the person's physician must certify the individual's condition. A new Level I screen must be submitted should there be any improvement in the person's physical condition.
	Dementia and ID: A person has an intellectual disability and dementia and whose physician certifies the condition.



	Refer for Level II: A person has a known or suspected PASRR condition and requires a Level II assessment and determination.
If the individual is out of state, how do I submit the PASRR?	If the person will be admitting to a TN Medicaid-certified nursing facility, they must have a TN Level I and Level II (if the Level I identifies the need for a Level II) prior to admission to the TN nursing facility. The receiving facility will need to submit the Level I prior to admission and the process for Level II completion will be slightly different if the person is not within the TN state borders, although the Level II must still be completed prior to NF admission. You will need to contact the referring facility and request the following: MARS, H&P, Psych evaluation (if available) and 2 weeks of nurses' notes (or whatever is available). You will then submit the request and upload the required documents.
	If a Level II is completed and an approval for nursing facility care is issued, it will be a short-term approval. At the expiration of the short-term approval, if more nursing facility care is needed please submit a new Level I and a face to face to Level II assessment will be completed.
When does the Level I need to be completed? Does a new PASRR need to be done every time a member is re/admitted to a facility?	<ul> <li>NF Applicant (Preadmission): <ul> <li>The NF may not accept a new resident without a complete Level I (and Level II, if needed).</li> </ul> </li> <li>NF Resident (Resident Review): <ul> <li>If a person goes to a hospital for a medical reason and returns to the nursing facility no new Level I/Level II is required.</li> <li>If a person goes to a psychiatric hospital and returns to the NF, a new Level I/Level II is required before returning to the NF.</li> <li>If a person transfers from one NF to a different NF without a discharge to the community, no new Level I/Level II is required, as long as there is no significant change in mental status.</li> <li>If a person transfers from one NF to a different NF and has a hospital admission between the two NFs, no new Level I/Level II is required, as long as there is no significant change in mental status.</li> <li>If a person discharges from the NF to home or other community placement—even for one day—a new Level I/Level II is required.</li> </ul> </li> </ul>
If a person is at home and has Home Health services, can the Home Health company enter the Level I?	If someone from the Home Health Agency is a registered user of Maximus's system, they can submit the Level I. Many Home Health Agencies will not have registered system users, so we encourage the agencies to work closely with the MCO, AAAD, hospital, and/or nursing facility staff to ensure the Level I is complete prior to NF admission.



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What is the next step after the PASRR is submitted?	Maximus will review the Level I and make a determination for negative screen (no Level II required), apply an exemption or categorical, or further review (Level II required). You will receive this outcome within 6 business hours of receipt of the necessary information. For negative screens, the person may receive an instant approval.
	If the person requires a Level II, you will also need to submit a Level of Care screen, similar to the PAE. This LOC screen is the first step in the Level II process. Maximus will refer the screen to one of our Independent Contractors who will meet with the person and conduct a face-to-face clinical interview. The assessor will submit their report to Maximus, who will review it and identify required PASRR services. These findings will be sent to the Department of Mental Health and Substance Abuse Services or Department of Intellectual and Developmental Disabilities for a PASRR determination. You will receive a summary of findings report that includes the PASRR-identified services to incorporate into the person's plan of care, along with the LOC/PAE outcome.  Review the training videos for system education about locating and printing outcomes and responding to requests for additional information.
Does a PASRR need to be completed prior to admission for a potential patient entering the facility with dementia?	Every person going to a Medicaid-Certified NF will require a Level I prior to NF admission. If the person has a sole or primary dementia diagnosis, no Level II will be required. If Maximus's clinicians question the dementia primacy, a Level II may be required for a PASRR determination. For persons with co-occurring dementia and serious mental illness, you must submit substantiating documentation to validate the dementia diagnosis, such as neurocognitive testing, neuropsychiatric evaluation, scans, etc.
Can the same PASRR be used if the individual is transferred from facility to facility and has not been discharged home or had a change of status?	A new Level I is not required if the individual is transferring from NF to NF without interruption in the level of service, in other words, no discharge to the community. NF providers can update discharges, transfers, and admissions in PathTracker. As long as there has been no change in mental health status or level of care, and as long as the initial Level I/Level II approval was not time-limited, a Level I is good indefinitely.
	If a person experiences a Status Change, a new LI is required before transferring to a new NF. If the individual has a Level II condition or found to have a Level II condition via the Status Change review, a Level I and LOC are required to refer for a Level II evaluation. If a person discharges from a NF to a community placement, and then needs to return to the same or different NF, a new Level I is required. If the individual has a Level II condition, a new Level I and LOC are required.



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How do I access documentation in reference to an applicant's screening or Level II evaluation if I didn't enter the screening?	Users within the same facility will be able to access their facility's pending/saving referrals (regardless of who began them) to complete and submit to Maximus. They can also access completed reviews from others in their facility.
	NFs will only have access to screens started within your identified facility. If a person admits to a NF from a hospital, a copy of the outcome determination should accompany the person to the NF, at the time of admission. Once the person has been admitted to the NF in the PathTracker system, the admitting NF will be able to view and print the outcome determination.
Who do I contact with questions about the Level II determination after December 1, 2016?	If you have questions about the determination, contact the Maximus help desk:
December 1, 2010:	<ul> <li>Ascend-TNPASRR@maximus.com or 833.617.2777</li> <li>LTSS handles questions regarding PAE/Medical eligibility, PAE Appeals, and PERLSS help. If you have PAE (also known as Medical Eligibility) questions, call the LTSS Help Desk at 1.877.224.0219.</li> <li>If you have financial eligibility or Medicaid application questions please contact TNHC at 1.855.259.0701.</li> </ul>
Are PASRRs required for everyone entering the nursing facility, regardless of the insurance/payer?	Federal regulations require every person entering a Medicaid-Certified NF to have a completed Level I (and Level II, if needed) prior to admission, regardless of pay source.
Is there an all-inclusive list of diagnoses and/or medications that prompt a Level II?	To make a determination of the need for a Level II, Maximus reviews the person's entire clinical presentation for PASRR inclusion, not just formal diagnoses or specific medications. As such, an all-inclusive list of diagnoses and medications does not exist. Remember, a PASRR condition is a known or suspected serious mental illness, intellectual disability, or related condition.
Who can complete a Level I or LOC?	Licensed physician
	Nurse practitioner
	Physician assistant
	Registered or licensed nurse
	Social worker
	<ul> <li>Individual with a bachelor's degree in social work, nursing, or other human service (e.g., psychology or sociology)</li> </ul>
	<ul> <li>Anyone who has conducted and submitted PASRR screenings prior to 12/1/2016 and who has completed a Maximus sponsored in person or online PASRR training.</li> </ul>



	This person's name and credentials will be required upon submission and will be the responsible party for inaccurate information. Any person with access to Maximus's system will have the ability to data enter the Level I and/or LOC screens. To complete a physician's attestation, the person must be an MD, DO, NP, CNS or PA.
I need to change something I entered on the PASRR screening; how do I do that?	If Maximus has processed the Level I and issued a determination, a new Level I must be submitted and marked as a status change. If the screen is pending a determination, contact the Maximus help desk for assistance. To minimize the need for corrections, be sure to review the information on the Level I prior to submission, including demographics, diagnoses, and medications. If you have already started the Level I and need to research or verify information, you can save a draft copy and come back to it within 24 hours. After 24 hours, the system will automatically delete any un-submitted screens.  Remember, you are attesting that the information you are submitting is a true and accurate reflection of the individual's clinical presentation. Intentional misinformation is Medicaid fraud.
Will there be any changes to the Categorical or Exemption determinations?	Yes. In accordance with CMS best practice, there is no longer a 120-day convalescent care categorical. This has been replaced with,  • Convalescent Care—a person is currently admitted to the hospital and is going to the NF for treatment of the condition for which s/he received hospital care, and whose physician certifies will likely require 60 days or fewer of NF services.
What are the screening and assessment turnaround times?	The timeframes are:  • Level I = up to 8 business hours from time of receipt of all required information  • Level II = up to 5 business days from the complete submission of the LOC screen in the Maximus system.
How do I complete an exemption?	When entering information on the PASRR and the individual is psychiatrically stable (Question # 5 is answered as "yes"), the exemption choices will appear at the end of the screen. The H&P and the MD Certification for Categorical/Exemptions are required.
When do the 30 or 60 days begin?	The date begins at the date of determination.
What determines a 30-day EHD or 60 day Convalescent Care outcome for PASRR?	The Maximus Level I clinician makes the determination, taking into consideration the information that the doctor who signs the MD certification form provided.



When will the review be completed?	If a Level II referral is not required, a negative Level I will be completed within 1 business day from the date/time of the submission. If a Level II IS required, it will be completed within 5 business days. For a Categorical determination, it will be completed within 1 business day and for an Exemption, it will be completed within 3 business days. For a LOC screen, it will be completed as part of the Level II evaluation within 5 business days.
I do not see the questions that allow me to request an exemption.	When submitting the Level I screening and if question #5: "Are the individual's behaviors/symptoms stable (meaning that there is no evidence of dangerousness/risk to self or others)?" is answered as "No," then the submitter will not be given the option for a categorical/exemption request. If the question is answered as "Yes," the option for a categorical/exemption request will become available at the end of the submission.
If the Hospital does a PASRR, does the Nursing facility have to do one as well?	Only one Level I is required for NF admission and this must be completed prior to NF admission. The NF will be responsible for completing change of status Level I screens. The hospital is responsible for sharing preadmission PASRR determinations with the receiving facility prior to admission. The NF can access the determination and summary of findings, if applicable, after admission through the PathTracker process.
Do I need to submit medications not used for the treatment of behavioral health conditions?	In the Level I, we will ask for psychotropic medications used for the treatment of behavioral health conditions. If a person takes a psychotropic medication for a physical condition, you do not have to include this on the Level I.
	<ul> <li>Remeron = include for the treatment of bipolar disorder, omit for the treatment of appetite stimulation</li> <li>Ativan = include for the treatment of anxiety, omit for the treatment of spasticity</li> </ul>
	An important note regarding diagnoses of seizure disorders or spasticity: If these conditions were present prior to age 22 and result in functional limitations in 3 or more life domains, the person may have a related condition, which could result in a referral for a Level II.
What if the medical record, documentation, family, and individual cannot provide the needed information when completing the Level I? How do we proceed?	Answer the questions to the best of your ability based on the information you have available and after taking due diligence to obtain the information. We understand that sometimes medical records are sparse or non-existent, the person is a poor historian, and/or the family is unaware, unavailable, or uninvolved. Do the research and, if the information is still absent, respond based on the information you do have.
	You cannot skip questions in the Level I. If new information becomes available, a new Level I can be initiated as a status change. To prevent delays, be sure to indicate in the comments sections that all known information was provided to assure the review is not delayed by questions from Maximus.



Who is responsible for completing the Level I if the person is ready to return to the NF from the psychiatric hospital?	The psychiatric hospital should complete the Level I. In the likely event of a Level II, this must be completed prior to the person's return to the NF.
Can everyone just receive a short-term approval for quick NF admission and then a change in status submission can occur later, after the person is already admitted?	This is a violation of both state and federal regulations, potentially resulting in loss of Medicaid certification and recoupment of funds for each individual admitted without an appropriate PASRR process.  The purpose of PASRR is to identify individuals with PASRR conditions and ensure their unique needs can be met in the least restrictive setting. Without the appropriate screening before admission, the NF cannot ensure they can meet each person's unique needs, which can lead to unavailable service delivery and quality of care concerns for the
	individual, in addition to higher facility staff turnover rates.
Is depression still considered a major mental illness?	Major Depressive Disorder is considered a major mental illness; however, when the ICD-10 transition occurred, many facilities adopted software to convert the ICD-9 codes to ICD-10, and the corresponding diagnoses. Unfortunately, Depressive Disorder NOS/mild, situational depression does not have a direct translation from ICD-9 to ICD-10. What we have learned is that many people now have diagnoses of Major Depression that a clinical professional did not give. To avoid unnecessary Level IIs, verify that the person's diagnosis comes from a clinical assessment and not a system "crosswalk."
	This means a psychiatrist or otherwise qualified clinician diagnosed the person with Major Depression. Although we will consider more than just a diagnosis, we cannot overlook a diagnosis of Major Depression when evaluating for PASRR conditions. Be sure to submit supporting documentation and include any necessary comments at the time you are completing the Level I.
Will the PASRR have to be completed by a MCO before placing a member on a short term stay in a NF?	Yes. A Level I is required for every admission to a Medicaid-certified NF. Therefore, the MCO would have to submit a Level I for individuals with TennCare going into the NF.
What happens if a person enters a facility without a completed PASRR? Is there some sort of penalty?	State and Federal regulations require completion of the PASRR process prior to admission. Maximus tracks compliance with these regulations and reports those findings to TennCare.
Will the hospitals be able to receive a categorical or exemption for short-term approval? If so, will the Level I have to be resubmitted if the person needs to remain long-term?	If a person meets the conditions associated with a categorical or exemption outcome, Maximus's clinical reviewers will give the determination. If the person will need to remain in the NF longer than a short-term determination allows, a new Level I and possibly a Level II will be required. The length of stay will be determined via the Level II review process.
Does a person entering the NF as a respite require a new Level I every time?	Every person admitting to a Medicaid-Certified NF will require a new Level I every time, regardless of individual pay source or expected length of stay.
How do I cancel a PASRR?	Contact the TN PASRR Help Desk at 833.617.2777. Please do not resubmit a PASRR until the original PASRR has been cancelled.



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How do I edit medications after I've already submitted the PASRR?	Once a PASRR is submitted, you must contact the TN PASRR Help Desk at 833.617.2777 for changes.
If an individual transfers from one nursing facility to another nursing facility, and a Level I PASRR has already been completed, does a new Level I need to be submitted?	No. A Level I will remain effective if an individual transfers from one nursing facility to another nursing facility or if an individual transfers from a nursing facility to the hospital, for a medical admission, and back to a nursing facility. A Level I should always be resubmitted if an individual discharges to the community/lower level of care facility (other than a nursing facility).
	Change of Status
How do I check on the status of a Change of Status?	To check on the status of a pending screen, log into the Maximus portal. You will have access to a pending determinations queue, where you can receive status updates, respond to requests for additional information, and print determinations.
Do Changes of Status go through Maximus?	Yes. All Level II screens will be triggered through the Level I process. To initiate a new Level II, such as a change of status, submit a new Level I.
What constitutes a Change of Status?	Please refer to MDS 3.0 for guidelines that specify "When a Significant Change Should Result in Referral for a PASRR Level II Evaluation." Within this guidance, there are some excellent examples of circumstances in which a referral for a status change is warranted. These examples are provided for individuals with an identified Level II condition, and for individuals for whom a level II condition was not been identified.
	Excerpt from MDS 3.0:
	Referral for Level II Resident Review Evaluations is required for individuals previously identified by PASRR to have Mental Illness, Intellectual Disability/Developmental Disability, or a Related Condition in the following circumstances:
	Note: this is not an exhaustive list:
	A resident who demonstrates increased behavioral, psychiatric, or mood-related symptoms.
	A resident whose behavioral, psychiatric, or mood related symptoms have not responded to ongoing treatment.
	<ol> <li>A resident who experiences an improved medical condition, such that the resident's plan of care or placement recommendations may require modifications.</li> </ol>



If a person receives a NF denial because of PASRR, what should be done?	Denials  The NF will not receive payment for any person admitted to the NF prior to Level II completion and who receives a denial outcome. The submitter must consider community placement for the individual found to not be appropriate for NF placement. For Medicaid recipients, contact the individual's MCO for assistance and resources. If you believe the denial is in error, resubmit the Level I screen, including documentation to
How do I enter a Change of Status?	status, it is best practice to submit the status change request (via a new Level I) so that we can review the specific factors and decide whether or not the information constitutes a status change.  You need to submit a new Level I.
Does a previous diagnosis of anxiety constitute submitting a new PASRR?	There are many factors that could impact whether or not this situation may constitute a change in status for the individual. When you are unsure whether or not a particular situation constitutes a change in
	<ol> <li>A resident whose intellectual disability as defined under 42 CFR 483.100, or condition related to intellectual disability as defined under 42 CFR 435.1010 was not previously identified and evaluated through PASRR.</li> <li>A resident transferred, admitted, or readmitted to a NF following an inpatient psychiatric stay or equally intensive treatment.</li> </ol>
	Individuals who may not have previously been identified by PASRR to have mental illness, intellectual disability, or a condition related to intellectual disability in the following circumstances:  Note: this is not an exhaustive list:  1. A resident who exhibits behavioral, psychiatric, or mood related symptoms suggesting the presence of a diagnosis of mental illness as defined under 42 CFR 483.100 (where dementia is not the primary diagnosis).
	6. A resident whose condition or treatment is or will be significantly different than described in the resident's most recent PASRR Level II evaluation and determination. (Note that a referral for a possible new Level II PASRR evaluation is required whenever such a disparity is discovered, whether or not associated with a Significant Change in Status Assessment.)
	A resident who indicates a preference (may be communicated verbally or through other forms of communication, including behavior) to leave the facility.
	A resident whose significant change is physical, but whose behavioral, psychiatric, or mood-related symptoms, or cognitive abilities, may influence adjustment to an altered pattern of daily living.



What if the PASRR is denied because of the need of specialized services?	The specialized services in TN are changing and will no longer be exclusively inpatient psychiatric hospitalization or ICF/IID requirements. If a person requires inpatient hospitalization or ICF/IID services, they will need to receive these services prior to NF eligibility. If, after receipt of services, the person would like re-evaluation for NF placement, a new Level I and Level II will be required.
Will the PASRR be denied if the information incomplete?	Maximus will make every effort to obtain complete information prior to issuing a denial. We can hold a pending screen for 14 days (10 business days) before issuing a cancellation—this means we do not have enough information to make a determination and the provider has not submitted or addressed requested documentation. It is important to note that any delay in receiving the information will cause a delay in outcome determination. This is particularly important for preadmission screens. Remember, the person cannot admit to the NF until the Level I (and Level II) are complete.
If the Level II receives a denial, does Maximus assist in locating appropriate placement?	Maximus does not assist in discharge or placement planning, aside from the related identification of PASRR services and supports. For Medicaid recipients, contact the individual's MCO for assistance and resources.
What resources are available for those that aren't on Medicaid when expanded Specialized Services are identified?	Check with individual's payor for guidance.
Will Maximus's tracking replace the 2350?	Maximus's PathTracker system will replace the current PASRR process that occurs in PERLSS.
Who can sign-off on exemptions and/or categoricals? Currently only MDs can sign-off. Will the state continue to keep this process? If so, can it be expanded to include the signature of a Nurse Practitioner or Physician Assistant?	TennCare approves that a Nurse Practitioner or PA can sign, as long as it is within the professional's scope of practice as licensed by the State.
How does the MD/PA/NP sign off on a categorical determination?	Maximus's system will allow the submitter to request the exemption or categorical on the form. You must attach a physician's certification of the need for NF or otherwise related documentation, as requested in the Maximus system.
Does a Nursing Facility have to call in every time when requesting an exemption?	No. As you submit the Level I, you may see questions regarding categoricals and exemptions. You must complete this information accurately to have Maximus's nurses apply a categorical or exemption.
Level of Care	
What is a Level of Care?	Level of Care (LOC) is the assessment of a person's physical functioning. We will use the same criteria and parameters as you currently find on the PAE. The LOC is a required element for everyone who needs a Level II assessment. You will enter the LOC in Maximus's system as part of the Level II process.



	When Medicaid or Medicaid pending is the payer source for the NF upon submission of the PASRR, the LOC submitted through the PASRR process will be used as the PAE for purposes of Medicaid reimbursement. When you put an admit date into Pathtracker, this tells Medicaid the date you want the payment to start. This is also known as the MOPD (Medicaid Only Payer Date).  When anything other than Medicaid/ Medicaid pending is the payer source for the NF upon submission of the PASRR and you determine at a later date that you need Medicaid reimbursement for the stay, you would submit a PAE via PERLSS and enter the MOPD on the approved PAE.
How do I submit a Level of Care?	For hospitals, the LOC will stay in their 'Recent Alerts' grid with 'Submit LOC' link. For nursing facilities, 'Saving' LOC will show up in the 'In Process' grid on the Individual page in 'Saving' status.
Where do I find the PAE Certification form?	You can find the PAE Certification form on the Maximus website under "Tools and Resources." The PAE Certification form is required for the LOC's only.
Who can submit a LOC?	<ul> <li>Licensed physician</li> <li>Nurse practitioner</li> <li>Physician assistant</li> <li>Registered or licensed nurse</li> <li>Social worker</li> <li>Individual with a bachelor's degree in social work, nursing, or other human service (e.g., psychology or sociology)</li> <li>Anyone who has conducted and submitted PASRR screenings prior to 12/1/2016 and who has completed an Maximus sponsored in person or online PASRR training.</li> <li>This person's name and credentials will be required upon submission and will be the responsible party for inaccurate information. Any person with access to Maximus's system will have the ability to data enter the Level I and/or LOC screens. To complete a physician's attestation, the person must be an MD, DO, NP, CNS or PA.</li> </ul>
How will I know if a LOC is needed, and how will I know the status of a LOC once it is submitted?	For hospitals, the LOC will stay in their 'Recent Alerts' grid with 'Submit LOC' link. For nursing facilities, 'Saving' LOC will show up in the 'In Process' grid on the Individual page in 'Saving' status.
When a Level II is halted, is LOC still determined?	No, a LOC determination will not be made when a Level II is halted. If the person wants Medicaid to reimburse for the NF stay, a PAE will need to be submitted via PERLSS.
I was working on the Level of Care (LOC), and the form is locked. Can Maximus unlock the form?	The LOC is not "locked." Before a provider can submit a LOC, the H&P or Physician Orders must be uploaded by the provider or attached by Maximus. Once this is done and the attestation is signed, at the end of the LOC, the referral can be submitted.



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Maximus System		
How do we obtain system access?	Maximus will provide training and assistance on system access and use. You can access the training on the TN PASRR State User Tools page, available here: <a href="https://www.ascendami.com/ami/Providers/YourState/">https://www.ascendami.com/ami/Providers/YourState/</a>	
	TennesseePASRRUserTools.aspx	
What is the website to access Maximus's screening system?	Go to www.ascendami.com to login to submit Level I screens. You do not have to download or install any software to use Maximus's system.	
I registered to be a system administrator. When will I receive my username and password?	Thank you for registering as a system administrator. Look for the access email closer to December 1, 2016. You will not have access to the system until that time.	
Do we have the ability to attach part of the medical record, such as the H&P to the Level I?	Yes. Maximus will allow electronic submission of supporting documentation. This process is more secure and less time consuming than faxing, and it allows us to process screens faster, thus making determinations with as little delay as possible. You may submit each document separately or join them into one file. It is important you include only the identified person's information per document. Including anyone else's information is a HIPAA violation and must be reported.	
Is there a fee to use the Maximus system?	No. As part of our contract with TennCare, Maximus provides use of the portal free to anyone who requires access for PASRR purposes.	
Is there a limit to how many staff members can have access to the Maximus system?	No. Anyone who will be involved in the PASRR process should have access to the Maximus system. We strongly encourage no fewer than 2 users in each facility, although some of the larger facilities may need as many as 10 or more. Each user must have their own login information.	
Will a screen be available to enter family contact information?	As part of the Level I process, Maximus collects information on the person, their legal guardian/designee, and primary care physician. Through the Level II, our assessor may need to reach out to family members for additional information and will compile that information as needed/available.	
Who should be web supervisors?	Maximus does not specify credentials or roles of staff to serve as a web supervisor. We recommend the web supervisor be someone who understands what type of activity a staff member should have in the system and is relatively tech savvy. This person will be responsible for assisting colleagues in registering for system use, logging in, removing, adding, or terminating users as the registered user's status changes, and other general system use questions. We encourage at least 2 web supervisors for each facility.	



How will the Bureau be notified of the outcomes? Will we link the PASRR with our packets now?	The Maximus system will communicate with TennCare in real-time. This means constant communication will occur between the Maximus system and TennCare. There is no need to link the PASRR with your packet, as that information will be readily available electronically.
Will we see end dates if the Level II is approved?	Maximus's system will show outcome timeframes for NF residents through PathTracker. Additionally, each summary of findings will have information about time limited determinations.
Will MCOs continue to have access to members' PASRR?	MCOs can enter new Level I screens and view the screens submitted by their organization. Screens submitted through a different facility or organization are not available for other providers to view. However, TennCare and Maximus have created a process to allow MCOs to have access to all of their members' PASRR information. Each MCO has identified authorized personnel to obtain member PASRR data from Maximus. Please contact the Maximus Helpdesk to obtain more information about this process.
If a person admits to a NF from a different NF (transfers), does the PASRR follow them?	Yes. Through the PathTracker service, the receiving NF can obtain copies of completed PASRR assessments/screens. Additional information and training will be provided on completing this process. It is imperative you maintain the integrity of PathTracker by keeping admissions and discharges updated. You can access the training on the TN PASRR State User Tools page, available here: <a href="https://maximusclinicalservices.com/svcs/tennessee">https://maximusclinicalservices.com/svcs/tennessee</a> .  The new NF cannot admit anyone their facility until the discharging facility
	officially discharges the person in PathTracker.
Case managers at our local hospital send us a paper PASRR, but I submit it online when I receive the referral. Can the Case Manager complete them online?	Yes. Representatives from the hospital can submit Level I screens using Maximus's portal, and, at times, may be the preferred entity to submit the Level I. We encourage that the provider who knows the person best and has the most recent information about them be the entity who submits the Level I. Note: all Level I submission must be completed through the web portal, no paper Level I submissions will be accepted or processed by Maximus.
Will we continue to complete PASRR screens on PERLSS?	No. To submit a Level I screen, you will access the Maximus screening system beginning December 1, 2016.
Are there any Maximus Screening System access limitations?	Users must be registered to access the Maximus Screening System. Also, Maximus supports system functionality on the current or most recent versions of Microsoft Edge, Internet Explorer, and Mozilla Firefox. Ensure your browser is updated. Also, we encourage version 10 or newer of Adobe Acrobat for effective viewing of PDFs. Although you can access the website using alternate browsers or older versions, you will likely experience technical difficulties that will not be present with current technology.



QUESTIONS	ANSWERS
Where can I print a copy of the paper Level I?	The paper version of the form will be available on our website prior to December 1, 2016. We understand that sometimes completing the Level I on paper is a necessary component to process completion. Please note, however, Maximus does not accept paper Level I submissions. Only Level I screens submitted through the electronic system will receive a determination. NFs may not accept a paper submission as Level I completion. Only outcomes issued through the Maximus Screening system will be valid.
Can I see every screen submitted by members of my facility/agency or only those I submit?	You will have access to every screen submitted through your facility. Review the Recent Activity table in the system to locate the person's PASRR record.
All of our medical records are in an EMR. Does Maximus's system allow for direct transmission of the records?	At this time, the Maximus screening system allows for uploading attachments. The attachments must be .doc, .docx, or .pdf formats.
How can I submit a Level I referral for a person who is out of state and admitting to a TN nursing facility?	Enter the current location for persons out of state by choosing "Other" from the current location dropdown and then adding in the free text fields the type of location; Hospital, Home, NF, ALF, etc.
Why doesn't the PASRR outcome appear in my queue?	If your facility is a hospital, the PASRR will drop out of your queue after 15 days. If your facility is a nursing facility, the PASRR remains in your queue. When the printer icon appears, the assessment is complete and you can print the outcome.
Why do I see a duplicate review?	You should not see duplicate reviews. There is a possibility you are seeing the LOC and Level I/II records together in the Recent Activity grid, but those are not duplicate reviews. If you have additional questions, contact the Maximus Help Desk at 833.617.2777.
Where is the communication box when I am talking with the reviewer?	The submitter only has access to the communication box if the reviewer has the review on hold for information. If you submitted a review and find a need to communicate anything to us such as an error or a change, you do not have access to the text. You must call the Help Desk at 833.617.2777.