Notice of Change in TennCare II Demonstration: Amendment 37

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 37,” is being filed with the Centers for Medicare & Medicaid Services (CMS). Amendment 37 will be submitted with the request that it become effective on January 1, 2019.

Description of Amendment and Affected Populations

The primary purpose of Amendment 37 is to introduce changes to Employment and Community First CHOICES, TennCare’s managed long-term services and supports program for individuals with intellectual and developmental disabilities. Other items proposed in Amendment 37 include a change in the populations assigned to the TennCare Select health plan, and a technical correction to one of the attachments of the TennCare Demonstration.

I. Changes to Employment and Community First CHOICES Program

TennCare is an integrated managed care program that provides medical and behavioral health benefits to approximately 1.4 million Tennesseans. Since 2010, TennCare has also provided managed long-term services and supports (MLTSS) to eligible older adults and adults with physical disabilities in the CHOICES program, and beginning in July 2016, to individuals with intellectual and developmental disabilities in the Employment and Community First (ECF) CHOICES program.

In ECF CHOICES, TennCare’s newer MLTSS program for individuals with intellectual and developmental disabilities, the proposed changes entail the establishment of two new benefits and two new benefit groups in which these benefits will be available.

**Intensive Behavioral Supportive Home Care** is a new benefit targeted to providing intensive in-home, family-centered behavior supports, behavior-focused supportive home care, caregiver training and support, combined with crisis intervention and stabilization assistance and in-home behavioral respite when needed for a relatively small group of children (under age 21) who live with their family and have intellectual and/or developmental disabilities and severe co-occurring behavioral health and/or psychiatric conditions that place the child or others at significant risk of harm and threaten the sustainability of the family living arrangement. This benefit is targeted at children at significant risk of placement outside the home (e.g., State custody, hospitalization, residential treatment, incarceration).

**Intensive Behavioral Community Transition and Stabilization Services** is a new benefit targeted primarily to providing short-term intensive community-based behavioral-focused transition and stabilization services and supports to assist adults age 18 years and older with intellectual and/or developmental disabilities and severe behavioral and/or psychiatric conditions who are transitioning out of a highly
structured and supervised environment to achieve and maintain stable, integrated lives in their communities.

In addition to these two new benefits, Amendment 37 also includes a number of other adjustments to ECF CHOICES based on learnings from the first two years of the program’s implementation. The other changes to the ECF CHOICES program proposed in Amendment 37 are:

- Modifying the Expenditure Caps for the existing ECF CHOICES Groups 5 and 6. These modifications will give the State additional flexibility to target services based on a person’s identified needs and will enhance access to Supported Employment and/or Individual Employment Support benefits.
- Expanding the existing exception for persons who are transitioning into ECF CHOICES Group 6 from one of the State’s 1915(c) waiver programs and who are “at risk” of institutionalization to also apply to persons who are transitioning into ECF CHOICES from an Intermediate Care Facility for Individuals with Intellectual Disabilities.
- Clarifying that a person who meets the nursing facility level of care criteria may be enrolled in ECF CHOICES Group 5 so long as the person’s needs can be safely met in Group 5.
- Modifications and clarifications to certain ECF CHOICES service definitions.

II. Change in Populations Assigned to TennCare Select Health Plan

TennCare Select is a prepaid inpatient health plan (PIHP) operating in all areas of the state and administering the same package of covered benefits as TennCare’s managed care organizations (MCOs). TennCare Select enrolls the TennCare Medicaid and TennCare Standard populations specified in Special Term and Condition 37 of the TennCare II Demonstration. One of the populations included in TennCare Select is children who are receiving Supplemental Security Income (SSI).

The State proposes to change its approach to new enrollment of children receiving SSI. Rather than being automatically assigned to TennCare Select upon their initial enrollment, these enrollees will be presented with the same choice of managed care plans as virtually all other TennCare members when they enroll in TennCare. This change will benefit these enrollees by engaging them more actively in choosing their managed care plan upon their initial enrollment in TennCare, rather than passively enrolling them in a pre-selected plan. Children receiving SSI who are already enrolled in TennCare Select will remain in that plan unless they choose to disenroll from TennCare Select and enroll in another managed care plan.

III. Technical Correction to Attachment B of the TennCare Demonstration

In addition to the changes to the Employment and Community First CHOICES program and TennCare Select described above, the State is requesting a technical change to Attachment B (“Limitations on Home Health Services”) of the TennCare Demonstration. This technical change will update the language of Attachment B to reflect a change to the State’s reimbursement methodology for nursing facility
providers that was implemented on July 1, 2018. Specifically, any references to “Level 2 skilled nursing care” will be eliminated fromAttachment B to reflect the fact that the State’s reimbursement methodology no longer distinguishes between “Level 1” (intermediate care) and “Level 2” (skilled nursing care).

The State is requesting that Amendment 37 become effective on January 1, 2019.

**Expected Impact on Enrollment and Expenditures**

Amendment 37 will likely result in a slight increase in enrollment in the TennCare demonstration. This is because a person who qualifies for and receives Home and Community Based Services (HCBS) may qualify in one or more of the demonstration eligibility categories approved under the demonstration. Persons enrolled into ECF CHOICES Groups 7 or 8 could be SSI-eligible, but if not, could qualify not just for HCBS, but also for Medicaid by virtue of enrolling into ECF CHOICES.

Implementation of Amendment 37 is expected to result in an increase in annual aggregate expenditures of approximately $10 million.

**Hypothesis and Evaluation Parameters**

The state’s proposed evaluation design focuses primarily on MLTSS program components of the demonstration: CHOICES and Employment and Community First CHOICES. The state will work with CMS to determine whether the program changes requested in Amendment 37 will require additional adjustments to the evaluation design.

**Waiver and Expenditure Authorities Requested**

All waiver and expenditure authorities currently approved for the TennCare demonstration will continue to be in effect. Since this amendment reflects adjustments to the already approved ECF CHOICES program component, no additional waiver or expenditure authorities are needed.

**Public Notice Process**

TennCare has taken a variety of steps to ensure that members of the public are notified of Amendment 37. These measures include the development and maintenance of this webpage, as well as notices published in the newspapers of widest circulation in Tennessee cities with 50,000 or more residents. TennCare has disseminated information about the proposed amendment via its social media accounts.
(e.g., Facebook, Twitter). TennCare has also notified members of the Tennessee General Assembly of its intent to submit Amendment 37.

Public Input Process

TennCare is seeking feedback on Amendment 37 prior to its submission to CMS. Members of the public are invited to offer comments regarding Amendment 37 from August 31, 2018, through October 1, 2018.

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

- Comments may be sent by email to public.notice.tenncare@tn.gov.
- Comments may be mailed to

  Dr. Wendy Long, Director
  Division of TennCare
  310 Great Circle Road
  Nashville, TN 37243.

Individuals who wish to make their comments in person may attend either of the following events:

- A public hearing on September 10, 2018, 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 September 11, 2018, at 1:00 p.m. CT in the Large Meeting Room of the Looby branch of the Nashville Public Library, 2301 Rosa L. Parks Boulevard in Nashville.

Telephonic access to the September 10 hearing is available for those unable to attend in person. Individuals interested in this option must register by contacting Jonathan Reeve—no later than September 9—at (615) 507-6449 or by email at 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 prior to the date of the hearing.

TennCare always appreciates input. In order to be considered for the final draft of Amendment 37, feedback must be received no later than Monday, October 1, 2018. 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.
A draft of TennCare’s proposed demonstration amendment is located at https://www.tn.gov/content/dam/tn/tenncare/documents2/Amendment37.pdf. Draft modifications to Attachment G (“Employment and Community First CHOICES Service Definitions”) of the TennCare Demonstration may be found on the webpage located at https://www.tn.gov/tenncare/policy-guidelines/waiver-and-state-plan-public-notices.html. 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.