DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services 7500 Security Boulevard, Mail Stop S2-01-16 Baltimore, MD 21244-1850



Children and Adults Health Programs Group

August 8, 2023

Stephen Smith Director Division of TennCare 310 Great Circle Road Nashville, TN 37243

Dear Mr. Smith:

This letter is in response to Tennessee's request, dated July 24, 2023, for a waiver under section 1902(e)(14)(A) of the Social Security Act (the Act), that will protect beneficiaries in addressing the challenges the state faces as part of a transition to routine operations upon the expiration of the Medicaid continuous enrollment condition. Section 1902(e)(14)(A) allows for waivers "as are necessary to ensure that states establish income and eligibility determination systems that protect beneficiaries." Such waivers are time-limited and are meant to promote enrollment and retention of eligible individuals by easing the administrative burden states may experience in light of systems limitations and challenges.

Tennessee has requested that the Centers for Medicare & Medicaid Services (CMS) provide authority under section 1902(e)(14)(A) of the Act to temporarily reinstate eligibility effective on the individual's prior termination date for individuals who were disenrolled based on a procedural reason and are subsequently redetermined eligible for Medicaid during the state's reconsideration period. The state has expressed the need for this authority in order to address systems and operational issues related to the extraordinarily high volume of renewals and other eligibility and enrollment actions that need to be conducted during the unwinding period. Specifically, the state cited concerns that without this waiver the state may face significant delays in renewal processing and unmanageable workloads given limited staff capacity. Adopting this strategy will help the state reduce gaps in coverage for eligible beneficiaries.

Under Section 1902(e)(14)(A) of the Act, your request to temporarily reinstate eligibility effective on the individual's prior termination date for individuals who were disenrolled based on a procedural reason and are subsequently redetermined eligible for Medicaid during the state's reconsideration period is approved, as described and subject to the conditions below.

Reinstate Eligibility Effective on the Individual's Prior Termination Date for Individuals Disenrolled Based on a Procedural Reason who are Subsequently Redetermined Eligible for Medicaid During a 90-day Reconsideration Period (Reinstate Eligibility Back to Termination Date During Reconsideration Period):

The authority provided in accordance with this letter will enable the state, during the period of time specified below, to temporarily reinstate eligibility effective on the individual's prior date of termination if an individual: (1) was disenrolled on the basis of a procedural reason; and (2) was redetermined eligible during the state's reconsideration period, consistent with §§ 435.916(a)(3)(iii)

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and 435.916(b). This authority applies to both Medicaid (MAGI and non-MAGI eligibility groups) and CHIP populations. For any individual who is reinstated under this authority, the state will base the individual's next eligibility period on the month that the renewal form was returned.

The authority provided in this letter is effective April 1, 2023, and will remain effective until 17 months after the end of the continuous enrollment condition (*i.e.*, August 31, 2024).

The authority provided in this letter is subject to CMS receiving your written acknowledgement of this approval and acceptance of this new authority and the terms described herein within 30 days of the date of this letter.

We look forward to our continuing work together as part of a transition to routine operations. If you have questions regarding this award, please contact Joe Weissfeld and Jessika Douglas in the Division of Enrollment Policy and Operations, at josef.weissfeld@cms.hhs.gov and jessika.douglas@cms.hhs.gov.

Sincerely,

Sarah deLone, Director,

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