

TennCare Medicaid serves everyone who is determined eligible for Medicaid in the following groups:

- ✓ Children receiving Families First cash assistance through the Tennessee Temporary Assistance to Needy Families (TANF) program;
- ✓ Children who qualify under the “Poverty Level Income Standard”; Income standards vary according to the age of the child: For children in families with low to very low income or high medical bills:
 - ✓ Infants to age 1, 185 percent of poverty (\$2,256 for a family of three);
 - ✓ Children ages 1 to 6, 133 percent of poverty (\$1,622 for a family of three);
 - ✓ Children ages 6 to 17, 100 percent of poverty (\$1,220 for a family of three);
 - ✓ Children under age 21, Medicaid Spend-Down, with unpaid medical bills or big medical bills paid during the month of application and with very low savings and assets.
- ✓ Children receiving Special Supplemental Security Income, the Social Security Administration program providing income support for low-income disabled people.

When can children apply?

- ✓ TennCare Medicaid: children can apply any time
- ✓ TennCare Standard Uninsured: must wait for open enrollment period
- ✓ TennCare Standard Medically Eligible: if under 100 percent of poverty level can apply anytime; if at or over 100 percent they will have to wait for open enrollment period.

Between July 1 and December 31, 2002, eligibility under the new rules was redetermined for all children receiving TennCare in non-Medicaid categories. Children who may retain their coverage are:

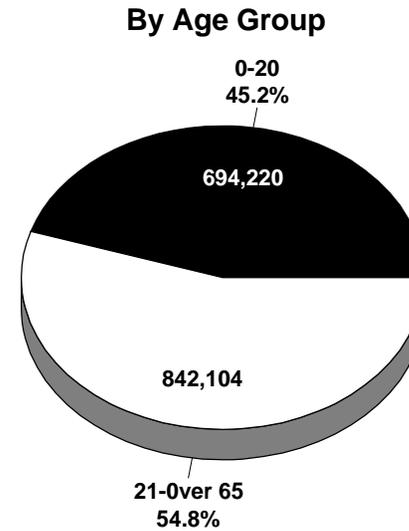
- ✓ Children through age 18 who are below 185 percent of poverty without access to other insurance;
- ✓ Children below 185 percent of poverty who have access to other insurance and were enrolled before January 1, 2002;
- ✓ Uninsurable children (and adults) regardless of income; and
- ✓ Children in families of dislocated workers who enrolled before January 1, 2002.

People removed from the program for failure to comply with the redetermination process must reapply under new, more limited eligibility requirements, including income limits for uninsurable people.

The state also transferred initial application for those seeking health insurance from the Department of Health to the Department of Human Services. In order to qualify for TennCare Standard, applicants must first be rejected for TennCare Medicaid.

Deadlines for redetermination of eligibility depend on the month of initial enrollment to the TennCare program. By January of 2003 all individuals from the original TennCare Program should have completed the redetermination process. Initial analysis of data on those who have lost eligibility through the redetermination process indicates that more than one third are children. A full analysis of those individuals who will lose or have lost TennCare coverage cannot be determined until after the final group has completed the redetermination process in January 2003.

Total TennCare Enrollees, 2001



Source: Bureau of TennCare.