TennCare Oversight Division of the Tennessee Department of Commerce and Insurance Prompt Pay Compliance Summary for Processed Electronic Nursing Facility/HCBS and ECF Claims

The HMO's contract with the TennCare Bureau include additional prompt pay claims processing requirements for the CHOICES program. The additional CHOICES requirements apply to electronically submitted nursing facility claims/HCBS claims and Employment Community First (ECF) claims.

TennCare Contractual 90% 99.5% **Requirements Only** 21 Day 14 Day Clean Clean For the

Claim Type Compliance? Month Ended Claims Claims

Wellnoint of Tennessee Inc. (fka AMERIGROUP Tennessee Inc.)

Wellpoint of Tennessee	, Inc. (tka AMEF	KIGKOUF	lennessee	e, Inc.)	
Region(s): All					
Nursing Facility/HCBS	1/31/2023	100%	100.0%	Yes	
Nursing Facility/HCBS	2/28/2023	100%	100.0%	Yes	
Nursing Facility/HCBS	3/31/2023	99%	99.6%	Yes	
Nursing Facility/HCBS	4/30/2023	100%	99.9%	Yes	
Nursing Facility/HCBS	5/31/2023	99%	99.7%	Yes	
Nursing Facility/HCBS	6/30/2023	99%	99.9%	Yes	
Nursing Facility/HCBS	7/31/2023	100%	100.0%	Yes	
Nursing Facility/HCBS	8/31/2023	100%	99.9%	Yes	
Nursing Facility/HCBS	9/30/2023	100%	99.9%	Yes	
Nursing Facility/HCBS	10/31/2023	99%	100.0%	Yes	
Nursing Facility/HCBS	11/30/2023	100%	99.7%	Yes	
Nursing Facility/HCBS	12/31/2023	100%	99.7%	Yes	
Nursing Facility/HCBS	1/31/2024	99%	99.6%	Yes	
Nursing Facility/HCBS	2/29/2024	99%	99.9%	Yes	
Nursing Facility/HCBS	3/31/2024	100%	99.9%	Yes	

TennCare Contractual 90% 99.5% **Requirements Only** 14 Day 21 Day For the Clean Clean

Claim Type	Month E	nded Claii		Compliance?	
Wellpoint of Region(s): All	Tennessee, Inc. (fka A	MERIGRO	UP Tenness	see, Inc.)	
ECF	1/31/20	100%	100.0%	Yes	
ECF	2/28/20	99%	99.0%	Yes	
ECF	3/31/20	23 100%	99.9%	Yes	
ECF	4/30/20)23 100%	99.8%	Yes	
ECF	5/31/20	99%	99.8%	Yes	
ECF	6/30/20	94%	98.0%	Yes	
ECF	7/31/20	99%	99.0%	Yes	
ECF	8/31/20	100%	100.0%	Yes	
ECF	9/30/20	23 100%	100.0%	Yes	
ECF	10/31/20	100%	99.7%	Yes	
ECF	11/30/20	100%	99.9%	Yes	
ECF	12/31/20	100%	100.0%	Yes	
ECF	1/31/20	99%	100.0%	Yes	
ECF	2/29/20	94%	100.0%	Yes	
ECF	3/31/20	98%	99.9%	Yes	

TennCare Contractual		90%	99.5%
Requirements Only		14 Day	21 Day
	For the	Clean	Clean

Claim Type	Month Ended	Claims	Claims	Compliance?	
UnitedHealthcare Plans	of the River Valle	ey, Inc.			
Region(s): All					
Nursing Facility/HCBS	1/31/2023	100%	99.9%	Yes	
Nursing Facility/HCBS	2/28/2023	100%	100.0%	Yes	
Nursing Facility/HCBS	3/31/2023	100%	100.0%	Yes	
Nursing Facility/HCBS	4/30/2023	100%	99.9%	Yes	
Nursing Facility/HCBS	5/31/2023	100%	100.0%	Yes	
Nursing Facility/HCBS	6/30/2023	100%	99.9%	Yes	
Nursing Facility/HCBS	7/31/2023	100%	99.9%	Yes	
Nursing Facility/HCBS	8/31/2023	100%	100.0%	Yes	
Nursing Facility/HCBS	9/30/2023	98%	99.5%	Yes	
Nursing Facility/HCBS	10/31/2023	98%	99.2%	No	
Nursing Facility/HCBS	11/30/2023	100%	100.0%	Yes	
Nursing Facility/HCBS	12/31/2023	100%	100.0%	Yes	
Nursing Facility/HCBS	1/31/2024	93%	98.1%	No	
Nursing Facility/HCBS	2/29/2024	98%	99.7%	Yes	
Nursing Facility/HCBS	3/31/2024	99%	99.9%	Yes	

TennCare Contractual		90%	99.5%	
Requirements Only		14 Day	21 Day	
	For the	Clean	Clean	

Claim Type	Month Ended	Claims	Claims	Compliance?	
UnitedHealthcare Pla	ans of the River Valle	ey, Inc.			
Region(s): All					
ECF	1/31/2023	80%	94.4%	No	
ECF	2/28/2023	100%	100.0%	Yes	
ECF	3/31/2023	100%	100.0%	Yes	
ECF	4/30/2023	100%	100.0%	Yes	
ECF	5/31/2023	100%	100.0%	Yes	
ECF	6/30/2023	100%	100.0%	Yes	
ECF	7/31/2023	100%	100.0%	Yes	
ECF	8/31/2023	100%	99.9%	Yes	
ECF	9/30/2023	98%	99.8%	Yes	
ECF	10/31/2023	98%	98.9%	No	
ECF	11/30/2023	100%	100.0%	Yes	
ECF	12/31/2023	100%	100.0%	Yes	
ECF	1/31/2024	96%	99.1%	No	
ECF	2/29/2024	98%	99.9%	Yes	
ECF	3/31/2024	100%	99.9%	Yes	

TennCare Contractual		90%	99.5%	
Requirements Only		14 Day	21 Day	
	For the	Clean	Clean	

Claim Type	Month Ended	Claims	Claims	Compliance?	
Volunteer State Health F	Plan, Inc., d/b/a B	lueCare			
Region(s): All	, ,				
Nursing Facility/HCBS	1/31/2023	100%	100.0%	Yes	
Nursing Facility/HCBS	2/28/2023	100%	100.0%	Yes	
Nursing Facility/HCBS	3/31/2023	100%	100.0%	Yes	
Nursing Facility/HCBS	4/30/2023	100%	100.0%	Yes	
Nursing Facility/HCBS	5/31/2023	99%	100.0%	Yes	
Nursing Facility/HCBS	6/30/2023	100%	100.0%	Yes	
Nursing Facility/HCBS	7/31/2023	100%	100.0%	Yes	
Nursing Facility/HCBS	8/31/2023	99%	100.0%	Yes	
Nursing Facility/HCBS	9/30/2023	100%	100.0%	Yes	
Nursing Facility/HCBS	10/31/2023	99%	100.0%	Yes	
Nursing Facility/HCBS	11/30/2023	98%	100.0%	Yes	
Nursing Facility/HCBS	12/31/2023	100%	100.0%	Yes	
Nursing Facility/HCBS	1/31/2024	100%	100.0%	Yes	
Nursing Facility/HCBS	2/29/2024	100%	100.0%	Yes	
Nursing Facility/HCBS	3/31/2024	100%	100.0%	Yes	

TennCare Contractual		90%	99.5%	
Requirements Only		14 Day	21 Day	
	For the	Clean	Clean	

Claim Type	Month Ended	Claims	Claims	Compliance?	
Volunteer State Heal	th Plan. Inc d/b/a B	lueCare			
Region(s): All	, ,				
ECF	1/31/2023	100%	100.0%	Yes	
ECF	2/28/2023	100%	100.0%	Yes	
ECF	3/31/2023	100%	100.0%	Yes	
ECF	4/30/2023	100%	100.0%	Yes	
ECF	5/31/2023	100%	100.0%	Yes	
ECF	6/30/2023	100%	100.0%	Yes	
ECF	7/31/2023	100%	100.0%	Yes	
ECF	8/31/2023	99%	100.0%	Yes	
ECF	9/30/2023	100%	100.0%	Yes	
ECF	10/31/2023	98%	100.0%	Yes	
ECF	11/30/2023	100%	99.9%	Yes	
ECF	12/31/2023	100%	99.9%	Yes	
ECF	1/31/2024	100%	100.0%	Yes	
ECF	2/29/2024	100%	100.0%	Yes	
ECF	3/31/2024	100%	100.0%	Yes	

TennCare Contractual		90%	99.5%		
Requirements Only		14 Day	21 Day		
	For the	Clean	Clean		
Claim Type	Month Ended	Claims	Claims	Compliance?	

- 71	Mentin Ended	Oldino	Oldillio	ı	,
olunteer State Health I	Plan, Inc., d/b/a To	ennCare :	Select		
Region(s): All					
Nursing Facility/HCBS	1/31/2023	92%	100.0%	Yes	
Nursing Facility/HCBS	2/28/2023	100%	100.0%	Yes	
Nursing Facility/HCBS	3/31/2023	100%	100.0%	Yes	
Nursing Facility/HCBS	4/30/2023	100%	100.0%	Yes	
Nursing Facility/HCBS	5/31/2023	100%	100.0%	Yes	
Nursing Facility/HCBS	6/30/2023	100%	100.0%	Yes	
Nursing Facility/HCBS	7/31/2023	100%	100.0%	Yes	
Nursing Facility/HCBS	8/31/2023	100%	100.0%	Yes	
Nursing Facility/HCBS	9/30/2023	100%	100.0%	Yes	
Nursing Facility/HCBS	10/31/2023	100%	100.0%	Yes	
Nursing Facility/HCBS	11/30/2023	100%	100.0%	Yes	
Nursing Facility/HCBS	12/31/2023	100%	100.0%	Yes	
Nursing Facility/HCBS	1/31/2024	100%	100.0%	Yes	
Nursing Facility/HCBS	2/29/2024	97%	100.0%	Yes	
Nursing Facility/HCBS	3/31/2024	100%	100.0%	Yes	