

TennCare is Tennessee's managed care Medicaid program which provides health insurance coverage to certain groups of low-income individuals such as pregnant women, children, parents or caretaker relatives of minor children, older adults, and adults with disabilities.

TennCare History

Then

Volatile, inexperienced, non-accredited health plans* operating in some or all regions of the state

Fragmented health care system; some members interacted with up to 5 different entities to access care

Rapidly escalating costs with medical trend at more than 13.5%

Now

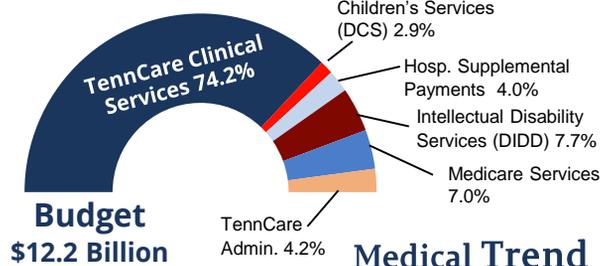
Stable, experienced, quality-accredited health plans* operating statewide

Integrated health care delivery system; single entity responsible for coordinating care

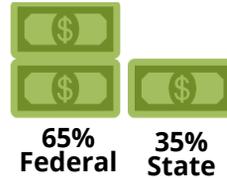
Significantly reduced cost trends; medical trend below 4.5% for the past 6 years

* TennCare uses Managed Care Organizations (MCOs or health plans) to manage and coordinate care for members.

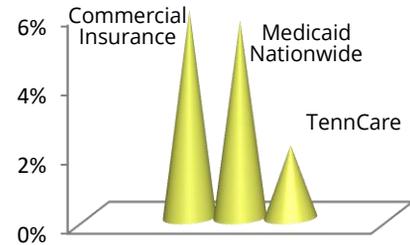
TennCare Finances



Funding

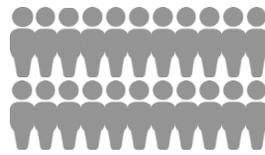


Medical Trend



Program Snapshot

TennCare pays for approximately 50 percent of births in the state



Approximately 1.4 million Tennesseans are enrolled in the TennCare program

That's more than **20%** of the state's population



children* (753,900)



pregnant women* (40,890)



individuals with disabilities* (234,100)



older adults* (15,600)



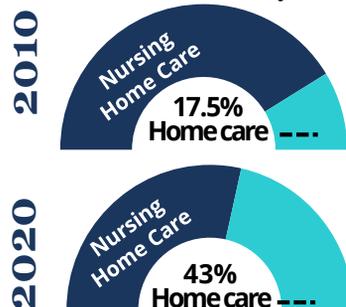
parents or caretaker relatives of minor children* (287,500)

TennCare Health Plans

BlueCare and TennCareSelect
UnitedHealthCare Community Plan
AmeriGroup

* Figures as of December 2019

Rebalancing Services for Older Adults and Adults with Physical Disabilities



TennCare has scored 90% or better on the annual satisfaction survey conducted by the University of Tennessee for the past 11 years.

Improved Quality

✓ The statewide EPSDT screening rate increased from 74% in FY17 to 77% in FY18.

✓ In 2019, 175 high-quality providers provided opioid use disorder treatment and recovery services to 6,125 members through TennCare's dedicated medication assistant treatment network.

✓ TennCare's Delivery System Transformation is serving 70,000 members in the Tennessee Health Link program, 550,000 in Patient-Centered Medical Homes and covers 48 episodes of care.

More individuals needing long-term services and supports (LTSS) are choosing to be served in the home and community rather than in a nursing home.

TennCare – Tennessee’s Managed Care Medicaid Program

TennCare is Tennessee’s Medicaid program which provides health insurance coverage to certain groups of low-income individuals such as pregnant women, children, caretaker relatives of minor children and older adults and adults with disabilities. TennCare operates with an annual budget of approximately \$12.2 billion. TennCare provides health coverage to approximately 20 percent of the state’s residents and 50 percent of the state’s children. Current enrollment is approximately 1.4 million Tennesseans.

TennCare provides health insurance coverage through the use of managed care. While many states use managed care, TennCare is currently the only state that enrolls its entire Medicaid population into managed care. Our experience has shown that managed care allows for better coordinated, more efficient, and higher quality care. It also reduces avoidable emergency room visits and hospital stays.

TennCare contracts with three health plans – also called Managed Care Organizations (MCOs) – to manage and coordinate care and maintain a network of health care providers for TennCare members. TennCare’s health plans are AmeriGroup (part of Anthem), BlueCare and TennCare Select (part of BlueCross and BlueShield of Tennessee), and UnitedHealthcare Community Plan (part of UnitedHealthcare). Pharmacy services are provided by OptumRx, and dental services for TennCare children (under age 21) and CoverKids children are provided by DentaQuest.

TennCare was the first state in the country to require its health plans to be NCQA accredited. NCQA or the National Committee for Quality Assurance is an independent, nonprofit organization that assesses and scores health plan performance in the areas of quality improvement, utilization management, provider credentialing and member rights and responsibilities.

TennCare also contracts with an independent third party to track the satisfaction of TennCare members. Satisfaction ratings have been above 90% since 2009.

In 2010, the TennCare CHOICES in Long-Term Services and Supports (LTSS) program was implemented. This fundamentally changed the way LTSS were delivered to older adults and adults with physical disabilities by allowing more members to receive services in the home and bringing LTSS into the managed care model. This program has been recognized nationwide as an example of how giving those in need of LTSS more choice can lead to better quality of life for members while at the same time reducing the per person cost of care. In 2016, the Employment and Community First CHOICES program launched providing supports for people with intellectual and developmental disabilities targeted to employment and independent community living.

TennCare is continually working on ways to improve services and reduce costs. Delivery System Transformation is changing the way health care is paid for in Tennessee, rewarding health care providers for high quality and efficient treatment of medical conditions and help maintaining people’s health over time.

Individuals can apply for TennCare online at www.tennconnect.tn.gov, or by calling 1-855-259-0701. Individuals applying for long-term services and supports (LTSS) can find out how to apply at <http://www.tn.gov/tenncare/topic/how-to-apply-ltss>. Eligibility information can be found at <http://www.tn.gov/tenncare/article/categories>.

