

TENNESSEE

TennCare: (Division of Health Care Finance and Administration)

310 Great Circle Road, Nashville, TN 37243

<https://www.tn.gov/tenncare/>

Home and Community-Based 1915(c) Waivers for Respite Support

Medicaid is a program in every state that pays for medical assistance for certain individuals and families with low incomes and resources. It is the largest source of funding for medical and health-related services for America's poorest people. Because Medicaid is funded jointly by the federal and state governments, the services paid for vary from state to state. In addition to medical services, Medicaid will pay for home and community-based services (HCBS) through the state plan as well as through Medicaid waivers that offer services as a lower-cost alternative to treatment in a medical or long-term care facility, such as a nursing home. Respite is usually paid for through one or more of the following types of waivers: research and demonstration (1115), managed care (1915b) and HCBS (1915c) waiver programs. This state's Medicaid waivers that include respite are:

Tennessee is in the process of transitioning its 1915(c) waivers under its 1115 waiver demonstration, TennCare II, as part of their managed care programs. Enrollment in these 1915(c) waivers is now closed for new applicants. Individuals who are currently being served under the 1915(c) programs will continue to be served under those programs, but new HCBS applicants will be transferred to TennCare II.

[TennCare II](#)

Under TennCare II, the state will continue to provide Medicaid coverage to all mandatory and optional populations eligible under Tennessee's state plan. The CHOICES Program utilizes the existing at-risk Medicaid managed care organizations to provide eligible consumers with nursing facility services or home and community based services (HCBS), including respite. Employment and Community First (ECF) CHOICES is the newest component of the CHOICES program and utilizes Medicaid managed care to provide HCBS and LTSS for participants, including respite.

[Tennessee Self-Determination Waiver Program \(0427.R03.01\)](#)

Provides respite, nursing services, nutrition services, occupational therapy, physical therapy, specialized medical equipment and supplies and assistive technology, speech, language, and hearing services, adult dental services, behavior services, behavioral respite services, community participation supports, employment and day services, environmental accessibility modifications, facility-based day supports, individual transportation services, intermittent employment and community integration wrap-around, non-residential homebound support services, orientation and mobility services for impaired vision, personal assistance, personal emergency response systems, semi-independent living services, supported employment - individual employment support, and supported employment - small group employment support for individuals of all ages diagnosed with intellectual disabilities and individuals ages 5 and younger with developmental disabilities.

[TN Comprehensive Aggregate Cap \(or CAC\) Waiver Program \(0357.R03.01\)](#)

Provides residential habilitation, respite, support coordination, nursing services, nutrition services, occupational therapy, physical therapy, specialized medical equipment and supplies and assistive technology, speech, language, and hearing services, behavior services, behavioral respite services, community participation supports, dental services, employment and day services, environmental accessibility modifications, facility-based day supports, family model residential support, individual transportation services, intensive behavioral residential services, intermittent employment and community integration wrap-around supports, medical residential services, non-residential homebound support services, orientation and mobility services for impaired vision, personal assistance, personal emergency response system, semi-independent living, supported employment - individual employment support, supported employment - small group employment support, supported living, and transitional case management for individuals of all ages diagnosed with an intellectual disability.

[TN Statewide HCBS Waiver Program \(0128.R05.03\)](#)

Provides residential habilitation, respite, support coordination, nursing services, nutrition services, occupational therapy, physical therapy, specialized medical equipment and supplies and assistive technology, speech, language, and hearing services, adult dental services, behavior services, behavioral respite services, community participation supports, employment and day services, environmental accessibility modifications, facility-based day supports, family model residential support, individual transportation services, intensive behavioral residential services, intermittent employment and community integration wrap-around supports, medical residential services, non-residential homebound support services, orientation and mobility services for impaired vision, personal assistance, personal emergency response systems, semi-independent living, supported employment - individual employment support, supported employment - small group employment support, supported living, and transitional case management for individuals with developmental disabilities ages 0 - 5, and individuals of all ages diagnosed with an intellectual disability.

TennCare II

State Operating Agency: Division of TennCare

Description	Under TennCare II, the state will continue to provide Medicaid coverage to all mandatory and optional populations eligible under Tennessee's state plan. The CHOICES Program utilizes the existing at-risk Medicaid managed care organizations to provide eligible consumers with nursing facility services or home and community based services (HCBS). This provides participants with an integrated package of acute and long-term services and supports (LTSS) through a managed care delivery system. Employment and Community First (ECF) CHOICES is the newest component of the CHOICES program and utilizes Medicaid managed care to provide HCBS and LTSS for participants.
Waiver Type	1115
Target Population-Eligibility	Individuals are eligible for respite under the CHOICES program if they are ages 65 and older or ages 21 and older with physical disabilities. Individuals are eligible for respite under various ECF CHOICES programs if they are children under age 21 with intellectual or developmental disabilities (I/DD) living at home with family, or are adults age 21 and older with I/DD whether or not they are living at home with family caregivers. Individuals are eligible for behavioral respite if they are under age 21 with I/DD who are living at home with family and have severe co-occurring behavioral health and/or psychiatric conditions that place the child or others at imminent and significant risk of serious physical harm, significantly strain the family's ability to adequately respond to the child's needs, threaten the sustainability of the family living arrangement, and place the child at imminent and significant risk of placement outside the home.
Level of Care	Individuals require level of care available in a nursing facility (NF), or if they do not meet the NF level of care, are "at risk" of NF placement in the absence of services.
Respite Services	<p>Respite is provided under two different programs in this waiver: the CHOICES program and the Employment and Community First (ECF) CHOICES program.</p> <p>CHOICES: This program provides both In-home respite care and In-patient respite care.</p> <p>In-home respite services are provided to individuals unable to care for themselves, and are furnished on a short-term basis in the individual's place of residence, because of the absence or need for relief of those persons normally providing the care. Members can self-direct in-home respite services. In-home respite may be used up to 216 hours per calendar year.</p> <p>In-patient respite care services are provided to individuals unable to care for themselves, and are furnished on a short-term basis in a licensed nursing facility or licensed community-based residential alternative, because of the absence or need for relief of those persons normally providing the care. In-patient respite may be used up to 9 days per calendar year.</p> <p>ECF CHOICES: Respite is available for individuals in the following sub-programs: Essential Family Supports, Essential Supports for Employment and Independent Living, and Comprehensive Supports for Employment and Community Living. Under ECF CHOICES programs, respite shall mean services provided to a person supported when unpaid caregivers are absent or need relief from routine caregiving responsibilities. Respite shall be limited to 30 days of service per person per calendar year or to 216 hours per person per calendar year, depending on the needs and preferences of the individual as reflected in the Person Centered Support Plan. (The 2 limits cannot be combined in a calendar year.) Respite services shall be provided in settings that meet the federal HCBS regulatory standards, which promote community involvement and inclusion and which allow individuals to sustain their lifestyle and routines when an unpaid caregiver is absent for a period of time.</p> <p>In-home behavioral respite is also now available under the ECF CHOICES program Intensive Behavioral Family Supports.</p>
Respite Provider Eligibility	Information for providers: https://www.tn.gov/tenncare/providers.html
Caregiver Eligibility	Caregiver eligibility is not available.

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Enrollment Limit	Enrollment limit is not available.
How to Apply	To apply for TennCare, go to tenncareconnect.tn.gov and click “Apply Now.” You can also apply over the phone by calling TennCare Connect at 1-855-259-0701. Learn more about applying specifically for CHOICES or ECF CHOICES at https://www.tn.gov/tenncare/long-term-services-supports/choices.html and https://www.tn.gov/tenncare/long-term-services-supports/employment-and-community-first-choices/self-referral-form.html , respectively.
Contact Information	Call TennCare Connect at 1-855-259-0701 for help applying. You can also visit your county’s DHS office for help applying. For information on or help with the CHOICE and ECF CHOICES programs, call the TennCare LTSS Help Desk at 1-877-224-0219.
Link to Waiver Application	https://www.tn.gov/content/dam/tn/tenncare/documents/tenncarewaiver.pdf
Expiration Date	06/30/2021
Date of Last Update	08/06/2019

TN Self-Determination Waiver Program (0427.R03.01)

State Operating Agency: TN Department of Intellectual and Developmental Disabilities (TNDIDD)

Description

The waiver program affords participants the opportunity to lead the person-centered planning process and directly manage selected services, including recruitment and management of service providers. Participants and families (as appropriate) electing self-direction have responsibility for managing, in accordance with waiver service definitions and limitations, a budget affording flexibility in service design and delivery. The Self-Determination Waiver offers a continuum of services designed to support each person’s independence and integration into the community and workplace.

Waiver services include: respite, nursing, nutrition services, occupational and physical therapy, specialized medical equipment and supplies and assistive technology, speech, language, and hearing services, adult dental services, behavior services, behavioral respite services, community participation supports, employment and day services, environmental accessibility modifications, facility-based day supports, individual transportation services, intermittent employment and community integration wrap-around, non-residential homebound support services, orientation and mobility services for impaired vision, personal assistance, personal emergency response systems, semi-independent living services, and supported employment.

Waiver Type

1915(c)

Target Population-Eligibility

Individuals who have been diagnosed with a developmental disability between the ages 0 and 5 as well as individuals of all ages diagnosed with an intellectual disability before age 18.

Level of Care

Individuals require level of care available in an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID).

Respite Services

Respite services are provided when unpaid caregivers are absent or need relief from routine caregiving responsibilities. Respite may be provided in the person's place of residence, a Family Model Residential Support home, a Medicaid-certified ICF/IID, a home operated by a licensed residential provider, a licensed respite care facility, or in the home of an approved respite provider. Respite providers may accompany the person on short outings for exercise, recreation, shopping or other purposes while providing respite care. Services must not supplant natural supports that would otherwise be provided at no cost to the Medicaid program. Respite shall not be provided during the same time period that the person supported is receiving Personal Assistance Services, Day Services, Employment Services, or services under a 504 Plan or Individual Education Program (IEP), is being homeschooled, or any combination thereof. Respite shall be limited to a maximum of 30 days per person supported per calendar year. Respite may be participant directed or provider managed.

Behavioral Respite is short-term behavior-oriented services for a participant who is experiencing a behavioral crisis that requires removal from the current residential setting in order to assist in resolving the crisis. Behavioral Respite Services providers shall help to plan, coordinate, and prepare for the individual’s transition back to his/her residential setting. Behavioral Respite is provided in a setting staffed by individuals trained in the management of behavioral issues. Behavioral Respite may be provided in a Medicaid-certified ICF/IID, in a licensed respite care facility, or in a home operated by a licensed residential provider. Behavioral Respite shall not be provided in a home where a participant lives with family members unless such family members are also participants receiving Behavioral Respite Services. The Behavioral Respite Services provider shall be responsible for providing an appropriate level of services and supports 24 hours per day during the hours the person supported is not at school, including behavioral supervision and intervention for aggressive or inappropriate behavior that jeopardizes the health and safety of the person supported or others. With the exception of transportation to and from medical services covered through the Medicaid State Plan/TennCare Program, transportation shall be a component of Behavioral Respite. A participant receiving Behavioral Respite is not eligible to receive Personal Assistance, Respite, or Day Services. Behavioral Respite is limited to 60 days per calendar year and is provider managed.

Respite Provider Eligibility	Provider eligibility and application information available at https://www.tn.gov/didd/providers/provider---how-to.html
Caregiver Eligibility	Respite services may be provided by a relative, but not by a legally responsible person or legal guardian. Behavioral respite may not be provided by a relative, legal guardian, or legally responsible person.
Enrollment Limit	This waiver is closed for new enrollees but remains available to Tennessee residents in the target population already enrolled in the waiver. 1094: Year ending 12/31/2020
How to Apply	This waiver is now closed for new enrollment. For individuals currently seeking services, similar services are offered under TennCare’s Employment and Community First CHOICES program.
Contact Information	DIDD Regional Offices: Western Region: (866) 372-5709 (toll free); (901) 745-7273 (fax) Middle Region: (800) 654-4839 (toll free); (615) 231-5452 (fax) Eastern Region: (888) 531-9876 (toll free); (423) 787-6092 (fax) Call the LTSS Help Desk at 1-877-224-0219.
Link to Waiver Application	https://www.tn.gov/content/dam/tn/tenncare/documents/SelfDeterminationWaiver.pdf
Expiration Date	12/31/2022
Date of Last Update	08/10/2019

TN Comprehensive Aggregate Cap (or CAC) Home and Community Based Services Waiver (0357.R03.01)
State Operating Agency: TN Department of Intellectual and Developmental Disabilities (TNDIDD)

Description

This waiver serves individuals with intellectual disabilities who are former members of the certified class in U.S. vs. Tennessee, et al. (Arlington Developmental Center), current members of the certified class in the U.S. vs. Tennessee, et al. (Clover Bottom Developmental Center), persons discharged from a State Developmental Center (Clover Bottom or Greene Valley) or the Harold Jordan Center following a stay of at least 90 days, and individuals transitioned from the Statewide Waiver (#0128). The CAC Waiver offers a continuum of services designed to support each person’s independence and integration into the community and uses a person-centered planning process.

The waiver provides residential habilitation, respite, support coordination, nursing, nutrition services, occupational and physical therapy, specialized medical equipment/supplies, assistive technology, speech, language, and hearing services, behavior services, behavioral respite services, community participation supports, dental services, employment and day services, home accessibility modifications, facility-based day supports, family model residential support, transportation services, intensive behavioral residential services, intermittent employment and community integration wrap-around supports, medical residential services, non-residential homebound support services, orientation and mobility services for impaired vision, personal assistance, personal emergency response system, semi-independent living, supported employment and transitional case management.

Waiver Type

1915(c)

Target Population- Eligibility

Individuals of all ages diagnosed with an Intellectual Disability who are former members of the certified class in the United States vs. the State of Tennessee, et al. See specific groups covered in the Description section above.

Level of Care

Individuals require level of care available in an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID).

Respite Services

Respite services are provided when unpaid caregivers are absent or need relief from routine caregiving responsibilities. Respite may be provided in the person's place of residence, a Family Model Residential Support home, a Medicaid-certified ICF/IID, a home operated by a licensed residential provider, a licensed respite care facility, or the home of an approved respite provider. Respite providers may accompany the person on short outings for exercise, recreation, shopping or other purposes while providing respite. Services must not supplant natural supports that would otherwise be provided at no cost to the Medicaid program. Respite cannot be provided during the same time period that the person supported is receiving Personal Assistance Services, Day Services, Employment Services, or services under a 504 Plan or Individual Education Program (IEP), is being homeschooled, or any combination thereof. Respite is limited to a maximum of 30 days per person supported per calendar year. Respite may be participant directed or provider managed.

Behavioral Respite is short-term behavior-oriented services for a participant who is experiencing a behavioral crisis that requires removal from the current residential setting in order to assist in resolving the crisis. Providers shall help plan, coordinate, and prepare for the individual’s transition back to his/her residential setting. Behavioral Respite is provided by individuals trained in the management of behavioral issues and may be provided in a Medicaid-certified ICF/IID, in a licensed respite facility, or in a home operated by a licensed residential provider. Behavioral Respite shall not be provided in a home where a participant lives with family members unless such family members are also participants receiving Behavioral Respite Services. The provider shall be responsible for providing an appropriate level of services and supports 24 hours per day during the hours the person supported is not at school, including behavioral supervision and intervention for aggressive or inappropriate behavior that jeopardizes the health and safety of the person supported or others. With the exception of transportation to and from medical services covered through the Medicaid State Plan/TennCare Program, transportation shall be a component of Behavioral Respite. A participant receiving Behavioral Respite is not eligible to receive Personal Assistance, Respite, or Day Services. Behavioral Respite is limited to 60 days per calendar year and is provider managed.

Respite Provider Eligibility	Provider eligibility and application information available at: https://www.tn.gov/didd/providers/provider---how-to.html
Caregiver Eligibility	Respite services may be provided by a relative, but not by a legally responsible person or legal guardian. Behavioral respite may not be provided by a relative, legal guardian, or legally responsible person.
Enrollment Limit	This waiver is closed for new enrollees but remains available to Tennessee residents in the target population already enrolled in the waiver. 1617: Year ending 12/31/2019
How to Apply	This waiver is now closed for new enrollment. For individuals currently seeking services, similar services are offered under TennCare’s Employment and Community First CHOICES program.
Contact Information	DIDD Regional Offices: Western Region: (866) 372-5709 (toll free); (901) 745-7273 (fax) Middle Region: (800) 654-4839 (toll free); (615) 231-5452 (fax) Eastern Region: (888) 531-9876 (toll free); (423) 787-6092 (fax) Call the LTSS Help Desk at 1-877-224-0219.
Link to Waiver Application	https://www.tn.gov/content/dam/tn/tenncare/documents/ApplicationFor1915cHCBSWaiverCAC.pdf
Expiration Date	12/31/2019
Date of Last Update	08/06/2019

TN Statewide HCBS Waiver (0128.R05.03)

State Operating Agency: TN Department of Intellectual and Developmental Disabilities (TNDIDD)

Description

This waiver serves adults with intellectual disabilities and children under six with a developmental disability. It offers a continuum of services for that are selected by each participant through a person-centered planning process to identify services to be included in each waiver participant’s Individual Service Plan. Services aim to support each person’s independence and full integration into the community, including opportunities for employment and work in competitive integrated settings.

The waiver provides residential habilitation, respite, support coordination, nursing, nutrition services, occupational and physical therapy, specialized medical equipment/supplies, assistive technology, speech, language, and hearing services, adult dental services, behavior services, behavioral respite services, community participation supports, employment and day services, home accessibility modifications, facility-based day supports, family model residential support, individual transportation services, intensive behavioral residential services, intermittent employment and community integration wrap-around supports, medical residential services, non-residential homebound support services, orientation and mobility services for impaired vision, personal assistance, personal emergency response systems, semi-independent living, supported living and employment, and transitional case management.

Waiver Type

1915(c)

Target Population- Eligibility

Individuals who have been diagnosed with a developmental disability between the ages 0 and 5 as well as individuals of all ages diagnosed with an intellectual disability before age 18.

Level of Care

Individuals require level of care available in an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID).

Respite Services

Respite services are provided when unpaid caregivers are absent or need relief from routine caregiving responsibilities. Respite may be provided in the person's place of residence, in a Family Model Residential Support home, in a Medicaid-certified ICF/IID, in a home operated by a licensed residential provider, in a licensed respite care facility, or in the home of an approved respite provider. Respite providers may accompany the person on short outings for exercise, recreation, shopping or other purposes while providing respite care. Services must not supplant natural supports that would otherwise be provided at no cost to the Medicaid program. Respite shall not be provided during the same time period that the person supported is receiving Personal Assistance Services, Day Services, Employment Services, or services under a 504 Plan or Individual Education Program (IEP), is being homeschooled, or any combination thereof. Respite shall be limited to a maximum of 30 days per person supported per calendar year. Respite may be provider managed.

Behavioral Respite is short-term behavior-oriented services for a participant who is experiencing a behavioral crisis that requires removal from the current residential setting in order to assist in resolving the behavioral crisis. Behavioral Respite Services providers shall also help to plan, coordinate, and prepare for the individual’s transition back to his/her residential setting. Behavioral Respite is provided in a setting staffed by individuals trained in the management of behavioral issues. Behavioral Respite may be provided in a Medicaid-certified ICF/IID, in a licensed respite care facility, or in a home operated by a licensed residential provider. Behavioral Respite shall not be provided in a home where a participant lives with family members unless such family members are also participants receiving Behavioral Respite Services. The Behavioral Respite Services provider shall be responsible for providing an appropriate level of services and supports 24 hours per day during the hours the person supported is not at school, including behavioral supervision and intervention for aggressive or inappropriate behavior that jeopardizes the health and safety of the person supported or others. With the exception of transportation to and from medical services covered through the Medicaid State Plan/TennCare Program, transportation shall be a component of Behavioral Respite. A participant receiving Behavioral Respite is not eligible to receive Personal Assistance, Respite, or Day Services. Behavioral Respite is limited to 60 days per calendar year and is provider managed.

Respite Provider Eligibility	Provider eligibility and application information available at: https://www.tn.gov/didd/providers/provider---how-to.html
Caregiver Eligibility	Respite services may be provided by a relative, but not by a legally responsible person or legal guardian. Behavioral respite may not be provided by a relative, legal guardian, or legally responsible person.
Enrollment Limit	4812: Year ending 12/31/2019
How to Apply	This waiver is now closed for new enrollment. For individuals currently seeking services, similar services are offered under TennCare’s Employment and Community First CHOICES program.
Contact Information	DIDD Regional Offices: Western Region: (866) 372-5709 (toll free); (901) 745-7273 (fax) Middle Region: (800) 654-4839 (toll free); (615) 231-5452 (fax) Eastern Region: (888) 531-9876 (toll free); (423) 787-6092 (fax) Call the LTSS Help Desk at 1-877-224-0219.
Link to Waiver Application	https://www.tn.gov/content/dam/tn/tennicare/documents/StatewideWaiver.pdf
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