

## **Notice of Change in TennCare II Demonstration: Amendment 32**

The Commissioner of the Tennessee Department of Finance & Administration is providing official notification of intent to file an amendment to the TennCare II Demonstration. This amendment, which will be known as “Amendment 32,” is being filed with the Centers for Medicare & Medicaid Services (CMS), with a proposed effective date of January 1, 2018.

### Description of Amendment and Affected Populations

In Amendment 32, Tennessee proposes to establish a two-year pilot project, whereby certain TennCare enrollees will receive a medication therapy management (MTM) benefit in addition to the traditional TennCare benefits package. MTM is a clinical service provided by licensed pharmacists, the aim of which is to optimize drug therapy and improve therapeutic outcomes for patients. MTM services include medication therapy reviews, pharmacotherapy consults, monitoring efficacy and safety of medication therapy, and other clinical services. Amendment 32 proposes to make MTM available to TennCare enrollees affected by the State’s patient-centered medical home (PCMH) and health home programs.

In January 2017, TennCare launched a PCMH program. PCMH is a comprehensive care delivery model designed to improve the quality of primary care services for TennCare members, the capabilities and practice standards of primary care providers, and the overall value of health care delivered to TennCare enrollees. Concurrently, TennCare also implemented a health home program targeted specifically at TennCare enrollees with serious and persistent mental health conditions. Health home providers work with TennCare enrollees with significant behavioral health needs to better coordinate the delivery of behavioral health care, physical health care, and other types of social supports. Together, Tennessee’s PCMH and health home programs affect approximately 300,000 enrollees, and represent a significant commitment to improving the quality of primary care provided to TennCare members.

Amendment 32 proposes to make MTM services available to TennCare members enrolled in the State’s health home program, and to members whose primary care providers are participants in the state’s PCMH program. Under the proposed program design, health home and PCMH providers may enter into collaborative practice agreements with qualified pharmacists to provide MTM services to TennCare members with high levels of clinical risk who may benefit from these services. MTM will engage pharmacists as part of the extended care team for these enrollees and increase collaboration between pharmacists and primary care providers. The State believes that pharmacist-led MTM services will enhance the effectiveness of the PCMH and health home programs, improve health outcomes and quality of care, and could potentially drive cost savings over time.

The MTM service would be available for a two-year pilot period, from January 1, 2018, through December 31, 2019. At the end of this pilot period, the State will evaluate the effectiveness of the initiative to inform future decision-making about its continuation, discontinuation, and/or expansion to additional populations.

#### Expected Impact on Enrollment and Expenditures

Amendment 32 will not result in any increase or decrease in enrollment in the TennCare demonstration.

Implementation of Amendment 32 is expected to result in an increase in annual aggregate expenditures of approximately \$5.1 million, which will not materially alter the State's budget neutrality demonstration.

#### Hypothesis and Evaluation Parameters

Amendment 32 proposes to implement a two-year pilot program that will make medication therapy management (MTM) services available to certain TennCare enrollees. The hypothesis underlying the pilot program is that MTM services will improve health outcomes for affected members and drive cost savings through better management of chronic diseases and avoidance of high-cost medical utilization. The State will identify appropriate clinical and financial measures to evaluate the effectiveness of the MTM pilot based on this hypothesis.

#### Waiver and Expenditure Authorities Requested

All waiver and expenditure authorities currently approved for the TennCare demonstration will continue to be in effect. To implement Amendment 32, the State requests to add the following waiver of Title XIX requirements to the TennCare demonstration pursuant to Section 1115(a)(1) of the Social Security Act.

|    |                                         |                                                |
|----|-----------------------------------------|------------------------------------------------|
| #) | Amount, Duration, and Scope of Services | Section 1902(a)(10)(B)<br>42 CFR 440 Subpart B |
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To enable the State to provide medication therapy management services only to enrollees affected by the State's patient-centered medical home and health home programs.

In addition, the State asks CMS to add the following expenditure authority to the TennCare demonstration pursuant to Section 1115(a)(2) of the Social Security Act.

- #) Medication Therapy Management. For expenditures for medication therapy management to individuals enrolled in the State's patient-centered medical home and health home programs. This authority will expire December 31, 2019, unless amended based on the requirements of paragraph 7 (*Amendment Process*).

### Public Notice Process

TennCare has taken a variety of steps to ensure that members of the public are aware of Amendment 32. These measures include the development and maintenance of this webpage, as well as notices to be published in the newspapers of widest circulation in Tennessee cities with 50,000 or more residents. TennCare has also addressed Amendment 32 in communications with a variety of stakeholders, including the Tennessee General Assembly and a Technical Advisory Group (TAG) consisting of clinical experts and other stakeholders. TennCare notified its Facebook friends and Twitter followers of Amendment 32 on July 27, 2017.

### Public Input Process

The development of Amendment 32 has been informed by a variety of stakeholder engagement and public input processes. Amendment 32 results in part from Public Chapter No. 363 directing TennCare to implement an MTM pilot program. This public chapter was passed by the Tennessee General Assembly on May 4, 2017, and signed by Governor Bill Haslam on May 11, 2017.

The operational design of the state's proposed MTM program has been informed by a TAG consisting of clinical experts and other stakeholders. This TAG was organized by the State to provide input into the design of the MTM program, and to date has held meetings on November 7, 2016; February 22, 2017; and June 14, 2017.

In addition to input events already completed, TennCare continues to seek feedback on Amendment 32 prior to its submission to CMS. Members of the public are invited to offer comments regarding Amendment 32 from July 28, 2017, through September 1, 2017.

Members of the public who wish to comment on the proposed demonstration amendment may do so through either of the following options:

- Comments may be mailed to Dr. Wendy Long, Director, Bureau of TennCare, 310 Great Circle Road, Nashville, TN 37243.
- Comments may be sent by email to [public.notice.tennCare@tn.gov](mailto:public.notice.tennCare@tn.gov).

Individuals who wish to share their thoughts in person may attend either of the following events:

- A public hearing on August 11, 2017, at 9:00 a.m. CT in Conference Room 1 East A of the TennCare Building, 310 Great Circle Road in Nashville.
- A public hearing on August 14, 2017, at 2:00 p.m. CT in the PEARL Room on the ground floor of the Tennessee Department of Labor and Workforce Development, 220 French Landing Drive in Nashville.

Telephonic access to the August 11 hearing (in the TennCare Building) is available for those unable to attend in person. Individuals interested in this option must register by contacting Jonathan Reeve—no later than August 10—at (615) 507-6449 or by email at [jonathan.reeve@tn.gov](mailto:jonathan.reeve@tn.gov). Individuals with disabilities or individuals with limited English proficiency who wish to participate in one or both hearings and who may require language or communication assistance to do so should contact Talley Olson of TennCare's Office of Civil Rights Compliance by phone at (855) 857-1673 or by email at [HCFA.fairtreatment@tn.gov](mailto:HCFA.fairtreatment@tn.gov) prior to the date of the hearing.

TennCare always appreciates input. In order to be considered for the final draft of Amendment 32, feedback must be received no later than Friday, September 1, 2017. Individuals wishing to view comments submitted by members of the public may submit their requests to the same physical address and/or email address at which comments are being accepted.

### Draft of Amendment 32

A draft of TennCare's proposed demonstration amendment is located at <http://tn.gov/assets/entities/tenncare/attachments/MTMAmendment.pdf>. Copies of the draft amendment are also available in each county office of the Tennessee Department of Health. Once comments received during the public input period have been reviewed and considered, a final draft of the amendment will be prepared. The final draft will be submitted to CMS and will then be made available through this webpage.

### TennCare Page on CMS Web Site

As the federal agency with oversight authority over all Medicaid programs, CMS offers its own online resources regarding the TennCare Demonstration. Interested parties may view these materials at

[https://www.medicaid.gov/medicaid/section-1115-demo/demonstration-and-waiver-list/waivers\\_faceted.html](https://www.medicaid.gov/medicaid/section-1115-demo/demonstration-and-waiver-list/waivers_faceted.html).