

On Thu, Feb 5, 2026 at 8:29 AM Melanie Keller <[melaniekeller@meritan.org](mailto:melaniekeller@meritan.org)> wrote:

Good morning,

I am including an email below from a provider. I think it does help to clarify the question at hand with licensing. My understanding has been that the professional support services license only covers nursing provided to those in the DDA 1915C waiver. Providers want to be certain that nursing services provided outside of that waiver, even if not billed, are covered under their license. Or should those services (again, in someone's home) be provided by Home Health agencies? Apparently during licensing surveys, the patients outside of the DDA waiver are not being reviewed by surveyors. That also brings up if this is a covered service under the PSS license, that those patients (even if not billed separately for the nursing services) should be included in surveys to ensure quality of services. Again, the rules state .(49) Professional Support Services. Nursing, occupational, physical or speech therapy services provided **to individuals with mental retardation or developmental disabilities pursuant to a contract with the state agency financially responsible for such services**. Note those in the CHOICES waiver are in the waiver due to age and disability, and if they were not living in a CLS home, would be receiving nursing services from a home health agency.

From a provider:

We are currently in the middle of our recredentialing process. As part of that, you know we are being reviewed against MCO credentialing manuals and service definitions that clearly include nursing oversight and skilled nursing as part of Community Living Supports (CLS) under ECF CHOICES and CHOICES. To date, the license issue has not been a problem for recredentialing for us.

However the ambiguity creates real risk for providers if licensure expectations are being interpreted differently across agencies without clear, written guidance. DDA providers across the state have delivered and overseen nursing supports within CLS for many years and have historically been authorized and paid to do so. If that practice is now being questioned, it needs to be addressed clearly and consistently, not discovered during audits or recredentialing.

Since this issue came up, I've been trying to understand how nursing services are supposed to work under ECF CHOICES and CHOICES from both a TennCare and DDA standpoint, and how that lines up with what providers are being told to do through MCO manuals and credentialing standards.

**My concern is straightforward: whether providers will be able to continue delivering and billing for nursing services within ECF CHOICES and CHOICES CLS.** I have spoken directly with David Taylor, Director of Nursing at DDA. While he shared his perspective, he indicated that there is uncertainty about whether current licensure is considered fully adequate for these services. I have also exchanged emails with Katie Evans at TennCare, who provided the BlueCare credentialing manual (cited below) but did not give any clear guidance and leaves this issue in a gray area. In addition, when I contacted DDA Licensure staff directly, I was referred to the DDA Credentialing division, which further highlights that there is no single, clear answer being applied across agencies. I have not talked to anyone in credentialing further about it yet. I doubt they would understand what I would even be asking.

At the same time, the managed care manuals are clear about expectations. For example, the BlueCare Community Living Supports Provider Manual (effective January 1, 2026) states that CLS services may include nursing oversight and skilled nursing for routine, **ongoing health care needs such as blood sugar monitoring, suctioning, tube feeding, bowel care, and similar supports.** The manual also states that DDA approval and a Department of Health PSS/PSSL license are required for skilled nursing services within CHOICES and ECF CLS.

**Taken together, providers are being told that if they are credentialed to provide CLS, approved by DDA, and hold a PSS/PSSL license, they are expected to ensure and oversee nursing services within CLS—separate from billing Home Health Nursing. But the licensure authority to do this has not been clearly or consistently confirmed in writing.**

That leads to the key question providers are facing right now during credentialing and recredentialing:

**Does Tennessee licensure law require an ECF CHOICES or CHOICES provider to also hold a Home Health license in order to deliver or oversee nursing services within CLS, or can providers use their own licensed nurses under existing DDA approval and PSS/PSSL licensure, as we historically have done.**