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Sequence Number: 09-13-18  
Notice ID(s): 2910  
File Date: 9/12/18

# Notice of Rulemaking Hearing

Hearings will be conducted in the manner prescribed by the Uniform Administrative Procedures Act, T.C.A. § 4-5-204. For questions and copies of the notice, contact the person listed below.

|                                 |  |
|---------------------------------|--|
| <b>Agency/Board/Commission:</b> | Tennessee Department of Finance and Administration                   |
| <b>Division:</b>                | Division of TennCare   |
| <b>Contact Person:</b>          | George Woods   |
| <b>Address:</b>                 | Division of TennCare<br>310 Great Circle Road<br>Nashville, TN 37243 |
| <b>Phone:</b>                   | (615) 507-6446   |
| <b>Email:</b>                   | george.woods@tn.gov  |

Any Individuals with disabilities who wish to participate in these proceedings (to review these filings) and may require aid to facilitate such participation should contact the following at least 10 days prior to the hearing:

|                     |  |
|---------------------|--|
| <b>ADA Contact:</b> | Talley A. Olson, Director<br>TennCare, Office of Civil Rights Compliance |
| <b>Address:</b>     | Division of TennCare<br>310 Great Circle Road<br>Nashville, TN 37243     |
| <b>Phone:</b>       | (855) 857-1673<br>TTY dial 711 and ask for 855-857-1673                  |
| <b>Email:</b>       | hcfa.fairtreatment@tn.gov  |

**Hearing Location(s)** (for additional locations, copy and paste table)

|                |   |   |                                  |
|----------------|---|---|----------------------------------|
| Address 1:     | Division of TennCare<br>310 Great Circle Road, Conference Room 1 East A |   |                                  |
| City:          | Nashville, TN   |   |                                  |
| Zip:           | 37243   |   |                                  |
| Hearing Date : | November 14, 2018   |   |                                  |
| Hearing Time:  | 9:00 a.m.   | <input checked="" type="checkbox"/> CST/CDT | <input type="checkbox"/> EST/EDT |

**Additional Hearing Information:**

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|  |
|--|

**Revision Type (check all that apply):**

- Amendment
- New
- Repeal

**Rule(s)** (ALL chapters and rules contained in filing must be listed. If needed, copy and paste additional tables to accommodate more than one chapter. Please enter only **ONE** Rule Number/Rule Title per row.)

|                       |                      |
|-----------------------|----------------------|
| <b>Chapter Number</b> | <b>Chapter Title</b> |
| 1200-13-13            | TennCare Medicaid    |
| <b>Rule Number</b>    | <b>Rule Title</b>    |
| 1200-13-13-.04        | Covered Services     |

Place substance of rules and other info here. Statutory authority must be given for each rule change. For information on formatting rules go to [http://sos-tn-gov-files.s3.amazonaws.com/forms/Rulemaking%20Guidelines\\_September2016.pdf](http://sos-tn-gov-files.s3.amazonaws.com/forms/Rulemaking%20Guidelines_September2016.pdf).

Part 12 of Subparagraph (c) of Paragraph (1) of Rule 1200-13-13-.04 Covered Services is amended by adding Subparts (vii) and (viii) which shall read as follows:

- (vii) Opioid prescriptions are subject to prior authorization following the first fill of a new opioid prescription.
- (viii) For women of child-bearing age (between the ages of fifteen (15) and forty-four (44)) and ability, when prior authorization is required for an opioid prescription, the prescribing provider must submit information to the enrollee's PBM regarding the enrollee's pregnancy status and use of contraception or family planning methods, and the provision of counseling regarding the risks of becoming pregnant while receiving opioid medication. The information regarding pregnancy status and contraceptive use may, when appropriate, be based on self-reporting by the patient.

Statutory Authority: T.C.A. §§ 4-5-202, 4-5-203, 71-5-105, 71-5-109 and 71-5-197.

I certify that the information included in this filing is an accurate and complete representation of the intent and scope of rulemaking proposed by the agency.

Date: 9/10/18

Signature: Wendy Long MD

Name of Officer: Wendy Long, M.D., M.P.H.

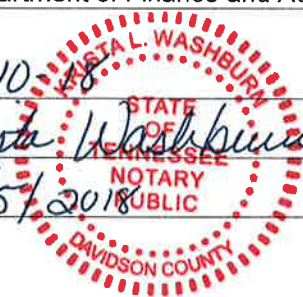
Division of TennCare

Title of Officer: Tennessee Department of Finance and Administration

Subscribed and sworn to before me on: 9-10-18

Notary Public Signature: Krista Washburn

My commission expires on: 11/5/2018



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Filed with the Department of State on: 9/12/18

Tre Hargett

Tre Hargett  
Secretary of State

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