Providers will continue to submit service requests to the regions using the Emergency Authorization Guidance that is currently in place.

* **Reminder:** When requesting a Hospital Attendant, you **cannot** **bill** for a Residential Service, Special Needs Adjustment, Respite 1, 2, 3, and/or Behavioral Respite on the same day.
* During regular office hours (M-F 8-4:30.), please continue submitting the Emergency Services and Supports Request form to the Regional Plans Review Unit email address to request a Hospital Attendant for up to 7 days at a time.
* After-hour Emergency Service requests will follow the Emergency Notification and Authorization Process, which allows the Provider to submit the After-Hours Emergency Service and Supports Request Form to request emergency services. Each email sent will have an automatic email bounce-back acknowledging receipt.
* When sending the email please include in the subject line “**Expedite Request for (person’s initials).”**
* Complete all sections of the form.
	+ Hospital Attendant is requested in quarter hours units.
	+ Until 6.30.2024 use Service Code **5P311**.
	+ **Starting on and after 7.1.2024** use Service Code **ST-0000**.
	+ Each Hospital Attendant quarter-hour unit is currently $6.33 per quarter hour. **Note:** rates are subject to change.
	+ One (1) hour equals 4 quarter-hour units.
	+ Include a written justification for the hospital attendant as to why the attendant is needed and include how many hours for each day requested.
	+ **IMPORTANT:** Services can only be requested for 7 days at a time.

Regional Plans Review Email Addresses

* East: dd\_etro.plans@tn.gov
* Middle: MTRO.PlansReview@tn.gov
* West: Plans.Service@tn.gov

**Reference Document and Forms**

Location: DIDD Website – Provider Resources>Waiver Information

Section: Emergency Service Requests

* Emergency Notification Process
* Reporting Guidelines for Emergency Notifications and Service Authorizations
* After Hours Emergency Service Request
* Emergency Service and Supports Request Form