

Frequently Asked Questions for Providers about TennCare Benefit Changes for Members Turning 21

- 1. How do TennCare benefits differ for members age 21 and older from members under age 21?**

Benefits for children (defined by federal law as under age 21) are determined by federal law¹ and are called Early and Periodic Screening, Diagnostic, and Treatment services (EPSDT). The services must be medically necessary² and Medicaid covered³ but can't be otherwise limited. EPSDT includes:

 - Well-child visits
 - Vaccinations
 - Dental care
 - Vision services
 - Hearing services
 - Other necessary health care, diagnostic services, treatments and other measures that correct or ameliorate defects and physical and mental illnesses and conditions discovered by the screening services, whether or not such services are covered under the State plan⁴.

Adults (age 21 and older) are not covered by EPSDT. TennCare benefits for adults do not include hearing or routine vision services. Benefits⁵ for adults may be defined differently, and often have quantity and other limits not applicable to children under age 21. For example, there are limits on home health visits for adults, and private duty nursing⁶ (PDN) is only available to adults with very specific medical and technology support needs, and is generally provided only up to the comparable cost of institutional care. Adults also have prescription limits with certain exceptions and some cost-sharing provisions.

- 2. If I have patients under 21 years old with complex medical needs, how can I support my patients' transition to the TennCare benefits for members age 21 and older?**

BlueCare Tennessee will engage with members receiving PDN or home health benefits above the adult limits to tell them about the changes in their benefits upon turning 21.

This outreach will begin around the member's 18th birthday. After the member's 20th birthday, BlueCare Tennessee will provide further information about other TennCare programs that are available to help meet the needs of the member. BlueCare may reach out to you, or a member's other healthcare provider, to obtain information on what the member's medical needs are. They also will be able to provide information on what services are available to the member in transition.

It is important that you learn about the benefits that will (and will not) be available to your patients as they become adults, and work with them to help determine the covered benefits that will best meet their needs once they become adults. They will not be able to continue receiving the same benefits once they turn age 21. Your willingness to communicate with the BlueCare Care Coordinator or Medical Director will be a great help in facilitating a smooth transition for your patient.

¹ 42 USC §1396a(a)

² TennCare Medical Necessity Criteria – Rule 1200-13-16-.05, TCA 71-5-144.

³ Section 1905(r)(5) of the Social Security Act.

⁴ The state plan is a formal, written agreement between a state and the federal government, submitted by the single state agency (42 CFR 431.10) and approved by CMS, describing how that state administers its Medicaid program. Web: <https://www.macpac.gov/subtopic/state-plan/> Accessed December 8, 2017.

⁵ Rule 1200-13-13-.04 & 1200-13-14-.04 COVERED SERVICES

⁶ Rule 1200-13-13-.01 & 1200-13-14-.01 DEFINITIONS

3. What is the TennCare PDN benefit?

PDN is a service that is only for people who require 8 hours or more of *continuous* nursing care from a licensed nurse in a 24-hour period.

4. My patient has been receiving 24/7 PDN services for a long time. I understand that the TennCare benefits change when members turn 21. How will this affect my patient?

PDN services are only covered for adults who are dependent upon technology-based medical equipment requiring constant nursing supervision, visual assessment, and monitoring of both the equipment and the patient. An adult is considered to be using ventilator equipment or other life-sustaining medical technology if he/she⁷:

- is ventilator dependent for at least 12 hours each day with an invasive patient end of the circuit (i.e. tracheostomy cannula); or
- is ventilator dependent with a progressive neuromuscular disorder, a spinal cord injury, or chronic respiratory failure, 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; or
- has a functioning tracheostomy
 - requiring suctioning; and
 - oxygen supplementation; and
 - is receiving nebulizer treatments or
 - requires the use of a cough assist/in-exsufflator device; and
- In addition, at least one sub item from each of the following items (Medication and Nutrition) must be met:
 - Medication:
 - is receiving medication via a gastrostomy tube (G-tube); or
 - receiving medication via a Peripherally Inserted Central Catheter (PICC) line or central port
 - Nutrition:
 - receiving bolus or continuous feedings via a permanent access such as a G-tube or Mickey button or
 - is receiving total parenteral nutrition.

If your patient will not meet the criteria for PDN once he or she turns age 21, it is important that you begin now working with your patient to plan for transition to covered benefits that will be available. This may include benefits (but not 24/7 nursing) available through the CHOICES or Employment and Community First CHOICES programs.

5. Are ventilator dependent TennCare members eligible for 24/7 PDN once they turn 21?

No. While a person who is ventilator dependent and meets the criteria listed above will qualify to receive PDN, they will not be able to receive the benefit 24/7. If the criteria listed above are met, adults can receive medically necessary PDN up to the comparable cost of these services in a long-term care facility—generally no more than 16 hours per day.

6. My patient has been receiving PDN, will not meet the criteria for this benefit once they turn 21, but has other skilled nursing needs. Will nursing services be available?

To learn about what services and programs are available to help meet their needs, the family should call our Care Coordinator at 1-888-416-3025.

Part-time and intermittent skilled nursing services may be available through the TennCare home health benefit. Read the next question to find out more about home health, including limits on the nursing benefit. You, the provider, can also reach out to the BlueCare Care Coordinator or Medical Director.

⁷Refer to the definition of “Private Duty Nursing Services” in TennCare rules 1200-13-13-.01 and 1200-13-14-.01.

7. What services are covered through TennCare's home health benefit?

Home health services for adults age 21 and older are detailed in TennCare rules⁸. In general, the services are limited to one visit per day, with each visit lasting less than 8 hours per day and 27 hours per week of nursing care. On a case-by-case basis, and if certain criteria are met, the weekly total for nursing services may be increased as allowed by the TennCare rules. Home health aide services generally consist of **hands-on** care such as grooming, bathing, toileting, transfers, and feeding. Safety monitoring, general childcare, cleaning, laundry or meal preparation services are not part of the home health benefit.⁹

8. What options are available for TennCare members who need more care than provided through the TennCare home health benefit?

TennCare offers Long-Term Services & Supports (LTSS) programs that may serve qualifying individuals and allow them to stay in their home. The TennCare CHOICES program is for adults who have physical disabilities. The Employment and Community First CHOICES program is for people of all ages who have an intellectual or developmental disability (I/DD), including people who have significant disabilities.

9. Who can I call to discuss the needs of my patient who is about to turn 21 and is receiving 24/7 PDN?

Please talk to your patient's Care Coordinator at BlueCare. Your patient's family may be able to give you the Care Coordinator's name and phone number. You can also contact BlueCare by calling us at 1-800-468-9736.

10. What is CHOICES?

CHOICES is TennCare's program for adults (age 21 and older) with a physical disability and seniors (age 65 and older). CHOICES offers services to help a person live in their own home or in the community. These services are called Home and Community Based Services or HCBS.

They include things like Personal Care Visits, Attendant Care, Home Delivered Meals, Assistive Technology, Minor Home Modifications, Adult Day Care, and Respite Care. CHOICES services do not include nursing services, but a person in CHOICES could also receive part-time and intermittent nursing services through the Home Health benefit (subject to all applicable limits), if eligible.

CHOICES services can be provided in the home, on the job, or in the community to assist with daily living activities and allow people to work and be actively involved in their local community. CHOICES also provides care in a nursing home if this is needed.

11. What is Employment and Community First CHOICES?

Employment and Community First CHOICES is a new program for people of all ages who have an intellectual or developmental disability (I/DD), including people with significant disabilities.

Services help people with I/DD gain as much independence as possible. People are supported to live with their family or in the community, not in an institution. Residential services are available for adults with I/DD who do not live with family but need supports where they live.

Employment and Community First CHOICES can help the person with I/DD explore the possibility of working. Services can also help people learn skills for work, find a job, and keep a job. This could be a part-time job, a full-time job or self-employment. Working helps people earn money, learn new skills, meet new people, and play an important role in their communities. Work can also help people stay healthy and build self-confidence.

Other services available in Employment and Community First CHOICES help people learn and do things at home and in the community that help people achieve their goals. If a person lives at home with their family, the services help the family support the person to become as independent as possible. Services also help people get actively involved in their communities and include peer supports for the person and for their family.

⁸ Refer to the definition for "Home Health Services" in TennCare Rule 1200-13-13-.01 and 1200-13-14-.01.

⁹ TennCare Rule 1200-13-13-.10(3)(b); 1200-13-14-.10(3)(b).

12. What is the difference between the TennCare home health aide benefit and services that are provided through the CHOICES & Employment and Community First CHOICES programs?

The TennCare home health aide benefit provides **hands-on** assistance with personal care needs such as grooming, bathing, toileting, transfers, mobility and feeding in the member's home. Attendant Care and Personal Care Visits offered through the CHOICES program and Supportive Home Care and Personal Assistance offered through the Employment and Community First CHOICES program can provide the same types of assistance.

But unique to CHOICES and Employment and Community First CHOICES, these services can also help with safety monitoring, as well as household chores, meal preparation, and shopping, (but only for the person on enrolled in the program, not other family members). CHOICES and Employment and Community First CHOICES services can also be provided outside the home—at the person's workplace and other community settings.

Attendant Care is for people who require assistance for more than four hours per occasion. Personal Care is for people who require no more than four hours of assistance per occasion. Supportive Home Care is for people who live at home with their families. Personal Assistance is for people who may live at home or independently in the community.

13. What are the differences in the TennCare DME benefit and benefits provided through CHOICES & Employment and Community First CHOICES?

The TennCare Durable Medical Equipment (DME) benefit is part of the medical benefit and covers medically necessary DME. CHOICES and Employment and Community First CHOICES provides an Assistive Technology benefit which covers things that may be in addition to the DME benefit.

The CHOICES benefit includes adaptive aids, controls or appliances that support greater independence in activities of daily living, or to help a person perceive or control their environment. Examples include "grabbers" to pick up objects off the floor, a strobe light to signify the smoke alarm has been activated, etc.

Employment and Community First CHOICES Assistive Technology benefit includes items that help people do things more independently in their home or community. Examples include augmentative communication devices, adaptive switches and adaptive silverware, flatware and glasses. CHOICES and Employment and Community First CHOICES also includes a Minor Home Modifications benefit that includes minor modifications to the home to increase the person's safety and independence, like wheelchair ramps, handrails for interior or exterior steps, grab bars, widening of doorways, or modification of bathrooms.

14. Where can I find detailed information about the kinds of in-home support options available for adults age 21 and older in TennCare, including CHOICES and Employment and Community First CHOICES?

Information about CHOICES and Employment and Community First CHOICES can be found on the TennCare website at <http://tn.gov/tenncare/section/long-term-services-supports>.

The BlueCare Tennessee provider administration manual also provides information about CHOICES, Employment and Community First CHOICES, home health services, and private duty nursing. The manual is available at: https://www.bcbst.com/providers/manuals/BCT_PAM.pdf.