

Standard Spend Down Program

1. Who is eligible for the Adult Standard Spend Down Category?

To be eligible for the Standard Spend Down (or SSD) program, you must meet all of the following criteria:

You must be age 21 or older and not pregnant.

AND

You must be a US citizen or legal resident alien.

AND

You must be a Tennessee resident.

AND

You must not be incarcerated.

AND

You must be either aged (65 or older), blind, or disabled, or you must be a caretaker relative of a Medicaid eligible child. To be considered blind or disabled, you must meet standards set by the Social Security Administration (SSA).

AND

You must have a sufficient amount of medical bills that have not been written off by the provider and that are your responsibility. The sum of these bills, when subtracted from your income, must be enough to "spend down" to the state's Medically Needy Income Standard, which is \$241 for a family of 1, \$258 for a family of 2, \$317 for a family of 3, etc.

AND

You must have resources that do not exceed \$2,000 for a family of 1 and \$3,000 for a family of 2, with an additional \$100 added per additional individual in the family.

**Children and pregnant women have a similar eligibility category under Medicaid.*

(Access to insurance does not prevent a person from qualifying)

2. When will the program be open again to applicants?

*The program is scheduled to be open for enrollment on February 21, 2012. A dedicated DHS phone line will be available on Tuesday, February 21, 2012 from 6:00 p.m. to 8:30 p.m. Central Standard Time. The number for that line is **1.866.358.3230**. The phone line will close after approximately 2,500 calls are received.*

3. Why are only 2,500 calls taken during an enrollment period?

We cannot take in more applications at one time than we can process within the “timeliness” standards that CMS requires. Processing applications for this category can take some time because many applicants must go through a disability determination process. That process requires a detailed review of an applicant’s medical records.

4. When and how do I apply?

*New applicants will apply initially over the phone during established open enrollment periods. The first of those periods was October 4, 2010, the second on February 22, 2011, the third on September 12, 2011, and the next is scheduled for February 21, 2012 from 6:00 p.m. to 8:30 p.m. Central Standard Time. The call-in line will be available until approximately 2,500 calls are received. (As stated above, we cannot accept more applications at one time than DHS can process within CMS’s timeliness standards.) The number for this dedicated call center is **1.866.358.3230**. The call-in line is the only way to apply. You cannot apply for this category at your county DHS office.*

Staff persons on the call-in line will collect basic demographic information from callers. Those who are not already on TennCare will be sent a written application to be returned to DHS within 30 days. DHS will process those applications as they come in. Once all the applications from one open enrollment period have been processed, the state will conduct another enrollment period. The public and other stakeholders will be notified in advance before the next open enrollment period.

5. Why do I have to request an application through a call-in line?

The toll-free number system is used to ensure equal access to Tennessee citizens interested in this program. Because only approximately 2,500 applications can be processed per enrollment period, there needs to be a process that is fair to everyone regardless of their location within the state or their ability to travel to a DHS office.

6. Does having access to health insurance prevent me from qualifying?

No.

7. How much coverage will I receive? Will the start date for coverage be three months retroactive to the date of application? If not, what will be the first date of coverage?

Enrollees in the SSD program will be eligible for all TennCare benefits for adults except long-term care (meaning Nursing Facility care and care in a Home and Community Based Services Waiver). If you are a Medicare beneficiary, you will be eligible for TennCare to participate in payment of your Medicare deductibles and coinsurance.

The start date of coverage for the SSD program will be the later of:

- a. The date your call was received by the call-in line; or*
- b. The date spend-down is met (which must be no later than the end of the month of the original call to the call-in line).*

8. How is this program different from the Medically Needy Spend Down Program for pregnant women and children?

The application process is somewhat different, in that pregnant women and children apply at DHS offices, whereas applicants for the SSD program apply through the Call-in Line discussed above. The benefits for all children enrolled in TennCare, including those enrolled in the Medically Needy Spend Down program, exceed benefits that are available for adults, since children are entitled to EPSDT. Otherwise, the SSD program is very much like the Medically Needy Spend Down program for pregnant women and children.