Day 1
TennCare Basics

Chris Coleman
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Household Counting

Chris Coleman
Staff Attorney
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Household Counting
3 Types of Household Counting Rules:

1. MAGI categories
2. Medically needy spend down
3. Aged, blind, and disabled categories
Household Counting for MAGI Categories
What is MAGI?

MAGI = Modified Adjusted Gross Income

MAGI rules apply to:

- Premium Tax Credits
- CoverKids
- Some TennCare eligibility categories
Household Size Under MAGI Rules

Step 1: What is the applicant’s *expected* tax filing status?

1. Tax filers not claimed as tax dependents
2. Tax dependents
3. Non-filers and not claimed as tax dependents
The MAGI household will ALWAYS be either:

1. Tax filing unit

2. Parents, spouse, minor children, and minor siblings living together (family unit)
Household Size for Premium Tax Credits
Household size = Tax filing unit
Household Size for TennCare
Household Size for TennCare: Tax Filer Not Claimed as a Dependent

Household size = Tax filing unit
Household Size for TennCare: Non-filer, Not Claimed as a Dependent

Household size = Parents, spouse, minor children, and minor siblings living together
Household Size for TennCare: Tax Dependent

Household size = household of the tax filer claiming the dependent (tax filing unit),

unless . . .
Household Size for TennCare: Tax Dependent - EXCEPTIONS

1. Tax dependent is not minor child or spouse of tax filer
2. Tax dependent is a minor child living with both parents who are unmarried
3. Tax dependent is a minor child claimed as a tax dependent by a non-custodial parent
Gunnar

- Gunnar lives alone, of course.

- Gunnar is not claimed as a dependent on anyone else’s tax return and has no tax dependents.

<table>
<thead>
<tr>
<th>Counted in HH</th>
<th>HH Size for Medicaid</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gunnar</td>
<td>✔️</td>
</tr>
</tbody>
</table>

1

Medicaid Household Size
**Conrad-James Family (pre-divorce)**

- Conrad-James family: married couple with 2 children
- Teddy and Rayna file a joint return and claim both children as dependents

<table>
<thead>
<tr>
<th>Counted in HH</th>
<th>Rayna</th>
<th>Teddy</th>
<th>Maddie</th>
<th>Daphne</th>
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<tbody>
<tr>
<td></td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
</tr>
</tbody>
</table>
| Rayna         | ✔     | ✔     | ✔      | ✔      | 4
| Teddy         | ✔     | ✔     | ✔      | ✔      | 4
| Maddie        | ✔     | ✔     | ✔      | ✔      | 4
| Daphne        | ✔     | ✔     | ✔      | ✔      | 4

**Medicaid Household Size**
Conrad≠James Family (after divorce)

- Rayna lives with both daughters and files taxes as a single individual
- Teddy claims girls as tax dependents

<table>
<thead>
<tr>
<th>Counted in HH</th>
<th>Rayna</th>
<th>Maddie</th>
<th>Daphne</th>
<th>Teddy</th>
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<tr>
<td>Rayna</td>
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<tr>
<td>Maddie</td>
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<td>✔</td>
<td></td>
</tr>
<tr>
<td>Daphne</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td></td>
</tr>
<tr>
<td>Teddy</td>
<td>✔</td>
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<td></td>
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</table>

<table>
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<th>HH Size for Medicaid</th>
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<tr>
<td>1</td>
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<tr>
<td>3</td>
</tr>
<tr>
<td>3</td>
</tr>
</tbody>
</table>
Conrad≠James Family (after divorce)

- Rayna lives with both daughters. Rayna claims Maddie as a tax dependent.
- Teddy claims Daphne as a tax dependent.

<table>
<thead>
<tr>
<th>Counted in HH</th>
<th>Rayna</th>
<th>Maddie</th>
<th>Daphne</th>
<th>Teddy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rayna</td>
<td>✔</td>
<td>✔</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maddie</td>
<td>✔</td>
<td>✔</td>
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<tr>
<td>Daphne</td>
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<td>✔</td>
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<tr>
<td>Teddy</td>
<td>✔</td>
<td>✔</td>
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<td></td>
</tr>
</tbody>
</table>

**HH Size for Medicaid**

- Rayna and Maddie: 2
- Rayna, Maddie, and Daphne: 3
- Teddy and Daphne: 2

**Medicaid Household Size**
Juliette – Three-Generation Household

- Juliette lives with and supports her 44-year old mother, Jolene, and her 1-year old daughter, Cadence
- Juliette is the tax filer and claims Jolene and Cadence as dependents

<table>
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<tr>
<td>Jolene</td>
<td>✓</td>
<td>1</td>
</tr>
<tr>
<td>Cadence</td>
<td>✓</td>
<td>3</td>
</tr>
</tbody>
</table>
3 Types of Household Counting Rules:

- ✓ MAGI categories
- 2. Medically needy spend down
- 3. Aged, blind, and disabled categories
Household Counting for Medically Needy Spend Down
Household Size for Medically Needy Spend Down

**Children:**
Household size = self + parents + siblings under age 21

- DO NOT include step-parents or step-siblings
- INCLUDE unborn child(ren) who will become the applicant’s sibling(s)
Household Size for Medically Needy Spend Down

**Pregnant women:**

Household size = self + spouse + unborn child(ren) + children under age 21

• Do not include step-children
3 Types of Household Counting

Rules:

- MAGI categories
- Medically needy spend down
- Aged, blind, and disabled categories
Aged, Blind, and Disabled (ABD) Categories

• SSI disability-related categories
  • SSI recipients, Pickle, Disabled Adult Child (DAC), Disabled Adult Widow(er) (DAW), 1619(b)
• CHOICES
• Institutionalized TennCare
• Hospice
• Medicare Savings Programs
Household Size: Aged, Blind, and Disabled Categories

Household size is ALWAYS either 1 or 2.
Household Size: Aged, Blind, and Disabled Categories

Household of 2 only if applicant is married to someone also eligible for Medicaid and they live together.
3 Types of Household Counting Rules:

- ✔ MAGI categories
- ✔ Medically needy spend down
- ✔ Aged, blind, and disabled categories
Household Changes Can Affect Eligibility and/or Amount of Assistance

Household changes:
• Birth or adoption of child
• Marriage, divorce, or legal separation
• Death of family member
• Family member no longer eligible to be claimed as tax dependent
• Minor turning 18
Pregnant Women

• For the **Marketplace**, a pregnant woman counts as one person.

• For **TennCare MAGI categories**, Tennessee counts the woman plus the number of children she expects to have for *her household only*.

• For **medically needy spend down**, unborn child(ren) are considered part of applicant’s household.
What’s Next?
Counting Income!
Income Counting

Rob Watkins
Staff Attorney
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What is Income?
3 Methodologies
MAGI

Non-MAGI

SSI Counting Rules
TennCare and CoverKids

Premium Tax Credits

Cost Sharing Reductions
TennCare and CoverKids = 5% Disregard

PTCs & CSRs = NO 5% Disregard
Kids
Pregnant Women
Caretaker Relatives
TennCare Standard
Transitional TennCare

= MAGI
Gross Income - Deductions + Add Back Income = MAGI
Gross Income
Gross Income - Deductions
<table>
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<tr>
<th>Item</th>
<th>Description</th>
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<tbody>
<tr>
<td>23</td>
<td>Educator expenses</td>
</tr>
<tr>
<td>24</td>
<td>Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ</td>
</tr>
<tr>
<td>25</td>
<td>Health savings account deduction. Attach Form 8889</td>
</tr>
<tr>
<td>26</td>
<td>Moving expenses. Attach Form 3903</td>
</tr>
<tr>
<td>27</td>
<td>Deductible part of self-employment tax. Attach Schedule SE</td>
</tr>
<tr>
<td>28</td>
<td>Self-employed SEP, SIMPLE, and qualified plans</td>
</tr>
<tr>
<td>29</td>
<td>Self-employed health insurance deduction</td>
</tr>
<tr>
<td>30</td>
<td>Penalty on early withdrawal of savings</td>
</tr>
<tr>
<td>31a</td>
<td>Alimony paid b Recipient’s SSN</td>
</tr>
<tr>
<td>32</td>
<td>IRA deduction</td>
</tr>
<tr>
<td>33</td>
<td>Student loan interest deduction</td>
</tr>
<tr>
<td>34</td>
<td>Tuition and fees. Attach Form 8917</td>
</tr>
<tr>
<td>35</td>
<td>Domestic production activities deduction. Attach Form 8903</td>
</tr>
<tr>
<td>36</td>
<td>Add lines 23 through 35</td>
</tr>
<tr>
<td>37</td>
<td>Subtract line 36 from line 22. This is your <strong>adjusted gross income</strong></td>
</tr>
</tbody>
</table>

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.
Gross Income - Deductions + Add Back Income
Foreign Income
+ Non-Taxable Interest
+ Non-Taxable Social Security
Gross Income - Deductions + Add Back Income = MAGI
Special Rule for Tax Dependents
Required to File?
YES - countable
NO - exclude
Non-MAGI
Not Based On IRS Rules
Resource Limits Apply
CHOICES
Institutionalized
Medically Needy Spend Down
Disability Categories
SSI Counting Rules
Income Disregards
Treatment of Income
LAST WILL AND TESTAMENT
FAST check

Social Security benefits*/2 + All other income*

If less than $25,000 (single)
If less than $32,000 (married)

• Then: None of the benefit is taxable.
• If over limit need to calculate amount.

*If married, include spouse’s income and benefits
Income Disregards
Resources
Ownership
Accessibility
Equity Value
Ownership
Ownership
Accessibility
Equity Value
FMV – Debt = Equity
Treatment of Resources
Medically Needy Spend Down
SSI - Disability Related Categories
CHOICES

MAGI Categories = NO Resources Test
Specific Types of Resources
SOCIAL SECURITY
DISABILITY CLAIM

APPROVED
Practice
Calculating MAGI: Lamar

- Rayna’s dad, Lamar, is 62.
- In 2012, he had a stroke and began getting SSDI.
- Gets SSDI for $900/mo.
- Has $1200 in savings.
- Receives $600/mo in royalties from deceased wife’s records.
- Lamar pays $150/mo in child support for a yet-to-be disclosed child
- Received a one-time gift of $11,000 from Rayna
Calculating MAGI: Lamar

• Rayna’s dad, Lamar, is 62.
• In 2012, he had a stroke and began getting SSDI.
• Gets SSDI for $900/mo.
• Has $1200 in savings.
• Receives $600/mo in royalties from deceased wife’s records.
• Lamar pays $150/mo in child support for a yet-to-be-disclosed child.
• Received a one-time gift of $11,000 from Rayna.
Calculating MAGI: Lamar

Lamar’s MAGI = $1,500 X 12 = $18,000/yr
Calculating Resources

- Lives in a $1M home that he still owes $700k;
- Owns a 1976 Cadillac Eldorado convertible, and 1974 Ford Pinto that he owes nothing.
- Has mineral rights on the homestead property worth $800k;
- Owns a boat and trailer although both are in disrepair and worthless;
- Has $300k in a Traditional IRA

Identify the issues
MAGI Coverage

Categories

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Training Coordinator
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MAGI Eligibility Categories

Children
MAGI Eligibility Categories

Children

Pregnant Women
MAGI Eligibility Categories

Children
Pregnant Women
Parent and Caretaker Relative
MAGI Eligibility Categories

Children
TennCare Medicaid
TennCare Medicaid

CoverKids / CHIP
TennCare Deeming
TennCare Deeming
CoverKids Deeming
Newborn Presumptive Eligibility (NPE)
George
- 5 years old
- 110% FPL
- On parent’s insurance
What is George eligible for?
Charlotte
• 3 months old
• 110% FPL
• On parent’s insurance
What is Charlotte eligible for?
MAGI Eligibility Categories

Children

Pregnant Women
TennCare Medicaid
TennCare Medicaid
Presumptive Eligibility (PE)
TennCare Medicaid Presumptive Eligibility (PE) Cover Kids
MAGI Eligibility Categories

Children
Pregnant Women
Parent and Caretaker Relative
Jay Z

- 47 years old
- $4,525 / month
- No insurance
What is Jay eligible for?
Beyoncé

• 35 years old
• $4,525 / month
• No insurance
• Pregnant with twins
What is Beyoncé eligible for?
Break
Safety Net Programs

Thomas Bynum
Training Coordinator

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TennCare Standard
Transitional TennCare
Extended TennCare
TennCare Standard
TennCare Standard

Transitional TennCare

Extended TennCare
Gap-Filling Rule

MIND THE GAP
Categorically eligible under MAGI?

Yes

Eligible monthly income?

Yes

Apply for TennCare!

No

Not eligible 😞

No

Projected annual household income below 100% FPL?

Yes

Eligible under gap-filling rule

No

Not eligible 😞
Practice Scenarios

Thomas Bynum
Training Coordinator
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Archie and Betty

- 19 years old
- Living together but unmarried
- Combined income of $715/month
Homer Simpson

- Married, father of 3
- Just started working October 1
- Makes $2,700 per month
TennCare Medicaid under Gap Filling Rule
Eli and Amy

- 28 and 5
- Income bump from $1,300 to $2,750
- No resources
PTCs/CSRs
Questions?
Current State of Healthcare

Keila Franks
Field Director
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What’s even happening with Congress?

“All in favor of sneaking this new new health care bill past an unsuspecting public, say ‘Aye’.”
“Repeal and Replace”
Round 1: American Health Care Act
American public demanded “Protect our care!”
House pulled the AHCA from the floor
House passed AHCA with a narrow vote
Candlelight vigils held across Tennessee
Round 2: Better Care Reconciliation Act
Delay... Delay... Delay...
BCRA: Senator Corker votes NO
Round 3: Repeal WITHOUT a Replacement – Senator Alexander votes NO
Round 4: “Skinny Repeal” - FAILS
Round 5: Graham-Cassidy

CASSIDY: WE DON'T HAVE THE VOTES FOR HC PLAN
YOU saved the ACA and Medicaid!

YOU STOOD UP FOR TENNESSEANS.
YOUR VOICE MATTERED.
FROM ALL OF US AT TJC:
THANK YOU.
So... What now?

Target #1

Target #2
Target #1: Obamacare
Possibilities for Repealing the ACA

Keep an eye on the federal fiscal year 2019 budget resolution!
• Likely to come in first half of 2018
Meanwhile... Sabotage of ACA

10/12: Executive order - association health plans
ACA Sabotage: Cost-Sharing Reductions

The Democrats ObamaCare is imploding. Massive subsidy payments to their pet insurance companies has stopped. Dems should call me to fix!

4:36 AM - 13 Oct 2017

8,922 Retweets 38,594 Likes
ACA Sabotage: Outreach and Enrollment

The System is down at the moment.
We’re working to resolve the issue as soon as possible. Please try again later.

Please include the reference ID below if you wish to contact us at 1-800-318-2596 for support.
Reference ID: 0.cd17617.1380639133.6cffe0f

Health Insurance Marketplace

181 DAYS LEFT TO ENROLL

Open Enrollment Begins

1 DAY

Covered

31 DAYS

Open Enrollment Closes

Live Chat
ACA Sabotage: No-Cost Birth Control Rollback
ACA Sabotage: Federal Uncertainty

**Why Individual Rates are Rising for 2018**

We achieved a better balance between rates and costs for 2017.

<table>
<thead>
<tr>
<th>Without Federal Uncertainty:</th>
<th>With Federal Uncertainty:</th>
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</thead>
<tbody>
<tr>
<td>Nominal Increase</td>
<td>21% Average Increase</td>
</tr>
<tr>
<td>+14%</td>
<td>A possible lack of funding for the consumer CSR program will add costs.</td>
</tr>
<tr>
<td>+7%</td>
<td>A potential lack of enforcement on the coverage mandate will negatively affect the risk pool.</td>
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</tbody>
</table>
Combatting Sabotage: Need Bipartisan Solutions

Senator Alexander

- bipartisan marketplace stabilization talks
Take action!

1. Call Senator Alexander (202-224-4944)
   • encourage him to continue bipartisan marketplace stabilization talks
   • Call Senator Corker (202-224-3344) and ask him to support bipartisan talks

2. Submit a letter to the editor about ACA sabotage to your local paper.
Target #2: Medicaid
Threats to Medicaid

“That’s Where the Money is…”

— Willie Sutton
Threat to Medicaid: Tax Reform
Medicaid/TennCare is BIG

• TennCare covers 1.55 million Tennesseans
• Provides over 50% of federal funds in state budget
• Over 20¢ of ever dollar in state budget is federal Medicaid funding.
Importance of Medicaid Funding in TN Budget

In addition to TennCare, 5 departments partially rely on federal Medicaid $$ to fund administration and/or direct services:

- Children’s Services
- Health
- Human Services
- Intellectual and Developmental Disabilities
- Mental Health and Addiction Services
TennCare is Critical for TN Kids

• Covers 50% of the babies born in Tennessee, and provides major funding for the state’s network of neonatal intensive care units
• Covers over 50% of all Tennessee children
• Is the single most important payer for services for children with severe health care needs
TennCare is critical for Behavioral Health

• TennCare is the largest single payer for mental health and addiction services.
• TennCare has major role in state efforts to combat opioid and meth addiction epidemics, which are among the worst in the nation.
TennCare & People with Disabilities

• Covers approximately 250,000 Tennesseans with disabling illnesses
• Pays for 61% of nursing home care in TN
TennCare & Rural Health

• TennCare enrollment is generally twice as high in rural counties as in urban counties
• Plays an indispensable role in sustaining the health care infrastructure of rural Tennessee
Impact on Health Care Infrastructure

• 32 TN hospitals are at risk of major cuts or even closure because they have, on average, lost money over the past three years.
  • If these hospitals closed, this would leave 23 more Tennessee counties without a hospital.
• These at-risk hospitals directly employ over 13,000 Tennesseans
Tennessee hospital closes after falling 94% short of GoFundMe goal

Written by Ayla Ellison (Twitter | Google+) | October 02, 2017 | Print | Email
“If McNairy Hospital had not been there, my daughter would not be alive.”
Nowhere to Safely Cut

• TN is 39th in Medicaid expenditures per enrollee.
• TN’s eligibility criteria is already among the strictest of any state.
• TN’s provider payment rates and benefits are already among the lowest of any state.

Therefore, there is no way to respond to federal cuts without slashing coverage for the very vulnerable patients who account for most of the cost.
What else is Congress (not) doing?

Children’s Health Insurance Program

MIECHV

Community Health Center funding
Children’s Health Insurance Program

8.9 Million Children Enrolled*

* 2016 Statistical Enrollment Report
Maternal, Infant, and Early Childhood Home Visiting (MIECHV)
I WILL KEEP FIGHTING FOR HEALTH CENTERS UNTIL CONGRESS FIXES THE CLIFF!

I'M A PART OF THE HEALTH CENTER Advocacy NETWORK

#FIXTHECLIFF #VALUECHCS
Take action!

Call Senators Alexander and Corker (202-224-3121) and tell them to:
1. Renew funding for CHIP
2. Extend the MIECHV program
3. Reauthorize Community Health Center funding
State-level threats and opportunities
1115 waiver: TennCare Work Requirements
What is the Coverage Gap?

- 280,000 Tennesseans have no access to health care coverage.
- 31 other states have closed their gap.
Low-income, AND...
• Child
• Parent
• Pregnant woman
• Woman with breast/cervical cancer
• Some with federally-determined disabilities

Income over...
• $12,000 for 1
• $16,000 for 2
• $20,000 for 3
• $24,000 for 4

THE COVERAGE GAP IS CLOSER THAN YOU THINK

Hard-working Tennesseans stuck in a “Coverage Gap” through no fault of their own.

INSURE TENNESSEE will give 280,000 people access to much-needed healthcare.
Our Neighbors in the Coverage Gap

• 280,000+ Tennesseans
• 54% work at low wage jobs
• 24,000 uninsured veterans
• Many can’t work, but would if they could
Our Economy

• Since January 1, 2014, Tennessee has rejected $2.6 million per day that would provide coverage to at least 280,000 uninsured people.

• That means that as of October 16, 2017, TN has lost out on approximately....

$3.6 Billion
Kentucky accepted the federal dollars to expand coverage, and has seen at least:
• $1.16 billion infusion into economy
• Reduction of $1.15 billion in uncompensated care charges
• 5,400 new jobs in health care services
• 12,000 new jobs in administrative and support services
We need to close the gap.

Whatever it’s called, Tennessee needs a solution:

• A plan created by Tennesseans
• A plan approved by the federal government
• A plan that can pass in the legislature
Stay informed!

Text TNJUSTICE to 22828!
Stay informed!

https://www.facebook.com/tnjustice/

https://twitter.com/tnjusticecenter
Put this number in your phone!

Capitol switchboard
202-224-3121
Stories matter.

Hanna Ravi, TJC’s Story Outreach Coordinator: hravi@tnjustice.org
Questions?
Day 2
SSI Disability Categories

Jake Lorber
Volunteer Coordinator
jlrorber@tnjustice.org
SSI-Disability Categories

• SSI
• Disabled Adult Child
• Disabled Adult Widow(er)
• Pickle
• 1619(b)
SSI-Disability Categories

• SSI
• Disabled Adult Child
• Disabled Adult Widow(er)
• Pickle
• 1619(b)
Supplemental Security Income (SSI)
Basic SSI Eligibility

Income
Basic SSI Eligibility

Income  Resources
SSI & SSDI Differences
**SSI**

- Based on income and resources. After age 18, parents' income and resources do not count.
- Automatically enrolled in TennCare.

**SSDI**

- Administered by Social Security Administration.
- Provide cash assistance for individuals with disabilities.
- Must have disability as determined by SSA.
- Based on work history of individual or individual's parent or spouse.
- Eligible for Medicare after two years (exceptions: end-stage renal disease and ALS).
Which one is it? SSI or SSDI
SSI-Disability Categories

• SSI
• Disabled Adult Child
• Disabled Adult Widow(er)
• Pickle
• 1619(b)
DAC (Disabled Adult Child)
DAC — Categorical Eligibility
DAC – Income / Resources Eligibility
SSI-Disability Categories

• SSI
• Disabled Adult Child
• Disabled Adult Widow(er)
• Pickle
• 1619(b)
DAW (Disabled Adult Widow)
DAW – Categorical Eligibility
DAW – Income / Resources Eligibility
SSI-Disability Categories

• SSI
• Disabled Adult Child
• Disabled Adult Widow(er)
• Pickle
• 1619(b)
Pickle — Categorical Eligibility
Pickle – Income / Resources Eligibility
SSI-Disability Categories

• SSI
• Disabled Adult Child
• Disabled Adult Widow(er)
• Pickle
• 1619(b)
1619(b)
1619(b) – Categorical Eligibility
Pickle – Income / Resources Eligibility
SSI-Disability Categories

• SSI
• Disabled Adult Child
• Disabled Adult Widow(er)
• Pickle
• 1619(b)
CHOICES

Katie Ann Twiggs
CHOICES Client Advocate
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CHOICES Categories

CHOICES Group 1: Nursing home care

CHOICES Group 2: Full array of HCBS

CHOICES Group 3: Limited HCBS (SSI only)
Medical Eligibility
Transfer
Mobility
Eating
Toileting
Incontinence Care
Catheter/ostomy care
Orientation
Expressive Communication
Receptive Communication
Administering Medication
Behavior
PAE
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<tr>
<th>Functional Measure</th>
<th>Condition</th>
<th>Weights</th>
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<th></th>
<th></th>
<th>Max Individual Score</th>
<th>Max Acuity Score</th>
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<td>Highest value of two measures</td>
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<td>1</td>
<td>3</td>
<td>4</td>
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<td>Mobility</td>
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<td>2</td>
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<td>1</td>
<td>2</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Incontinence care</td>
<td>for the toileting measure</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
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</tr>
<tr>
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<td></td>
<td>0</td>
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<td>1</td>
<td>3</td>
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<td>for the communication measure</td>
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<td>0</td>
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<td>Self-administration of medication</td>
<td>First question only (excludes SS Insulin)</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>2</td>
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<td>1</td>
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<td></td>
<td></td>
<td></td>
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</tbody>
</table>
Financial Eligibility
Financial Hurdles

Five Year “Look Back” Rule

Estate Recovery

Qualified Income Trusts (QITs)
Potential Remedies for a Penalty Period
Potential Remedies for Estate Recovery
Where to Apply For CHOICES

AAAD

Client’s MCO

Appeal
Jolene is a 67-year-old woman with Stage-IV lung cancer and dementia.

She was recently hospitalized and sent to a rehabilitation facility.

Jolene’s daughter Juliette says she needs more time in a nursing facility than Jolene’s Medicare will cover.

Let’s walk through CHOICES application process step-by-step.
• Jolene cannot get into bed without help from her daughter.

• Jolene needs a walker to move around her room, and about once a week she her daughter helps her walk by holding her under her arm.

• Jolene can’t fix her own meals

• Jolene can’t always make it to the bathroom in time and has trouble cleaning up afterward.

• Jolene’s doctors have told her daughter Juliette that she shouldn’t drive any more. Juliette has taken her keys away.
<table>
<thead>
<tr>
<th>Functional Measure</th>
<th>Condition</th>
<th>Always</th>
<th>Usually</th>
<th>Usually Not</th>
<th>Never</th>
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<td>21</td>
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</tbody>
</table>
Appeal!
Approved for CHOICES Group 1!
• Until she was hospitalized, Jolene lived in her own home with her daughter Juliette, who helped to care for her.

• Jolene receives $1,500/mo. from Social Security retirement each month and $800/mo. from her pension.

• She has $4,500 in a savings account.

• She has a $5,000 whole life insurance policy with a cash surrender value (CSV) of $3,600.

• Juliette works part-time and earns $1,600/mo. Juliette doesn’t pay rent but helps with utilities and groceries.
Financial Medicaid Planning!
Financially Approved for CHOICES Group 1!
ECF CHOICES

Danielle Johns
Legal Fellow
djohns@tnjustice.org
ECF CHOICES: Basics
ECF CHOICES: Why?
Basic Structure
Service Tiers

• Essential Family Supports (Group 4)
• Essential Supports for Employment and Independent Living (Group 5)
• Comprehensive Supports for Employment and Community Living (Group 6)
Determinations
Level of Care
ECF Expenditure/Cost Caps
Which services count toward my cost cap?
SSI Eligible
ECF CHOICES
217-like Group
Interim ECF CHOICES
At-Risk
Priority Categories

Key Priorities
Reserve Capacity
ECF Group 4
ECF Group 5

YOU MUST BE AT LEAST 21 OR OLDER TO BE SERVED
ECF Group 6
Referral Process

Not on TennCare
- Online
- DIDD

Already on TennCare
- MCO

Screening
- Place on ECF category
- Intake
- Enrollment Process
- Refer to Interagency Committee
Benefits
ECF Consumer Direction

HAVE IT YOUR WAY®
Appeals
Involuntary Withdrawals

You don’t have to go home, but you can’t stay here!
Voluntary Withdrawals

Addendum is judicially enforceable.

THE ABOVE IS AGREED:

Dated:

FOR [NAME], Owner
Questions?
Medically Needy
Spend Down

Thomas Bynum
Training Coordinator
tbynum@tnjustice.org
Income - Bills < Spend Down Limit
Income
Income - Bills
Income - Bills < Spend Down Limit
Elroy
- 10 years old
- $4,500 income
- Elroy: $150 bills, Judy: $2,000 bills, Jane: $1,700 bills, George: $150/month prescription
- $3,800 in bank
Medically Needy
Spend Down
Other Coverage Categories

Thomas Bynum
Training Coordinator
tbynum@tnjustice.org
Hospice Care
Hospice Care

Breast and Cervical Cancer
Hospice Care

Breast and Cervical Cancer

Former Foster Children
Hospice Care
Breast and Cervical Cancer
Former Foster Children

Institutional TennCare
Hospice Care
Breast and Cervical Cancer
Former Foster Children
Institutional TennCare
Emergency Medicaid
Hospice Care
Breast and Cervical Cancer
Former Foster Children
Institutional TennCare
Emergency Medicaid
IV-E Adoption Status
Janet
• 45 years old
• $1,700/month
• $50k in bank
• Diagnosed with breast cancer
TennCare for Breast Cancer
Jerrod
• 24 years old
• $3,550/month
• $25k in bank
• Aged out of foster care at 18
TennCare for Foster Children
Angela

- 22 years old
- Single mother to 1 year old
- $1,355/month
- $1,500 in bank
- Legal immigrant last year
- In a car crash
Nothing for her emergency
Katherine
• 2 months old
• Been in NICU since birth
• $9,250/month parent income
• $1,500 in bank
Break
Social Determinants of Health

Keith Barnes
kbarnes@tnjustice.org
Director of Nutrition Advocacy
SOCIAL DETERMINANTS OF HEALTH

The social determinants of health are the conditions in which we are born, we grow and age, and in which we live and work. The factors below impact on our health and wellbeing.

- Childhood experiences
- Housing
- Education
- Social support
- Family income
- Employment
- Our communities
- Access to health services

Source: NHS Health Scotland
Source: Tennessee Department of Labor and Workforce Development, June 2017
Adverse Childhood Experiences (ACEs)
Whole Life Perspective

Conception

Adverse Childhood Experiences

Social, Emotional, & Cognitive Impairment

Adoption of Health-risk Behaviors

Disease, Disability, & Social Problems

Early Death

Death
ACEs in Tennessee
Outcomes
Figure 6: Employment-Related Variables by ACE Score

- Odds Ratio

- Having Health Care Coverage
- Retired
- Unable to Work
- Out of Work >1 Year
- Income <$10,000

- 0 ACEs
- 1 ACE
- 2 ACEs
- 3 ACEs
- 4+ ACEs
Figure 10: Depression Diagnosis by ACE Score

A person with four or more ACEs is four times as likely to have depression as a person with 0 ACEs (see figure 10).
The more ACEs a person has, the more likely he or she is to have asthma.

** data is not statistically significant
TJC on the Scene
Nutrition
Food Insecurity
Over one million food insecure Tennesseans

Source: Feeding America, Map the Meal Gap 2017
One in five Tennessee children
Figure i.2  Cycle of Food Insecurity & Chronic Disease: Diabetes

$160 Billion in Avoidable Healthcare Costs
TJC on the Scene
SNAP
Figure i.5  Children With Access to Food Stamps Fare Better Years Later

Percentage-point change for disadvantaged children by age 19 when food stamps became available

- Stunted growth: -6%
- Heart disease: -5%
- Obesity: -16%
- High school completion: 18%

Seniors who enroll in SNAP have improved health and reduced costs

- **14%** less likely to be admitted to the hospital
  - Average cost per hospital admission: **$28,360**

- **23%** less likely to be admitted into a nursing home
  - Average cost per nursing home admission: **$25,091**

Every senior enrolled in SNAP saves **$2,120** in healthcare costs every year.
Redeterminations

Chris Coleman
Staff Attorney
ccoleman@tnjustice.org
“A Rose is a Rose is a Rose” – Gertrude Stein

“Redeterminations” =

“Renewals” =

“Reverifications” =

“Recertifications”
Periodic Redetermination of Medicaid Eligibility
The State is Required to...

• Extend coverage for all enrollees whose current eligibility can be determined by review of records already available to the state. ("Ex parte review")

• Afford enrollees an opportunity to provide any missing information or documentation.

• Provide assistance – in person & by phone.

• Assess enrollees’ eligibility in all open categories of TennCare.
The State is Required to...

- If ineligible for TennCare, determine eligibility for other insurance affordability programs (CoverKids, PTCs, CSRs).
- Electronically transfer files to the Marketplace for those determined eligible for other insurance affordability programs.
- Notify enrollees of the state’s determination.
The Enrollee is Required to...

• Keep TennCare informed of any changes in contact information.
• Report changes in income and/or household composition.
• Fill out and return redetermination packets within 40 days.
• Provide supporting documentation, as requested by the state, within 10 days.
Reconsideration

Reconsider in a timely manner the eligibility of an individual who is

• terminated for failure to submit the renewal form or necessary information,

• if the individual subsequently submits the renewal form within 90 days after the date of termination without requiring a new application.

42 CFR 435.916(a)
TennCare’s Eligibility Determination System
Accent System (DHS)
A GLITCH IN GOVERNMENT

COMPUTER FAILURES ENTANGLE TENNESSEE

Systems meant to help children, the poor and the uninsured sidetracked by costly defects, delays

By Joe Maleval

Computer problems persist in Tennessee. What can we prevent similar snags in other states?
State lays off 121 workers

Department of Human Services eliminates 256 vacant positions; more layoffs planned

By Chas Sisk
csisk@tennessean.com

The state Department of Human Services has laid off 121 workers responsible for administering food stamp and welfare payments in Tennessee and eliminated 256 vacant positions.

The department said Monday that the workers were let go Friday as part of an effort to rethink how the state administers its Temporary Family Assistance programs. Officials also said in a news release that caseloads had decreased.

All of the workers who were laid off were probationary employees, meaning they had been in their positions less than 12 months. They were given 10 days' severance pay.

The workers were still in training or had taken on limited case work assignments and clerical duties, a spokeswoman for the department said. The Family Assistance division continues to employ about 2,400 people.

DHS officials said they plan more layoffs but have not yet determined what positions would be cut. Gov. Bill Haslam's 2014-15 budget, which the General Assembly approved this spring, calls for eliminating an additional 154 vacant positions.

Under Haslam, the state has cut more than 4,000 positions from its payrolls, bringing the total workforce down to about 43,000 workers.

Reach Chas Sisk at 615-259-8283 and on Twitter @chassisk.
The Health Insurance Marketplace is Open!

Enroll now in a plan that covers essential benefits, pre-existing conditions, and more.

Plus, see if you qualify for lower costs.

APPLY NOW

WANT TO LEARN MORE FIRST? START HERE

Get covered: A one-page guide
Find the Marketplace in your state
Get lower costs on health insurance
See what Marketplace insurance covers
Get help with your application
The Health Insurance Marketplace is Open!

Find new health care options that meet your needs and fit your budget. Apply for coverage that can begin as soon as January 1.

APPLY ONLINE  APPLY BY PHONE

SEE PLANS AND PRICES IN YOUR AREA  SEE PLANS NOW

Get covered: A one-page guide  Find out if you qualify for lower costs  See 4 ways you can apply for coverage  Get in-person help in your community  Call 1-800-318-2596 for information
TennCare fires Northrop Grumman

New vendor to build system of computers

By Tom Wilemon
twilemon@tennessean.com

TennCare will end its contract with Northrop Grumman.

To see a PDF of the KPMG audit report, go to Tennessean.com.

The report rated Northrop Grumman’s problems by impact and risk probability. The high-impact issues with a 90 percent or “almost certain” likelihood were:

- Seven to two, the report said. Terminating the Northrop Grumman contract and going with a new vendor actually carried more advantages. But the only advantage for TennCare was seven to two. Termination would also save money and also learn if they qualified for Medicaid.

TennCare needed to replace a more than 20-year-old computer system that could not be modified to process Medicaid applications according to new income guidelines set by the fed-
The State is Required to...

- Extend coverage for all enrollees whose current eligibility can be determined by review of records already available to the state. ("Ex parte review")
- Afford enrollees an opportunity to provide any missing information or documentation.
- Provide assistance – in person & by phone.
- Assess enrollees’ eligibility in all open categories of TennCare.
Challenges in Completing the “Renewal Packet”
Seven Challenges:

1. Extensive requests for information
2. Enrollees may not receive the redetermination packet
3. Individualized barcodes on packets
4. SSI-related eligibility categories
5. Eligible immigration statuses
6. Resources/assets
7. Enrollees may fail to take timely action
Extensive requests for information
Renewal Packet
Requests for More Information

- Enrollees have 10 days to respond to requests for more information.

- Request may not be specific.

- ALWAYS RESPOND! (Even if only with a letter asking for clarification of what information is needed.)
Enrollees May Not Receive the Redetermination Packet
Change of Address Form

• TennCare Change of Address Reporting Form
  
  • English:  
  http://tn.gov/assets/entities/tenncare/attachments/ChangeOfAddressForm.pdf

  • Spanish:  
  http://tn.gov/assets/entities/tenncare/attachments/ChangeOfAddressFormSP.pdf
Was I supposed to get a packet?

1. Call Tennessee Health Connection (TNHC) at 1-855-259-0701 and ask what address they have on file. Update address if needed.

2. Ask TNHC if you were supposed to get a redetermination packet.

3. If yes, request that TNHC sends you a new redetermination packet.

4. Record date, time, & the name of the TNHC representative whom you spoke to.

10/27/2016
It’s time to renew your TennCare!

Each year, we must see if you still qualify for TennCare. Do you want to see if you can keep your coverage? You must fill out and return the Renewal Packet that came with this letter by December 31, 2016.

This is the date your packet is due. This is not the date your TennCare will end.
Individualized Barcodes
Individualized Barcode

Barcode on **bottom, left-hand side** is unique to each “renewal packet” & on every page.
Renewal Packet
It's time to renew your health coverage!
We'll use the facts you send to us to see if you still qualify.

Who can use this Renewal Packet?

- The person this packet is addressed to.
- Other people in your household who have TennCare or CoverKids today.
- People whose TennCare or CoverKids ended no more than 90 days ago.

*If someone is helping you fill this out, you may need to complete Step 4 of this Renewal Packet.
Do NOT make copies of the redetermination packet for other people to use.
SSI-related Eligibility Categories (Pickle, DAC, DAW, 1619(b))
SSI-related Eligibility Categories

9. Do you live in a medical facility or nursing home or do you need nursing home care either in a nursing home or at home?  
   □ Yes  □ No  If Yes, fill out and send in both Appendix A and this renewal packet.

10. Do you have Medicare and want to get or keep help paying your Medicare cost sharing, like QMB or SLMB? These pay for your Medicare premiums and sometimes your Medicare co-pays, and deductibles. □ Yes □ No  If Yes, fill out and send in both Appendix A and this renewal packet.

11. Do you need hospice care? □ Yes  □ No  If Yes, fill out and send in both Appendix A and this renewal packet.

12. Have you gotten both an SSI check and a Social Security check in the same month at least once since April 1977, AND do you still get a Social Security check? □ Yes  □ No  If Yes, fill out and send in Appendix A and this renewal packet.

13. Are you pregnant or under age 21? AND have you or anyone else in your home gotten care or medicine in the last 3 months and have bills (paid or unpaid) for that care or medicine? □ Yes  □ No  If Yes, fill out and send in both Appendix A and this renewal packet.

14. Are you a U.S. citizen or U.S. national? □ Yes □ No

15. **If you aren't a U.S. citizen or U.S. national**, do you have an eligible immigration status? □ Yes
   a. What is your immigration status? __________________________ When did you gain that status? __________________________
Eligible Immigration Statuses
Eligible Immigration Statuses

14. Are you a U.S. citizen or U.S. national?  ☑ Yes ☐ No

15. If you aren’t a U.S. citizen or U.S. national, do you have an eligible immigration status?  ☐ Yes

a. What is your immigration status? ____________________________ What date did you gain that status? ____________________________

What date did you enter the U.S.? ____________________________

Fill in your document type and ID number below:

Alien or I-94 number

SEVIS ID or expiration date (optional)

Card number or passport number

b. Did you have a different status before?  ☐ Yes ☐ No  If yes, what was it?

Need help with your application? Call us at 1-855-259-0701. Do you need help in a language other than English? When you call, tell us the language you need. We’ll get you help at no cost to you. Do you have a hearing or speech problem and use a TTY? Call 1-800-848-0298, then dial 1-855-259-0701.

Rev: 29Apr16
Eligible immigration status means Person 1 has a status that allows you to be considered for health coverage.

For example, a legal permanent resident who has only been in the country with that status for 2 years will not be eligible for TennCare. But someone who has been in the country with that status for 5 years could be reviewed for health coverage.

Refugees and Asylees can be considered for health coverage. If you have had two different immigration statuses, be sure to tell us.
Resources/Assets
### Appendix A

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<th>Do you own:</th>
<th>What’s it worth now?</th>
<th>How much do you owe on it?</th>
<th>The kind of proof we need:</th>
</tr>
</thead>
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<td>Something that shows what it’s worth like a property tax statement and something that shows how much you owe like a mortgage statement</td>
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</table>

**Homestead**
Enrollees May Fail to Take Timely Action
Timeframes

• **40 days** to fill out and return the redetermination packet.
  • Failure submit packet or document eligibility will result in termination of TennCare.
  • Save fax receipt, OR request certified mail receipt

• **10 days** to respond to request for more information.
Continuation of benefits during appeal

10 days from notice of termination to request an appeal with continuation of benefits. (Save fax receipt or certified mail receipt!)
Continuation of benefits

8. Has your coverage ended? Is your coverage ending?

You may be able to keep your coverage during your appeal. **If you keep your coverage during your appeal and you lose, you may have to pay TennCare back.**

☑ Check this box if you want to ask to keep your coverage during this appeal. You will get a letter from TennCare that tells you if you can keep your coverage during your appeal.

**How to file your eligibility appeal**

Then, **mail** these pages and other facts to:

Make a copy of the completed pages to keep.

Tennessee Health Connection
P.O. Box 305240
Nashville, TN 37230-5240

Or, **fax** it (toll-free) to 1-855-315-0669. **Keep a copy** of the page that shows your fax went through.
Main Takeaways
Main Takeaways

• Contact Tennessee Health Connection to make sure they have the correct address on file, and report any changes.

• If you have not received a packet, ask Tennessee Health Connection if you were due to receive one.

• Make copies of all documents you send to TennCare, and ask the post office for proof of mailing.
Main Takeaways

• Failure to return the packet or respond to request for additional information will lead to loss of coverage.
• Packets are complex and difficult to complete.
• The packets fail to capture information needed to ensure that people who are eligible retain their coverage.
• There is much greater need for help in this process than in applying for coverage on the Marketplace.
Main Takeaways

• Document everything!

• Complete and return all forms by the deadlines. If you cannot meet a deadline, send what you have and ask for more time to send the rest.

• If terminated, appeal with continuation of benefits within 10 days of the termination notice.

• If an enrollee has a disability, call Tennessee Health Connection and tell them. Ask them for help completing the forms. Keep a record of the call.
Questions?
Appeals and Building a Record

Andy Hofer
Intake Coordinator
ahofer@tnjustice.org
Eligibility & Delay Appeals
PLUS
Building the Record
What’s the timeline?
How To Handle Appeals

"THEN HE TWEETED 'SEE YOU IN COURT!' TO A COURT."
The Filing Game

YOU DIDNT FILE YOUR PAPERWORK
Constantly Build the Record
AND NOW...

THE WAITING GAME....
But seriously . . .
PARTY TIME!
2
COULD YOU REPEAT EVERYTHING
OH WHY MUST YOU

REPEAT IT OVER AND OVER.
Eligibility Appeal Hearings

DO YOU NEED HELP?

I CAN HELP YOU
Best Practices Guide for TennCare Applications and Appeals

https://www.tnjustice.org/resources/toolkit/