I am herewith submitting amendments to the rules of the Tennessee Department of Finance and Administration, Bureau of TennCare, for promulgation pursuant to the public necessity provisions of the Uniform Administrative Procedures Act, T.C.A. § 4-5-209 and the Medical Assistance Act, T.C.A. § 71-5-134.

This rule is being amended to allow for a Presumptive Eligibility process that will provide short term temporary and limited eligibility to persons who are likely to qualify for regular institutional Medicaid eligibility pursuant to DHS Rule 1240-3-3-.02(9) and provide them with home services that will keep them out of nursing homes at no financial risk to the person. This process serves to bolster the safety net in providing services to persons who are not now or are no longer eligible for TennCare. The presumptive eligibility program will be effective on or about February 1, 2006.

Tennessee Code Annotated, Section 71-5-134, states that in order to comply with or to implement the provisions of any federal waiver or state plan amendment obtained pursuant to the Medical Assistance Act as amended by Acts 1993, the Commissioner of Finance and Administration is authorized to promulgate public necessity rules pursuant to Tennessee Code Annotated, Section 4-5-209.

I have made a finding that these amendments are required to conform the current TennCare Medicaid rules to reflect changes resulting from the amendment of the TennCare waiver.

For a copy of this public necessity rule, contact George Woods at the Bureau of TennCare by mail at 310 Great Circle Road, Nashville, Tennessee 37243 or by telephone at (615) 507-6446.

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J. D. Hickey
Deputy Commissioner
Tennessee Department of Finance
and Administration
Rule 1200-13-1-.02 Eligibility is amended by adding a new paragraph (9) which shall read as follows:

(9)  TennCare may provide a 45 day period of presumptive eligibility in conjunction with an approved Pre-Admission Evaluation for persons seeking admission to a Home and Community Based Services program as described in rules 1200-13-1-.17, 1200-13-1-.26 or 1200-13-1-.27.  Such Presumptive Eligibility shall only be valid for the payment of covered services provided in the Home and Community Based Services program during the period of presumptive eligibility.  Such Presumptive Eligibility shall not be valid for the payment of any Medicaid services other than those covered in the Home and Community Based Services program.


The Public Necessity rules set out herein were properly filed in the Department of State on the 30th day of January, 2006, and will be effective from the date of filing for a period of 165 days. The Public Necessity rules remain in effect through the 14th day of July, 2006.