



Children and Adults Health Programs Group

February 27, 2023

Stephen Smith
Director
Division of TennCare
310 Great Circle Road
Nashville, TN 37243

Dear Mr. Smith:

This letter is in response to Tennessee's request, dated January 24, 2023, for a waiver under section 1902(e)(14)(A) of the Social Security Act (the Act), that will protect beneficiaries in addressing the challenges the state faces as part of a transition to routine operations when the continuous enrollment condition ends. Section 1902(e)(14)(A) allows for waivers "as are necessary to ensure that states establish income and eligibility determination systems that protect beneficiaries." Such waivers are time-limited and are meant to promote enrollment and retention of eligible individuals by easing the administrative burden states may experience in light of systems limitations and challenges.

The ongoing COVID-19 pandemic and implementation of federal policies to address the PHE have disrupted routine Medicaid and Children's Health Insurance Program (CHIP) eligibility and enrollment operations. Medicaid and CHIP enrollment has grown to historic levels due in large part to the continuous enrollment requirements that states implemented as a condition of receiving a temporary 6.2 percentage point federal medical assistance percentage increase under section 6008 of the Families First Coronavirus Response Act (P.L. 116-127).

Consistent with the March 3, 2022 Centers for Medicare & Medicaid Services (CMS) State Health Official (SHO) letter #22-001, "*Promoting Continuity of Coverage and Distributing Eligibility and Enrollment Workload in Medicaid, the Children's Health Insurance Program (CHIP), and Basic Health Program (BHP) Upon Conclusion of the COVID-19 Public Health Emergency,*" Tennessee has requested that CMS provide authority under section 1902(e)(14)(A) of the Act to enroll in Medicaid (at application) individuals who are receiving benefits under the Supplemental Nutritional Assistance Program (SNAP), despite the differences in household composition and income-counting rules. The state has expressed the need for this authority in order to address systems and operational issues related to efficiently completing eligibility and enrollment actions during the unwinding period. Specifically, the state cited that this authority will minimize the strain on the state's limited staff capacity, who also are responsible for conducting the unprecedented volume of renewals that will need to be completed, during the unwinding period.

Under Section 1902(e)(14)(A) of the Act, your request to enroll in Medicaid (at application) individuals who are receiving benefits under SNAP, despite the differences in household composition and income-counting rules, is approved, as described and subject to the conditions below.

Enrollment for Individuals Based on SNAP Eligibility (MAGI)

The authority provided in accordance with this letter will enable the state, during the period of time specified below, to enroll into Medicaid (at application) individuals who are receiving SNAP benefits despite the differences in household composition and income-counting rules. Under this authority, the state will enroll into Medicaid (at application) individuals who are receiving SNAP benefits whose gross income as determined by SNAP is under the applicable MAGI-based income standard for Medicaid eligibility without conducting a separate MAGI-based income determination. In order to enroll individuals into Medicaid at application under this strategy, the state will continue to collect and verify additional eligibility information, such as citizenship and immigration status, required to complete the Medicaid enrollment.

Enrollment for Individuals Based on SNAP Eligibility (non-MAGI)

The authority provided in accordance with this letter will enable the state, during the period of time specified below, to enroll into Medicaid (at application) individuals who are receiving SNAP benefits despite the differences in household composition and income-counting rules. This authority will apply for individuals enrolled in coverage under the eligibility groups described at 42 CFR 435.135 (the “Pickle” group), 42 CFR 435.137 and 42 CFR 435.138 (relating to certain widows and widowers who have disabilities), section 1634(c) of the Act (relating to adults who developed disabilities before age 22), and section 1902(a)(10)(E) of the Act (the “Medicare Savings Program” groups). Under this authority, the state may enroll into Medicaid (at application) SNAP participants in these eligibility groups whose gross income as determined by SNAP is under the applicable non-MAGI-based income standard for Medicaid eligibility without conducting a separate non-MAGI-based income determination. In order to enroll individuals into Medicaid at application under this strategy, the state will continue to collect and verify additional eligibility information, such as citizenship and immigration status, required to complete the Medicaid enrollment. The state will continue to conduct resource determinations, consistent with the state’s existing policies.

The authority provided in this letter is effective March 25, 2023, through the end of the state’s 12-month unwinding period, as defined in SHO #22-001.

The authority provided in this letter is subject to CMS receiving your written acknowledgement of this approval and acceptance of this new authority and the terms described herein within 30 days of the date of this letter.

We look forward to our continuing work together as part of a transition to routine operations. If you have questions regarding this award, please contact Joe Weissfeld and Jessika Douglas in the Division of Enrollment Policy and Operations, at josef.weissfeld@cms.hhs.gov and jessika.douglas@cms.hhs.gov.

Sincerely,



Sarah deLone, Director,
Children and Adults Health Programs Group