

Long-Term Services and Supports (LTSS) Assistors' Guide

This guide provides clear and helpful information on key aspects of Long-Term Services and Supports (LTSS). Click on the titles below to access each section:

- [Programs](#)
- [TennCare Access Portal](#)
- [TennCare Renewals](#)
- [Appendix](#)

Use this guide to assist individuals who are interested in signing up for LTSS or want to learn more about these programs.



Information provided in this guide is for general guidance only and should be used in conjunction with the authority governing the programs. Information provided here may change without notice.

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Programs

CHOICES

Tennessee's CHOICES program provides older adults (age 65 and older) & adults with physical disabilities (age 21 and older) who are eligible for needed long-term services and supports in the home/community setting or in a nursing facility.

Employment and Community First (ECF) CHOICES

Employment and Community First CHOICES is for people of all ages who have an intellectual or developmental disability (I/DD). This includes people who have significant disabilities.

1915(c) HCBS Waivers

Tennessee's 1915(c) waiver programs provide Home and Community Based Services (HCBS) for people with intellectual disabilities as an alternative to institutional care, which includes care in an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID). Tennessee has three 1915(c) HCBS waivers: Comprehensive Aggregate Cap (CAC) waiver, Self-Determination waiver, and Statewide (SW) waiver. These programs are closed to new enrollment.

Katie Beckett

Tennessee's Katie Beckett program is for children under the age of 18 with significant disabilities or complex medical needs. This program is for children who are not Medicaid eligible because of their parent's income or assets.

Eligibility Requirements

Applicants must meet financial and non-financial eligibility requirements to be approved for long-term services and supports. Below you will find what criteria an individual must meet for each program.

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CHOICES

Non-Financial Eligibility	• Individuals must meet medical (Level of Care) eligibility; this means you need help with daily living activities. The eligibility is assessed through the Pre Admission Evaluation (PAE). • Individuals must be 65 years or older, unless determined disabled by the SSA or TennCare. • Individuals must be U.S. Citizens, U.S. Nationals, or Eligible Immigrants. • Individuals must have a valid Social Security Number (SSN) or proof of application, unless exempted. • Individuals must be residents of Tennessee. Those placed out of state in an institution by a Tennessee agency are still considered residents.
Financial Eligibility	• Gross countable income must not exceed 300% of the SSI Federal Benefit Rate (SSI-FBR) (\$2,982 for 2026 and updated annually) • Countable resources must not exceed \$2,000.¹ • Transferred asset value within the last 60 months is considered for eligibility. • To qualify for Group 3² and remain in Group 3, an individual must be receiving SSI (Supplemental Security Income) payments or meet the financial eligibility rules above. <i>(the number of slots available for Group 3 is based on funding).</i>

¹ [Specific policies about countable resources and other financial eligibility topics](#)

² CHOICES Group 3 is for adults (age 21 and older) with a disability and seniors (age 65 and older) who don't qualify for nursing home care but still need care to delay or prevent the need for nursing home care.

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How to Apply:	Apply for Financial Eligibility: • Apply for TennCare using the self-service portal called TennCare Connect. Create an account, apply, check status, report changes, and more. • Applications can also be filed via phone, fax, mail, or dropped off in person at any DHS office. Apply For Medical Eligibility: • Current TennCare Members can contact their MCO for more information on how to apply for CHOICES: • BlueCare: 1-888-747-8955 • United Healthcare Community Plan: 1-800-690-1606 • Wellpoint: 1-833-731-2153 • If the applicant does not have TennCare, and are interested in CHOICES, contact the local Area Agency on Aging and Disability (AAAD) for free at 1-866-836-6678.
Keeping Your Coverage:	• Each year, TennCare checks to see if all members still qualify for coverage. This is required by state and federal law. To keep your coverage, go to the TennCare Renewals section below.
Additional Resources:	• Go to the CHOICES page for additional information including medical level of care (LOC). • The CHOICES Member Benefit Table offers a detailed overview of the benefits available within the CHOICES program. • The CHOICES Brochure provides a concise summary of the CHOICES program.

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Employment and Community First CHOICES

Non-Financial Eligibility	• Individuals must meet medical (Level of Care) eligibility; this means you need help with daily living activities. The eligibility is assessed through the Pre Admission Evaluation (PAE). • There is no age requirement. • Individuals must be U.S. Citizens, U.S. Nationals, or Eligible Immigrants. • Individuals must have a valid Social Security Number (SSN) or proof of application, unless exempted. • Individuals must be residents of Tennessee. Those placed out of state in an institution by a Tennessee agency are still considered residents.
Financial Eligibility	• Gross countable income must not exceed 300% of the SSI Federal Benefit Rate (SSI-FBR) (\$2,982 for 2026 and updated annually) OR • Be working and income must not be over 250% of the Federal Poverty Limit (FPL) and income must be less than the SSI FBR after the applicant's earned income is disregarded. For 2026, 250% of FPL is \$3,325/month for a household of 1. • Countable resources must not exceed \$2,000. • Parent to child deeming rules apply if under 18 (this means the parental income may be considered).

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How to Apply	Apply for Financial Eligibility: • Apply for TennCare using the self-service portal called TennCare Connect. Create an account, apply, check status, report changes, and more. • Applications can also be filed via phone, fax, mail, or dropped off in person at any DHS office. Apply For Medical Eligibility: • Current TennCare Members can contact their MCO for more information on how to apply for Employment and Community First CHOICES: • BlueCare: 1-888-747-8955 • United Healthcare Community Plan: 1-800-690-1606 • Wellpoint: 1-833-731-2153 • If the applicant does not have TennCare, and are interested in ECF CHOICES, call the Department of Disability and Aging (DDA) for free: • West Tennessee Regional Office 1-866-372-5709 • Middle Tennessee Regional office 1-800-654-4839 • East Tennessee Regional Office 1-888-531-9876
Keeping Your Coverage:	• Each year, TennCare checks to see if all members still qualify for coverage. This is required by state and federal law. To keep your coverage, go to the TennCare Renewals section below.
Additional Resources	• Go to the ECF CHOICES page for additional information including medical level of care (LOC). • The ECF CHOICES Application Items for Financial Eligibility outlines the documents required to complete the financial eligibility process for the ECF CHOICES program. • The ECF CHOICES Member Benefit Table offers a detailed overview of the benefits available within the ECF CHOICES program. • The ECF CHOICES Brochure provides a concise summary of the ECF CHOICES program.

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1915(c) HCBS Waivers

Non-Financial Eligibility	• These waivers are closed to new enrollment as of July 1, 2016, with limited exceptions. • To enroll in the SW waiver, an applicant must meet the following criteria: • Meet TennCare ICF/IID level of care criteria and financial eligibility criteria and have a Pre-Admission Evaluation (PAE) approved by TennCare; • Have been assessed and found to have an intellectual disability manifested before eighteen (18) years of age, as specified in Tennessee State law; and • Are participating in the State's Money Follows the Person (MFP) program, transitioning from an ICF/IID following a stay of at least ninety (90) days, and but for the availability of Medical Residential services through the SW waiver, would require placement in an ICF/IID.
Financial Eligibility	• Gross countable income must not exceed 300% of the SSI Federal Benefit Rate (SSI-FBR) (\$2,982 for 2026 and updated annually) • Countable resources must not exceed \$2,000.
How to Apply	• If you meet these criteria and want to enroll in the SW waiver, contact your MCO: • BlueCare: 1-888-747-8955 • United Healthcare Community Plan: 1-800-690-1606 • Wellpoint: 1-833-731-2153
Keeping Your Coverage:	• Each year, TennCare checks to see if all members still qualify for coverage. This is required by state and federal law. To keep your coverage, go to the TennCare Renewals section below.
Additional Resources	• Go to the LTSS 1915(c) HCBS Waivers page for additional information including medical level of care (LOC). • How do I access more information about Disability and Aging? Go to Disability and Aging.

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Katie Beckett

Non-Financial Eligibility	• Individuals must meet medical (Level of Care) eligibility; this means you need help with daily living activities. The eligibility is assessed through the Pre Admission Evaluation (PAE). • Individuals must be under 18 years old. • Individuals must be U.S. Citizens, U.S. Nationals, or Eligible Immigrants. • Individuals must have a valid Social Security Number (SSN) or proof of application, unless exempted. • Individuals must be residents of Tennessee. Those placed out of state in an institution by a Tennessee agency are still considered residents. • Individuals cannot qualify for any other Medicaid category.
Financial Eligibility	• Child's income must not exceed 300% of the SSI-FBR (\$2,982 for 2026 and updated annual). • Child's resources must not exceed \$2,000. • Parent to child deeming of income and resources does not apply (this means the parental income will not be considered). • Parental income will be considered to calculate premiums.
How to Apply	Apply for Financial Eligibility: • Apply for TennCare using the self-service portal called TennCare Connect. Create an account, apply, check status, report changes, and more. Apply for Medical Eligibility: • To apply for Tennessee's Katie Beckett Program, follow the steps below: • The application process starts by creating a TennCare Connect account. • Next, fill out the self-referral for Katie Beckett. IMPORTANT: For assistance or to apply without a computer, contact the DDA regional offices in your region: • West Tennessee Regional Office 1-866-372-5709 • Middle Tennessee Regional office 1-800-654-4839 • East Tennessee Regional Office 1-888-531-9876

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Keeping Your Coverage:	Each year, TennCare checks to see if all members still qualify for coverage. This is required by state and federal law. To keep your coverage, go to the TennCare Renewals section below.
Additional Resources	- Go to the Katie Beckett page for additional information including medical level of care (LOC). - The Katie Beckett Application Process Flow shows you how Katie Beckett applications are processed after they are submitted. - The Katie Beckett Application Items outlines the documents required to complete the financial eligibility process. - The Katie Beckett Member Benefit Table offers a detailed overview of the benefits available within the Katie Beckett program. - The Katie Beckett Brochure provides a concise summary of the Katie Beckett program.

General Questions or Assistance:

- Call TennCare Connect: 1-855-259-0701.
- Tennessee Relay Service (TNRS) for hearing/speech impaired: 1-800-848-0298.
- General Questions? Contact the LTSS Help Desk at 1-877-224-0219.
- Does the applicant or member have questions or concerns about their care? Or do they need free legal advocacy services for support? Contact [Disability Rights TN](#).
- What if the applicant does not qualify for any of these programs and still need help? [Tennessee Disability Pathfinder](#) helps people find and access resources available to meet their needs.

TennCare Access Portal

The [TennCare Access Portal](#) is the easiest way for LTSS Assistors to access TennCare, CoverKids, and Medicare Savings Programs. It includes a view into an applicant or member's TennCare Connect account, the online tool designed for residents of Tennessee to apply for and manage their healthcare coverage seamlessly. If an LTSS Assistor needs access to the TennCare Access Portal, go to the "Create an Account" section below.

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Key Features:

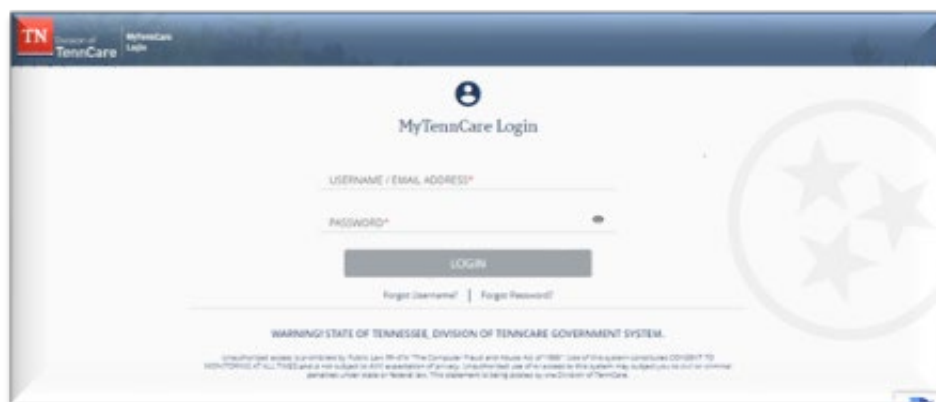
- **Apply For Coverage:** The TennCare Access Portal enables LTSS Assistors to assist applicants with their initial applications.
- **Manage Coverage:** LTSS Assistors can submit case changes, questions for review, and renewals on behalf of members they assist using the View TennCare Connect Account feature in the [TennCare Access Portal](#). This feature also allows LTSS Assistors to view members' coverage information and letters.
- **Upload Documents:** LTSS Assistors can upload documents on behalf of members using the View TennCare Connect Account feature. Alternatively, members can upload documents through TennCare Connect online or mobile app.

Create an Account:

- To create a [TennCare Access Portal account](#), the LTSS Assistor must contact their TennCare Access Organization Administrator to request access on their behalf. As part of the process, the LTSS Assistor will be required to complete training through the Learning Management System (LMS). Once the account has been created, the LTSS Assistor will receive an email notification with instructions and a link to set up their MyTennCare Login account password and preferences.

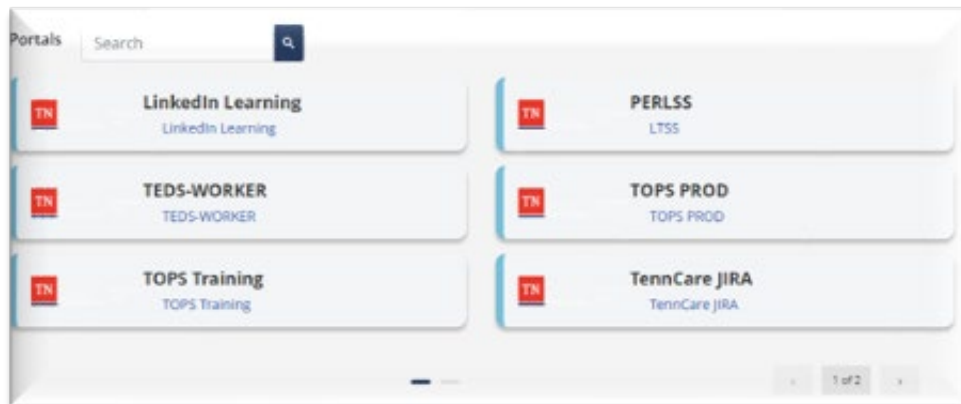
LTSS Assistor's MyTennCare Login Information:

An LTSS Assistor will begin by logging into MyTennCare Login.



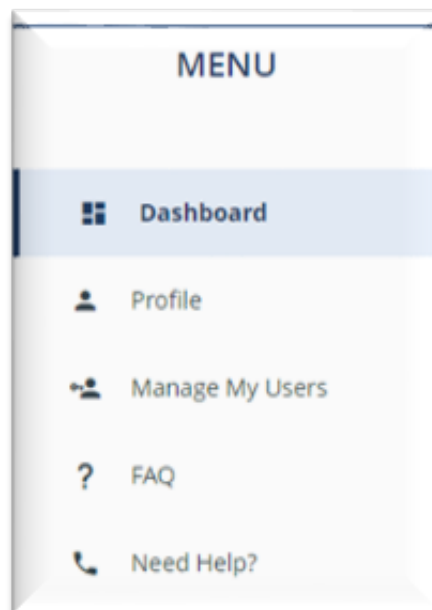
Once logged in, the LTSS Assistor will be directed to the dashboard. If they have access to multiple TennCare Portals, they will see a tile for each portal.

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On the left side of the screen, they will find various navigation options. Using this navigation, LTSS Assistors can:

- Review their profile
- Make updates to their account
- Access FAQs about MyTennCare Login
- Find help resources



Organizational Admin:

An Organization Admin is an individual at the organization who manages LTSS Assistor access to certain TennCare portals:

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- Submit and approve access requests to various TennCare portals (TennCare Access Portal, PERLSS).
- Make updates to LTSS Assistor access as needed.
- Request TennCare Access training for staff.

If you don't know who your organization's TennCare Access Org Admin is, please email Partner Support at PartnerSupport.TennCare@tn.gov for assistance.

Need Help?

For questions about the TennCare Access Portal, contact Partner Support at PartnerSupport.TennCare@tn.gov.

- For PERLSS access questions, contact LTSS.SystemSupport@tn.gov.
- For questions about the LTSS programs, contact LTC.Operations@tn.gov.
- For questions about Medical Appeals, contact TMM.Appeals@tn.gov.

Additional Resources: For assistance with navigating the TennCare Access Portal, including access to TennCare Access Portal Training documents, please contact the TennCare Partner Support Team at PartnerSupport.TennCare@tn.gov.

TennCare Renewals

What You Need to Know:

Each year, TennCare checks to see if all members still qualify for coverage. This includes TennCare, CoverKids, Medicare Savings Plan, or Katie Beckett and is required by state and federal law.

What You as an LTSS Assistor Need to Do:

1. Update the Contact Information

- Ensure TennCare has a member's correct contact information.
- Update any information through TennCare Connect, TennCare Access or call 1-855-259-0701.
- Assist members in creating their TennCare Connect account and help them link their account to their case.
- Encourage members to opt in for text and email alerts.

2. Find the Renewal Date

- A member must renew every year. Please note that the renewal date occurs

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once a year.

- Keep in mind: Dual eligible members who have TennCare Medicaid and Medicare Savings Program coverage types, may have different renewal for each program.
- Use TennCare Connect, TennCare Access, or call 1-855-259-0701 to see when a member is due for renewal.
 - i. Check the Member Assistance Dashboard in TennCare Access to see when it's time for members on your caseload to renew.
 - ii. When it's time for a TennCare member to renew their coverage, their TennCare Connect dashboard will show a **"Time to Renew"** notification.
 - iii. LTSS Assistors with TennCare Access who have access to TennCare Connect can assist the member in completing their renewal process online. Note: this does not include hospitals or the Tennessee Department of Health
- Visit tn.gov/tcrenew for online renewal instructions.

3. Respond to TennCare Mail

- Open and respond to all mail from TennCare.
- Complete all steps by the renewal date to maintain coverage.

How to Complete the Renewal Process: Members can renew their coverage in various ways:

- **Online:** <https://tenncareconnect.tn.gov/> or use the TennCare Connect App.
- **By Phone:** Call 1-855-259-0701.
- **In Person:** At a Department of Human Services (DHS) kiosk or submit documents to TennCare.
- **Mail:** Send the signed renewal packet to the address provided in the packet.
- **Fax:** Fax completed packet to 1-855-315-0669.

Keep In Mind: LTSS Assistors can complete the renewal process on a member's behalf in the TennCare Access Portal.

Need Help with the Renewal Packet?

- Call TennCare Connect at 1-855-259-0701 for assistance.
- Contact your local DHS office; find one at the [Office Locator – Family Assistance](#) webpage or call 1-866-311-4287.
- Call your local Area Agency on Aging and Disability (AAAD) for in-home support at 1-866-

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836-6678.

Additional Information:

- Visit the [TennCare Renewals page](#) for more details.
- Prepare for renewals by visiting the [Preparing for Renewals page](#).
- [You can also check out TennCare's YouTube Channel for step-by-step guides.](#)

Appendix Programs

CHOICES

- [CHOICES Member Benefit Table](#)
- [CHOICES Brochure](#)

Employment and Community First CHOICES

- [ECF CHOICES Application Items for Financial Eligibility](#)
- [ECF CHOICES Member Benefit Table](#)
- [ECF CHOICES Brochure](#)

1915(c) HCBS Waivers

- [LTSS 1915\(c\) HCBS Waivers page](#)
- [Disability and Aging page](#)
- [Disability Rights TN page](#)

Katie Beckett

- [Katie Beckett Application Process Flow](#)
- [Katie Beckett Application Items](#)
- [Katie Beckett Member Benefit Table](#)
- [Katie Beckett Brochure](#)

TennCare Access Portal

- Go to the [TennCare Access Portal Training Documents page](#) to access a list of the resource guides available to assist partners with using TennCare Access. These guides can be sent to you upon request. Please contact TennCare's Partner Support

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Unit at PartnerSupport.TennCare@tn.gov to request the latest version of the guide you need.

- If you need to schedule training for access to the TennCare Access Portal, please contact TennCare's Partner Support Unit at PartnerSupport.TennCare@tn.gov.

TennCare Renewals

- [TennCare Connect](#)
- [Renewal Packet Instructions](#)
- [Renewal Packet: Sample \(English\)](#)
- [Renewal Packet: Sample \(Espanol\)](#)
- [YouTube: TennCare Connect Instructional](#)
- [YouTube: TennCare Renewal Tips: TennCare Connect](#)
 - [ASL](#)
 - [Espanol](#)
- [YouTube: TennCare Renewal Tips: Paper Renewal Packet](#)
 - [ASL](#)
 - [Espanol](#)