

TennCare Oversight Division Summary of Provider Complaints for Calendar Year 2025

1st Quarter Total: 217
2nd Quarter Total: 299
3rd Quarter Total: 296
2025 Total: 812*

Wellpoint TennCare 1st Qtr. Total – 53

Denial Reversed: 25
Denial Upheld: 20
Partial: 3
Partial (Pay with Corrected Claim): 1
Resolved: 1
Question Answered: 3

WLP TennCare YTD Total: 212**

Wellpoint TennCare 2nd Qtr. Total – 90

Question Answered: 3
Denial Reversed: 47
Denial Upheld: 25
Partial: 1
Partial (Pay with Corrected Claim) 3
Withdrawn: 11

Wellpoint TennCare 3rd Qtr. Total – 69

Question Answered: 1
Denial Reversed: 36
Denial Upheld: 26
Partial: 4
Resolved: 1
Duplicate: 1

Wellpoint Tennessee CoverKids 1st Qtr. Total – 4

Denial Upheld: 4

Wellpoint Tennessee CoverKids 3rdQtr. Total – 3

Denial Upheld: 3

Wellpoint Medicare Advantage or Medicare Advantage SNP 1st Qtr. Total – 6 (MA 1, SNP 5)

Denial Reversed: 4
Denial Upheld: 1
Referred to Consumer Insurance Services: 1

Wellpoint Medicare Advantage or Medicare Advantage SNP 2nd Qtr. Total – 4 (MA 1, SNP 3)

Denial Reversed: 2
Denial Upheld: 1
Referred to Consumer Insurance Services: 1

Wellpoint Medicare Advantage or Medicare Advantage SNP 3rd Qtr. Total – 2 (SNP 2)

Denial Upheld: 2

DentaQuest TennCare 1st Quarter Total – 3

Paid: 2

Resolved: 1

DentaQuest TennCare YTD Total: 5**

DentaQuest TennCare 3rd Quarter Total – 2

Denial Upheld - 2

OptumRx 1st Quarter Total – 1

Question Answered: 1

OptumRx TennCare YTD Total: 1**

TennCare 1st Qtr. Total – 1

TCB Referral: 1

TennCare 2nd Qtr. Total – 3

TCB Referral: 3

TennCare 3rd Qtr. Total – 1

Resolved - 1

UnitedHealthcare Plan of the River Valley TennCare 1st Qtr. Total – 31

Denial Reversed: 17

Denial Upheld: 10

Partial (Pay with Corrected Claim): 1

Resolved: 1

Referred to Consumer Insurance Services: 1

Question Answered: 1

UPRV TennCare YTD Total: 97**

UnitedHealthcare Plan of the River Valley TennCare 2nd Qtr. Total – 29

Denial Reversed: 19

Denial Upheld: 6

Partial: 1

Ineligible: 1

Withdrawn: 2

UnitedHealthcare Plan of the River Valley TennCare 3rd Qtr. Total – 37

Denial Upheld: 13

Denial Reversed: 21

Partial: 2

Duplicate: 1

UnitedHealthcare Plan of the River Valley Medicare Advantage SNP 1st Qtr. Total – 9

Denial Reversed: 5

Denial Upheld: 3

Partial (Pay with Corrected Claims): 1

UnitedHealthcare Plan of the River Valley Medicare Advantage or Medicare Advantage SNP 2nd Qtr. Total – 10 (MA 1, SNP 9)

Denial Reversed: 3

Denial Upheld: 7

UnitedHealthcare Plan of the River Valley Medicare Advantage or Medicare Advantage SNP 3rd Qtr. Total – 22 (MA 2, SNP 20)

Question Answered: 1

Denial Upheld: 14

Denial Reversed: 6

Partial: 1

UnitedHealthcare Mississippi Medicaid 3rd Qtr. Total – 1

Ineligible: 1

UnitedHealthcare Plan of the River Valley CoverKids 1st Qtr. Total – 1

Denial Reversed: 1

Volunteer State Health Plan TennCare 1st Qtr. Total - 101

VSHP TennCare YTD Total: 379**

Denial Reversed: 60

Denial Upheld: 26

Duplicate: 2

Partial: 4

Paid: 4

Question Answered: 1

Resolved: 4

Volunteer State Health Plan TennCare 2nd Qtr. Total - 145

Question Answered: 2

Denial Reversed: 96

Denial Upheld: 27

Partial: 17

Partial (Pay with Corrected Claim): 2

Resolved: 1

Volunteer State Health Plan TennCare 3rd Qtr. Total – 133

Question Answered: 1

Denial Reversed: 66

Denial Upheld: 40

Partial: 13

Partial (Pay with Corrected Claim): 10

Resolved: 1

Duplicate: 1

Ineligible: 1

Volunteer State Health Plan CoverKids 2nd Qtr. Total – 7

Denial Reversed: 6

Denial Upheld: 1

Volunteer State Health Plan CoverKids 3rd Qtr. Total – 5

Denial Reversed – 1

Denial Upheld - 4

Volunteer State Health Plan Medicare Advantage SNP 1st Qtr. Total – 5

Denial Reversed: 1
Denial Upheld: 3
Duplicate: 1

Volunteer State Health Plan Medicare Advantage SNP 2nd Qtr. Total – 11

Denial Reversed: 1
Denial Upheld: 10

Volunteer State Health Plan Medicare Advantage SNP 3rd Qtr. Total – 21

Denial Reversed: 9
Denial Upheld: 11
Pay with Corrected Claim: 1

Ambetter/Centene 1st Qtr. Total – 1

Referred to Consumer Insurance Services: 1

Molina Healthcare 1st Qtr. Total – 1

Ineligible: 1

*Includes all Provider Complaints received.

** Excludes CoverKids, Special Needs Plan or FIDE Plan Provider Complaints.

Compare to previous years:

2024 Total: 1014
2023 Total: 993
2022 Total: 843
2021 Total: 561
2020 Total: 570
2019 Total: 553
2018 Total: 1151
2017 Total: 1045