



To: TennCare Managed Care Organizations  
From: Stephen Smith, Director  
Date: October 11, 2024  
Subject: Hurricane Helene Emergency Administrative Flexibilities – rev. 10/11/2024

On September 27, 2024, Governor Bill Lee signed [Executive Order No. 105](#) providing relief to victims of severe weather and flooding in Tennessee due to Hurricane Helene. The State of Tennessee has established the following website, <https://www.tn.gov/tema/updates/hurricane-helene.html>, to provide status updates via Flash Reports for Tennessee’s affected areas. TennCare is taking action to ensure that members and providers affected by Hurricane Helene are supported. Consistent with Executive Order No. 105 and related federal emergency declarations, **for providers, hospitals, and TennCare members who reside in the impacted counties of Carter, Claiborne, Cocke, Grainger, Greene, Hamblen, Hawkins, Jefferson, Johnson, Sullivan, Unicoi, and Washington, the following administrative flexibilities are granted from September 27, 2024, through November 10, 2024:**

- **Suspension of PCP Assignment**  
Through November 10, 2024, the MCOs will suspend statewide the practice of denying PCP service claims for patients whose claims are submitted by providers who are not the PCP of the members they are serving. As has been the practice throughout this year, members will continue to be assigned PCPs according to the normal process.
- **Waiving Out of Network Authorization Requirements for Members in Impacted Counties**  
Through November 10, 2024, the MCOs will waive out-of-network authorization requirements allowing members from impacted counties to see any primary care provider (PCP) or specialty care providers.
- **Post-Acute Care Services – Utilization Management**  
TennCare MCOs will not require authorization reviews before patients who reside in the impacted counties can be moved from the acute care setting to the appropriate post-acute care setting regardless of whether the patient is moved to a setting that is in a non-impacted county. TennCare MCOs will also support rapid placement and discharge of currently hospitalized patients who can be safely discharged to another setting.
- **Acute Care Hospital-based Services – Utilization Management**  
MCOs will suspend the practice of denying claims for notification not being timely filed or for UM not being timely filed through November 10, 2024. Note that other practices have not changed during this emergency period: TennCare MCOs continue to require notification and the submission of clinical information that is normally required for UM level of care reviews.
- **Authorization Approvals Made Before the Emergency**  
TennCare MCOs will allow extensions for authorizations dated September 27, 2024, or later. Through November 10, 2024, providers will be allowed to contact the MCO to change the facility or provider listed on the authorization for patients residing in the impacted counties. This

includes contacting the MCO to have the facility or provider changed to a facility or provider that may be in a non- impacted county. MCOs will suspend site of service reviews through November 10, 2024. To clarify what is being suspended, a site of service review refers to a review performed to determine the least costly safe and appropriate place of service.

- **Medical Record Requests and Audits**

MCOs will suspend their request of medical records to reduce administrative burdens on hospitals in the listed Tennessee counties affected by Hurricane Helene. Audits or recoupments related to medical claims will be suspended or postponed through November 10, 2024. MCOs will not place claims into either pre- or post-payment review or audit that would result in delay of payment of either stop-loss or outlier payments. Note that this change will apply to inpatient and outpatient facility claims. Hospitals that have professional groups as part of their system may need to submit medical records for professional claims. Future audits will consider the period and circumstances when the emergency occurred. However, because we are suspending most of the administrative measures in place to prevent inappropriate utilization during this period, once we have resumed normal operations, MCOs may review services during the period not just for fraud but also for waste or abuse. Reviews of services performed during this period should be reasonable.

- **Not Requiring Medical Records Before Claims Adjudication**

TennCare MCOs will not request medical records before claims adjudication through November 10, 2024 (with the exception of ASH claims). Note that this change will apply to inpatient and outpatient facility claims. Hospitals that have professional groups as part of their system may need to submit medical records for professional claims.

- **Quality and Value-Based Payment Programs**

TennCare MCOs will postpone the manual collection of medical records for HEDIS and in- office reviews. Automated collection of data for quality measures will continue as there is no effort or intervention required from the provider.

- **Recredentialing**

TennCare MCOs will suspend all recredentialing requirements for providers in impacted counties only.

- **Internal and External Appeals Timeframes**

The timeframes for hospitals to submit appeals are typically 180 days. While we are not eliminating these appeals timeframes, if a hospital would like an extension, MCOs will review and approve reasonable requests for an extension on a case-by-case basis. In addition, MCOs will consider this period and the circumstances of this emergency in future audits.

- **Electronic Visit Verification (EVV)**

From September 27, 2024, through November 10, 2024, TennCare's MCOs will allow home health (HH) and personal care service (PCS) providers to deliver their services to TennCare members living in the impacted counties using the best means available. HH and PCS providers that have the connectivity to facilitate an EVV visit are asked to complete the EVV visit or conduct a manual confirmation of the

visit whenever possible. HH and PCS providers that are unable to access their EVV platforms must maintain documentation of the HH or PCS visit including noting the type of service performed; the individual receiving the service; the date of the service; the location of service delivery; the individual providing the service; and the time the service began and ended. TennCare's MCOs are already performing outreach to all members within the impacted counties to coordinate their care. For services rendered between September 27, 2024, through November 10, 2024, TennCare's MCOs will accept claims and EVV documentation outside of the MCO's EVV platform and data aggregator, although HH and PCS providers that are able to perform their EVV visit are encouraged to do so.

- **Hospitals**

From September 27, 2024, through November 10, 2024, TennCare and its MCOs are temporarily waiving certain physical environment requirements to allow increased flexibilities for surge capacity. TennCare will permit facility and non-facility space that is not normally used for patient care to be utilized for patient care, provided the location is approved by the state and will ensure that safety and comfort for patients and staff are sufficiently addressed.

From September 27, 2024, through November 10, 2024, TennCare and its MCOs are temporarily expanding the ability for hospitals to offer long-term care services ("swing beds") for patients who do not require acute care but do meet the skilled nursing facility (SNF) level of care criteria as set forth at 42 CFR 409.31. Under section 1135(b)(1) of the act, eligibility requirements at 42 CFR 482.58(a)(1)-(4), "Special Requirements for hospital providers of long-term care services ('swing beds')" are temporarily waived to allow hospitals to establish SNF swing beds payable under the SNF prospective payment system to provide additional options for hospitals with patients who no longer require acute care but are unable to find placement in a SNF.

- **Skilled Nursing Facilities**

From September 27, 2024, through November 10, 2024, TennCare and its MCOs will temporarily cover SNF services without a qualifying three-day hospital stay for members that experience dislocations.

From September 27, 2024, through November 10, 2024, TennCare and its MCOs are temporarily postponing Pre-admission Screening and Annual Resident Review (PASARR) processes. Retroactively performed screenings or resident reviews must document the reason for the delay in the completion of PASARR requirements.

From September 27, 2024, through November 10, 2024, TennCare and its MCOs will temporarily waive the requirement for physicians and non-physician practitioners to perform in-person visits for nursing home residents and will allow visits to be conducted, as appropriate, via telehealth.

From September 27, 2024, through November 10, 2024, TennCare and its MCOs will temporarily postpone the timeframes in which SNFs must conduct a comprehensive assessment and collect minimum data set data.

- **Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IIDs)**

From September 27, 2024, through November 10, 2024, TennCare and its MCOs will temporarily allow for rooms in ICF/IIDs not normally used as a resident's room to be used to accommodate beds and residents for resident care in emergencies and situations needed to help with surge capacity.

From September 27, 2024, through November 10, 2024, TennCare and its MCOs will temporarily waive requirements for the facility to provide sufficient direct support staff so direct care staff are not required to perform support services that interfere with direct resident care. This will allow facilities to adjust staffing patterns while maintaining the minimum staffing ratios required.

- **Home Health and Hospice**

From September 27, 2024, through November 10, 2024, TennCare and its MCOs will temporarily allow home health agencies to perform initial assessments remotely or by record review.

From September 27, 2024, through November 10, 2024, TennCare and its MCOs will temporarily modify timeframes for hospice providers to complete updates to their comprehensive assessment from 15 to 21 days. Hospice providers must continue to complete other required assessments (i.e. initial and ad hoc assessments based on a change in the patient's condition).

From September 27, 2024, through November 10, 2024, TennCare and its MCOs will temporarily extend the timeframes related to OASIS transmission for home health agencies by:

- Extending the 5-day completion requirement for the comprehensive assessment to 30 day
- Modifying the 30-day OASIS submission requirement

- **Durable Medical Equipment (DME)**

From September 27, 2024, through November 10, 2024, TennCare and its MCOs will temporarily waive prior authorization requirements and quantity limits for oxygen therapy, positive airway pressure devices, respiratory assist devices, ventilators, suction devices, nebulizers, and related supplies.

If DME is lost, destroyed, irreparably damaged, or otherwise rendered unusable, from September 27, 2024, through November 10, 2024, TennCare and its MCOs will waive requirements for in-person assessments, new physician's orders, and medical necessity documentation for DME providers. DME providers still must include a narrative description on the claim explaining the reason why the equipment must be replaced and are reminded to maintain documentation indicating the DME was lost, destroyed, irreparably damaged, or otherwise rendered unusable or unavailable because of the emergency.

From September 27, 2024, through November 10, 2024, to the extent otherwise allowable by professional licensing boards, professional practice acts and other laws and regulations, DME providers may temporarily continue to provide services, recurring medical supplies or DME rentals with otherwise valid provider orders that exceed TennCare's and its MCOs' duration or timeliness standards.

September 27, 2024, through November 10, 2024, TennCare and its MCOs will temporarily suspend requirements for Medicaid Certificates of Medical Necessity (MCMNs) for oxygen, enteral nutrition, parenteral nutrition, and medical equipment. A valid physician order is still required for these services.

TennCare recognizes how devastating the severe rainfall, flash flooding, and damage caused by Hurricane Helene has been to our East Tennessee communities and seek to partner with our MCOs to provide as much support as possible. Thank you for your partnership and continued care of our members following this disaster.

**Memo Revision History:**

1. October 4, 2024: Initial memo released.
2. October 7, 2024: Typo was corrected on page 3 under the section Hospitals within the first paragraph. The reference to *South Carolina (SCDHHS)* was replaced with *TennCare*.
3. October 11, 2024: Impacted list of counties updated to include Claiborne, Grainger, Jefferson, and Sullivan.