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Phone: 615.741.2650
Fax: 615.741.5133
Email: register.information@tn.gov

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Sequence Number: 06-23-10
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File Date: 06/25/2010

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.

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

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.

ADA Contact: ADA Coordinator
Bureau of TennCare
310 Great Circle Road
Address: Nashville, Tennessee 37243
Phone: (615) 507-6474
Email: Helen.moore@tn.gov

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

Address 1:	Bureau of TennCare 1 st Floor East Conference Room 310 Great Circle Road
Address 2:	
City:	Nashville, Tennessee
Zip:	37243
Hearing Date :	08/17/10
Hearing Time:	9:00 a.m. <input checked="" type="checkbox"/> CDT <input type="checkbox"/> EST

Additional Hearing Information:

Revision Type (check all that apply):

- Amendments
- 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/RuleTitle per row.)

Chapter Number	Chapter Title
1200-13-13	TennCare Medicaid
Rule Number	Rule Title
1200-13-13-.02	Eligibility
1200-13-13-.03	Enrollment, Reassignment, and Disenrollment with Managed Care Contractors (MCCs)
1200-13-13-.11	Appeal of Adverse Actions Affecting TennCare Services or Benefits

(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>)

Chapter 1200-13-13
TennCare Medicaid

Part 2. of Subparagraph (a) of Paragraph (5) of Rule 1200-13-13-.02 Eligibility is deleted in its entirety and replaced with a new Part 2. which shall read as follows:

2. Individuals enrolled as Medically Needy, as defined at rule 1200-13-13-.01. Enrollment in this category is limited to pregnant women and children under the age of twenty-one (21). Eligibility for this category shall be for a period of one (1) year. At the end of that year, eligibility must be reestablished in order for these individuals to continue in the program. For non-pregnant individuals who are under age 21, eligibility in this category shall end when the individual reaches his twenty-first birthday or the individual reaches the end of his one (1) year eligibility, whichever comes first.

Statutory Authority: T.C.A. §§ 4-5-202, 4-5-203, 71-5-105 and 71-5-109.

Part 1. of Subparagraph (a) of Paragraph (1) of Rule 1200-13-13-.03 Enrollment, Reassignment, and Disenrollment with Managed Care Contractors (MCCs) is amended by replacing the third sentence with a new third sentence so as amended Part 1. Shall read as follows:

1. Individuals or families determined eligible for TennCare shall select a health plan (Managed Care Organization/MCO) at the time of application. The health plan must be available in the Grand Division of the State in which the enrollee lives. All family members living in the same household and enrolled in TennCare must be assigned to the same MCO except children determined by the Bureau to be eligible to enroll in TennCare Select. An enrollee is given his choice of MCOs when possible. If the requested MCO cannot accept new enrollees, the Bureau will assign each enrollee to an MCO that is accepting new enrollees. If no MCO is available to enroll new members in the enrollee's Grand Division, the enrollee will be assigned to TennCare Select until such time as another MCO becomes available. The Bureau may also assign TennCare children with special health care needs to TennCare Select.

Part 4. of Subparagraph (a) of Paragraph (2) of Rule 1200-13-13-.03 Enrollment, Reassignment, and Disenrollment with Managed Care Contractors (MCCs) is amended by replacing the first sentence with a new first sentence so as amended Part 4. shall read as follows:

4. An enrollee shall be given an opportunity to change MCOs once each year during an annual change period. Only one (1) MCO change is permitted every twelve (12) months, unless the Bureau authorizes a change as the result of the resolution of an appeal requesting a "hardship" reassignment. When an enrollee changes MCOs, the enrollee's medical care will be the responsibility of the current MCO until enrolled in the requested MCO.

Statutory Authority: T.C.A. §§ 4-5-202, 4-5-203, 71-5-105 and 71-5-109.

Subparagraph (a) of paragraph (4) of Rule 1200-13-13-.11 Appeal of Adverse Actions Affecting TennCare Services or Benefits is amended by changing the semicolon ";" to a period "." and adding a new sentence so as amended Subparagraph (a) shall read as follows:

- (a) TennCare shall inform enrollees that they have the right to an in-person hearing, a telephone hearing or other hearing accommodations as may be required for enrollees with disabilities. In-person hearings may be held in Nashville, Tennessee, or they may be conducted by video-conference from one of six regional locations designated by TennCare.

Statutory Authority: T.C.A. §§ 4-5-202, 4-5-203, 71-5-105 and 71-5-109.

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: 6/25/10

Signature: Wendy Long MD

Name of Officer: Wendy Long, M.D.

Chief Medical Officer, Bureau of TennCare

Title of Officer: Tennessee Department of Finance and Administration

Subscribed and sworn to before me on: 6/25/2010

Notary Public Signature: Marsha Thibault

My commission expires on: 10/25/2011



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Filed with the Department of State on: 6/25/10

Tre Hargett

Tre Hargett
Secretary of State

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