

September 16, 2004

Hon. Phil Bredesen
Governor's Office
Tennessee State Capitol
Nashville, TN 37243-0001

Re: Proposed TennCare Waiver

Dear Governor Bredesen:

We write to you on behalf of the 1.3 million vulnerable Tennesseans who rely on TennCare, and in response to your invitation to the public to submit comments on the draft reform proposal you released on August 19th. Through the members of our congregations and our outreach ministries, we know the vulnerable children and adults whom this valuable program serves, and we are keenly aware of TennCare's vital importance. We therefore applaud your goal of reforming TennCare to ensure its continuation. In order to achieve that goal, however, important changes to the draft are needed. Our concerns are fourfold.

1. Medical necessity must be redefined so that it does not create a second class standard of care for TennCare patients.

We appreciate reassurances in the proposal that the state will issue regulations resolving concerns about the definition of medical necessity approved by the Tennessee legislature last Spring. We believe these reassurances and any regulations issued are insufficient to address the problems created by the definition of medical necessity. The definition prohibits coverage of a service a doctor has prescribed if a cheaper substitute that is considered "adequate" exists. This adequate substitute need not be as safe or effective as what the patient's doctors have ordered. In fact, no treatment at all may be the "adequate" substitute, according to the definition. No other state in the country has such a provision. Medicaid patients in Tennessee may not receive a standard of care that meets the same expectations of safety and effectiveness owed the general public. The definition will cost some patients their lives and condemn many more to needless suffering and disability. It sets a double standard for the 1.3 million disadvantaged children, adults, and seniors who depend on TennCare, a result that we hope you will agree is morally unacceptable. We ask you to correct the definition of medical necessity before submitting it and the rest of the plan to federal officials.

2. While broad use of generic drugs is appropriate, TennCare should provide newer drugs when necessary for the patient's safety.

The draft plan proposes that, with few exceptions, TennCare will cover only the lowest cost drug in each class. While we support the use of generics whenever possible, they are not the safest and most effective treatment in all cases. In addition, for adults, TennCare would no longer cover antihistamines or gastric acid reducers at all, even for

patients for whom they may be lifesaving (for example, many asthmatics and patients with bleeding ulcers or who are undergoing chemotherapy). Our experience with TennCare tells us that few of the people on the program can afford to buy these essential medications out their own pockets. In order to protect life, it will be necessary for TennCare to provide access to advanced drugs in more than just the “very rare, unique or novel” cases contemplated in the draft.

3. The plan should not impose financial barriers that will make it impossible for sick patients to obtain essential medical services.

The waiver proposal states that many families living below the poverty level will be required to make co-payments in order to receive medical services. Pharmacies and care providers can and will deny services without these co-payments. There will be no out-of-pocket limits for co-pay requirements. The draft would also impose premiums on 60,000 patients with incomes close to poverty levels.

While the co-pays may seem like only token amounts to people with means, for the poor and near poor whom our congregations serve, and who rely on TennCare, they create barriers that are insurmountable. Families living below the poverty level are already forced to make choices between life necessities—requiring co-payments will mean choosing between food, housing and medicine for these vulnerable people. Many will do without necessary medical care, at greater cost to TennCare in the long run.

4. TennCare should not withhold essential care.

The waiver proposal would impose numerical limits on services for 270,000 TennCare patients. The elderly and people with chronic conditions will suffer greatly under such restrictions. For example, patients with more than 6 prescriptions per month will not be able to get all of their medicines, with dangerous consequences. Exceptions must be made to meet medical need.

We call on both your compassionate and moral sensibilities to continue to work on this proposal to reform TennCare so that our vulnerable brothers and sisters are not forced to carry added medical and financial burden they can ill afford to carry. We call on your fiscal responsibility to all Tennesseans to reform TennCare in a way that ensures savings in both the short term and the long term.

Thank you for your efforts, and the efforts of other conscientious state officials, to reform and sustain TennCare, and thank you for your consideration of our concerns.

Sincerely,

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