

TennCare Transition Plan August 21, 2013

Demonstration Eligibility Groups. There are six demonstration populations in the TennCare demonstration. These populations, which are defined in STCs 19-21, include two children’s groups and four adult groups. These groups, and the changes that will take effect on January 1, 2014, are listed below.

Current Demonstration Groups	Demonstration Groups Effective 1/1/14	Benefits	Delivery System
<i>Children’s Groups</i>			
Title XIX Medically Eligible Children (no income ceiling)	Title XIX Medically Eligible Children (no income ceiling) ¹	No change, as long as the person continues to meet eligibility criteria	No change, as long as the person continues to meet eligibility criteria
Title XXI Medicaid Expansion Children with incomes less than 200 percent of FPL	Title XIX Medicaid Expansion Children with incomes between 138 percent and 211 percent of FPL	Children with incomes below 138 percent of FPL , as determined at their next reverification, will be moved to Medicaid under the authority of 1902(a)(10)(A)(i)(VII)	No change, as long as the person continues to meet eligibility criteria
<i>Adult Groups</i>			
Standard Spend Down	Standard Spend Down	No change, as long as the person continues to meet eligibility criteria	No change, as long as the person continues to meet eligibility criteria
CHOICES 217-Like HCBS Group	CHOICES 217-Like HCBS Group	No change, as long as the person continues to meet eligibility criteria	No change, as long as the person continues to meet eligibility criteria
At Risk Demonstration Group	At Risk Demonstration Group	This group will be closed to new enrollment on	This group will be closed to new enrollment on

¹ It is unlikely that there would be any children in this group with incomes below 138 percent of FPL. Lower income uninsured children are enrolled in the Title XXI Medicaid Expansion Child category. However, if, upon reverification, a child in this category is found to have a family income below 138 percent of FPL, that child will be moved to Medicaid.

Current Demonstration Groups	Demonstration Groups Effective 1/1/14	Benefits	Delivery System
		December 31, 2013; however, persons already enrolled in the group will experience no change in benefits, as long as they continue to meet eligibility criteria	December 31, 2013; however, persons already enrolled in the group will experience no change in benefits as long as they continue to meet eligibility criteria
CHOICES 1 and 2 Carryover Group	CHOICES 1 and 2 Carryover Group	No change, as long as the person continues to meet eligibility criteria	No change, as long as the person continues to meet eligibility criteria
PACE Carryover Group	PACE Carryover Group	No change, as long as the person continues to meet eligibility criteria	No change, as long as the person continues to meet eligibility criteria

Medicaid Eligibility Groups. With respect to Medicaid groups, there may be some movement from one group to another after January 1, 2014, [but the state is not reducing eligibility levels](#). For example, a child who is currently enrolled as a Medically Needy child under 21 may qualify for the new Former Foster Care Children Under Age 26. The benefits and delivery system will not change, however, in such situations. [An individual will not need to take any action to maintain eligibility prior to the individual’s scheduled redetermination date, or the report of a change in eligibility factor.](#)

Systems. [The state will be moving its eligibility and enrollment information from a legacy system to a new system. The state will migrate some basic eligibility information in December of 2013, and will then complete the data migration following verification at the individual’s first renewal in 2014.](#)

Process for Transition. Individuals go through reverification at least annually to determine that they still meet the eligibility criteria of the category in which they are enrolled. Any time an individual is found to lose eligibility for this category, he is reviewed for eligibility in other categories and moved to one of these categories, as appropriate. This is a process that is in place today and that will continue after January 1, 2014, with certain changes from what occurs today based on the availability of real-time data and the new application. There is no action that the enrollee needs to take to effectuate the transition.

After January 1, 2014, if a child who is enrolled as a Title XXI Medicaid Expansion Child is found, upon reverification, to have a family income below 138 percent of FPL, he will be moved to Medicaid. If a child between the ages of 6 and 19 who had been eligible because his family income was 100 percent of FPL and who is found to have a family income of an amount up to 138 percent of FPL, he will be moved to Medicaid.

Process for Renewals.

2013: The state will conduct an ex parte review for those scheduled for renewal between October and December 2013. If the state cannot determine eligibility through this process, the beneficiary will receive the current renewal form and be asked to complete and return the form. The state will review the beneficiary's eligibility based on information submitted. No prepopulated renewal forms will be available in 2013.

2014: The state will conduct an ex parte review for renewals scheduled in 2014. If a beneficiary cannot be renewed via the ex parte process, the state will send an application form in the mail. -The application form will not be pre-populated. Pre-populated renewal forms for MAGI populations will not be available until after the initial MAGI determination. It is unclear when prepopulated renewal forms will be available for non-MAGI populations. Tennessee will have the capability to do online renewals beginning April 1, 2014.

During the ex parte renewal process the state will check a beneficiary for's eligibility under other Medicaid categories prior to sending the beneficiary a renewal notice.

Account Transfer. The state has held discussions with CMS regarding an account transfer mitigation plan. Tennessee will be able to transfer accounts to the Marketplace for renewal and new applicants beginning on January 1, 2014.

Notification. A Title XXI Medicaid Expansion Child who is found to be eligible for Medicaid will be moved the next day. He will receive a notice of his new category, just as he would today. His notice will inform him that he no longer has a copay requirement. All TennCare notices contain multiple telephone numbers that persons can use if they have questions about the notice. The state will send notices on its standard renewal schedule.

Content of Notices. Since we are not proposing to do a bloc transfer of individuals, we will use existing TennCare notices, updated with any applicable ACA requirements or references. All TennCare notices are compliant with 42 CFR §§ 431.206, .210, and .213, and all include information on appeal and hearing rights as outlined in 42 CFR §§ 431.220 and .221.

Community Outreach. The reverification process is a routine part of TennCare operations. There is no need to organize extensive community outreach activities to explain an established and familiar process.