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State/Territory Name: Tennessee

State Plan Amendment (SPA) #: 24-0001

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) Form CMS-179
- 3) Approved SPA Page

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
601 E. 12th St., Room 355
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

April 24, 2024

Stephen M. Smith
Director, Division of TennCare
310 Great Circle Road
Nashville, TN 37243

Re: Tennessee State Plan Amendment (SPA) – Transmittal #24-0001

Dear Director Smith:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) #24-0001. This amendment proposes to prohibit third party payers from refusing payment for an item or service solely on the basis that such item or service did not receive prior authorization under the third-party payer's rules, consistent with the Consolidated Appropriations Act, 2022.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act, section 1902(a)(25)(I). This letter informs you that Tennessee's Medicaid SPA TN #24-0001 was approved on April 24, 2024, with an effective date of March 7, 2024.

Enclosed are copies of Form CMS-179 and approved SPA page to be incorporated into the Tennessee State Plan.

If you have any questions, please contact Tandra Hodges at (404) 562-7409 or via email at Tandra.Hodges@cms.hhs.gov.

Sincerely,

A large black rectangular box redacting the signature of James G. Scott.

James G. Scott, Director
Division of Program Operations

Enclosures

cc: Aaron Butler

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER

2 4 — 0 0 0 1

2. STATE

TN3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL
SECURITY ACT

XIX



XXI

TO: CENTER DIRECTOR
CENTERS FOR MEDICAID & CHIP SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE

March 7, 2024

5. FEDERAL STATUTE/REGULATION CITATION

Section 1902(a)(25)(I) of the Social Security Act

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY 2023 \$ 0b. FFY 2024 \$ 0

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Supplement to Attachment 4.22-A, Page 1 of 18. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
OR ATTACHMENT (If Applicable)**Supplement to Attachment 4.22-A, Page 1 of 1**

9. SUBJECT OF AMENDMENT

Prohibits third party payers from refusing payment for an item or service solely on the basis that such item or service did not receive prior authorization under the third-party payer's rules, consistent with the Consolidated Appropriations Act, 2022.

10. GOVERNOR'S REVIEW (Check One)



GOVERNOR'S OFFICE REPORTED NO COMMENT



COMMENTS OF GOVERNOR'S OFFICE ENCLOSED



NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL



OTHER, AS SPECIFIED:

11. SIGNATURE OF STATE AGENCY OFFICIAL



12. TYPED NAME

Stephen Smith

13. TITLE

Director, Division of TennCare

14. DATE SUBMITTED

March 26, 2024

15. RETURN TO

**Tennessee Department of Finance & Administration
Division of TennCare
310 Great Circle Road
Nashville, Tennessee 37243****Attention: Aaron Butler****FOR CMS USE ONLY**

16. DATE RECEIVED

March 26, 2024

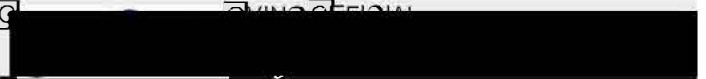
17. DATE APPROVED

April 24, 2024**PLAN APPROVED - ONE COPY ATTACHED**

18. EFFECTIVE DATE OF APPROVED MATERIAL

March 7, 2024

19. SIGNATURE



20. TYPED NAME OF APPROVING OFFICIAL

James G. Scott

21. TITLE OF APPROVING OFFICIAL

Director, Division of Program Operations

22. REMARKS

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE: TENNESSEE

STATE LAWS REQUIRING THIRD PARTIES TO PROVIDE COVERAGE
ELIGIBILITY AND CLAIMS DATA

Citation

1902(a)(25)(I) The State has in effect laws which require third parties to comply with the provisions, including those which require third parties to provide the State with coverage, eligibility and claims data, of 1902(a)(25)(I) of the Social Security Act. This includes laws that bar liable third parties from refusing payment for an item or service solely on the basis that such item or service did not receive prior authorization under the third-party payer's rules.