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Sequence Number: 03-12-10  
 Notice ID(s): 1209  
 File Date: 03/03/2010

**Notice of Rulemaking Hearing**

*Hearings will be conducted in the manner prescribed by the Uniform Administrative Procedures Act, Tennessee Code Annotated, Section 4-5-204. For questions and copies of the notice, contact the person listed below.*

<b>Agency/Board/Commission:</b>	Tennessee Department of Finance and Administration
<b>Division:</b>	Bureau of TennCare
<b>Contact Person:</b>	George Woods
<b>Address:</b>	Bureau of TennCare 310 Great Circle Road Nashville, Tennessee 37243
<b>Phone:</b>	(615) 507-6446
<b>Email:</b>	<a href="mailto:George.woods@tn.gov">George.woods@tn.gov</a>

*Any Individuals with disabilities who wish to participate in these proceedings (to review these filings) and may require aid to facilitate such participation should contact the following at least 10 days prior to the hearing:*

<b>ADA Contact:</b>	ADA Coordinator
<b>Address:</b>	Bureau of TennCare 310 Great Circle Road Nashville, Tennessee 37243
<b>Phone:</b>	(615) 507-6474
<b>Email:</b>	<a href="mailto:Helen.moore@tn.gov">Helen.moore@tn.gov</a>

**Hearing Location(s)** (for additional locations, copy and paste table)

Address 1:	Bureau of TennCare 1 <sup>st</sup> Floor East Conference Room 310 Great Circle Road		
Address 2:			
City:	Nashville, Tennessee		
Zip:	37243		
Hearing Date :	04/28/10		
Hearing Time:	9:00 a.m.	<input checked="" type="checkbox"/> CST	<input type="checkbox"/> EST

**Additional Hearing Information:**

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**Revision Type (check all that apply):**

- Amendment  
 New  
 Repeal

**Rule(s)** (ALL chapters and rules contained in filing must be listed here. If needed, copy and paste additional tables. Please enter only **ONE** Rule Number/Rule Title per row.)

<b>Chapter Number</b>	<b>Chapter Title</b>
1200-13-17	TennCare Crossover Payments for Medicare Deductibles and Co-Insurance
<b>Rule Number</b>	<b>Rule Title</b>
1200-13-17.04	Medicare Crossover Payment Methodology

(Place substance of rules and other info here. Statutory authority must be given for each rule change. For information on formatting rules go to <http://state.tn.us/sos/rules/1360/1360.htm>)

Substance of Proposed Rule

Chapter 1200-13-17

TennCare Crossover Payments for Medicare Deductibles and Co-Insurance

Paragraph (5) of rule 1200-13-17-.04 Medicare Crossover Payment Methodology is amended by inserting the language "Rules 1200-13-13-.08(12)(b) and 1200-13-14-.08(12)(b) set forth the guidelines for timely filing Medicare crossover claims." as a new sentence following the first sentence so as amended paragraph (5) shall read as follows:

- (5) Medicare crossover payments are normally made by the Bureau of TennCare separately from the Managed Care Contractors. Rules 1200-13-13-.08(12)(b) and 1200-13-14-.08(12)(b) set forth the guidelines for timely filing Medicare crossover claims. However, if an MCC should choose to authorize a non-covered TennCare service as a cost-effective alternative service for a non-QMB FBDE who is age 21 or older and not an SSI recipient, the MCC will be responsible for the Medicare crossover payment on that service. The calculation of this payment should be included by the MCC in its analysis of whether or not the non-covered TennCare service is a cost-effective alternative service.

I certify that the information included in this filing is an accurate and complete representation of the intent and scope of rulemaking proposed by the agency.

Date: 3/3/2010

Signature: D-JG

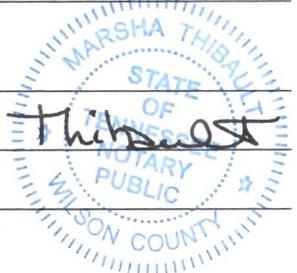
Name of Officer: Darin J. Gordon  
Director, Bureau of TennCare

Title of Officer: Tennessee Department of Finance and Administration

Subscribed and sworn to before me on: 3/3/2010

Notary Public Signature: Marsha Thibault

My commission expires on: 10/25/2011



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Filed with the Department of State on: 3/3/10

Tre Hargett

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Secretary of State

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