

Notice of  
Rulemaking Hearing

Tennessee Department of Finance and Administration  
Bureau of TennCare

There will be a hearing before the Commissioner to consider the promulgation of amendments of rules pursuant to Tennessee Code Annotated, 71-5-105 and 71-5-109. The hearing will be conducted in the manner prescribed by the Uniform Administrative Procedures Act Tennessee Code Annotated, Section 4-5-204 and will take place in the Bureau of TennCare, 1<sup>st</sup> Floor East Conference Room, 310 Great Circle Road, Nashville, Tennessee 37243 at 9:00 a.m. C.S.T. on the 16<sup>th</sup> January 2008.

Any individuals with disabilities who wish to participate in these proceedings (to review these filings) should contact the Department of Finance and Administration, Bureau of TennCare, to discuss any auxiliary aids or services needed to facilitate such participation. Such initial contact may be made no less than ten (10) days prior to the scheduled meeting date (the date the party intends to review such filings) to allow time for the Bureau of TennCare to determine how it may reasonably provide such aid or service. Initial contact may be made with the Bureau of TennCare's ADA Coordinator by mail at the Bureau of -TennCare, 310 Great Circle Road, Nashville, Tennessee 37243 or by telephone at (615) 507-6474 or 1-800-342-3145.

For a copy of this notice of rulemaking hearing, contact George Woods at the Bureau of TennCare, 310 Great Circle Road, Nashville, Tennessee 37243 or call (615) 507-6446.

Substance of Proposed Rules

Paragraph (1) of rule 1200-13-14-.05 Enrollee Cost Sharing is deleted in its entirety and replaced with new paragraph (1) which shall read as follows:

- (1) Persons who are enrolled in TennCare Standard have premium obligations corresponding to their family size and income. No new premiums will be charged for periods of time from December 1, 2007, forward, notwithstanding anything else in these rules to the contrary. The premium schedule in effect prior to December 1, 2007, is shown below:

Percentage of Poverty	0% - 99%	100% - 149%	150% - 199%	200% - 249%	250% -299%
Monthly Premium (Individual)	\$0	\$20	\$35	\$100	\$150
Monthly Premium (Family of 2 or more)	\$0	\$40	\$70	\$250	\$375

Percentage of Poverty	300% - 349%	350% - 399%	400% - 499%	500% - 599%	600% and over
Monthly Premium (Individual)	\$200	\$250	\$350	\$450	\$550
Monthly Premium (Family of 2 or more)	\$500	\$625	\$875	\$1,125	\$1,375

Paragraph (2) of rule 1200-13-14-.05 Enrollee Cost Sharing is amended by deleting subparagraphs (a) and (b) in their entirety and replacing them with a new subparagraph (a) and the present subparagraph (c) is renumbered as subparagraph (b) so as amended paragraph (2) shall read as follows:

(2) Premium Requirements.

- (a) No persons enrolled in TennCare Standard will have premium obligations for periods of time from December 1, 2007, forward. Enrollees who had premium obligations prior to December 1, 2007, and who have not made all required premium payments are not relieved of the responsibility for making these past due payments to TennCare.
- (b) At such time as (1) the enrollee has received at least two premium statements advising him of his arrearage AND (2) he is 60 days in arrears on his premium payments, coverage may be terminated for non-payment of premiums.
  - 1. Enrollees who are in arrears two months in premium payments will be sent a notice of delinquency (a "demand letter"). The notice will identify the specific payments, including month and amount, that are past due. The demand letter will serve as notice to the individual that he/she will be terminated from TennCare Standard unless he pays the amount due within 30 days. The enrollee has the right to appeal that he is in fact current with his/her payments or that the premium amounts being charged are not the premium amounts he has been assigned.
  - 2. If at least partial payment is received by the Bureau of TennCare within 30 days after the date of the demand letter, the enrollee will no longer be 60 days in arrears, and coverage will continue without interruption. "Partial payment" will be payment sufficient to make the enrollee no longer 60 days in arrears. However, remaining past due amounts will continue to accrue. If the enrollee is again 60 days in arrears when the next cycle of demand letters is processed, the enrollee will again receive a demand letter and may subsequently be terminated in accordance with these rules.
  - 3. If an enrollee files an appeal in response to his demand letter by the 30<sup>th</sup> day following the date of the notice, coverage will not be terminated on the 30<sup>th</sup> day, pending resolution of the appeal. The premium appeal will be processed by DHS in accordance with its rules at 1240-5.
  - 4. If the enrollee does not pay at least a partial payment or file an appeal by the 30<sup>th</sup> day following the demand letter, his TennCare Standard coverage will be terminated. A termination notice will be sent with due process appeal rights. The date of termination is the date of notice. An enrollee may appeal his notice of termination, but he is not entitled to continuation of benefits during the appeal. If the appeal is decided in his favor, he will be reinstated retroactively to the date of termination.

Statutory Authority: T.C.A. 4-5-202, 4-5-203, 71-5-105, 71-5-109, Executive Order No. 23.

The notice of rulemaking set out herein was properly filed in the Department of State on the 30th day of November, 2007. (FS 11-28-07; DBID 785)