United Healthcare Community Plan

TENNCARE AFTER YOU TURN 21

3

TENNCARE TRANSITIONS BOOKLET 3

CHOICES and Employment & Community First CHOICES

Revised

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This series of booklets tells you how your TennCare will change when you turn 21.

As you know, TennCare is the state of Tennessee's Medicaid program and follows the Medicaid rules of the federal government. Medicaid rules are different for adults age 21 and older than they are for children under age 21. The rules to qualify for Medicaid are different. And the Medicaid benefits you get after you turn 21 are different. We want to help you plan for these changes.

YOU GOT THIS BOOKLET BECAUSE:

- You are turning 21 soon (at least in the next few years).
- And you get home health care or private duty nursing paid for by TennCare.

You may be able to keep TennCare after you turn 21. But, you must be in a group that TennCare covers. If you keep TennCare after you turn 21, your benefits will change. You can read more of the following booklets to learn more about these changes.

BOOKLET 1

Qualifying for TennCare at Age 21 tells you who can keep TennCare at age 21.

BOOKLET 2

Changes to TennCare Benefits at Age 21 tells you how TennCare benefits change when you turn 21.

BOOKLET 3

CHOICES and Employment & Community First CHOICES tells you about two programs you may qualify for – and who is eligible. It also tells you about the services in these programs.

BOOKLET 4

What to do next? tells you about next steps. It also suggests things you may want to talk about with your health plan.

BOOKLET 5

TennCare *Select* and Turning 21 is for people in a special health plan called TennCare *Select*.

REMEMBER:

If you need help you can call your health plan. Here's the number to call:

BlueCare	1-800-468-9698
United Healthcare	1-800-690-1606
Wellpoint	1-800-600-4441

Your health plan can answer your questions. We want to help you make good choices about your TennCare.

BOOKLET 3

CHOICES and Employment & Community First CHOICES

This booklet is **only** for people who might want long-term care in CHOICES or Employment & Community First CHOICES.

Are you enrolled in a home and community-based services (HCBS) waiver operated by the Department of Disability and Aging (DDA)? If so, you can't be in CHOICES or Employment & Community First CHOICES too.

BOOKLET 3

Part 1: CHOICES and Employment & Community First CHOICES

"What is the difference between CHOICES and Employment & Community First CHOICES?"

One difference is **who qualifies for each program**:

- CHOICES is for individuals who need long-term care.[1] It also includes nursing facility services and HCBS.

- Employment and Community First CHOICES is for people of all ages with an intellectual disability (ID) or developmental disability (DD). This includes people with ID and DD who have severe disabilities.

The age limits are different for each program. Age limits may also be different for some of the groups in each program.[2]

The two programs offer similar benefits. Your benefits depend on which program **and** which group you're in.

CHOICES covers nursing home care. But it also covers services to help you live at home instead. These services can help you work and do things in the community. You can find a list of those services in the appendix at the end of this booklet. It tells you how each service can help, what benefit groups cover it, and the limits on that service. The appendix starts on page 47.

Employment and Community First CHOICES also helps you live at home if you have Intellectual Disabilities (ID) or Developmental Disabilities (DD). The services help you work and be part of your community. But because it's for people with ID or DD, it provides lots of employment supports. These are services that help a person with ID or DD get and keep a job. And there are other benefits too. It's a long list. Some of the services are only for adults. And some are only for people who live at home with their family. You can find the list of services in the appendix at the end of this booklet. It tells you how each service can help, what benefit groups cover it, and the limits on that service. The appendix starts on page 47.

To get services in your home and community, your health plan must decide they can safely serve you there. This means your health plan must decide that the services you get from the program, along with all of the other care and support you get, are going to keep you safe. If not, your health plan can't provide services to

you through CHOICES or Employment and Community First CHOICES.
See Part 2 and the appendix of this booklet for more information about the covered services and the cost caps for each program. A “cost cap” is the limit on the total cost of services that each person can get each year. Remember, Employment and Community First CHOICES is only for people with an ID or DD. Other rules also apply.

Example: Jared is turning 21. He has Down syndrome and has an ID. He is also on the autism spectrum. Jared needs a lot of help to manage his behaviors. Jared qualifies to get care in a nursing home. But Jared wants to live at home. He is also open to working part-time. But only if the job is in a very quiet place.

Jared may be eligible for both CHOICES and Employment and Community First CHOICES, too. He can decide which program he wants to apply for. But he can only enroll if there is a slot for him in the program he chooses. Since he is open to working and there is a slot for him, he signs up for Employment and Community First CHOICES.

Jared spends several months exploring employment and getting ready to work. He learns the skills he needs to do the job he wants to do. During all of this time, Jared gets services to help support him at home and in the community. With help from the program, Jared visits possible jobs and finds a part-time job he likes.

Employment and Community First CHOICES provides Jared with supports while he is at work. And it helps Jared travel to and from work. Jared also gets help to get ready for work. And he gets other services when he is not at work. Jared starts out working a few hours each week. After several months, Jared is thinking about working more hours each week. He likes his quiet job site. And he likes making his own money.

Reference: TennCare Rule 1200-13-01-.05, 1200-13-01-.31.

"How does TennCare know who needs long-term care?"

TennCare gets your medical information. A nurse reviews your information. The nurse decides if you qualify to get care in a nursing home[3] or if you're "at risk" for needing nursing home care.[4] If you qualify to get care in a nursing home (or if you are "at risk"), then you may be eligible for CHOICES or Employment and Community First CHOICES.[5]

Example: Joe is turning 21. Joe has medical conditions. He gets home health aide care now from TennCare. But he doesn't qualify to get care in a nursing home. And he is not "at risk" for needing care from a nursing home. So, Joe doesn't qualify for CHOICES. And he doesn't qualify for Employment and Community First CHOICES.

But Joe may still get services from his health plan if he stays eligible for TennCare. See Booklet 1 for some of the groups TennCare covers at age 21. Booklet 1 is titled Qualifying for TennCare at Age 21.

If Joe's condition gets worse, then he might think about CHOICES or Employment and Community First CHOICES.

Reference: TennCare Rule 1200-13-01-.05, 1200-13-01-.31, 1200-13-13-.02, 1200-13-14-.02, 1200-13-20.

"What is an intellectual disability (ID) or a developmental disability (DD)?"

An intellectual disability (ID) means you had an IQ of 70 or below **before** age 18. And you must need a lot of help with at least 2 life skills. These skills include communication, self-care, home living, social skills, community use, self-direction, health and safety, school learning, and leisure and work.

A developmental disability (DD) means you had a physical or intellectual impairment before age 22. Your impairment must be likely to continue for the rest of your life. And you must need a lot of help with at least 3 major life activities. These activities include self-care, receptive and expressive language, learning, getting around, self-direction, living on your own, and supporting yourself financially.[6]

Example A: Francine is turning 21. She has an IQ of 68. Francine does not have a physical impairment of any type. She also doesn't need help with any life skills or activities.

Francine doesn't have a physical disability. She also doesn't have an ID or DD since she doesn't need help with life skills or activities. So, Francine doesn't qualify for CHOICES or Employment and Community First CHOICES right now.

But, Francine may still get services from her health plan if she stays eligible for TennCare. Read Booklet 1 for some of the groups TennCare covers at age 21. Booklet 1 is titled Qualifying for TennCare at Age 21.

If Francine's condition gets worse, then she might think about Employment and Community First CHOICES.

Example B: Juan is turning 21. At age 12, he had a serious accident. He is paralyzed below his waist and uses a wheelchair. Juan has limited use of his arms and he has other medical conditions. He needs a lot of help each day in order to live at home. He qualifies to get care in a nursing home. Juan is smart and was a "straight A" student in community college. He wants to work and live independently.

Juan has a physical disability. So, Juan might qualify for CHOICES. His impairment occurred before age 22. If he needs help with 3 major life activities, he will meet the definition of having DD. He might also qualify for Employment and Community First CHOICES. He'll have to decide which program he wants to apply for. But he can only enroll if there is a slot for him in the program he chooses.

Reference: TennCare Rule 1200-13-01-.05, 1200-13-01-.31. 1200-13-13-.02, 1200-13-14-.02.

“I have a mental health condition. But I don’t have a physical disability, ID, or DD. Can I enroll in CHOICES or Employment and Community First CHOICES?”

No. You must also have a physical disability (or be age 65 or older) to enroll in CHOICES. And you must have an ID or DD to qualify for Employment and Community First CHOICES.

But you can get other help if you still qualify for TennCare. This includes help for your mental health condition. Ask your health plan about HealthLink. You may get help with living or employment skills, counseling, or medications.

Also, read Booklet 1 for some of the groups TennCare covers at age 21. Booklet 1 is titled Qualifying for TennCare at age 21.

Example: Sam is turning 21. He has an IQ of 80. Sam has bipolar disorder and other mental health problems. Sam needs a lot of support each day. But Sam does not have a physical impairment of any type.

Sam doesn't have a physical disability. So, Sam doesn't qualify for CHOICES. And he doesn't have an ID or DD. So, he doesn't qualify for Employment and Community First CHOICES either.

But, Sam may still get mental health treatment (and other services) from his health plan if he still qualifies for TennCare. Read Booklet 1 for some of the groups TennCare covers at age 21. Booklet 1 is titled Qualifying for TennCare at Age 21.

Reference: TennCare Rule 1200-13-01-.05, 1200-13-01-.31, 1200-13-13-.02, 1200-13-14-.02, 1200-13-20.

"I have an ID or DD. Could I be eligible for both CHOICES and Employment and Community First CHOICES?"

Possibly, yes. But to enroll in CHOICES or Employment and Community First CHOICES, you must be in one of the groups that may qualify to enroll now. You can find a list of those groups on pages 48 and 56. You may want to explore both programs. If you could qualify for both programs, you must decide which one is best for you. You can't enroll in both programs at the same time. And, there must be a slot for you in the program you choose.

"I have an ID or DD. Am I eligible for Employment and Community First CHOICES right away?"

Not necessarily. You also must meet the other program rules. For example, you must need long-term care and there must be a slot for you. To enroll in Employment and Community First CHOICES, you must be in one of the groups that may qualify to enroll now. You can find a list of those groups on page 56.

Example: Tina is turning 21. At age 16, she had a serious accident. She now has a DD and multiple physical disabilities. She needs a lot of help each day in order to live at home. Tina qualifies to get care in a nursing home.

Tina isn't open to exploring work right now. And she isn't in any of the groups that may qualify to enroll in Employment and Community First CHOICES now.

Tina may qualify for CHOICES. If so, CHOICES will provide services to help her keep living at home. Tina can also explore work opportunities in CHOICES.

Reference: TennCare Rule 1200-13-01-.05, 1200-13-01-.31. 1200-13-13-.02, 1200-13-14-.02.

"I have an ID or DD. Do I have to work to be in Employment and Community First CHOICES?"

No. You don't have to work to be in Employment and Community First CHOICES. But people who need support to work may qualify to enroll and get services sooner.

You still might be able to sign up sooner if you are:

- Interested in working, with help from the program, OR

- Open to exploring the option of working—even part-time or working for yourself, with help from the program.

You might also be able to enroll if you're in any of the groups that may qualify to enroll now. You can find a list of those groups on page 56. Keep reading to learn more.

"I have an ID or DD. I don't think I can work because of my disability. Could I still qualify to enroll in Employment and Community First CHOICES?"

Every person can be supported to work, regardless of their level of disability. As long as you are open to the idea of working, you may qualify to enroll sooner. But there must be a slot for you.

Your health plan can help you explore lots of options. If you enroll, you can get services that can help you:

- Find a good fit for things you like and are good at.
- Get ready to work.
- Even make a job just for you!

"I have an ID or DD. I am not interested in working. Can I still qualify to enroll in Employment and Community First CHOICES?"

Maybe, if you're in one of the groups that may qualify to enroll and get services now. You can find a list of those groups on pages 48 and 56.

"If I get a job, will this affect my SSI?"

Just signing up for the program won't hurt your SSI benefits. When you enroll, you can get Benefits Counseling. A Benefits Counselor will help you understand how the money you earn from working may affect your benefits. This includes SSI and other Social Security. It also includes SNAP and TennCare. This person will help you figure out how much you can earn and keep your benefits.

"I got turned down for CHOICES or Employment and Community First CHOICES when I was 17. Should I re-apply when I get close to age 21?"

Yes, if you need the kinds of services offered in these programs you should re-apply. You must be age 21 or older to qualify for CHOICES Groups 2 and 3.[7] Since you are turning age 21, you might qualify now. And, you may qualify for Medicaid now, even if you didn't before. But you can only enroll in CHOICES and qualify for Medicaid this way if there is a slot for you in the program you choose.

Example: Karen is turning 21. She has an ID and a physical disability.

When she was age 17, Karen applied for both CHOICES and Employment and Community First CHOICES. CHOICES denied her application then because she was too young and not in a nursing home. Employment and Community First CHOICES also denied her application. Her parents' income made her over the income limit for the program. That's because her parents' income had to be counted because she didn't qualify for the level of care provided in a nursing home.

Karen could re-apply for either program at age 21. She may qualify for CHOICES now that she is 21. If so, CHOICES can cover services to help her live at home. Karen may also qualify for Employment and Community CHOICES. This is because after age 18, the program no longer counts her parents' income or resources. Karen can decide which program she wants to apply for. But she can only enroll if there is a slot for her in the program she chooses.

Reference: TennCare Rule 1200-13-01-.05(3), 1200-13-01-.05(6)(h).

"I have an ID or DD – and I have a physical disability. Can I pick CHOICES now and switch to Employment and Community First CHOICES later?"

Yes, if you qualify for the program. And if Employment and Community First CHOICES has open slots that you qualify to enroll in at the time you want to switch.

"I heard Employment and Community First CHOICES may be full. Can I still sign up?"

This program is popular, and there is a list of people who want to enroll. At any point in the year, Employment and Community First CHOICES may run out of slots. But, if you need these services, you can still put your name on the list. We will reach out to you when there is a slot you may be able to enroll in and at least once a year.

Even if the program is out of slots, you may be able to enroll if you're in a nursing home and need help to move out or a few other reasons.[8]

BOOKLET 3

Part 2: Services in CHOICES and Employment & Community First CHOICES

"I have an ID or DD – and I have a physical disability. I may be eligible for both CHOICES and Employment and Community First CHOICES. How do I choose?"

These programs cover different services. For example:

- CHOICES focuses on helping you live at home instead of in a nursing home. The services can be used to help you work and do things in the community. CHOICES provides personal care, attendant care, and respite for your caregivers. It also covers things like home-delivered meals, home modifications, and pest control. You can find a complete list of services starting on page 48.

- Employment and Community First CHOICES covers many of the same kinds of services as CHOICES. But it's only for people with an ID or DD. There are other services too. You can find a complete list of services starting on page 56. This program focuses a lot on employment. It helps you find a full-time or part-time job. It also helps you get ready for your job each day and pays for transportation so you can get to and from work. The program also helps you do things in your community.

- CHOICES and Employment and Community First CHOICES each have different limits on some of the services you may be able to get. The appendix starting on page 47 provides more information about the services in each program.

- CHOICES and Employment and Community FIRST CHOICES also have different cost caps. A "cost cap" is the limit on the total cost of services that each person may get each year. Each person can only get the services that he or she ***needs*** without going over the cost cap. Your health plan will work with you to decide what services you need. Keep reading to learn more about the cost cap.

Your health plan can help you decide which program is better for you. But remember, you can't be in either of these programs if you're in an HCBS waiver operated by DDA. If you are in an HCBS waiver operated by DDA and want to switch, talk to your health plan. To enroll in Employment and Community First CHOICES, you must be in one of the other groups that qualifies to enroll now. And there must be a slot for you. You can find a list of those groups starting on page 48.

“I like my current home health or private duty nursing provider. Can I keep these if I enroll in either CHOICES or Employment and Community First CHOICES?”

If you still qualify for and get home health or private duty nursing services, you can probably keep the same provider. Ask your health plan about this.

If you enroll in CHOICES or Employment and Community First CHOICES, you may choose new providers for your long-term care services. If you choose consumer direction, you will hire the workers who will give you care. Keep reading to learn more about this.

"Are there limits on services in CHOICES and Employment and Community First CHOICES?"

Yes. Most of the services in CHOICES and Employment and Community First CHOICES have limits. There's also a limit in both programs on the total cost of services you can get each year. This is your cost cap. Every person in one of these programs will have a cost cap. Your cost cap is based on your level of support needs, including your medical or behavior support needs. **Each person can only get the services that he or she *needs*** without going over their cost cap.

Your health plan will work with you to decide what services you need. Your services can't cost more than your cost cap. We count almost **all** of the services you get from that program in your cost cap. There are a few that we don't count. They are listed in the next section. We may count any home health or private duty nursing you get too, but it depends on which Group you are in. Keep reading to find out more.

"How do I figure out my cost cap in CHOICES?"

Each CHOICES Group has a different cost cap. A group may have more than one cost cap. TennCare sets your cost cap based on information we get about you and your needs.

- If you are "at risk"[9] for needing care from a nursing home, you may be able to enroll in CHOICES Group 3. In Group 3, you get your care at home or in the community.
    - Group 3 has a lower cost cap because people in Group 3 don't qualify for nursing home care.
    - The cost cap for Group 3 does **not** include any home health or private duty nursing you may get from TennCare. It does not include small changes to your home. To see if you qualify for home health or private duty nursing, read Booklet 2. Booklet 2 is titled Changes to TennCare Benefits at Age 21.
- If you would qualify to get care in a nursing home right now, you may be able to enroll in CHOICES Group 2. In Group 2, you get your care at home or in the community instead of in a nursing home.
    - The Group 2 cost cap is based on the average yearly cost of nursing home care.

- The cost of any home health or private duty nursing you get from TennCare **will** be counted in your cost cap.
- **The services you get will be based on your *needs*.** Your health plan will work with you to write a plan of care that will safely meet your needs without going over your cost cap.
- If you don't use a ventilator but you have a tracheostomy and need frequent suctioning through the tracheostomy, you may have a higher cost cap.
- If you use a ventilator or similar technology 12 or more hours per day, you may have the highest cost cap in Group 2.
- **Any additional services you get will still be based on your *needs*.** Your health plan will work with you to write a plan of care that will safely meet your needs without going over your cost cap.

"How do I figure out my cost cap in Employment and Community First CHOICES?"

Each Group in Employment and Community First CHOICES has a different cost cap. A group may have more than one cost cap. TennCare sets your cost cap based on facts we get about you and your needs.

- Employment and Community First CHOICES Group 4 is mostly for people under age 21. People under age 21 get most of their services through TennCare. So, Group 4 has fewer benefits and a lower cost cap than Group 5 or Group 6.

    - The cost cap for Group 4 does **not** include any home health or private duty nursing you may get from TennCare. It also does not include small changes to your home.

    - **The services you get will be based on your *needs*.** Your health plan will work with you to write a plan of care that will safely meet your needs without going over your cost cap.

- If you are an adult over age 21 and are "at risk" for needing care from a nursing home, you may be able to enroll in Employment and Community First CHOICES Group 5.[10] Group 5 has a higher cost cap than Group 4, because it's for adults.

    - In Group 5, the cost cap does **not** include any home health or private duty nursing you may get from TennCare. To see if you qualify for home health or private duty nursing, read Booklet 2. Booklet 2 is titled Changes to TennCare Benefits at Age 21.

    - **The services you get will be based on your *needs.*** Your health plan will work with you to write a plan of care that will safely meet your needs without going over your cost cap.

- If you are an adult over age 21 and qualify to get care in a nursing home, you may qualify to enroll in Employment and Community First CHOICES Group 6.[11] In Group 6, TennCare gathers more facts to help set your cost cap. Your yearly cost cap will be based on an assessment of your "level of need". It starts with an assessment called a "Supports Intensity Scale." It is done by an independent expert – not TennCare or your health plan. It helps TennCare decide how much support you need. Everyone in CHOICES Group 6 will have an assessed "level of need."

- There are different cost caps for people with low, moderate, and high levels of need. For people with one of these cost caps, home health or private duty nursing is not counted in your cost cap.

- If you have very complex medical or behavior support needs, you may have exceptional needs. If so, your cost cap will be even higher. It's based on the average yearly cost of institutional care you would qualify for. Your total cost cap will depend on if you have **ID or DD**. These cost caps **do** count any home health or private duty nursing you get from TennCare.

- No matter what cost cap you have, **the services you get will be based on your *needs*.** If you have exceptional needs, you may be able to get more services if you need them. Your health plan will work with you to write a plan of care to safely meet your needs without going over your cost cap.

- There are two more groups in Employment and Community First CHOICES (Groups 7 and 8). They are for people who have ID or DD and severe behavioral support needs. To find out more about those groups, ask your health plan.

Remember, every person in one of these programs will have a cost cap. Your cost cap is based on your level of support needs, including your medical or behavior support needs. **Each person can only get the services that he or she *needs*** without going over their cost cap. Your health plan will work with you to write a plan of care to safely meet your needs without going over your cost cap.

Example A: Mary is turning 21. She has cerebral palsy and has a severe seizure disorder. She also has an IQ of 65. Mary uses a wheelchair to get around. Mary qualifies to get care in a nursing home. But Mary wants to live at home with her family. She also wants to stay busy during the day.

CHOICES: Mary may qualify to enroll in Group 2. If so, Mary can work with her health plan to develop a plan to meet her needs without going over her cost cap. The cost of any home health and private duty nursing she gets will be counted in her cost cap.

Employment and Community First CHOICES: Mary may also qualify to enroll in Group 6. If so, her cost cap would depend on her assessed level of need, including medical needs. That means she would get services as long she doesn't go over her cost cap. Mary's services will be based on her needs, ***and*** can't be more than her cost cap.

Mary will have to decide which program she wants to apply for. But she can only enroll if there is a slot for her in the program she chooses.

Example B: Dave is turning 21. He has a DD. Dave also has a tracheostomy and needs frequent suctioning. Dave qualifies to get tracheal suctioning care in a nursing home. But Dave wants to live with his older brother. He also wants to explore working or starting his own business.

CHOICES: Dave may qualify to enroll in Group 2. If so, then Dave would be eligible for a higher cost cap due to his tracheostomy and medical needs. The cost of any home health or private duty nursing he gets will be counted in his cost cap.

Employment and Community First CHOICES: Dave may also qualify to enroll in Group 6. Dave is eligible for a higher cost cap in Group 6 due to his tracheostomy and medical needs. Any home health or private duty nursing he gets would be counted in his cost cap. Dave could also get services to help him explore working or starting his own business. Since Dave wants to explore working, this program may be the best option for him.

Dave will have to decide which program he wants to apply for. But he can only enroll if there is a slot for him in the program he chooses.

Example C: Tiffany is turning 21. She has a DD, and she gets SSI. She doesn't qualify to get care in a nursing home now. But she is "at risk" for needing care from a nursing home. Tiffany wants to live on her own. She also wants to have a part-time job.

CHOICES: Tiffany could enroll in Group 3. If so, her cost cap would **not** include her home health and private duty nursing or any minor home modifications she might need.

Employment and Community First CHOICES: Tiffany may also be able to enroll in Group 5. If so, her cost cap would not include her home health and private duty nursing. If Tiffany needs services to help her get a job, this program may be the best option for her.

Tiffany will have to decide which program she wants to apply for. But she can only enroll if there is a slot for her in the program she chooses.

"Do I have to get my services from a home health agency? What is 'consumer direction'?"

Yes. If you want home health services and still qualify for them after age 21, you must get them from an agency.

But, if you get long-term care services, you have other options. If you enroll in CHOICES or Employment and Community First CHOICES, you could choose to "direct" certain services. These are services *like* those you might get from a home health aide. But they are more flexible. They can help you with things home health aides can't.

In "consumer direction," you hire the people who give some of your support services—they work for you (instead of a provider). You hire, train, and schedule them. You can even fire them.

Consumer Direction (CD) gives you more choices and control. It may also allow you to get more hours of care without going over your cost cap if you need more support. Keep reading to learn more.

Example: Chris is turning 21. He has an ID and a physical disability. He qualifies to get care in a nursing home. But Chris wants to live at home. He is also open to the idea of working.

CHOICES: Chris may be able to enroll in CHOICES Group 2. His cost cap will be based on the annual average cost of nursing home care. Any home health or private duty nursing he gets would be counted in his cost cap. Chris wants to direct his attendant care instead of getting home health. This means he will hire, train, and schedule his own workers. He can hire people he knows to be his CD workers.

Employment and Community First CHOICES: Chris may also be able to enroll in Group 6. The amount of services he could get depends on his needs. TennCare will use an assessment to help decide what his "cost cap" will be. Chris also has the option to direct his personal assistance services in Employment and Community First CHOICES. This means he will hire, train, and schedule his own workers. He can hire several people he knows to be his CD workers.

Chris will have to decide which program he wants to apply for. But he can only enroll if there is a slot for him in the program he chooses.

"Can I get more services through 'consumer direction'?"

You **may** be able to get more services through "consumer direction" than through an agency. This is because the amount you pay a worker is less than what an agency is paid. Normally, TennCare would pay a home health agency or provider for services. But in consumer direction, the worker is paid directly. They work for you. (You don't have to pay them. TennCare has someone that does that for you. And they file all of your payroll taxes and forms.) If you can buy care for less money from CD workers, you may be able to use the "savings" to buy more care if you need it.

Example: Susan is turning 21. She has an ID and multiple serious medical conditions. Susan uses a ventilator 12 or more hours each day. Susan qualifies to get continuing ventilator care in a nursing home. But Susan wants to live at home and be part of her community. She is also open to the idea of working. But she wants more information.

CHOICES: Susan could enroll in Group 2. Susan may qualify for the highest cost cap in Group 2 because she uses a ventilator. Any home health or private duty nursing she gets would be counted in her cost cap. Because she uses a ventilator, if she enrolls in CHOICES, she could keep getting private duty nursing from an agency, if it's needed—but not for 24 hours a day. Instead, she could get more hours of paid care each day if she gets attendant care through Consumer Direction. In Consumer Direction, her workers could be trained to help her with skilled tasks. Or, she could hire nurses to give her attendant care, but she may have to pay them more. This means she might not be able to buy as many hours of care. The amount of care she would get depends on her needs and the services she chooses. But it can't cost more than her cost cap.

Employment and Community First CHOICES: Susan could enroll in Group 6. Susan also may qualify for the highest cost cap in Group 6 because she uses a ventilator. Any home health or private duty nursing she gets would be counted in her cost cap. Because she uses a ventilator, she could keep getting private duty nursing from an agency, if it's needed—but not for 24 hours a day. She may be able to get more hours of paid care each day if she gets personal assistance services through Consumer Direction. In Consumer Direction, her workers could be trained to help her with skilled tasks. Or, she could hire nurses to give her attendant care, but she may have to pay them more. This means

she might not be able to buy as many hours of care. The amount of care she would get depends on her needs and the services she chooses. She could also explore the possibility of working or starting her own business.

Susan will have to decide which program she wants to apply for. But she can only enroll if there is a slot for her in the program she chooses.

Note: There are lots of options that meet Susan's needs. In addition to paid care, Susan may be able to rely on her family for care one or two days a week. Susan should talk with her health plan about the best options for her based on the care she needs.

"Do I need to become an accountant to do consumer direction?"

No, not at all! TennCare has a contractor that will handle the payroll for your CD workers. The contractor will take care of withholding taxes, file payroll taxes, and mail tax forms to your CD workers. The contractor will help you.

“Can I hire my neighbor as a CD worker? What about my sister?”

You can hire your neighbor or a friend to be a CD worker. You just can’t hire someone who already lives with you to be a CD worker. If you’re married, you can’t hire your spouse. And you can’t hire a family member who would normally provide care for you without being paid.

"I want to get services from a day program. Do CHOICES or Employment and Community First CHOICES pay for this?"

CHOICES pays for day programs for older adults and adults with physical disabilities (called adult day care). This involves supervised activities and care during the day. People who go to these programs must have opportunities to work, do things in their community, and spend time with other people. This includes people who don't have disabilities.

Employment and Community First CHOICES does **not** pay for this kind of adult day care. Instead, the program provides services at home, at work or other community settings.

"I don't think my cost cap is high enough or gives me enough services. What should I do?"

TennCare uses fair facts to set your cost cap. These facts include things like if:

a) You are at risk for nursing home care.
b) You would qualify for care in a nursing home.
c) You would need certain kinds of skilled care if you were in a nursing home.
d) You use a ventilator or similar technology 12 or more hours per day.
e) You have a trach and require frequent tracheal suctioning.
f) You have an ID or DD.
g) An assessment says you have low, moderate, high, or exceptional support needs. The assessment looks at things specific to you that may impact the level of support you need.

If you think we made a mistake in setting your cost cap, tell us. If you think your cost cap is wrong **and** it keeps you from getting covered services you need, you can file an appeal.

Do you think your health plan made a mistake in deciding what services you need or can get?

You can file an appeal and ask for a fair hearing with TennCare. At a fair hearing, you get the chance to tell a judge about the mistake you say your health plan made. The judge will listen to both sides and decide your case. For more information on how to ask for a fair hearing, go to TennCare's website at tn.gov/tenncare/members-applicants/how-to-file-a-medical-appeal.html.

Or call the TennCare Member Medical Appeals at 1-800-878-3192. They are open Monday to Friday, from 8:00 a.m. to 4:30 p.m. Central Time.

APPENDIX

In this section you will learn general information about some of the supports available to you if you choose CHOICES or Employment and Community First CHOICES. TennCare rules provide more detail about who can get each support and what limits apply: Tenn. Comp. R. & Regs. 1200-13-01. For your convenience, here is a benefits group reference guide:

CHOICES

GROUP 1

Nursing Home Resident

GROUP 2

Home and Community-Based Services as an alternative to Nursing Home Care

GROUP 3

At risk of Nursing Home placement without CHOICES Home and Community-Based Services

CHOICES Caregiver Assistance Services					
Service	**How it can help you**	**What benefit groups cover it?**			**Limits**
		Group 1	**Group 2**	**Group 3**	
Adult Day Care	A place that provides supervised care and activities during the day.		✓	✓	2,080 hours per calendar year (January 1-December 31 each year)
In-Home Respite Care	Someone to stay with you in your home for a short time so your caregiver can have a break. (Only for routine family or other caregivers who aren't paid to support you.)		✓	✓	216 hours per calendar year (January 1-December 31 each year)
Inpatient Respite Care	A short stay in a nursing home or assisted care living facility so your caregiver can have a break. (Only for routine family or other caregivers who aren't paid to support you.)		✓	✓	9 days per calendar year (January 1-December 31 each year)

CHOICES Community Based Residential Alternatives					
Service	**How it can help you**	**What benefit groups cover it**			**Limits**
		Group 1	**Group 2**	**Group 3**	
Assisted Care Living Facility	A place you live that helps with personal care needs, homemaker services, and taking your medicine. You must pay for your room and board.		✓	✓	
Critical Adult Care Home	A home where you and no more than 4 other people live with a health care professional that takes care of special health and long-term care needs. Under state law, this is available only for people who are ventilator dependent or who have traumatic brain injury. You must pay for your room and board.		✓		Limited to adults who are ventilator dependent or who have traumatic brain injury

CHOICES Community Based Residential Alternatives (continued)					
Service	**How it can help you**	**What benefit groups cover it**			**Limits**
Companion Care	Someone you hire who lives with you in your home to help with personal care or homemaker services when you need it.	**Group 1**	**Group 2**	**Group 3**	Available only for Group 2 members in consumer direction who need care throughout the day and night that can't be provided by unpaid caregivers. And only when it costs less than other kinds of home care that would meet your needs.
			✓		
Community Living Supports and Community Living Supports – Family Model	Support with activities of daily living and other tasks that help you live in the community and engage in community life. Usually in a small shared living arrangement or with a family (but not your own) who will provide the supports you need. You must pay for your room and board.	**Group 1**	**Group 2**	**Group 3**	
			✓	✓	

CHOICES Hands-on Services					
Service	**How it can help you**	**What benefit groups cover it**			**Limits**
		Group 1	**Group 2**	**Group 3**	
Personal Care Visits	Someone to help you with personal care needs and support in the home, on the job, or in the community. If you need personal care, you can get help with household chores and errands too, but only for you (not other family members).		✓	✓	Up to 2 visits per day, lasting no more than 4 hours per visit. There must be at least 4 hours between each visit.
Attendant Care	The same kinds of help you get with personal care visits, but for longer periods of time.		✓	✓	1,080 hours per calendar year (January 1-December 31 each year); up to 1,400 hours per calendar year if homemaker services are needed too.

CHOICES Additional Services					
Service	**How it can help you**	**What benefit groups cover it**			**Limits**
		Group 1	**Group 2**	**Group 3**	
Assistive Technology	Certain low-cost items or devices that help you do things easier or safer in your home like grabbers to reach things.		✓	✓	The service limit for Assistive Technology and Enabling Technology combined will be $5,000 limit person per year across both services.
Minor Home Modification	Changes to your home that will help you get around more easily and safely like grab bars or a wheelchair ramp.		✓	✓	$6,000 per project; $10,000 per calendar year (January 1-December 31 each year); and $20,000 per lifetime (Not counted as part of overall service limit for CHOICES 3 members.)
Personal Emergency Response System	A call button you can use to get help in an emergency.		✓	✓	
Pest Control	Spraying your home to take care of an infestation such as for bugs or mice.		✓	✓	9 visits per calendar year (January 1-December 31 each year)

CHOICES Additional Services					
Service	**How it can help you**	**What benefit groups cover it**			**Limits**
Home Delivered Meals	Nutritious meals that can be delivered fresh each day or frozen in bulk.	**Group 1**	**Group 2**	**Group 3**	1 meal per day
			✓	✓	
Enabling Technology	Equipment and/or methodologies that, alone or in combination with associated technologies, support an individual's increased independence and/or safety in their home, community, and workplace.		✓	✓	The service limit for Enabling Technology and Assistive Technology combined will be $5,000 limit person per year across both services.

CHOICES Nursing Home Care					
Service	**How it can help you**	**What benefit groups cover it**			**Limits**
		Group 1	**Group 2**	**Group 3**	
Nursing Home Care	A nursing home is a place that provides a room, meals, and help with activities of daily living. Most people in a nursing home have physical and/or mental health challenges that keep them from living on their own.	✓	✓ Short - term only	✓ Short - term only	For Group 2 and 3 members, limited to no more than 90 days, but only if the person is getting home care first, qualifies for nursing home care, and expects to only need a short stay,

GROUP 4

Essential Family Supports

GROUP 5

Essential Supports for Employment & Independent Living

GROUP 6

Comprehensive Supports for Employment & Community Living

Employment and Community First CHOICES Employment Supports: Individual Employment Supports					
Service	**How it can help you**	**What benefit groups cover it?**[i]			**Limits**
Exploration	Helps you decide if you want to work and the kinds of jobs you might like and be really good at by visiting job sites that match your skills and interests. Also helps you (and your family) understand the benefits of working and helps answer your questions about work.	**Group 4**	**Group 5**	**Group 6**	No more than once a year (at least 365 days between services) **and** only if you're not employed or getting other employment supports **and** haven't decided if you want to work
		✓	✓	✓	

[i] There are two more groups in Employment and Community First CHOICES (Groups 7 and 8). They are for people who have ID or DD and severe behavioral support needs. To find out more about those groups, ask your health plan.

Employment and Community First CHOICES Employment Supports: Individual Employment Supports (continued)					
Service	**How it can help you**	**What benefit groups cover it?**			**Limits**
Discovery	Someone to help you identify the kinds of work you want to do, the skills and strengths you will bring to your work, and what you need to be successful. This information can be used to help you write a plan to get a job or start your own business.	**Group 4**	**Group 5**	**Group 6**	No more than once every 3 years **and** only if you're not employed or getting other employment supports **and** have a goal to get a job within 12 months
		✓	✓	✓	

Individual Employment Supports (continued)					
Service	**How it can help you**	**What benefit groups cover it**			**Limits**
		Group 4	**Group 5**	**Group 6**	
Situational Observation and Assessment	A chance to try out certain jobs to see what they're like and what you need to do to get ready for those jobs	✓	✓	✓	No more than once every 3 years **and** only if you're not employed or getting other employment supports **and** have a goal to get a job within 12 months
Job Development or Self-Employment Plan	Someone to help you write a plan to get a job (or start your own business)	✓	✓	✓	No more than once every 3 years **and** only if you're not employed or getting other employment supports **and** have a goal to get a job within 12 months
Job Development or Self-Employment Start Up	Someone to help you carry out your plan to get a job (or start your own business)	✓	✓	✓	No more than once a year (at least 365 days between services) **and** only if you're not employed or getting other employment supports **and** haven't decided if you want to work

Individual Employment Supports (continued)					
Service	**How it benefits you**	**What benefit groups cover it**			**Limits**
		Group 4	**Group 5**	**Group 6**	
Job Coaching	A job coach to support you when you start your job until you can do the job by yourself or with help from co-workers.	✓	✓	✓	• Up to 40 hours per week of Job Coaching or Co-Worker Supports, Community Integration Support Services, Independent Living Skills Training **and** the hours you work **combined if** you work in the community or you're self-employed in a community business • Up to 50 hours per week of these services and the hours you work **combined if** you work in the … …community or you're self-employed in a community business at least 30 hours per week
Job Coaching for Self-Employment	A job coach to support you when you start your business until you run the business by yourself	✓	✓	✓	
Co-Worker Supports	Paying a co-worker to help you on your job instead of a job coach	✓	✓	✓	
Career Advancement	Services to help you get a better job, earning more money	✓	✓	✓	No more than once every 3 years to get a promotion or second job

Individual Employment Supports (continued)					
Service	**How it benefits you**	**What groups cover it**			**Limits**
		Group 4	**Group 5**	**Group 6**	
Benefits Counseling	Someone to help you understand how the money you earn from working will impact other benefits you get, including Social Security and TennCare	✓	✓	✓	• Only if you can't get the service through another program • Initial counseling up to 20 hours no more than once every 2 years • Up to 6 more hours no more than 3 times a year to consider a new job, promotion, or self-employment • Up to 8 extra hours 4 times a year to help you stay employed or self-employed

Employment and Community First CHOICES Employment Supports: Small Group Employment Supports					
Service	**How it can help you**	**What benefit groups cover it?**			**Limits**
		Group 4	**Group 5**	**Group 6**	
Supported Employment – Small Group	Support for you and 1 or 2 other people to work together in a small group. Helps you get ready for a job where you can work by yourself	✓	✓	✓	Up to 30 hours per week of Supported Employment– Small Group, Community Integration Support Services, and Independent Living Skills Training **combined.**
Employment and Community First CHOICES Employment Supports: Pre-Vocational Training					
Integrated Employment Path Services	Time-limited training to get you ready for work in the community	✓	✓	✓	• Up to 12 months; may get up to 12 more months if actively working to get a job • Up to 30 hours per week of Integrated Employment Path Services or Supported Employment– Small Group, Community Integration Support Services, and Independent Living Skills Training **combined.**

Employment and Community First CHOICES Independent Community Living Supports:					
Service	**How it can help you**	**What benefit groups cover it?**			**Limits**
		Group 4	**Group 5**	**Group 6**	
Community Integration Support Services	Helps you do things in the community that you want to do. Take a class, join a club, volunteer, get or stay healthy, do something fun, build relationships, and reach your goals.	✓	✓	✓	• Not covered as a separate service if you get Community Living Supports (it's part of that benefit) • **If you <u>don't</u> work in the community OR get an employment service:** Up to 20 hours per week of Community Integration Support Services and Independent Living Skills Training combined *after* starting an Employment Informed Choice process • Limits continued on next page…
Independent Living Skills Training	Helps you learn new things so you can live more independently. These skills can help you take care of yourself, your home, or your money.	✓	✓	✓	

Independent Community Living Supports (continued)
Limits (continued)
• **If you <u>do</u> work in the community OR get an employment service:** Up to 30 hours per week of Community Integration Support Services, Independent Living Skills Training, and Individual or Small Group Employment Supports combined • **If you're working (in an individual job, not a group, in the community) or self-employed:** Up to 40 hours per week of Community Integration Support Services, Independent Living Skills Training, Job Coaching, Co-Worker Supports and the hours you work **combined** • **If you're working or self-employed in the community at least 30 hours a week:** Up to 50 hours per week of these services and the hours you work **combined**

Independent Community Living Supports (continued)					
Service	**How it benefits you**	**Group 4**	**Group 5**	**Group 6**	**Limits**
Community Transportation	Helps you get to work or to other places in the community when public transportation isn't available and you don't have any other way to get there.	✓	✓	✓	Up to $225 per month if you get this service through consumer direction
Personal Assistance	Someone to help with personal care needs or daily living activities in your home, at work, or in the community. Includes help with your household chores or errands. They can help you do things like get out of bed, take a bath, and get dressed so that you are ready to go to work or out into the community. They can also help you with **your** household chores (but not other people you live with). This includes things like **your** cleaning and laundry, help you fix and eat **your** meals, and run **your** errands. And they can support you in the community to do the things you want to do. Also includes help training someone you know to provide this kind of support.		✓	✓	Up to 215 hours per month

Independent Community Living Supports (continued)					
Service	**How it can help you**	**What benefit groups cover it?**			**Limits**
		Group 4	**Group 5**	**Group 6**	
Assistive Technology, Adaptive Equipment and Supplies	Certain items that help you do things more independently in your home or community. This includes assessments and training on how to use them.	✓	✓	✓	Up to $5,000 per calendar year Combined with enabling technology (January 1 – December 31 each year)
Enabling Technology	Equipment and/or methodologies that, alone or in combination with associated technologies, provide the means to assist you to achieve increased independence in your home, community, and/or workplace.	✓	✓	✓	Up to $5,000 per calendar year combined with Assistive Technology (January 1-December 31 each year)

Independent Community Living Supports (continued)					
Service	**How it can help you**	**What benefit groups cover it?**			**Limits**
Minor Home Modifications	Certain changes to your home that will help you get around easier and safer in your home like grab bars or a wheelchair ramp.	**Group 4**	**Group 5**	**Group 6**	Up to $6,000 per project; $10,000 per calendar year; and $20,000 per lifetime
		✓	✓	✓	
Community Living Supports and Community Living Supports– Family Model	Support with activities of daily living and other tasks that help you live in the community and engage in community life. Usually in a small shared living arrangement or with a family (but not your own) who will provide the supports you need. You must pay for your room and board.		✓	✓	

Employment and Community First CHOICES Family Caregiving Supports:					
Service	**How it can help you**	**What benefit groups cover it?**			**Limits**
Respite	Someone to support you for a short time so your caregiver can have a break. (Only for routine family or other caregivers who aren't paid to support you.)	**Group 4**	**Group 5**	**Group 6**	Up to 30 days per calendar year **<u>or</u>** 216 hours per calendar year (January 1 – December 31 each year). You have to **pick one**. In Consumer Direction, you can ***only*** get hourly respite.
		✓	✓	✓	

Family Caregiving Supports (continued)					
Service	**How it can help you**	**What benefit groups cover it?**			**Limits**
		Group 4	**Group 5**	**Group 6**	
Supportive Home Care	This is like Personal Assistance, but for people who live at home with their family. Someone to help you with personal care needs or daily living activities that your family can't help you with. This help could be in your home, on the job, or in the community. Includes help with your household chores or errands. They can help you do things like get out of bed, take a bath, and get dressed so that you are ready to go to work or out into the community. They can help you with **your** household chores (but not the whole family). This includes things like **your** cleaning and laundry, help you fix and eat **your** meals, and run **your** errands. They can also support you in the community to do the things you want to do.	✓			

Family Caregiving Supports (continued)					
Service	**How it can help you**	**What benefit groups cover it?**			**Limits**
		Group 4	**Group 5**	**Group 6**	
Family Caregiver Stipend (instead of Supportive Home Care)	A monthly payment to your primary caregiver if they help with your personal care needs and daily living activities (instead of receiving Supportive Home Care). This payment helps offset lost wages or pays for things you need that aren't covered in Employment and Community First CHOICES. (But you **must** get the services you need to work and be part of your community.)	✓			• **Only if** you get the services you need to work and be part of the community • Up to $500 per month for children up to age 18 • Up to $1,000 per month for 18 years old and older

Employment and Community First CHOICES Self-Advocacy Supports:					
Service	**How it can help you**	**What benefit groups cover it?**			**Limits**
Individual Education and Training	Help paying for workshops and training that will help you learn to advocate for yourself and direct your planning and supports.	**Group 4**	**Group 5**	**Group 6**	Up to $500 per calendar year (January 1 – December 31 each year)
			✓	✓	
Peer-to-Peer Support and Navigation for Person-Centered Planning, Self-Direction, Integrated Individual/Self-Employment& Independent Community Living	Guidance and support from another person with disabilities who has experience and training to answer your questions and help you: - Direct your support plan. - Direct your services (hire and supervise your own staff in Consumer Direction). - Think about and try employment or community living options.		✓	✓	Up to $1,500 per lifetime

Self-Advocacy Supports (continued)					
Service	**How it can help you**	**What benefit groups cover it?**			**Limits**
		Group 4	**Group 5**	**Group 6**	
Decision making supports	One-time consultation, education and assistance to family caregivers in understanding legal, financial, and other decision making supports and options for a person supported who cannot make some or all of their own decisions.	✓	✓	✓	• Up to $500 per lifetime
Employment and Community First CHOICES Family Empowerment Supports:					
Community Support Development, Organization and Navigation	Helps you and other people with disabilities and their families: - Connect with and help each other, and - Find and use resources in your community.	✓			

Family Empowerment Supports (continued)					
Service	**How it can help you**	**What benefit groups cover it?**			**Limits**
		Group 4	**Group 5**	**Group 6**	
Family Caregiver Education and Training	Help paying for workshops and training that will help family caregivers understand, support and advocate for you and help you advocate for yourself.	✓			Up to $500 per calendar year (January 1 – December 31 each year)
Family to Family Support	Guidance and support from another parent of a person with disabilities who has experience and training.	✓			
Health Insurance Counseling/ Forms Assistance	Training and support to help you understand and use your insurance benefits (including TennCare, Medicare and private insurance).	✓			Up to 15 hours per calendar year (January 1 – December 31 each year)

Employment and Community First CHOICES Dental and Therapy Supports:					
Service	**How it can help you**	**What benefit groups cover it?**			**Limits**
Adult Dental Services	Basic dental care for adults age 21 and older, including dental exams, cleanings, and fillings is covered under the TennCare benefit.	**Group 4** ✓	**Group 5** ✓	**Group 6** ✓	• No dollar limit
Supplemental Adult Dental Waiver Services	Services not covered under the TennCare adult dental services for adults age 21 and older including services such as medically necessary behavioral management support or sedation.	✓	✓	✓	• Up to $5,000 per calendar year (January 1 – December 31 each year) • No more than $7,500 across three calendar years in a row

Dental and Therapy Supports (continued)				
Specialized Consultation and Training	Help from a professional to assess, plan and teach others to support you, including paid staff and unpaid caregivers. Kinds of professional help and training include: - Behavior services - Speech therapy - Occupational therapy - Physical therapy - Nutrition - Orientation and mobility - Nursing	✓	✓	• Up to $5,000 per calendar year (January 1 – December 31 each year) • Up to $10,000 if your assessment shows you have exceptional medical and/or behavioral health needs

Notice of availability of language assistance services and alternate formats

Do you need free language or an auxiliary aid or service?

If you speak a language other than English, help in your language is available for free.

We have free interpretation and translation services to help you. We have free auxiliary aids and services, like large print, to communicate effectively with you. Call us at 1-800-690-1606 (TennCare) or 1-866-600-4985 (CoverKids) (TRS: 711).

Spanish: **Español**

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística.
Llame al 1-800-690-1606 (TennCare) o al 1-866-600-4985 (CoverKids) (TRS/TTY:866-503-0264).

Arabic: **ربيةعلا**

تنبيه: إذا كنت تتحدث العربية، فتتوفر خدمات المساعدة اللغوية مجانًا. اتصل على الرقم 1-800-690-1606 (TennCare) أو 1-866-600-4985 (CoverKids) (TRS/TTY:866-503-0264).

Chinese: **繁體中文**

注意：如果您使用繁體中文，您可以免費獲得語言援助服。
請致電 1-800-690-1606 (TennCare) 或 1-866-600-4985 (CoverKids) (電訊轉接服務/聽障專線 (TRS/TTY:866-503-0264).

Vietnamese: **Tiếng Việt**

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Hãy gọi 1-800-690-1606 (TennCare) hoặc 1-866-600-4985 (CoverKids) (TRS/TTY:866-503-0264).

Korean: 한국어 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-800-690-1606 (TennCare) 또는 1-866-600-4985(CoverKids) (TRS/TTY:866-503-0264)로 전화주세요.
French: Français ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposes gratuitement. Appelez le +1-800-690-1606 (TennCare) ou le +1-866-600-4985 (CoverKids) (TRS/TTY: 866-503-0264).
Amharic: አማርኛ ማሳሰቢያ፡- አማርኛ የሚናገሩ ከሆነ፣ የነጻ ቋንቋ እርዳታ አገልግሎቶች አሉ። በ1-800-690-1606 (TennCare) ወይም 1-866-600-4985 (CoverKids) (TRS/TTY:866-503-0264) ላይ ይደውሉ።
Gujarati: ગુજરાતી ધ્યાન આપો: જો તમે ગુજરાતી બોલતા હો, તો નિઃશુલ્ક ભાષા સહાય સેવાઓ ઉપલબ્ધ છે. 1-800-690-1606 (TennCare) અથવા 1-866-600-4985 (CoverKids) (TRS/TTY:866-503-0264) પર કૉલ કરો.
Laotian: ພາສາລາວ ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັງຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທ 1-800-690-1606 (TennCare) ຫຼື 1-866-600-4985 (CoverKids) (TRS/TTY:866-503-0264).
German: Deutsch ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufen Sie 1-800-690-1606 (TennCare) oder 1-866-600-4985 (CoverKids) an (TRS/TTY:866-503-0264).

Tagalog: Tagalog PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-800-690-1606 (TennCare) o sa 1-866-600-4985 (CoverKids) (TRS/TTY:866-503-0264).
Hindi: हिंदी ध्यान दें: अगर आप हिंदी बोलते हैं, तो नि:शुल्क भाषा सहायता सेवाएं उपलब्ध हैं। 1-800-690-1606 (TennCare) या 1-866-600-4985 (CoverKids) (TRS/TTY: 866-503-0264) पर कॉल करें।
Russian: Русский ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните по номеру 1-800-690-1606 (TennCare) или 1-866-600-4985 (CoverKids) (TRS/TTY: 866-503-0264).
Japanese: 日本語 注意：日本語を話されるお客様へ。無料の言語支援サービスをご利用いただけます。TennCareに関するご相談があれば1-800-690-1606まで、CoverKidsに関するご相談があれば1-866-600-4985までお電話ください（TRS/TTY: 866-503-0264）。
Persian: فارسی **توجه**: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با 1-800-690-1606 (TennCare) یا 1-866-600-4985 (CoverKids) (TRS/TTY:866-503-0264) تماس بگیرید.

Notice of nondiscrimination

Protections

Discrimination is against the law. TennCare obeys federal and state civil rights laws. We don't discriminate on the basis of race, color, national origin including limited English proficiency and primary language, age, disability, or sex. TennCare doesn't exclude people or treat them less favorably (differently) because of race, color, national origin, age, disability, or sex.

Help you can get

Disability related help

TennCare provides people with disabilities reasonable modifications. Reasonable modifications are reasonable requests for changes to a rule, policy, practice, or service to help a person with a disability related need. TennCare has free auxiliary aids and services to communicate effectively with you. Auxiliary aids and services are types of help like:

- Qualified sign language interpreters, and
- Written information in large print, audio, accessible electronic formats, letter reading, Braille, or other formats.

Language help

TennCare offers free language help to people whose primary language is not English like:

- Qualified interpreters, and

- Translations — Information written in other languages.

Who to contact

TennCare Connect

Do you need help like applying or renewing your TennCare, need auxiliary aids and services, or language help to talk with TennCare? Call TennCare Connect for free at 855-259-0701.

TennCare's Office of Civil Rights Compliance

- Reasonable modifications:
  If you need reasonable modifications, contact TennCare's Office of Civil Rights Compliance ("OCRC").
- Grievance/complaint:
  If you believe that TennCare failed to provide these services, or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance/complaint with TennCare's OCRC by email at **HCFA.fairtreatment@ tn.gov**, mail at 310 Great Circle Road Floor 3W, Nashville, TN 37243, OCRC's website at **https://www.tn.gov/tenncare/members-applicants/civil-rights-compliance.html**, or calling 615-507-6474 (TRS 711). If you need help filing a grievance call TennCare Connect for free at 855-259-0701.

More information

You can find forms, policies and more information about civil rights and help like for food or other things on OCRC's website: https://www.tn.gov/tenncare/members-applicants/civil-rights-compliance.html.

You can file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights,

electronically through the Office for Civil Rights Complaint Portal, available at **https://ocrportal.hhs.gov/ocr/portal/lobby.jsf**, or by mail or phone at:
U.S. Department of Health and Human Services 200 Independence Avenue, SW
Room 509F, HHH Building Washington, D.C. 20201
1-800-368-1019, 800-537-7697 (TDD)
Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.

- **Do you need help talking with us or reading what we send you?**

- **Do you have a disability and need help getting care or taking part in one of our programs or services?**

- **Or do you have more questions about your health care?**

Call TennCare Connect for free at **1-855-259-0701**. We can connect you with the free help or service you need. **(For TTY call: 1-800-848-0298)**


TN
Division of
TennCare

BOOKLET 3

Notes and References

[1] The CHOICES rules define the term "physical disabilities" at Tenn. Comp. R. & Regs.1200-13-01-.02 at https://publications.tnsosfiles.com/rules/1200/1200-13/1200-13.htm Note that for CHOICES Group 2, it includes any adult age 21 or older who meets TennCare criteria for nursing home care and without HCBS, would be placed in a nursing home.

[2] For example, persons under age 21 can enroll in CHOICES Group 1 or Employment and Community First CHOICES Group 4. But they can't enroll in CHOICES Groups 2 or 3. And they usually can't enroll in Employment and Community First CHOICES Groups 5 or 6 either. TennCare can make an exception for Group 5 or 6 if they are age 18-20 and can't live with their family anymore.

[3] This means you meet the nursing facility level-of-care described at Tenn. Comp. R. & Regs. 1200-13-01-.10 at https://publications.tnsosfiles.com/rules/1200/1200-13/1200-13.htm.

[4] This means that you meet the definition of "At risk for institutionalization" defined at Tenn. Comp. R. & Regs. 1200-13-01-.02 and 1200-13-01-.10 at https://publications.tnsosfiles.com/rules/1200/1200-13/1200-13.htm.

[5] TennCare will send you a letter telling you what the nurse decides. And if you disagree with the decision, you can appeal. The letter will tell you how to appeal.

[6] State law at Tenn. Code Ann. § 33-1-101 and the program rules at Tenn. Comp. R. & Regs.1200-13-01-.02 define "developmental disability" and "intellectual disability". Please note that the definition of developmental disability is different for persons under age 5. See Tenn. Comp. R. & Regs. 1200-13-01-.02 at https://publications.tnsosfiles.com/rules/1200/1200-13/1200-13.htm.

[7] See endnote 2 above.

[8] If priority group slots are full, we may still have slots for people with certain needs (called "reserve capacity slots"). See Tenn. Comp.R. & Regs 1200-13-01-.02 at https://publications.tnsosfiles.com/rules/1200/1200-13/1200-13.htm. Even if all slots are full, we may still be able to make an exception and enroll you. This is only if 1) you are in a nursing home and want to leave; or 2) you get SSI and without these services would go into a nursing home, **and** your health plan decides to enroll you.

[9] See endnote 4 above.

[10] You could also enroll in Group 4 **if** you live at home with your family. But Group 4 is primarily for people under age 21.

[11] See endnote 3 above.