Welcome!!

Webinar will start at 11:00AM CDT

Webinar will be 1 hour

Ask questions using Q&A box

Recording and Slides will be distributed to registrants.

Future Events: https://www.tnjustice.org/events

- May: In depth trainings on CHOICES
- September: In depth training on ECF CHOICES
- November: In depth training on Katie Beckett
LONG TERM SERVICES AND SUPPORTS AND TENNCARE
MARCH 21, 2024
TODAY'S PRESENTERS

Emily Jenkins
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Caroline Sprenger
Melkus Fellow, Client Advocate
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AGENDA

Tennessee Justice Center
TennCare 101
Long Term Services and Support Programs
How to Apply
Loss of Enrollment & Adverse Actions
DIRECT SERVICES

- Individual client representation
- Promote enrollment on healthcare and nutrition programs
IMPACT WORK

- Class action litigation to correct systemic issues
- Advocate for legislative/administrative changes on state and federal level
  - Paying Family Caregivers Campaign
    - For more information contact Vanessa Zapata, vzapata@tnjustice.org
  - Elderly Simplified Application Project (ESAP) for SNAP
    - For more information contact Signe Anderson, sanderson@tnjustice.org
TennCare

https://www.tn.gov/tenncare.html

TENNCARE 101
depends on your eligibility “group.” all have an income test. some have a resource test. some have a medical needs test.

some groups tennicare covers:

- children under 21
- women who are pregnant
- parents/caretakers of minor children
- individuals with breast or cervical cancer
- people who get ssi or some people who used to get ssi
- gets or is eligible for long term care services that tennicare pays for
WHAT DOES IT COVER?

- Depends on the program.
- For “dual eligibles,” which means folks who have TennCare and Medicare you can also get certain benefits like D-SNP which includes assistance with out of pocket expenses and a food allowance based on the MCO you select.
- For some covered services you can, visit:
  https://www.tn.gov/content/dam/tn/tenncare/documents/benefitpackages.pdf
LONG TERM SERVICES AND SUPPORTS
WHAT IS TENNCARE LONG TERM SERVICES & SUPPORTS (LTSS)?

- Administered by the Long-Term Services & Supports (LTSS), Division of TennCare (formerly the Long-Term Care Division)
- You can get LTSS through various TennCare programs/waivers
- Provides medical/personal care and supportive services for individuals who need help with activities of daily living (ADLs)
  - ADLs are things like bathing, dressing, personal hygiene and grooming, eating, toileting, transfers and mobility
- Supports can also be provided for instrumental activities of daily living (IADLs)
  - IADLs are things like household chores, meal planning, shopping, preparing and storing food, and personal finances.
WHAT ARE SOME CURRENT TENNCARE LTSS PROGRAMS?

CHOICES

Employment and Community First (ECF) CHOICES

1915(c) HCBS Waivers (DIDD Waivers)

Katie Beckett Waiver
WHO IS EACH PROGRAM FOR?

- **CHOICES**
  - Individuals who are seniors (65+) or adults (21+) with a physical disability who demonstrate need through a pre-admission evaluation (PAE)

- **ECF CHOICES**
  - Individual who have an intellectual or developmental disability.

- **DIDD Waiver**
  - Individuals with intellectual and developmental disabilities who would qualify for placement in an intermediate care facility for individuals with intellectual and developmental disabilities (ICF/IDD)

- **Katie Beckett Waiver**
  - Children under the age of 18 with significant disabilities or complex medical needs.
THREE DIDD WAIVERS/ 1915(C) WAIVERS

Comprehensive Aggregate Cap (CAC) Waiver

Self Determination

Statewide Waiver
Part A is for children who qualify for care in a medical institution—like a hospital, nursing home, but the family wants to care for their child at home instead.

Part A serves children with the most significant disabilities or complex medical needs.

Children receive full Medicaid benefits and up to $15,000 a year in home and community.
Katie Beckett Program Part B
Part B is for children with disabilities or complex medical needs who are considered “at risk” of going into a facility unless they can get services.
Children in Part B are not enrolled in Medicaid.
They receive up to $10,000 a year in services.
Other benefits include premium assistance, a health-care savings type account, reimbursement for services that will benefit the child but can’t be covered under a health-care savings account, self-directed respite and supportive home care services, or an array of services from a community-based provider.
Katie Beckett Program Part C

Continued Eligibility (or “Part C” for short) is for children who have Medicaid now, but their Medicaid is ending because their parents’ income or resources increased.

Part C may allow the child to keep Medicaid if they would qualify to enroll in Part A, but there isn’t a slot open for the child right now. (We tell you more about “slots” below.) If a child enrolls in Part C and then gets a Part A slot, they must move to Part A. They can’t stay in Part C anymore.
THREE CHOICES CATEGORIES

CHOICES Group 1
Nursing Home Care

CHOICES Group 2
HCBS

CHOICES Group 3
Limited HCBS
ELIGIBILITY FOR EACH GROUP

Medical Part (PAE)  Financial Part
WHO CAN DO YOUR PAE?

- Your local Area Agency on Aging and Disability (AAAD)
- Your MCO if you are already on TennCare (Wellpoint, BlueCare or UnitedHealthcare)
- Some staff in a hospital or facility

ENROLLMENT PROCESS

Step One: PAE test

If you are on TennCare, reach out to your MCO for a referral
If you are not on TennCare, reach out to the Area Agency on Aging and Disability

Step Two: Complete a PAE (Pre-Admission Evaluation)

Tips: give as many details as you can have someone there with you ask for a safety determination (should be automatic with a score of 5 or higher)
Step Three: make sure a TennCare Application was submitted.

Step Four: Regularly review your TennCare Connect Account for requests for additional information. You can expect that TennCare will ask for financial records to show that you meet requirements for income and resources.
QUALIFIED INCOME TRUST (QIT)

This is the legal document that helps the applicant get around the income limit requirement if it is higher than the limit.

Beneficiary = applicant

Trustee = a trusted legal representative

Requires separate bank account
Welcome to TennCare Connect!

The easiest way to access TennCare, CoverKids, and Medicare Savings Programs

TennCare Connect is an online tool for Tennesseans to apply for TennCare, CoverKids, and Medicare Savings Programs! After you're approved, you can also use TennCare Connect to manage your coverage. Click on the Get Started button to begin.

https://tenncareconnect.tn.gov/

HOW TO APPLY
FILE AN APPEAL

1. File an appeal with TennCare within 30 days of application or service denial or termination.

2. If it is concerning a PAE there will be an internal review of the original PAE by TennCare LTSS.

3. They may ask for additional documentation.

4. If is concerning the PAE they will send the information to a TennCare Contractor – Ascend.

5. TennCare will review the results of the final assessment.

6. If they still disagree it will go to a hearing.

SEND SUPPORTING DOCUMENTATION
QUESTIONS?
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