



Center for Medicaid and CHIP Services

June 15, 2012

Mr. Darin Gordon
Director
Bureau of TennCare
Tennessee Department of Finance and Administration
310 Great Circle Road
Nashville, TN 37243

Dear Mr. Gordon:

The Centers for Medicare and Medicaid Services (CMS) has approved Amendments #14 and #16 for Tennessee's section 1115 Medicaid demonstration, TennCare II (11-W-00151/4). Amendment #14 authorizes an increase to the enrollment targets for the CHOICES 2 program, which was formerly requested as Amendment #13, and approves the rebalancing of the CHOICES managed long-term care program and the creation of *Interim* CHOICES 3. Amendment #14 is effective as of July 1, 2012. Approval of Amendment #16 fully responds to the State's request to remove the DSH allotment from the existing hospital pool to implement Tennessee's DSH allotment authorized under the Affordable Care Act and to ensure that other obligations to hospitals can be fulfilled. Amendment #16 is effective as of the date of this letter. Furthermore, CMS is no longer considering Amendment #12, as modified by the State on May 5, 2011 to impose a \$2 copayment on non-emergency medical transportation, as under active review.

In addition to the above, the following technical changes are made to the STCs:

- Corrects a cross-reference in Table 2a of STC paragraph 30.
- Replaces a specific State statutory citation with a general reference to the annual legislation that authorizes allocations to the Unreimbursed Hospital (UHC) Pool in STC paragraph 57(k).
- Incorporates modifications to the service definitions for attendant care, homemaker services, and personal care visits in Attachment D as approved on May 8, 2012.
- Updates the list of waivers in "Table 1a – TennCare Eligibility Groups" to remove references to waivers that were eliminated in Amendment #11.

The approval is conditioned upon compliance with the enclosed STCs, and is subject to our receiving your acknowledgement of the award and the acceptance of the STCs, waiver list, and expenditure authorities within 30 days of the date of this letter.

Your project officer is Mr. Paul Boben. He is available to answer questions concerning this demonstration project and may be contacted as follows:

Mr. Paul Boben
Centers for Medicare & Medicaid Services
Center for Medicaid and CHIP Services
Mailstop S2-01-16
7500 Security Boulevard
Baltimore, MD 21244-1850
Telephone: (410) 786-6629
Facsimile: (410) 786-5882
Email: Paul.Boben@cms.hhs.gov

Official communications regarding program matters should be submitted simultaneously to Ms. Kaufman, and to Ms. Jackie Glaze, Associate Regional Administrator in our Atlanta Regional Office. Ms. Glaze's address is:

Ms. Jackie Glaze
Centers for Medicare and Medicaid Services
Division of Medicaid and Children's Health
Atlanta Federal Center, 4th Floor
61 Forsyth Street, SW, Suite 4T20
Atlanta, GA 30303-8909

If you have additional concerns regarding CMS oversight of this demonstration or questions, please contact Ms. Victoria Wachino, Director, Children and Adults Health Programs Group, Center for Medicaid and CHIP Services, at (410) 786-5647.

Sincerely,

A solid black rectangular redaction box covering the signature of Cindy Mann.

Cindy Mann
Director

Enclosures

cc: Jackie Glaze, Associate Regional Administrator, Atlanta Regional Office
Kenni Howard, State Coordinator for Tennessee, Atlanta Regional Office
Paul Boben, Technical Director, Center for Medicaid and CHIP Services