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State of Tennessee House of Representatives

COMMITTEES
HEALTH
BUSINESS AND UTILITIES

SUBCOMMITTEE HEALTH

June 28, 2018

Dr. Wendy Long, Director Division of TennCare 310 Great Circle Road Nashville, TN 37243

RE: Amendment 36 to the TennCare II Demonstration

Dear Dr. Long:

I write to submit my public comments regarding the above-referenced amendment to the TennCare II Demonstration. I strongly oppose Amendment 36 and the Division of TennCare's submission of this amendment to the Centers for Medicare & Medicaid Services at this time. I also take serious issue with the Division of TennCare's purposeful limitation on the opportunity of affected Tennessee citizens' to make public comments on this amendment in person. Your submission of this amendment will have a direct, negative impact on the health of women in this state and threaten their access to vital health care services.

The stated objective of Amendment 36 is to implement Public Chapter No. 682, a controversial and legally suspect law that was only recently passed by the state legislature. This law expressly prohibits health care providers performing legal and elective reproductive health care procedures from participating in the TennCare program. The stated legislative intent for this law was to prevent public funds from being used to fund elective abortions and to favor one health care service over another. However, during legislative committee debate, the bill sponsor could not provide or specify a single instance where public funds were being used to fund the reproductive health care procedure at issue in this state. The law also arbitrarily, without any rational basis, creates a threshold of fifty procedures for purposes of determining a health care provider's eligibility to participate in the TennCare program. During floor debate, the bill sponsor's only reason for the arbitrary fifty-procedure threshold was that "fifty was the number we chose." This arbitrary allowance of fifty procedures eliminates the other stated intent of the bill to favor one health care service over another, thus evidencing the real intent of the law.

The law and this resulting amendment are being used to target a single health care provider with which the bill sponsor and his political party take issue. Political vendettas are inappropriate and insufficient grounds on which to seek a

waiver amendment. Any such amendment should have the ultimate goal of improving the quality and accessibility of health care services to eligible Tennesseans and to improve the public health and general welfare of this state. Amendment 36 fails in both respects, just as the law requiring it fails to accomplish its alleged intent.

Amendment 36 will ultimately only serve to have a direct and detrimental impact on the health of Tennessee citizens who need public assistance the most. Thousands of Tennessee women will lose access to health care services, including birth control, cancer screenings and other lifesaving care as a direct result of this amendment.

Additionally, I also question the Division of TennCare's haste in filing this amendment to the TennCare II Demonstration with the Center for Medicare & Medicaid Services. Public Chapter No. 682 contains no language requiring the Division of TennCare to submit this amendment during any specific timeframe. Therefore, I question the Division's motives in acting with haste and without fully evaluating the potential impact of Amendment 36 before blindly acquiescing to the politically-motivated whims of the legislature.

Given the lack of a deadline to submit this amendment, it also raises the question of why the Division of TennCare has only allowed for two opportunities for Tennessee citizens to share their public comments in person. Both public hearings took place within a four-day timespan and both were held in Nashville in the middle of the afternoon during working hours. Neither of these opportunities for public comment would appear to be conducive to many who will be directly impacted by this amendment. The Division of TennCare had the time and opportunity to hold public meetings in Shelby, Davidson, Knox and any other county in this state, yet it chose not to do so for unknown reasons.

In closing, I would respectfully request the Division of TennCare to carefully evaluate the purpose and impact of Amendment 36 and reconsider the Division's hasty submission of this amendment to the federal government for approval so that the public has adequate time to comment. At this time, we should be doing everything within our power and respective jurisdictions to improve the quality and expand accessibility of health care in this state. Amendment 36 would accomplish just the opposite, and for the above-stated reasons, I strongly oppose it.

Sincerely,

John Ray Clemmons State Representative

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