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Sequence Number:

Rule ID(s):

Effective Date:

File Date:

Rulemaking Hearing Rule(s) Filing Form

Rulemaking Hearing Rules are rules filed after and as a result of a rulemaking hearing. T.C.A. § 4-5-205

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Agency/Board/Commission:	Tennessee Department of Finance and Administration
Division:	Bureau of TennCare
Contact Person:	George Woods
Address:	310 Great Circle Road
Zip:	37243
Phone:	(615) 507-6446
Email:	george.woods@tn.gov

Revision Type (check all that apply):

X Amendments

New

Repeal

Rule(s) Revised (ALL chapters and rules contained in filing must be listed here. If needed, copy and paste additional tables to accommodate multiple chapters. Please enter only ONE Rule Number/Rule Title per row)

Chapter Number	Chapter Title
1200-13-14	TennCare Standard
Rule Number	Rule Title
1200-13-1404	Covered Services

(Place substance of rules and other info here. Statutory authority must be given for each rule change. For information on formatting rules go to http://state.tn.us/sos/rules/1360/1360.htm)

The introductory paragraph of Paragraph (5) and Subparagraphs (d), (e) and (f) of Paragraph (5) of Rule 1200-13-14-.04 Covered Services are deleted in their entirety and replaced with a new introductory paragraph and new Subparagraphs (d), (e) and (f) so as amended Paragraph (5) shall read as follows:

- (5) Preventive Medical Services. The following services (identified by applicable CPT procedure codes) shall be covered subject to any limitations described herein, within the scope of standard medical practice, without copay.
 - (a) Office Visits
 - 1. New Patient

```
99381 - Initial evaluation
99382 - ages 1 through 4 years
99383 - ages 5 through 11 years
99384 - ages 12 through 17 years
99385 - ages 18 through 39 years
99386 - ages 40 through 64 years
```

99387 - ages 65 years and older

2. Established Patient

```
99391 - Periodic evaluation
99392 - ages 1 through 4 years
99393 - ages 5 through 11 years
99394 - ages 12 through 17 years
99395 - ages 18 through 39 years
99396 - ages 40 through 64 years
99397 - ages 65 years and older
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- (b) Counseling and Risk Factor Reduction Intervention
 - 1. Individual

```
99401 - approximately 15 minutes
99402 - approximately 30 minutes
99403 - approximately 45 minutes
99404 - approximately 60 minutes
```

2. Group

```
99411 - approximately 30 minutes 99412 - approximately 60 minutes
```

- (c) Family Planning Services, if not part of a preventive services office visit, should be billed by using the codes in (b)1. above.
- (d) Mental health case management services including T1016 and H0004.
- (e) Vaccines as recommended by the Advisory Committee on Immunization Practices (ACIP).
- (f) Any other covered service assigned a rating of A or B by the US Preventative Services Task Force (USPSTF).

Statutory Authority: T.C.A. §§ 4-5-202, 71-5-105 and 71-5-109.

I further certify the following:			
Notice of Rulemaking Hearing file	ed with the Departmer	nt of State on:	03/10/14
Rulemaking Hearing(s) Conducted	ed on: (add more date	s). <u>05/01/14</u>	
	Date:	5/8/2014	
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STATE M		Director, Bureau of	
TENNESSEE			nent of Finance and Administration
NOTARY PUBLIC Subscrib	ed and sworn to befor	e me on:	5 181 2014
AMOSON CONSIDERATION	Notary Public S	ignature:	Charl & Kline
	My commission ex	pires on:	'AUG 2 3 2018'
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	roved as to legality p	ursuant to the provi	Pobert E. Copper, Jr. Robert E. Copper, Jr. Attorney General and Reporter of the sions of the Administrative Procedures Pobert E. Copper, Jr. Attorney General and Reporter (0-13-/-) Date
Department of State Use Only	•		
	Filed with the Departr	nent of State on:	Co-17-14
		Effective on:	9-15-14
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			Secretary of State
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SECRET			
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I certify that this is an accurate and complete copy of rulemaking hearing rules, lawfully promulgated and adopted by the <u>Tennessee Department of Finance and Administration</u> (board/commission/ other authority) on 05/08/2014 (mm/dd/yyyy), and is in compliance with the provisions of T.C.A. § 4-5-222.

Public Hearing Comments

One copy of a document containing responses to comments made at the public hearing must accompany the filing pursuant to T.C.A. § 4-5-222. Agencies shall include only their responses to public hearing comments, which can be summarized. No letters of inquiry from parties questioning the rule will be accepted. When no comments are received at the public hearing, the agency need only draft a memorandum stating such and include it with the Rulemaking Hearing Rule filing. Minutes of the meeting will not be accepted. Transcripts are not acceptable.

There were no public comments on this rule.

Regulatory Flexibility Addendum

Pursuant to T.C.A. §§ 4-5-401 through 4-5-404, prior to initiating the rule making process as described in T.C.A. § 4-5-202(a)(3) and T.C.A. § 4-5-202(a), all agencies shall conduct a review of whether a proposed rule or rule affects small businesses.

The rule is not anticipated to have an effect on small businesses.

Impact on Local Governments

Pursuant to T.C.A. §§ 4-5-220 and 4-5-228 "any rule proposed to be promulgated shall state in a simple declarative sentence, without additional comments on the merits of the policy of the rules or regulation, whether the rule or regulation may have a projected impact on local governments." (See Public Chapter Number 1070 (http://state.tn.us/sos/acts/106/pub/pc1070.pdf) of the 2010 Session of the General Assembly)

The rule is not anticipated to have an impact on local governments.

Additional Information Required by Joint Government Operations Committee

All agencies, upon filing a rule, must also submit the following pursuant to T.C.A. § 4-5-226(i)(1).

(A) A brief summary of the rule and a description of all relevant changes in previous regulations effectuated by such rule;

The rule is being promulgated to simplify the categories of preventive medical services and to point out that they are copay exempt.

(B) A citation to and brief description of any federal law or regulation or any state law or regulation mandating promulgation of such rule or establishing guidelines relevant thereto;

The rule is lawfully adopted by the Bureau of TennCare as a rulemaking hearing rule under T.C.A § 4-5-202, 71-5-105 and 71-5-109.

(C) Identification of persons, organizations, corporations or governmental entities most directly affected by this rule, and whether those persons, organizations, corporations or governmental entities urge adoption or rejection of this rule;

The persons and entities most directly affected by this rule are the providers. The governmental entity most directly affected by this rule is the Bureau of TennCare, Tennessee Department of Finance and Administration.

(D) Identification of any opinions of the attorney general and reporter or any judicial ruling that directly relates to the rule;

The Rule was approved by the Tennessee Attorney General. No additional opinion was given or requested.

(E) An estimate of the probable increase or decrease in state and local government revenues and expenditures, if any, resulting from the promulgation of this rule, and assumptions and reasoning upon which the estimate is based. An agency shall not state that the fiscal impact is minimal if the fiscal impact is more than two percent (2%) of the agency's annual budget or five hundred thousand dollars (\$500,000), whichever is less;

The promulgation of this rule is not anticipated to have an effect on state and local government revenues and expenditures.

(F) Identification of the appropriate agency representative or representatives, possessing substantial knowledge and understanding of the rule;

Donna K. Tidwell
Deputy General Counsel

(G) Identification of the appropriate agency representative or representatives who will explain the rule at a scheduled meeting of the committees;

Donna K. Tidwell Deputy General Counsel

(H) Office address, telephone number, and email address of the agency representative or representatives who will explain the rule at a scheduled meeting of the committees; and

310 Great Circle Road Nashville, TN 37243 (615) 507-6852 donna.tidwell@tn.gov (I) Any additional information relevant to the rule proposed for continuation that the committee requests.

GW10114113

1200-13-14-.04 Covered Services

(5) Preventive Medical Services.

The following preventive services (identified by applicable CPT procedure codes) shall be covered subject to any limitations described herein, within the scope of standard medical practice.

<u>Preventive Medical Services.</u> The following services (identified by applicable CPT procedure codes) shall be covered subject to any limitations described herein, within the scope of standard medical practice, without copay.

(a) Office Visits

1. New Patient

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1. Individual

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```

2. Group

```
99411 - approximately 30 minutes 99412 - approximately 60 minutes
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(c) Family Planning Services, if not part of a preventive services office visit, should be billed by using the codes in (b)1. above.

(d)	Prenatal	care
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59400	Routine obstetric care including antepartum care, vaginal delivery (with or
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	without episiotomy, and/or forceps) and postpartum care
	without episioterry, and/or toroops/ and postparturi ourc

59410 Vaginal delivery only (with or without episiotomy, and/or forceps) including postpartum care

59425 Antepartum care only, 4 - 6 visits

59426 Antepartum care only, 7 or more visits

59430 Postpartum care only (separate procedure)

59510 Routine obstetric care including antepartum care, cesarean delivery, and postpartum care

59515 Cesarean delivery only including postpartum care

59610 Routine obstetric care including antepartum care, vaginal delivery (with or without episiotomy and/or forceps) and postpartum, after previous cesarean delivery

59618 Routine obstetric care including antepartum care, cesarean delivery, and postpartum care, following attempted vaginal delivery after previous cesarean delivery

(e) Other Preventive Services

90700 through 90744 - Immunizations

92551 Screening test, pure tone, air only (Audiologic function)

92552 Pure tone audiometry (threshold); air only

96110 Developmental Code Limited

99173 Vision

99420 Administration and interpretation of health risk assessment instrument (e.g., health hazard appraisal)

99431 Newborn Initial Hospitalization

99435 Newborn - Assessment and Discharge Same Day

Any laboratory test procedure listed in the preventive services periodicity schedule when the services CPT code is one of the above preventive medicine codes. This includes mammography screening (76092) as indicated in the periodicity schedule.

(f) Mental health case management-services

T1016 and H0004 Mental-health case management

- (d) Mental health case management services including T1016 and H0004.
- (e) Vaccines as recommended by the Advisory Committee on Immunization Practices (ACIP).
- (f) Any other covered service assigned a rating of A or B by the US Preventive Services Task Force (USPSTF).

GW10214073