

THE IMPACT OF TENNCARE

A Survey of Recipients, 2015

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The Impact of TennCare: A Survey of Recipients, 2015

Method

The Center for Business and Economic Research (CBER) at the University of Tennessee, under contract with the Department of Finance and Administration of the State of Tennessee, conducted a survey of Tennessee residents to ascertain their insurance status and use of medical facilities. A target sample size of 5,000 households allows for obtaining accurate estimates for subpopulations. CBER prepared the survey instrument in cooperation with personnel from the Bureau of TennCare.

The University of Tennessee Social Work Office of Research and Public Service conducted the survey by randomly selecting potential respondents from a land line and cell phone set of numbers between May and July 2015. Five calls were made to each residence, at staggered times, to minimize nonrespondent bias. The design chosen was a “Household Sample,” and the interview was conducted with the head of the household. When Hispanic households were reached, a person fluent in Spanish would call the household at a later time to conduct the survey.

Approximately 56.8 percent and 47.7 percent of qualified respondents who answered their land line phone and cell phone, respectively, agreed to participate in the survey.¹ The large sample size allowed the weighting of responses by income and age to provide unbiased estimates for the entire population. For all statewide estimates, a correction factor was used to adjust for the degree to which the sample over- or under-represented Tennesseans grouped by household income and head of household age.² (Table 1)

This is a follow-up to previous surveys of 5,000 Tennessee households conducted annually since 1993, the last year of Medicaid before Tennessee adopted TennCare. Throughout this report, we make comparisons to findings from earlier surveys.

¹ In the land line phone sample, there were 4,157 completed surveys and 3,165 refusals. In the cell phone sample, there were 852 completed surveys, and 934 refusals.

² Since 2010, the sample has been adjusted by household income and head of household age using the 3-year American Community Survey (ACS). The ACS is a nationwide survey designed to provide reliable and timely estimates of the demographic, social, economic and housing characteristics of the US population. The 3-year ACS data are available for any political division (state, county, city, school district, etc.) with a population greater than 20,000. It is prepared by the United States Census Bureau. In prior years, the sample had been adjusted by household income using the 2000 Census.

TABLE 1: Head of Household Age and Household Income

Age-Householders	Proportion in 2015 Survey (Percent)	Proportion in ACS* (Percent)	Deviation (Percent)
Under 25	2.7	4.3	1.6
25-44	33.3	33.0	-0.3
45-64	45.9	39.5	-6.4
65+	18.2	23.1	4.9

Household Income Level	Proportion in 2015 Survey (Percent)	Proportion in ACS* (Percent)	Deviation (Percent)
Less than \$10,000	6.2	8.9	2.7
\$10,000 to \$14,999	7.2	6.6	-0.6
\$15,000 to \$19,999	6.1	6.6	0.5
\$20,000 to \$29,999	9.6	12.6	3.0
\$30,000 to \$39,999	9.0	11.3	2.3
\$40,000 to \$49,999	8.9	9.6	0.7
\$50,000 to \$59,999	8.7	8.2	-0.5
\$60,000 to \$99,999	20.8	20.6	-0.2
\$100,000 to \$149,999	10.7	9.7	-1.0
\$150,000 and over	6.9	5.9	-1.0

*Census Bureau, 2011-2013 American Community Survey 3-year Estimates

Estimates for Insurance Status

Estimates for the number of Tennesseans who are uninsured are presented below (Table 2 and Figure 1). These statewide estimates are extrapolated from the weighted sample. The estimated 426,301 uninsured represent 6.6 percent of the 6,449,754 Tennessee residents.³ The number of uninsured in 2015 continues a downward trend in the rate of uninsured people in Tennessee that began in 2013. This decrease coincided with the late 2013 through early 2014 establishment of the Health Insurance Marketplace established as part of the Affordable Care Act. The uninsured rate for children is 1.5 percent, which is almost a full percentage point decrease from last year representing about 14,000 fewer uninsured children (Table 2a). The estimate of the number of uninsured children in 2015 is 21,959, which is less than half the estimated 55,319 uninsured children in 2013. The uninsured rate for adults decreased from the 2014 rate of 8.7 percent (Table 2a) to 8.2 percent in 2015, which is approximately 152,000 fewer uninsured adults since 2013.

³ Population estimates are found using United States Census Bureau, 2011-2013 ACS. In prior years (1993-2009), population figures were gathered from the "Interim State Population Projections," also prepared by the United States Census Bureau.

TABLE 2: Statewide Estimates of Uninsured Populations (1995–2015)

	1995	1996	1997	1998	1999	2000	2001
State Total	303,785	333,268	319,079	335,612	387,584	372,776	353,736
Percent	5.8	6.3	6.1	6.2	7.2	6.5	6.2

	2002	2003	2004	2005	2006	2007	2008
State Total	348,753	371,724	387,975	482,353	649,479	608,234	566,633
Percent	6.1	6.4	6.6	8.1	10.7	10	9.3

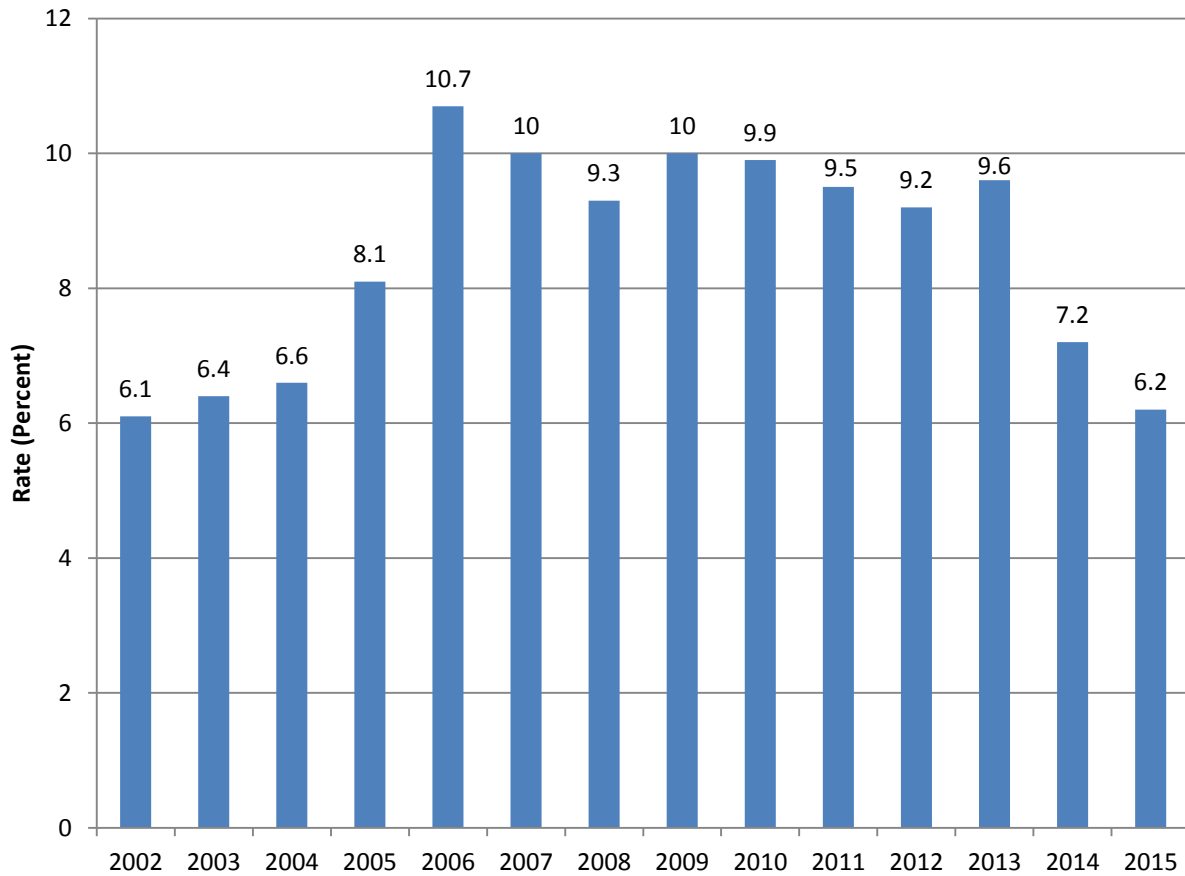
	2009	2010	2011	2012	2013	2014	2015
State Total	616,967	618,445	604,222	577,813	611,368	472,008	426,301
Percent	10	9.9	9.5	9.2	9.6	7.2	6.6

TABLE 2a: Uninsured Tennesseans by Age (2002–2015)

	2002	2003	2004	2005	2006	2007	2008
Under 18 Total	54,552	46,999	67,772	72,387	82,484	70,096	72,258
Under 18 Percent	3.9	3.3	4.9	5	5.7	4.8	4.9
18+ Total	297,779	324,725	320,203	409,965	566,955	538,138	494,375
18+ Percent	6.9	7.4	7.2	9.1	12.1	11.7	10.6

	2009	2010	2011	2012	2013	2014	2015
Under 18 Total	54,759	57,912	35,743	40,700	55,319	36,104	21,959
Under 18 Percent	3.7	3.9	2.4	2.7	3.7	2.4	1.5
18+ Total	562,208	560,532	568,479	537,113	556,049	435,904	404,342
18+ Percent	11.9	12	12	11.2	11.4	8.7	8.2

FIGURE 1: Rate of Uninsured Populations (2002-2015)



Reasons for Failure to Obtain Medical Insurance

Affordability is the predominate reason why people fail to obtain insurance with 9 out of 10 families citing it as a reason for their lack of coverage (Table 3). Though there is some variation from one year to the next, the difference among income groups has been consistently large, with those in the higher income groups considerably less likely to consider affordability as a major reason (Table 4). The group least likely to consider cost a major barrier to having insurance is the \$50,000+ group, with only 64 percent claiming affordability as a major barrier for not having insurance. However, the group most likely to cite affordability as a major reason are those making between \$15,000 and \$19,999 (95 percent), considerably higher than those households only making between \$10,000 - \$14,999 (83 percent) and households making less than \$10,000 (89 percent). In the previous survey 26 percent claimed lack of need as a major or minor reason for non-coverage. This year 20 percent cited lack of need, which is in line with the historical trends. While financial pressures and lack of need limit people from obtaining coverage, over one in five people responded they just did not get around to obtaining coverage.

TABLE 3: Reasons for Not Having Insurance (1998–2015) (Percent)

Reason	Cannot Afford			Did Not Get to It			Do Not Need		
	Major Reason	Minor Reason	Not a Reason	Major Reason	Minor Reason	Not a Reason	Major Reason	Minor Reason	Not a Reason
1998	73	10	17	12	17	72	13	13	74
1999	71	10	19	15	22	63	10	16	74
2000	76	8	16	6	21	73	7	12	81
2001	78	9	13	11	20	69	12	16	72
2002	74	10	17	11	16	74	8	14	78
2003	82	8	10	10	20	70	8	15	77
2004	82	7	11	8	19	73	8	16	76
2005	82	7	10	9	16	75	8	15	77
2006	87	4	9	12	14	74	12	14	74
2007	89	6	4	9	11	79	5	13	82
2008	93	4	4	7	11	82	5	8	87
2009	92	3	4	3	15	81	5	10	85
2010	91	5	4	5	13	82	6	15	80
2011	88	5	7	11	12	77	8	12	79
2012	88	5	7	9	13	78	7	13	80
2013	83	6	11	9	17	74	5	16	79
2014	86	6	8	11	15	75	12	14	74
2015	83	7	10	9	13	77	9	10	80

TABLE 4: “Cannot Afford” Major Reason for No Insurance: By Income (2007–2015) (Percent)

Household Income	2007	2008	2009	2010	2011	2012	2013	2014	2015
Less than \$10,000	93	97	96	96	89	87	88	94	89
\$10,000 - \$14,499	95	97	96	95	90	94	83	85	83
\$15,000 - \$19,999	93	88	93	88	90	91	87	86	95
\$20,000 - \$29,999	89	96	92	94	89	92	85	82	74
\$30,000 - \$39,999	90	88	90	87	83	85	79	82	83
\$40,000 - \$49,999	88	93	92	92	80	91	82	83	71
\$50,000+	76	81	80	76	92	71	71	59	64

Evaluations of Medical Care and Insurance Coverage

Tennessee residents' perception about the quality of care received remains consistent with the last decade. Overall, 78 percent of all heads of households and 70 percent of heads of households with TennCare rated the quality of care as "good" or "excellent" (Table 5).

Heads of households rate the quality of care received by children consistently high. In 2015, 89 percent of all heads of households rated their children's quality of care as "excellent" or "good" (Table 6).

Ratings from TennCare heads of households are also high, with 87 percent rating the quality of care for their children as "excellent" or "good." These percentages remain stable compared to recent years. As in previous years, very few Tennesseans rate the quality of medical care received by children as "poor," with only 3 percent of all heads of household (4 percent for those on TennCare) responding that their children had received this lowest level of care (Table 6).

TABLE 5: Quality of Medical Care Received by Heads of Households (2005–2015) (Percent)

All Heads of Households	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Excellent	29	28	28	28	32	32	31	30	32	31	32
Good	48	48	47	46	46	46	46	46	46	47	46
Fair	17	18	18	18	16	16	15	17	16	16	17
Poor	6	7	7	8	6	6	7	7	6	6	5
Heads of Households w/ TennCare	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Excellent	28	21	23	24	29	24	30	24	24	25	28
Good	40	43	44	43	47	41	41	45	44	45	42
Fair	26	27	27	25	18	29	19	22	24	22	24
Poor	6	10	6	8	6	6	10	9	8	8	6

TABLE 6: Quality of Medical Care Received by Children of Heads of Households (2005–2015) (Percent)

All Heads of Households	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Excellent	38	39	35	34	39	46	44	42	43	41	45
Good	49	47	48	51	49	43	45	45	43	48	44
Fair	9	11	12	11	9	9	9	10	10	9	8
Poor	4	3	4	4	3	3	2	3	4	2	3
Heads of Households w/ TennCare⁴	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Excellent	34	39	30	32	41	43	48	38	35	38	41
Good	49	38	49	49	48	45	39	42	45	49	46
Fair	12	17	19	14	8	6	11	14	14	10	9
Poor	5	6	2	6	3	6	2	6	6	3	4

Satisfaction with Quality of Care Received from TennCare

TennCare recipients continue to show high levels of satisfaction with the quality of care received from TennCare (Table 7), with 95 percent responding “somewhat satisfied” or “very satisfied.”⁵ This satisfaction level has stayed at the mid-90s for this decade, and it has improved significantly since the turn of the century.

TABLE 7: Percent Indicating Satisfaction with TennCare (2001–2015) (Percent)

2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
79	85	83	90	93	87	90	89	92	94	95	93	95	93	95

Behavior Relevant to Medical Care

Each respondent was asked a series of questions regarding his or her behavior when initially seeking medical care (Table 8). Among all heads of households, 96 percent in the current year (95 percent in the prior year) first sought care at a doctor’s office or clinic, and only 3 percent first sought care at a hospital, such as in the emergency department. The share of TennCare head of households who first

⁴ This subgroup includes all children who are on TennCare, regardless of the insurance status of the head of household.

⁵ A three point scale was used, and respondents could indicate “very satisfied,” “somewhat satisfied,” or “not satisfied.”

sought care at a doctor’s office or clinic increased from 90 percent in 2014 to 94 percent in the current survey but that percentage is still lower than the overall population. When it comes to initial care choices for children, 98 percent of all households and 97 percent of TennCare households sought initial care at a doctor’s office or a clinic, which is consistent with past years (Table 9).

TABLE 8: Head of Household: Medical Facilities Used When Medical Care Initially Sought (2005-2015) (Percent)

All Heads of Households	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Doctor's Office	83	83	83	83	83	82	83	82	81	81	81
Clinic	11	11	11	11	12	12	12	13	13	14	15
Hospital	5	5	4	4	4	4	4	4	4	3	3
Other	1	1	2	2	2	2	2	1	2	2	1
Heads of Households w/ TennCare	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Doctor's Office	78	76	79	80	83	77	80	75	80	72	76
Clinic	14	15	15	13	12	15	11	14	14	18	18
Hospital	7	7	4	6	4	7	8	10	6	8	6
Other	1	1	2	<1	1	<1	2	1	<1	2	0

TABLE 9: Children: Medical Facilities Used When Medical Care Initially Sought (2005-2015) (Percent)

All Heads of Households	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Doctor's Office	86	87	88	88	86	87	88	88	86	87	86
Clinic	10	10	9	10	10	11	9	10	12	12	12
Hospital	3	3	2	2	3	2	2	2	1	1	1
Other	1	<1	1	<1	<1	<1	<1	<1	1	<1	<1
Heads of Households w/ TennCare	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Doctor's Office	79	82	83	83	85	82	84	86	84	84	83
Clinic	13	12	14	14	15	15	7	11	12	14	14
Hospital	8	6	3	3	0	3	9	3	3	1	3
Other	0	1	0	<1	0	0	0	0	<1	1	0

TennCare recipients continue to report seeing physicians on a more frequent basis than the average Tennessee household (Table 10). Approximately 29 percent of TennCare heads of households report that they see a physician at least monthly, which is twice the rate as all head of households (29 percent compared to 13 percent, respectively). Yet there is a significant reduction (over 20 percent) in the percentage of TennCare recipients seeing a doctor at this frequency when compared to 2014. TennCare heads of households are almost half as likely to see a physician yearly or less frequently as all heads of households (22 percent compared to 41 percent, respectively) (Table 10).

These same trends between the general population and TennCare households are observed among children with 14 percent of TennCare households taking their children to visit a doctor at least monthly compared to only 8 percent of all households. Furthermore, 33 percent of those with TennCare take their child to the doctor yearly or less frequently compared with 44 percent of all households (Table 11). While the frequency of doctor’s visits remains higher for children of TennCare heads of households compared to that of the population as a whole, there was an 5 percentage point decrease from 2014 to 2015 (19 percent to 14 percent, respectively) in the percent of these TennCare households that took their children to the doctor at least monthly.

TABLE 10: Frequency of Visits to Doctor for Head of Household (2005–2015) (Percent)

All Heads of Households	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Weekly	2	2	2	3	2	2	2	1	2	2	2
Monthly	11	12	13	12	12	11	11	11	11	11	11
Every Few Months	46	44	46	46	49	45	44	46	46	47	46
Yearly	26	25	23	22	22	24	25	25	24	25	25
Rarely	15	18	16	17	15	18	17	17	17	15	16
Heads of Households w/ TennCare	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Weekly	6	7	8	7	6	6	6	4	5	6	3
Monthly	30	30	33	33	30	29	26	31	34	31	26
Every Few Months	46	45	45	47	51	47	46	43	43	45	49
Yearly	11	8	6	8	7	7	10	8	8	11	9
Rarely	7	10	8	4	6	12	11	14	10	8	13

TABLE 11: Frequency of Visits to Doctor for Children (2005–2015) (Percent)

All Heads of Households	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Weekly	2	1	2	2	1	2	1	1	1	1	1
Monthly	11	10	11	9	9	9	10	8	9	9	7
Every Few Months	53	52	50	50	51	51	50	50	52	47	47
Yearly	23	28	27	29	31	29	31	35	30	35	36
Rarely	11	10	10	10	8	9	8	6	8	8	8
Heads of Households w/ TennCare⁶	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Weekly	2	2	4	1	1	3	1	0	1	2	1
Monthly	21	16	14	16	18	13	15	15	19	17	13
Every Few Months	49	51	54	55	50	51	55	58	53	53	51
Yearly	17	23	16	21	27	24	25	22	25	25	28
Rarely	11	8	11	7	4	10	4	5	2	2	5

Appointments

The reported time required to obtain an appointment is comparable to previous years' findings. The percent of TennCare recipients obtaining a doctor's appointment within a week remained steady at 68 percent, and 42 percent obtained an appointment within one day (Table 12). TennCare recipients wait on average about an hour to see their physicians once they reach the office (Table 13)⁷. The average travel time to a physician's office increased from 22 minutes in 2014 to 27 minutes in 2015.

⁶ This subgroup includes the children of heads of household enrolled in TennCare.

⁷ Although there appears to be a relatively large increase of 10 minutes in the wait time from 2014 to 2015, due to the wide variation in reported wait times this difference is not statistically significant and does not indicate a change in the underlying population.

**TABLE 12: Time between Attempt to Make Appointment and First Availability of Appointment:
TennCare Heads of Household (2006–2015) (Percent)**

When you last made an appointment to see a primary care physician for an illness in the last 12 months, how soon was the first appointment available?	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Same day	22	22	21	18	20	21	20	18	18	24
Next day	27	20	17	23	19	19	21	25	21	18
1 week	22	30	27	25	29	30	25	23	29	26
2 weeks	10	8	10	9	11	10	14	10	8	8
3 weeks	4	4	4	4	4	4	2	4	6	3
Over 3 weeks	16	15	22	20	17	16	18	20	19	21

TABLE 13: Wait for Appointments: TennCare Heads of Household (2005–2015) (Minutes)

	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Number of minutes wait past scheduled appointment time?	57	80	57	50	52	65	58	58	51	53	63
Number of minutes to travel to physician's office?	32	30	21	25	24	31	23	22	22	22	27

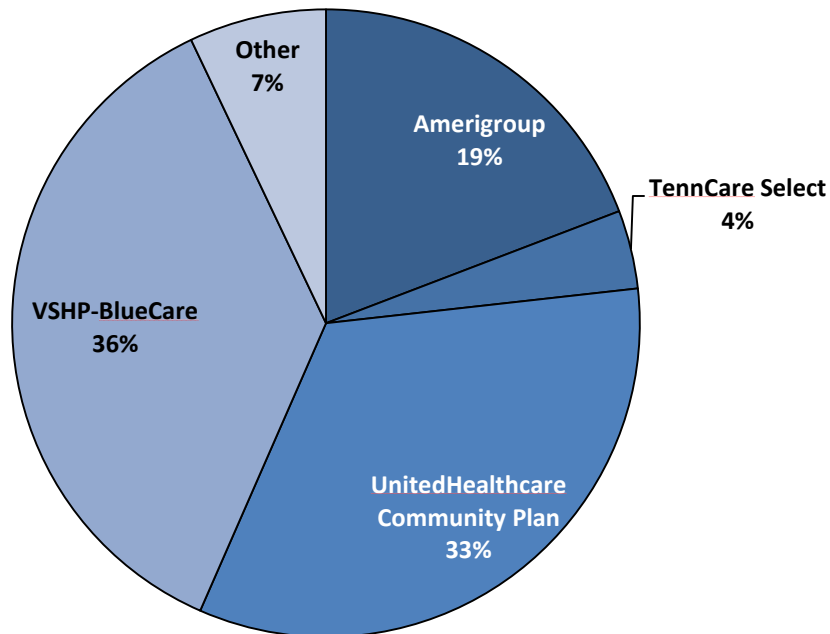
TennCare Plans

The largest number of TennCare survey household members (36 percent) report being signed up with Volunteer State Health Plan (BlueCare), overtaking UnitedHealthcare Community Plan as the TennCare MCO with the largest population. Approximately 33 percent report being signed up with United Healthcare, which saw a 9 point decrease in the share of enrollees since last year. Amerigroup accounts for another 20 percent, while 4 percent are enrolled in TennCare Select. Seven percent report being represented by other plans, though there are no other active TennCare plans (Table 14).⁸

TABLE 14: Reported TennCare Plan (2010–2015) (Percent)

What company manages your TennCare plan?	2010	2011	2012	2013	2014	2015
Amerigroup	10	16	20	17	19	20
TennCare Select	8	8	6	5	4	4
UnitedHealthcare Community Plan (formerly AmeriChoice)	37	41	37	41	42	33
VSHP – BlueCare	36	32	33	30	30	36
Other	7	4	4	7	5	7

FIGURE 2: Reported TennCare Plan (2015)



⁸ Prior 2015, UnitedHealthcare Community Plan served all regions of the state, while BlueCare served east and west Tennessee and Amerigroup served only middle Tennessee. All three plans now deliver services to TennCare enrollees on a statewide basis.

This year’s survey shows a significant increase in TennCare households who reported receiving information from their MCOs (Table 15) such as an enrollment card (6 percent higher), information on filing appeals (12 percent higher), a list of rights and responsibilities (7 percent higher), and the name of the MCO to which they are assigned (8 percent higher).

The preferred method for receiving information about TennCare remains through the mail, with 78 percent reporting this is the best way they obtain TennCare information (Table 16).

TABLE 15: Households Receiving TennCare Information from Plans (2006–2015) (Percent)

Please indicate whether or not you or anyone in your household has received each of the following regarding TennCare	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
An enrollment card	73	78	78	77	74	61	62	69	63	69
Information on filing grievances	41	46	41	41	43	29				
Information on filing appeals ⁹							73	76	70	82
A list of rights and responsibilities	78	77	73	75	74	68	80	82	78	85
Name of MCO to whom assigned	82	81	79	79	79	76	79	76	76	84

TABLE 16: Best Way to Get Information about TennCare (2006–2015) (Percent)

	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Mail	75	72	73	71	72	78	80	74	75	78
Doctor	8	8	5	6	5	5	6	9	5	4
Phone	5	8	11	10	11	5	4	6	6	8
Handbook	3	6	6	7	5	6	5	4	4	3
Drug Store	2	1	1	1	<1	<1	<1	<1	<1	<1
Friends	1	1	<1	1	1	2	<1	<1	<1	<1
TV	1	0	1	<1	<1	<1	<1	<1	<1	<1
Paper	0	0	<1	1	<1	0	<1	<1	<1	0
Other	5	4	3	3	4	4	4	6	8	6

⁹ Before 2012, survey respondents were asked whether they had received “information on filing grievances.” The term “appeals” is much more widely used in the TennCare program than the term “grievances.” Therefore, the question was changed in 2012 to ask whether respondents had received “information on filing appeals.”

Nine percent of respondents indicated that either they or someone else in their family had changed plans within the preceding twelve months, a significant four percentage point increase from 2014. Of that total, 44 percent requested the change (as opposed to being automatically reassigned from one plan to another). The most commonly cited reason for changing plans was limited choice of doctors and hospitals. This increase in plan changes is consistent with the changing composition in individual member enrollment in the various MCOs (Table 14).

In the past 12 months, 6 percent of TennCare families used a non-emergency care provider that did not participate in their plan, with 7 out of 10 using these providers 1-2 times (Figure 3). The most common type of non-participating provider used by TennCare families was a general medical care/family doctor (51 percent) followed by a non-surgical specialist (22 percent) (Table 17 and Figure 4). Approximately 41 percent of survey responders stated that they sought care from a non-TennCare provider because the service was not covered under TennCare. Approximately 14 percent stated that they were dissatisfied with the quality of service from the TennCare provider (Table 18). Almost one-fourth of respondents reported that TennCare helped them find a provider that participated in the TennCare plan.

FIGURE 3: Number of Times Sought Non-Emergency Care at a Non-Participating Provider in Past 12 Months (Percent)

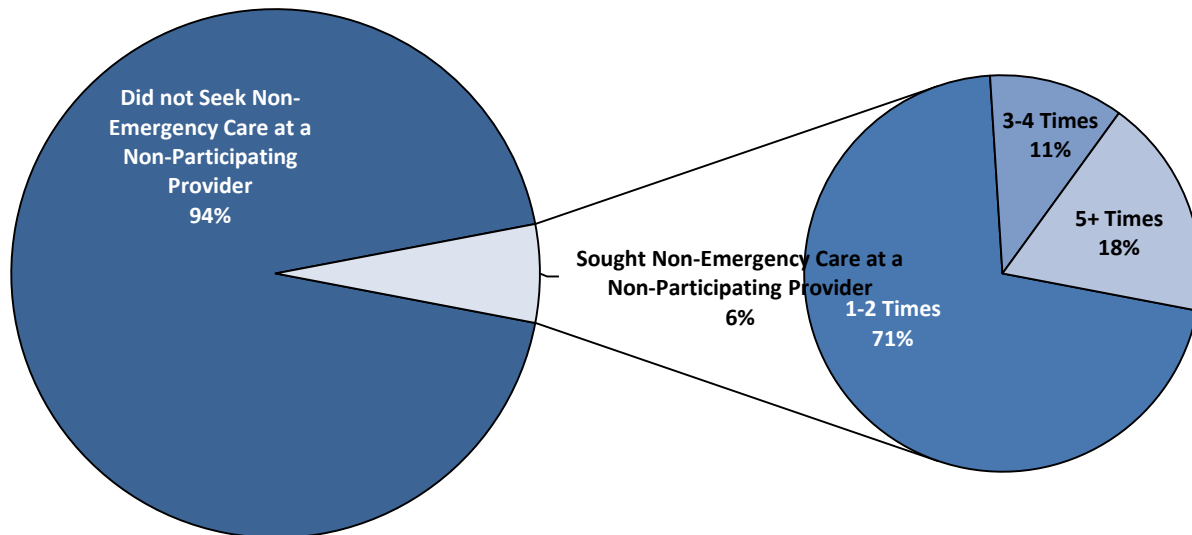


TABLE 17: Type of Non-Emergency Care Sought from a Non-TennCare Provider (2015) (Percent)

	2015
Eye Care	3
Dental Care	3
General Medical Care Specialist	51
Non-Surgical Specialist	22
Surgical Specialist	16
Not Sure	3

Respondents could choose more than one type of non-emergency care.

FIGURE 4: Type of Non-Emergency Care Sought from a Non-TennCare Provider (2015)

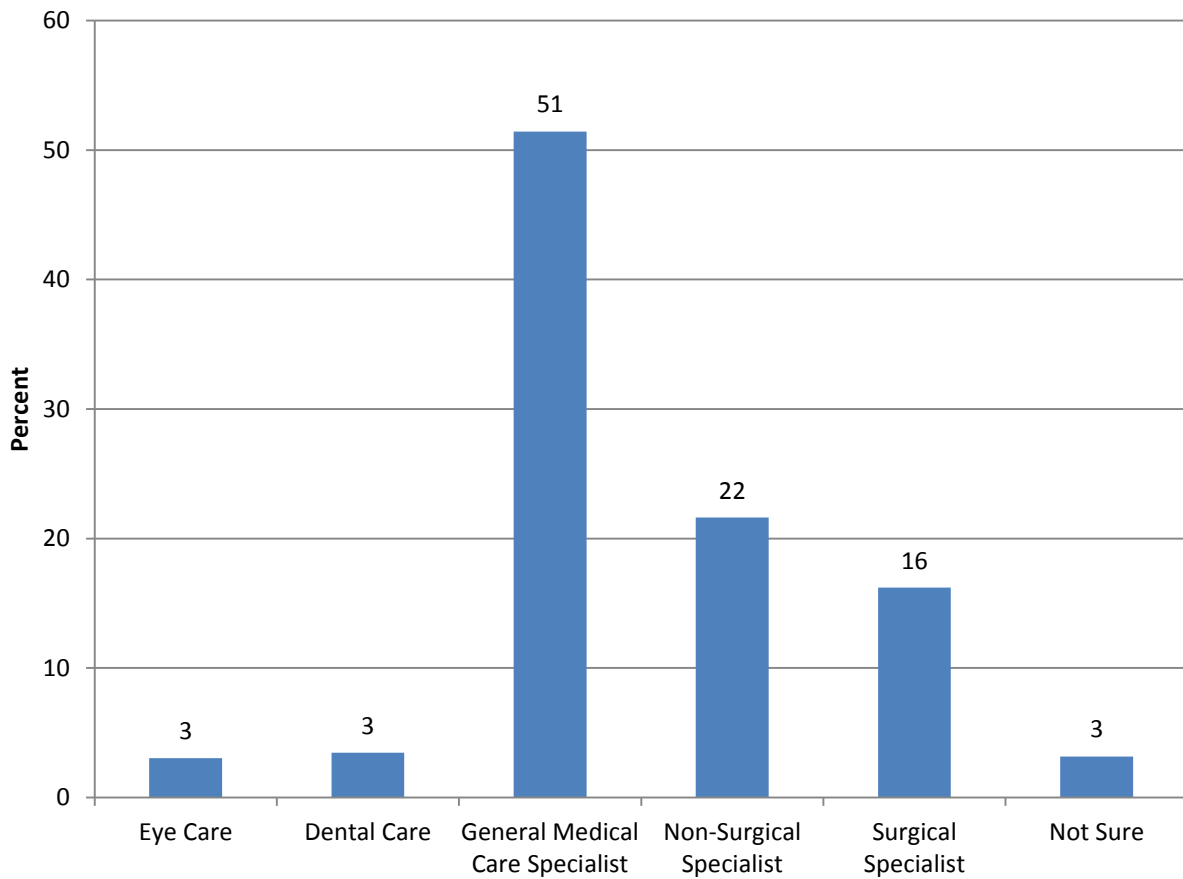


TABLE 18: Reasons Sought Non-Emergency Care from a Non-TennCare Provider (2015) (Percent)

	2015
Dissatisfaction with quality of service from TennCare Provider	14
Service was not covered by TennCare	41
No TennCare provider in the area	6
Could not get timely appointment with TennCare Provider	10
When I made the appointment or received care, I mistakenly thought the provider participated in my TennCare health care plan	13
Not Sure	17

Total exceeds 100 percent because respondents could choose more than one type of non-emergency care.

Conclusion

Tennessee's 6.6 percent rate of uninsured in 2015 is the lowest rate in over a decade and continues the decline since 2013. Compared to 2 years ago, there are an estimated 33,000 fewer children and 152,000 fewer adults without insurance than 2 years ago. This decrease coincided with the late 2013 through early 2014 establishment of the Health Insurance Marketplace established as part of the Affordable Care Act.

Although TennCare enrollees are less likely than all households to seek initial care at a doctor's office or clinic, significantly more initially sought care at those providers in the current survey (94 percent) than in 2014 (90 percent). There was also a trend in both TennCare heads of households and their children to have less frequent visits to the doctor, although TennCare heads of households and their children still visit the doctor more often than the general population.

Another interesting finding in this year's survey is that TennCare enrollees report an increase in receiving information from TennCare such as enrollment cards, information on filing appeals, a list of rights and responsibilities, and the name of their Managed Care Organization (MCO). The survey also noted that the rate of TennCare heads of households or someone in their family changing MCOs in the past 12 months had more than doubled, which is also consistent with changes seen in the share of member enrollments between the MCOs.

Overall, TennCare continues to receive positive feedback from its recipients, with 95 percent reporting satisfaction with the program, indicating TennCare is providing medical care in a satisfactory manner and up to the expectations of those it serves.