



TennCare Medicaid Advisory Committee Meeting

October 14, 2025

1pm CST

Participants:

X	Attendee	X	Attendee
X	Dana Moore, TennCare	X	Deborah Murph, Executive Director of Mountain Hope (Clinical Provider)
X	Cato Johnson, Chair, Hospital Administrator (Healthcare Administrator)	X	Leslie Wolfe, Independent Pharmacist (Pharmacy Provider)
X	Kimberly Howerton (Clinical Provider)	X	Michele Williams, Walker Comprehensive Health Center (Pediatric Clinical Provider)
X	Jesse Samples, Executive Director of Tennessee Health Care Association (Nursing Home Representative)	X	Chelsea Rick, LTSS Medical Director at United HealthCare (Medicaid MCO)
X	Julie Joseph, BlueCare Chief Medical Officer (Medicaid MCO)	X	Greg Cannella, WellPoint Chief Medical Officer (Medicaid MCO)
X	Sharon Moore-Caldwell, BlueCross BlueShield of Tennessee	X	Jessica Hill, TennCare
X	Lynette Porter, Tennessee Council on Development Disabilities Overviews (State Advocacy Group)	X	Caleb Nix, TennCare
X	Vicki Lee Jessup, Public participant	X	Jim Guffey, TennCare
X	Mary Keown, Dental Provider	X	Victor Wu, TennCare
X	BAC Member	X	Amy Lawrence, TennCare
X	Reese Devilbiss, Notetaker		

Topics:

Number	Topic
1.	Introduction and Administrative Items

2.	Sector and MCO Updates
3.	Wellpoint Overview
4.	Pharmacy Provider Overview
5.	Healthcare Provider Overview
6.	Open Discussion

Meeting Minutes

Sector and MCO Updates

- Dr. Victor Wu provided an update on Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) rates, noting the screening rate benchmark is 80%, which is set by the Centers for Medicare & Medicaid Services (CMS).
- He highlighted that from 2020–2022, rates were low due to pandemic-related challenges. However, in 2024, the EPSDT rate reached its highest point at 75%.
- Dr. Wu noted that while the <1 age group performs well, teenagers often miss well-child visits.
 - He also pointed out that East Tennessee has seen increased screening percentages, and West Tennessee traditionally has lower rates; however almost every county has shown improvement from 2023.
- Dr. Wu highlighted that MCOs have been creative in establishing partnerships and finding different activities to improve EPSDT rates.
- The following questions were posed to the group:
 - What initiative(s) or best practices do you use to increase member and/or provider engagement?
 - Do you have any potential ideas that could help improve EPSDT rates, especially in target counties?
 - Are there any additional community partners that you would recommend TennCare or our health plans partner with?
- **Transportation:** Dr. Mary Keown identified TennCare transportation as a significant barrier. She explained that transport brokers sometimes misunderstand the rules, preventing a sibling from accompanying another child to an appointment and causing a missed visit.
 - Dr. Wu acknowledged there is continued opportunity to help providers navigate the process. He noted that while regulations have been made more flexible, work is needed to improve the user experience.
- **Provider Engagement:** Dr. Kim Howerton asked if successful engagement strategies from East Tennessee could be replicated in the west.
 - Dr. Wu believed there was a longer history of partnerships in the eastern part of the state, but health plans are working to establish more in the west.
 - Dr. Cannella agreed, highlighting there are opportunities for mileage reimbursement.
 - Sharon Moore-Caldwell noted that community outreach, such as attending sporting events, has successfully built relationships and increased patient engagement with providers.

- **Appointment Access:** Amy Lawrence shared that some school systems are reportedly no longer excusing absences for doctor visits, creating barriers to care.
 - Dr. Michele Williams added that while some clinics have tried extending hours or opening on Saturdays, patient turnout for well-child visits during these times has been low, leaving a lot of staff, but few patients.
 - Clinic hours have previously been extended to 7:00 p.m., but the same result occurs.
 - Dr. Keown mentioned that in Davidson County, many clinics are open on Saturday morning, primarily for sick visits.
- Dr. Wu reiterated that there are a lot of opportunities in west Tennessee, and the team will continue to think through ideas around transportation, engagement, and after-hours visits.
 - Any additional EPSDT questions and suggestions can be directed to April Cunningham-Rush.

Wellpoint Overview

- Cato passed it to Dr. Greg Cannella for the Wellpoint Overview
- Dr. Cannella, CMO for Wellpoint, highlighted several member engagement initiatives:
 - **Community Events:** Sponsored events like diaper giveaways, baby showers, and back-to-school bashes have been held to provide attendees with resources such as baby items, healthy foods, resources, school supplies, haircuts, clothing, immunizations, and more.
 - These events can be coordinated with other services such as EPSDT services and provide warm handoffs for local community support.
 - **New Programs:** A “Take a Load Off” program offers free laundry services throughout the state, which has already garnered 1,300 loads of laundry.
 - Another program provides hygiene vending machines, initially at the Boys and Girls Club, which dispenses items such as deodorant, toothpaste, and dental floss to support health and dignity, allowing children to focus on personal growth without barriers.
 - Earlier this month in partnership with the Tennessee Titans and US Hunger, 50 volunteers packed over 10,000 meals in middle Tennessee
 - Dr. Cannella thanked Matthew Walker Comprehensive Health Center for providing flu shots, adult and well-child exams, and other resources.
 - These types of events with the provider community contribute to the growth in EPSDT rates.
 - **Maternal Health:** Enhancements have been made to the maternal health program. Over 520 blood pressure cuffs have been distributed to pregnant or postpartum members since February to improve health outcomes.
 - **Non-Emergency Medical Transportation (NEMT) & Behavioral Health:** By scheduling NEMT rides for in-patient behavioral health patients, several patients were unable to follow-up as they were still at in-patient facilities.
 - This observation showed a 13% decrease in no-show visits, increasing available NEMT resources.
 - **Long-Term Support Services (LTSS) Annual Choices Community:** Events were organized with advocates from BlueCare, United, and Wellpoint, to provide CHOICES members and providers with educational updates related to Choices

- Cato thanked Dr. Cannella for the overview, highlighting he has seen blood pressure screening be done in barbershops, focusing on African American males, which has proved successful

Pharmacy Provider Overview

- Dr. Leslie Wolfe, an independent pharmacist in Dickson, Tennessee, provided an overview from the pharmacy perspective, noting that everything from TennCare is running smoothly.
- **Success:**
 - The elimination of the 5-prescription per month was a significant improvement, which used to be a tedious process to get medication at a low monthly cost.
 - The expansion of the auto-exempt list also helped, highlighting there are high-value brand names that are now available in generic forms.
 - The diaper benefit program has been a success, with over 400 pharmacies across the state participating.
 - Dr. Wolfe noted her peers have seen this bring more families through the door.
- **Challenges:**
 - **Vaccine Coverage:** Dr. Wolfe noted challenges around pharmacy access to vaccines. She described that pharmacies can only bill TennCare for flu and COVID-19 vaccines. Other critical immunizations (shingles, pneumonia, RSV) are considered medical benefits, but physician offices may not readily stock these vaccines. Patients are also often referred to pharmacies but for vaccines, but pharmacies cannot currently bill TennCare for these vaccines.
 - This makes it difficult to keep individuals on schedule for receiving immunizations
 - **Opioid Limits:** New limits on chronic opioid prescriptions are a significant out-of-pocket expense for patients with chronic pain who are not grandfathered in or do not have a diagnosis of cancer, sickle cell, or burns.
 - Patients can get a 15-day supply every 90 or 180 days, leaving them to pay out of pocket for prescriptions each month, which can be a large expense.

Healthcare Provider Overview

- Dr. Michele Williams from Matthew Walker Comprehensive Health Center discussed challenges faced.
 - **Staffing & Access:** Significant staff shortages, particularly in rural areas (e.g., no dentist in their Clarksville clinic for over two years) and a lack of behavioral health specialists put a strain on providing care when screening for things such as depression.
 - **Member Engagement:** High rates of missed appointments and non-urgent ED visits remain a problem. There have been collaborations with MCOs on outreach events, such as offering free bicycles for attending an EPSDT physical, has helped improve quality of care for TennCare patients.

- **Immigration Concerns:** Fear of Immigration and Customs Enforcement (ICE) has deterred patients, including pregnant mothers, leading to poor health outcomes.
 - Cato confirmed that the same situation with ICE is occurring in Memphis.
- **Specialty Care in Rural Areas:** Rural areas do not offer much specialty care such as behavioral health.
 - It was noted that 20% of patients need diagnostic testing or an autism diagnosis to receive ABA therapy, and there are long waits for services like speech therapy, often requiring patients to travel long distances for care.

Open Discussion

- Dana asked for suggestions on TennCare resources that could help with member engagement.
 - Dr. Williams noted that small gift card incentives have been successful for Medicare outreach but was told TennCare can't offer that.
 - Dr. Cannella said he would check if MCOs could offer similar incentives.
 - Michele explained that during the holiday season, patient visits will be slow, so this is a great opportunity to provide incentives where possible.
 - Dana mentioned that there are organizations and agencies that don't know what MCOs provide in terms of transportation or incentives and will look into this further.
- Jesse Samples asked how Tennessee compares to other states across the eligibility groups.
 - Amy Lawrence explained that during the PHE unwinding Tennessee performed very well, with 65% -70% of members now being auto-renewed post-unwinding.
 - The other 30% typically comes from unnotified changes in address. TennCare is looking into ways to keep this information up to date.
- Dana opened the floor to members of the public to ask any questions or provide comments.
- A BAC member asked if the diaper benefit for children under two could be extended for children with disabilities.
 - Dr. Wu clarified that while there are currently no plans to extend the pilot guidelines, diapers are covered as durable medical equipment for all ages with a qualifying medical condition.
 - Cato asked if the diaper program is covered under the shared savings program.
 - Dr. Wu confirmed that is correct. There is a 7-year commitment to provide diapers for children under two.

Meeting Adjournment

- Dana noted if there were any questions or feedback after the session to contact her directly.
- Meeting minutes, presentations, and speaker requests for the January 15th, 2026, MAC meeting will be distributed after the call
- Dana and Cato thanked the group for their engagement and wished them a great holiday season.



- The call concluded and participants left the meeting.