



**STATE OF TENNESSEE**  
**DEPARTMENT OF COMMERCE AND INSURANCE**  
500 JAMES ROBERTSON PARKWAY  
NASHVILLE, TENNESSEE 37243-5065  
615-741-6007

**BILL LEE**  
GOVERNOR

**CARTER LAWRENCE**  
COMMISSIONER

**MEMORANDUM**

TO: Ralph Alvarado, MD, FACP, Department of Health  
Fiscal Review Committee

FROM: Commissioner Carter Lawrence   
Carter Lawrence (Apr 28, 2025 15:32 CDT)

DATE: April 28, 2025

RE: Report of Requests for Independent Review Pursuant to the TennCare Prompt Pay  
Act, Tenn. Code Ann. § 56-32-126(b)(5)

Please find attached the Annual Report of Requests for TennCare Independent Reviews for calendar year 2024.

Pursuant to the TennCare Prompt Pay Act, Tenn. Code Ann. § 56-32-126(b)(5), the Commissioner of Commerce and Insurance shall report to the Department of Health and to the Fiscal Review Committee the number of requests for TennCare claims review filed for each health maintenance organization operating a TennCare line of business during the prior calendar year and the general outcome of these independent review requests. The Commissioner shall also report the name of any provider whose claim denial is upheld in more than fifty percent (50%) of submitted claim reviews as well as the number of claim reviews lost by that provider.

If you have any questions, please contact Assistant Commissioner Lisa Jordan, TennCare Oversight Division, at (615) 741-2677.

Enclosure

cc: Lisa R. Jordan, Assistant Commissioner, TennCare Oversight Division  
John Mattingly, Examinations Director, TennCare Oversight Division  
Patricia L. Newton, Compliance Manager, TennCare Oversight Division  
Gregory Hawkins, Examinations Manager, TennCare Oversight Division  
Commissioner Jim Bryson, Department of Finance & Administration  
Stephen Smith, Deputy Commissioner, TDFA Division of TennCare  
Johnny Lai, Director of Managed Care Operations, Division of TennCare  
Sherri Ernst, Selection Panel for TennCare Reviewers  
Patrick Sullivan, Selection Panel for TennCare Reviewers  
Justin Campbell, Selection Panel for TennCare Reviewers  
Heather Staton, Selection Panel for TennCare Reviewers

Settled for Provider — The MCC and Provider agreed to a dispute resolution in the Provider's favor before the Independent Reviewer rendered a decision.

Other – The dispute arose from an error in the enrollee's TennCare record which resulted in the enrollee being assigned to two different TennCare MCCs at the same time. The Department's TennCare Oversight Division collaborated with the Division of TennCare and the MCCs to correct the error. The provider was ultimately paid without the dispute being decided by independent review.



Dept. of Commerce and Insurance, Authorization #MV9V46-1, electronic only, May 1, 2025. This public document was promulgated at a cost of \$0.00 per copy.

**Annual Report to the Department of Health and Fiscal Review Committee  
Requests for Independent Review of TennCare  
For Calendar Year 2024**

Pursuant to Tenn. Code Ann. § 56-32-126(b)(5):

Number of requests for Independent Review of TennCare claims denial filed for each TennCare Managed Care Company ("MCC") during the 2024 calendar year:

<b>Name of MCC</b>	<b>Number of Requests</b>	<b>Outcome of Each Result^</b>
<u>Wellpoint Tennessee</u> 14 (formerly AmeriGroup Tennessee)		<div> Decision for MCC: 2  Decision for MCC to Pay Outpatient: 2  Decision for Provider: 2  Ineligible: 2  Settled for Provider: 3  PC Process: 3 </div>
<u>UnitedHealthcare Plan of the River Valley</u> 30 (UnitedHealthcare Community Plan)		<div> Decision for MCC: 9  Decision for MCC to Pay Outpatient: 2  Decision for Provider: 7  Decision for Provider and MCC (Partial): 1  Ineligible: 4  PC Process: 1  Refer to TCB: 1  Settled for Provider: 4  Other: 1 </div>

Volunteer State Health Plan 17  
(BlueCare and TennCareSelect)

Decision for MCC: 6  
Decision for MCC to Pay Outpatient: 2  
Decision for Provider: 4  
Decision for Provider and MCC (Partial): 2  
Settled for Provider: 3

Name of Provider whose claim denial is upheld in more than fifty percent (50%) of the Independent Review Requests, as well as the number of claim reviews lost by that provider:

Baptist Memorial Hospital – Memphis 2

Covenant Morristown Hamblen Hospital 2

Maury Regional Health 7

**^Description of Outcome Information:**

Ineligible — The Independent Review Request did not meet the statutory guidelines for eligibility. The Providers are notified of their ineligible statuses and are given the opportunity to correct the deficiencies.

Decision for MCC — The Independent Reviewer found that the Provider claim was properly denied by the MCC.

Decision for MCC to Pay Outpatient – MCC inpatient denial upheld. MCC ordered to pay as outpatient claim.

PC Process — Processed as a Provider Complaint.

Decision for Provider — The Independent Reviewer found that the Provider claim should be paid by the MCC.

Decision for MCC and Provider (Partial) — The Independent Reviewer found that the claim should be partially paid by the MCC.

Pending – The Independent Reviewer has not rendered a decision.

Refer to TCB — Referred to the Division of TennCare for Medical Review (Pending).