



July 6, 2017

Jessica Woodard
TennCare Project Officer
Division of State Demonstrations and Waivers
Center for Medicaid and CHIP Services
Centers for Medicare and Medicaid Services
Mail Stop S2-01-16
7500 Security Boulevard
Baltimore, Maryland 21244-1850

RE: TennCare II Demonstration (No. 11-W-00151/4)

Dear Ms. Woodard:

As you know, Attachment C of the TennCare Demonstration specifies limitations for private duty nursing services. We are requesting a technical change to these limitations in order to make these services available to certain adults aged 21 and older who are ventilator-dependent with a progressive neuromuscular disorder or spinal cord injury, and who are ventilated using noninvasive positive pressure ventilation by mask or mouthpiece for at least 12 hours each day in order to avoid or delay tracheostomy. (Please refer to the attachment, which illustrates the State's requested change.)

The technical change requested in this letter has been published for public comment in newspapers of largest circulation in cities of 50,000 or more people across the state, and has been posted on the State's website. To date, no comments on the proposed change have been received. If any comments arrive by the last day of the comment period (July 13, 2017), the State will share them with CMS.

We are proposing that the modification to Attachment C take effect upon its approval by CMS.

Thank you for your attention to this important matter.

Jessica Woodard, TennCare Project Officer

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Sincerely,



Wendy Long, M.D., M.P.H.
Director, Bureau of TennCare

cc: Andrea Casart, State Demonstrations Group, CMCS Baltimore
Jackie Glaze, Associate Regional Administrator, CMS Atlanta
Kenni Howard, Health Insurance Specialist, CMS Atlanta
Megan Lepore, State Demonstrations Group, CMCS Baltimore

**ATTACHMENT:
TECHNICAL CHANGE TO ATTACHMENT C OF THE TENNCARE DEMONSTRATION**

3. Private duty nursing services are covered for adults aged 21 and older only when medically necessary to support the use of ventilator equipment or other life-sustaining medical technology when constant nursing supervision, visual assessment, and monitoring of both equipment and patient are required. For purposes of this rule, an adult is considered to be using ventilator equipment or other life-sustaining medical technology if he:
- a. Is ventilator dependent for at least 12 hours each day with an invasive patient end of the circuit (i.e., tracheostomy cannula); or
 - b. Is ventilator dependent with a progressive neuromuscular disorder or spinal cord injury, and is ventilated using noninvasive positive pressure ventilation (NIPPV) by mask or mouthpiece for at least 12 hours each day in order to avoid or delay tracheostomy (requires medical review); or
 - b.c. Has a functioning tracheostomy:
 - (1) Requiring suctioning; AND
 - (2) Oxygen supplementation; AND
 - (3) Receiving nebulizer treatments or requiring the use of Cough Assist/ inxsufflator devices.
 - (4) In addition, for persons with a functioning tracheostomy, at least one item from each of the following items (I and II) must be met:
 - (I) Medication:
 - (a) Receiving medication via a gastrostomy tube (G-tube); OR
 - (b) Receiving medication via a Peripherally Inserted Central Catheter (PICC) line or central port; AND
 - (II) Nutrition:
 - (a) Receiving bolus or continuous feedings via a permanent access such as a G-tube, Mickey Button, or Gastrojejunostomy tube (G-J tube); OR
 - (b) Receiving total parenteral nutrition.