

HEALTHCARE AND HOUSING (H²) SYSTEMS INTEGRATION INITIATIVE NASHVILLE

Medicaid Coverage and Other Health Care Resources

TENNESSEE STATE MEDICAID PLAN AND COVERAGE

Medicaid Eligibility And Federal Medical Assistance Percentage (FMAP)¹

- Tennessee is not currently a Medicaid expansion state. However, in January 2015, Tennessee released a proposed amendment to its current Section 1115 demonstration to implement the Affordable Care Act's (ACA) Medicaid expansion.
- In 2015, Medicaid eligibility based on family income as a percentage of federal poverty level (FPL), is:
 - For pregnant women: 195% of FPL
 - For children: 195% of FPL (ages 0-1), 142% of FPL (ages 1-5), 133% of FPL (ages 6-18)
 - For parents: 105% of FPL
 - For childless adults: 0% of FPL
- FMAP is 65.05%, meaning Tennessee receives \$1.86 of federal matching funds for every \$1 spent on Medicaid.

Enrollment Efforts²

- Health Insurance/Affordable Insurance Exchange: The Health Insurance Marketplace (The Marketplace):
 - Enrollment in TennCare is year-round; Tennessee residents do not have to wait for an open enrollment period to apply if they are eligible for Medicaid.
 - From October 2013 through April 2014, 83,591 people in Tennessee enrolled in Medicaid or CHIP through the federally-facilitated marketplace. Total Medicaid and CHIP enrollment in Tennessee increased by 8.1 percent during this period of time.
 - Between January and May 2014, a total of 126,300 people were newly enrolled in TennCare.
 - The increase in enrollment is due to the “woodwork” effect – people who were previously eligible but are just now enrolling due to the publicity and enrollment efforts surrounding the ACA and the exchange.
 - TennCare requested an additional \$180 million from the state in late 2013 because of the rapidly increasing enrollment they were seeing soon after open enrollment began on the exchange.
- Tennessee offers phone (Phone: 1-800-318-2596) and in-person options for enrollment at any DHS office in any of Tennessee's 95 counties; the state also offers enrollment help through private groups (local help can be found at <https://localhelp.healthcare.gov/> or by dialing 1-866-720-1711).
- Online applications for healthcare coverage are accepted via the federal marketplace exchange (<https://www.healthcare.gov/>) or by calling 1-800-318-2596. The FFM will make assessments of Medicaid/CHIP eligibility and then transfer the applicant's account to the state agency for a final eligibility determination.

¹ www.medicaid.gov/Medicaid-CHIP-Program-Information/By-State/tennessee.html

² <http://www.healthinsurance.org/tennessee-medicaid/> and <http://www.tn.gov/tenncare/section/members-applicants>

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Medicaid Enrollees And Expenditures³

TennCare is the state of Tennessee's Medicaid program that provides health care for approximately 1.3 million Tennesseans and operates with an annual budget of approximately \$10 billion. TennCare members are primarily low-income pregnant women, children and individuals who are elderly or have a disability. TennCare covers approximately 20 percent of the state's population, 50 percent of the state's births, and 50 percent of the state's children. As of August 2014, Medicaid and CHIP covered 1,360,437 people in Tennessee.

If Tennessee's proposed amendment to its 1115 waiver is implemented on January 1, 2016, the two-year demonstration would cover newly eligible adults – parents from 103-138% of the federal poverty level (FPL, up to \$16,242 per year for an individual in 2015) and childless adults from 0-138% of the federal poverty level – an estimated 200,000 beneficiaries.

Medicaid Care Delivery⁴

Since 2011, all Medicaid beneficiaries in Tennessee are enrolled in some form of managed care. If Tennessee's proposed amendment is implemented, Medicaid coverage would be expanded to newly eligible adults primarily through capitated Medicaid managed care organizations (MCOs) already operating in the state. Under the Healthy Incentives Plan, most newly eligible adults would receive an Alternative Benefits Package consisting of the same benefits as provided to other Medicaid beneficiaries. MCOs would administer health savings accounts in which newly eligible adults would accrue credits by participating in certain designated healthy behaviors. These credits could then be used to decrease premiums and co-payments. Tennessee seeks waiver authority to require monthly premiums up to 2% of income (approximately \$20 per month) for newly eligible adults from 100-138% FPL and would impose copays within existing limits in federal regulations.

Medicaid Waivers and Demonstration Programs⁵

Tennessee has three Medicaid 1915(c) HCBS Waivers:

TN Self-Determination (0427.R02.00)

Provides respite, nursing, nutrition, OT, PT, specialized medical equipment and supplies and assistive technology, speech/language/and hearing, adult dental, behavior services, behavioral respite, emergency assistance, environmental accessibility mods, individual transportation, orientation and mobility services for impaired vision, personal assistance, PERS, semi-independent living services for individuals with intellectual disabilities of all ages and developmental disabilities ages 0-5.

TN Comprehensive Aggregate Cap (or "CAC") (0357.R03.00)

Provides residential habilitation, respite, support coordination, nursing services, nutrition services, OT, PT, specialized medical equipment and supplies and assistive technology, speech/language/

³ <https://www.tn.gov/tenncare/article/tenncare-overview> and <http://www.healthinsurance.org/tennessee-medicaid/>

⁴ <http://www.medicaid.gov/medicaid-chip-program-information/by-topics/delivery-systems/managed-care/downloads/tennessee-mcp.pdf>

⁵ For more information, see: http://www.medicaid.gov/medicaid-chip-program-information/by-topics/waivers/waivers_faceted.html; <https://www.hudexchange.info/resource/3215/affordable-care-act-state-and-territory-profiles/>

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hearing services, behavior services, behavioral respite, dental services, employment and day services, environmental accessibility mods, family model residential support, individual transportation, intensive behavioral residential services, medical residential services, orientation and mobility services for impaired vision, personal assistance, PERS, semi-independent living, supported living, transitional case management, vision services for individuals with intellectual disabilities of all ages.

TN Statewide HCBS Waiver (0128.R05.00)

Provides residential habilitation, respite, support coordination, nursing services, nutrition services, OT, PT, specialized medical equipment and supplies and assistive technology, speech/language/hearing services, adult dental, behavior services, behavioral respite, employment and day services, environmental accessibility mods, family model residential support, individual transportation, intensive behavioral residential services, medical residential services, orientation and mobility services for impaired vision, personal assistance, PERS, semi-independent living, supported living, transitional case management for individuals w/ developmental disabilities ages 0 - 5, and with intellectual disabilities of all ages.

Other Initiatives

Tennessee Association of Mental Health Organizations (TAMHO)⁶

The Tennessee Association of Mental Health Organizations (TAMHO) is a statewide trade association representing Community Mental Health Centers (CMHCs) and other nonprofit corporations that provide behavioral health services. TAMHO's mission is to serve its members, promote the advancement of effective behavioral health services, and advocate for people in need of care. To achieve this mission, the TAMHO Board of Directors formulates an agenda each year that is designed to improve the effectiveness of treatment and support services for the mentally ill and to increase access to these services throughout the state. As a means of carrying this agenda forward, working committees, task forces, and professional membership sections bring together over 400 staff of TAMHO member organizations on a regular basis to identify problems and issues from a provider perspective and to formulate recommendations for effectively addressing them.

Behavioral Health Safety Net of Tennessee⁷

The Behavioral Health Safety Net of Tennessee is a program created by the State of Tennessee and the Tennessee Department of Mental Health/ Substance Abuse Services (TDMHSAS) to provide mental health treatment to individuals who have no access to health care due to lack of health insurance. The Behavioral Health Safety Net Program provides outpatient medication management, community-based case management, and individual therapy services. The program also assists participants in obtaining their psychotropic medications at no out-of-pocket cost via Pharmaceutical Assistance Programs (PAP's).

Eligibility Information:

- Axis I Mental Health Diagnosis (identified as priority population)

⁶ <http://tamho.org/>

⁷ <http://www.state.tn.us/mental/safetynet.html>

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- Household Income at or below 100% Federal Poverty Level
- Tennessee Resident for the past 6 months and United States citizen
- Lack of TennCare or commercial insurance coverage (Medicare coverage is acceptable)
- No access to VA benefits
- The consumer is not currently an inmate

CoverKids⁸

CoverKids provides low-cost, comprehensive health coverage for qualifying children 18 and younger who do not have insurance and who make too much to qualify for TennCare. The coverage includes an emphasis on preventive health services and coverage for physician services, hospital visits, vaccinations, well-child visits, healthy babies program, developmental screenings, mental health, vision and dental care. There are low co-pays for medical services, though well-child visits and immunizations are covered at 100 percent.

CoverRX⁹

CoverRX is a pharmacy assistance program designed to assist those who have no pharmacy coverage, but have a need for medication. CoverRx provides participants affordable access to more than 250 generic medications in addition to some name brands of insulin and of mental health medications.

HEALTH CARE FOR THE HOMELESS PROGRAMS¹⁰

Health Care for the Homeless Programs emphasize a multi-disciplinary approach to delivering care to homeless persons, combining aggressive street outreach with integrated systems of primary care, mental health and substance abuse services, case management, and clinical advocacy. Emphasis is placed on coordinating efforts with other community health providers and social service agencies.

There are six federally-funded Health Care for the Homeless Programs in Tennessee: 1 in Chattanooga, 1 in Knoxville, 1 in Johnson City, 2 in Memphis, and 1 in Nashville.

RYAN WHITE PROGRAM TITLE II FUNDS¹¹

Tennessee's Ryan White Part B program is administered by the Tennessee Department of Health. The State of Tennessee utilizes Ryan White Part B funds to provide drug and medical services for eligible Tennessee residents. The state has 18 "HIV Centers of Excellence" sites that receive Ryan White Part B funding in order to provide services to Tennessee residents with HIV/AIDS. The major part of Ryan White Plan B funding goes to the AIDS Drug Assistance program (ADAP, HDAP in Tennessee), which provides AIDS medications to low-income people with HIV/AIDS who are uninsured or underinsured.

⁸ <http://www.coverkids.com/WebForms/StaticContent1.aspx>

⁹ <https://www.tn.gov/covertn/section/coverrx>

¹⁰ <https://www.nhchc.org/hchdirectory/tn/>

¹¹ <http://tn.gov/health/topic/STD-ryanwhite>

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2012 Funding Snapshot¹²

- 9,376 clients served by the Ryan White Program
- 288 (3.3%) were unstably housed and 1,149 (13.3%) were in temporary housing
- Top medical services provided: medical case management (7,009 clients received), outpatient ambulatory care (4,261 clients received), early intervention services (2,447 clients received), medical nutrition care (1,420 clients received), mental health services (1,315 clients received), and oral health care (1,175 clients received).
- Other key services provided: food bank/home delivered meals (2,430 clients received), medical transportation services (1,761 clients received), referrals to health care/support services (1,439 clients received), and non-medical case management (1,014 clients received).

FEDERALLY QUALIFIED HEALTH CENTERS (FQHC)¹³

The Federal Health Center Program serves medically underserved populations or areas, works with special populations, and provides for enhanced Medicaid reimbursement. The four types of health centers are: (1) Community Health Centers; (2) Health Care for the Homeless; (3) Migrant Health Centers; and (4) Public Housing Primary Care Health Centers. Tennessee's FQHC network operates nearly 200 health centers and look-alike sites¹⁴ throughout the state. As of 2013, Tennessee had 26 community health centers operating over a hundred sites around the state, serving approximately 367,754 patients annually.

¹² <http://hab.hrsa.gov/stateprofiles/Client-Characteristics.aspx> and <http://hab.hrsa.gov/stateprofiles/Services-Received.aspx>

¹³ <http://bphc.hrsa.gov/uds/datacenter.aspx?year=2013&state=TN>

¹⁴ Look-alikes meet all the eligibility requirements of an FQHC, but do not receive grant funding.