

Notice of  
Rulemaking Hearing  
Tennessee Department of Finance and Administration  
Bureau of TennCare

There will be a hearing before the Commissioner to consider the promulgation of amendments of rules pursuant to Tennessee Code Annotated, 71-5-105 and 71-5-109. The hearing will be conducted in the manner prescribed by the Uniform Administrative Procedures Act, Tennessee Code Annotated, Section 4-5-204 and will take place in the Multi Media Room, 3<sup>rd</sup> Floor, W.R. Snodgrass Tennessee Tower, 312 8<sup>th</sup> Avenue North, Nashville, Tennessee 37243 at 9:00 a.m. C.D.T. on the 18th day July 2005.

Any individuals with disabilities who wish to participate in these proceedings (to review these filings) should contact the Department of Finance and Administration, Bureau of TennCare, to discuss any auxiliary aids or services needed to facilitate such participation. Such initial contact may be made no less than ten (10) days prior to the scheduled meeting date (the date the party intends to review such filings) to allow time for the Bureau of TennCare to determine how it may reasonably provide such aid or service. Initial contact may be made with the Bureau of TennCare's ADA Coordinator by mail at the Bureau of TennCare, 729 Church Street, Nashville, Tennessee 37247-6501 or by telephone at (615) 741-0155 or 1-800-342-3145.

For a copy of this notice of rulemaking hearing, contact George Woods at the Bureau of TennCare, 729 Church Street, Nashville, Tennessee 37247-6501 or call (615) 741-0145.

Substance of Proposed Rule

Rule 1200-13-14-.12 Other Appeals By TennCare Applicants and Enrollees is amended by deleting paragraph (1)(a) in its entirety and by substituting instead the following new language so that as amended paragraph (1)(a) shall read as follows:

- (1) Appeal Rights of TennCare Standard or TennCare Medicaid Applicants or Enrollees.
  - (a) Appeal Time; Continuation of Services.
    1. TennCare Standard and TennCare Medicaid Appeals.
      - (i) TennCare Standard and TennCare Medicaid applicants or enrollees will be given the opportunity to have an administrative hearing before a Hearing Officer or an Administrative Law Judge, as determined by the Department of Human Services, regarding valid factual disputes concerning denial of his/her application, cost sharing disputes, limitation, reduction or termination of coverage, failure to act upon a request or application within required timeframes, and disputes regarding disenrollment from TennCare Standard or TennCare Medicaid. A valid factual dispute is a dispute that, if resolve in favor of the appellant, would prevent the state from taking the adverse action that is the subject of the appeal.

- (ii) Requests for appeals must be made within forty (40) calendar days, including mail time, of the date of the notice to the applicant/enrollee regarding the intended action, notwithstanding the provisions of Chapter 1240-5-3-.03 relating to the ninety (90) day timeframe for filing of an appeal of an intended action for TennCare Medicaid applicants/enrollees, and any provisions regarding the time within which to file an appeal in order to maintain coverage while the appeal is determined.
- (iii) If the enrollee whose TennCare Standard or TennCare Medicaid coverage is being reduced or terminated or whose cost sharing is in dispute wants his/her coverage or cost sharing obligation to remain unchanged while the appeal is being determined, s/he must submit his/her appeal within ten (10) days of the date of the notice sent to the enrollee regarding the intended action, or prior to the effective date of the intended action, whichever is later.

Statutory Authority: T.C.A 4-5-202, 4-5-203, 71-5-105, 71-5-109, Executive Order No. 23.

D1025140

I certify that this is an accurate complete representation of the intent and scope of rulemaking proposed by the Tennessee Department of Finance and Administration.



[Signature]  
J. D. Hickey  
Deputy Commissioner  
Tennessee Department of Finance and Administration

Subscribed and sworn to before me this the 31<sup>st</sup> day of May, 2005.

[Signature]  
Notary Public

**MY COMMISSION EXPIRES SEPTEMBER 25, 2008**

My Commission Expires on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

The notice of rulemaking set out herein was properly filed in the Department of State on the 31 day of May, 2005.

[Signature]  
Riley C. Darnel  
Secretary of State

BY: [Signature]