

THE IMPACT OF TENNCARE

A Survey of Recipients, 2016

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TennCare



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The Impact of TennCare: A Survey of Recipients, 2016

Method

The Boyd Center for Business and Economic Research 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 and their level of satisfaction with the TennCare program. A target sample size of 5,000 households allows us to obtain accurate estimates for subpopulations. The Boyd Center 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 and contacting those families between May and July 2016. Up to five calls were made to each residence, at staggered times, to minimize non-response bias. The design chosen was a “Household Sample,” and the interview was conducted with the head of the household. When Hispanic households without an English speaker were reached, a person fluent in Spanish would call the household at a later time to conduct the survey.

Approximately 62.0 percent and 57.2 percent of those who answered their land line phone or cell phone, respectively, qualified and agreed to participate in the survey.¹ The large sample size allowed for 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.

¹In the land line phone sample, there were 4,249 completed surveys and 3,654 refusals. In the cell phone sample, there were 769 completed surveys, and 1,047 refusals.

² Starting with the 2016 report, the 5-year American Community Survey (ACS) conducted by the U.S. Census is used to adjust the sample by household income and head of household age. 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. From 2010 to 2015, the sample was adjusted by household income and head of household age using the 3-year ACS. Approximately 1/10th of the drop in the uninsured population is due to using more accurate population statistics from the 5-year ACS. Prior to 2010, the sample was adjusted by household income using the 2000 Census.

TABLE 1: Head of Household Age and Household Income

Age-Householders	Proportion in 2016 Survey (Percent)	Proportion in ACS* (Percent)	Deviation (Percent)
Under 25	2.2	4.4	2.2
25-44	31.2	33.1	1.9
45-64	48.7	39.4	-9.3
65+	17.9	23.2	5.3

Household Income Level	Proportion in 2016 Survey (Percent)³	Proportion in ACS* (Percent)	Deviation (Percent)
Less than \$10,000	5.5	8.7	3.2
\$10,000 to \$14,999	5.9	6.4	0.5
\$15,000 to \$19,999	5.7	6.5	0.8
\$20,000 to \$29,999	10.1	12.3	2.2
\$30,000 to \$39,999	9.1	11.3	2.2
\$40,000 to \$49,999	8.5	9.5	1.0
\$50,000 to \$59,999	8.7	8.2	-0.5
\$60,000 to \$99,999	20.1	20.8	0.7
\$100,000 to \$149,999	11.2	10.0	-1.2
\$150,000 and over	7.1	6.3	-0.8

*Census Bureau, 2009-2014 American Community Survey 5-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 population of uninsured represents 5.5 percent of the 6,600,299 Tennessee residents.⁴ The number of uninsured in 2016 continues a downward trend in the rate of uninsured people in Tennessee that began in 2013. The uninsured rate for children is 1.8 percent, which is slightly higher than last year's rate of 1.5 percent (Table 2a) but is not statistically different. The estimate of the number of uninsured children in 2016 is 27,226, which is about half the estimated 55,319 uninsured children in 2013. The uninsured rate for adults decreased from the 2015 rate of 8.2 percent (Table 2a) to 6.6 percent in 2016, which is approximately 218,500 fewer uninsured adults since 2013 and a drop of approximately 67,000 since our last survey.

³ Amounts do not total 100 percent because 8.1 percent either did not know or declined to answer.

⁴ Population estimates are found using United States Census Bureau, 2009-2014 ACS. In prior years (1993 to 2008), 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 (1996–2016)

	1996	1997	1998	1999	2000	2001	2002
State Total	333,268	319,079	335,612	387,584	372,776	353,736	348,753
Percent	6.3	6.1	6.2	7.2	6.5	6.2	6.1

	2003	2004	2005	2006	2007	2008	2009
State Total	371,724	387,975	482,353	649,479	608,234	566,633	616,967
Percent	6.4	6.6	8.1	10.7	10	9.3	10

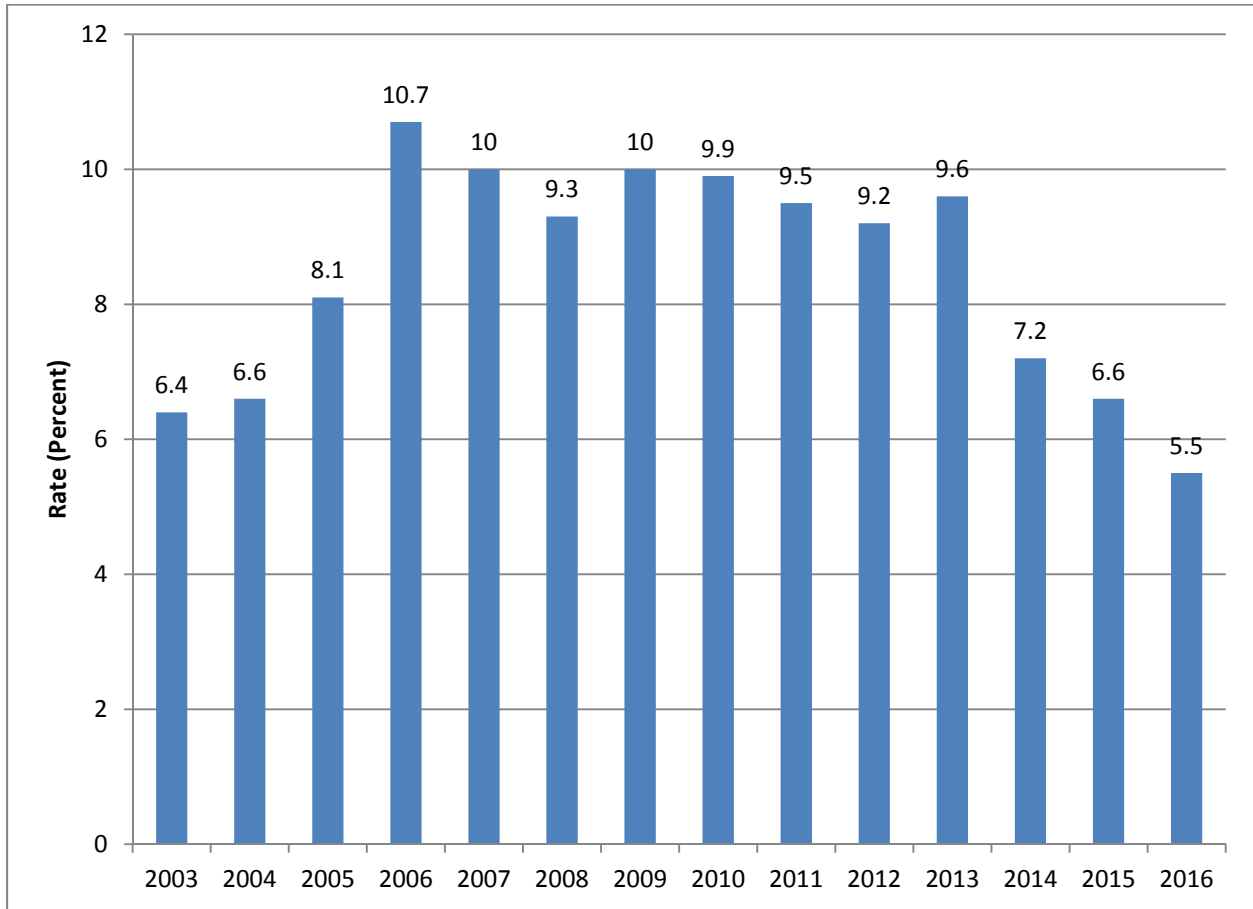
	2010	2011	2012	2013	2014	2015	2016
State Total	618,445	604,222	577,813	611,368	472,008	426,301	364,732
Percent	9.9	9.5	9.2	9.6	7.2	6.6	5.5

TABLE 2a: Uninsured Tennesseans by Age (2003–2016)

	2003	2004	2005	2006	2007	2008	2009
Under 18 Total	46,999	67,772	72,387	82,484	70,096	72,258	54,759
Under 18 Percent	3.3	4.9	5	5.7	4.8	4.9	3.7
18+ Total	324,725	320,203	409,965	566,955	538,138	494,375	562,208
18+ Percent	7.4	7.2	9.1	12.1	11.7	10.6	11.9

	2010	2011	2012	2013	2014	2015	2016
Under 18 Total	57,912	35,743	40,700	55,319	36,104	21,959	27,226
Under 18 Percent	3.9	2.4	2.7	3.7	2.4	1.5	1.8
18+ Total	560,532	568,479	537,113	556,049	435,904	404,342	337,506
18+ Percent	12	12	11.2	11.4	8.7	8.2	6.6

FIGURE 1: Rate of Uninsured Populations (2003-2016)



Reasons for Failure to Obtain Medical Insurance

Affordability is the predominate reason why people fail to obtain insurance with eight of 10 of all respondents citing “cannot afford” as a major reason why they did not obtain health insurance. On the other hand, there is a notable 5 percent drop from last year in those that cite it as a major or minor reason for their lack of coverage (Table 3). Respondents in the less than \$20,000 income bracket are most likely to cite affordability as a major reason for their uninsured status (86 percent). There was a 9 percent drop from 78 percent to 69 percent among families in the \$20,000 to \$39,999 income bracket reporting that affordability was a major barrier to obtaining insurance coverage (Table 4). Those reporting that they “do not need” insurance increased considerably, from 19 percent to 30 percent. About one in four respondents reported that they just did not get around to obtaining coverage.

TABLE 3: Reasons for Not Having Insurance (1998–2016) (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
2016	80	5	16	16	10	73	17	13	70

TABLE 4: “Cannot Afford” Major Reasons for No Insurance: By Income (2011–2016) (Percent)

Household Income	2011	2012	2013	2014	2015	2016
Less than \$20,000	90	90	87	90	89	86
\$20,000 - \$39,999	87	89	82	82	78	69
\$40,000 and above	88	81	74	82	66	79

Evaluations of Medical Care and Insurance Coverage

Tennessee residents' perception about the quality of care received remains consistent with their perceptions during the last decade. Overall, 78 percent of all heads of households and 74 percent of heads of households on TennCare rated the quality of care as “good” or “excellent,” a recent high for TennCare families (Table 5). The quality of care rating for all heads of households has remained extremely stable since 2013. Over the past 10 years, the percentage of families on TennCare reporting “good” or “excellent” care has ranged from a low of 64 percent in 2006 to a high of 76 percent in 2009. Importantly, the rating by all heads of households has been the same since 2013, reflecting strong stability in their perceptions about their quality of care.

Heads of households rate the quality of care received by children consistently high. In 2016, 88 percent of all heads of households and 87 percent of TennCare households rated their children's quality of care as “excellent” or “good” (Table 6). These percentages have remained stable in recent years, although the 1 percent of TennCare families with children who rated the quality of care “poor” is at an all-time low.

TABLE 5: Quality of Medical Care Received by Heads of Households (2006–2016) (Percent)

All Heads of Households	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Excellent	28	28	28	32	32	31	30	32	31	32	33
Good	48	47	46	46	46	46	46	46	47	46	45
Fair	18	18	18	16	16	15	17	16	16	17	17
Poor	7	7	8	6	6	7	7	6	6	5	5
Heads of Households w/ TennCare	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Excellent	21	23	24	29	24	30	24	24	25	28	31
Good	43	44	43	47	41	41	45	44	45	42	43
Fair	27	27	25	18	29	19	22	24	22	24	23
Poor	10	6	8	6	6	10	9	8	8	6	3

TABLE 6: Quality of Medical Care Received by Children of Heads of Households (2006–2016) (Percent)

All Heads of Households	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Excellent	39	35	34	39	46	44	42	43	41	45	46
Good	47	48	51	49	43	45	45	43	48	44	42
Fair	11	12	11	9	9	9	10	10	9	8	10
Poor	3	4	4	3	3	2	3	4	2	3	2
Heads of Households w/ TennCare⁵	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Excellent	39	30	32	41	43	48	38	35	38	41	43
Good	38	49	49	48	45	39	42	45	49	46	44
Fair	17	19	14	8	6	11	14	14	10	9	12
Poor	6	2	6	3	6	2	6	6	3	4	1

Satisfaction with Quality of Care Received from TennCare

TennCare recipients continue to show high levels of satisfaction with the TennCare program as a whole (Table 7), with 92 percent indicating they were “very satisfied” or “somewhat satisfied.”⁶ The satisfaction level has stayed within a narrow range since 2009, fluctuating between 92 percent and 95 percent.

TABLE 7: Percent Indicating Satisfaction with TennCare (2002–2016) (Percent)

2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
85	83	90	93	87	90	89	92	94	95	93	95	93	95	92

⁵ This subgroup includes all households in which at least one child is enrolled in TennCare, even if the head of the household is not enrolled.

⁶ A three-point scale was used, and respondents could indicate “very satisfied,” “somewhat satisfied,” or “not satisfied.”

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). There was no substantial change in the behavior among all heads of households from the previous year. For both TennCare and all heads of household, 96 percent initially sought care at a doctor's office or clinic. The 3 percent of TennCare recipients who initially sought care at a hospital is at an all-time low and down from 10 percent in 2012 (Table 8). When it comes to initial care choices for children, 98 percent of all households and 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 (2006-2016) (Percent)

All Heads of Households	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Doctor's Office	83	83	83	83	82	83	82	81	81	81	80
Clinic	11	11	11	12	12	12	13	13	14	15	16
Hospital	5	4	4	4	4	4	4	4	3	3	3
Other	1	2	2	2	2	2	1	2	2	1	1
Heads of Households w/ TennCare	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Doctor's Office	76	79	80	83	77	80	75	80	72	76	78
Clinic	15	15	13	12	15	11	14	14	18	18	18
Hospital	7	4	6	4	7	8	10	6	8	6	3
Other	1	2	<1	1	<1	2	1	<1	2	0	1

**TABLE 9: Children: Medical Facilities Used When Medical Care Initially Sought
(2006-2016) (Percent)**

All Heads of Households	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Doctor's Office	87	88	88	86	87	88	88	86	87	86	85
Clinic	10	9	10	10	11	9	10	12	12	12	13
Hospital	3	2	2	3	2	2	2	1	1	1	1
Other	<1	1	<1	<1	<1	<1	<1	1	<1	<1	<1
Heads of Households w/ TennCare⁷	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Doctor's Office	82	83	83	85	82	84	86	84	84	83	86
Clinic	12	14	14	15	15	7	11	12	14	14	12
Hospital	6	3	3	0	3	9	3	3	1	3	2
Other	1	0	<1	0	0	0	0	<1	1	0	<1

TennCare recipients continue to report seeing physicians on a more frequent basis than the average Tennessee household (Table 10). Approximately 14 percent of all households report seeing a doctor at least weekly or monthly compared to 36 percent of TennCare heads of households. While the rate of TennCare households seeing a doctor at least weekly or monthly increased from 29 percent in 2015, the current rate of 36 percent is consistent with the past decade which ranged from a high of 40 percent in 2008 to last year's low of 29 percent.

These same trends between the general population and TennCare households are observed among children, with 15 percent of TennCare households taking their children to visit a doctor at least weekly or monthly compared to only 9 percent of all households (Table 11). While the frequency of doctor visits remains higher for children of TennCare heads of households compared to that of the population as a whole, the current year's rate of 15 percent who saw a doctor at least monthly remains well below the recent high of 20 percent in 2013 and 19 percent in 2014.

⁷ This subgroup includes the children of heads of household enrolled in TennCare.

TABLE 10: Frequency of Visits to Doctor for Head of Household (2006–2016) (Percent)

All Heads of Households	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Weekly	2	2	3	2	2	2	1	2	2	2	2
Monthly	12	13	12	12	11	11	11	11	11	11	12
Every Few Months	44	46	46	49	45	44	46	46	47	46	44
Yearly	25	23	22	22	24	25	25	24	25	25	26
Rarely	18	16	17	15	18	17	17	17	15	16	16
Heads of Households w/ TennCare	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Weekly	7	8	7	6	6	6	4	5	6	3	5
Monthly	30	33	33	30	29	26	31	34	31	26	31
Every Few Months	45	45	47	51	47	46	43	43	45	49	42
Yearly	8	6	8	7	7	10	8	8	11	9	10
Rarely	10	8	4	6	12	11	14	10	8	13	12

TABLE 11: Frequency of Visits to Doctor for Children (2006–2016) (Percent)

All Heads of Households	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Weekly	1	2	2	1	2	1	1	1	1	1	1
Monthly	10	11	9	9	9	10	8	9	9	7	8
Every Few Months	52	50	50	51	51	50	50	52	47	47	44
Yearly	28	27	29	31	29	31	35	30	35	36	38
Rarely	10	10	10	8	9	8	6	8	8	8	9
Heads of Households w/ TennCare⁸	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Weekly	2	4	1	1	3	1	0	1	2	1	3
Monthly	16	14	16	18	13	15	15	19	17	13	12
Every Few Months	51	54	55	50	51	55	58	53	53	51	53
Yearly	23	16	21	27	24	25	22	25	25	28	29
Rarely	8	11	7	4	10	4	5	2	2	5	3

⁸ This subgroup includes the children of heads of household enrolled in TennCare.

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 69 percent, and 41 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). The average travel time to a physician's office is 24 minutes in 2016. Wait and travel times are in line with prior survey years.

TABLE 12: Time between Attempt to Make Appointment and First Availability of Appointment: TennCare Heads of Household (2007–2016) (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?	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Same day	22	21	18	20	21	20	18	18	24	19
Next day	20	17	23	19	19	21	25	21	18	22
1 week	30	27	25	29	30	25	23	29	26	28
2 weeks	8	10	9	11	10	14	10	8	8	9
3 weeks	4	4	4	4	4	2	4	6	3	4
Over 3 weeks	15	22	20	17	16	18	20	19	21	18

TABLE 13: Wait for Appointments: TennCare Heads of Household (2006–2016) (Minutes)

	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Number of minutes wait past scheduled appointment time?	80	57	50	52	65	58	58	51	53	63	52
Number of minutes to travel to physician's office?	30	21	25	24	31	23	22	22	22	27	24

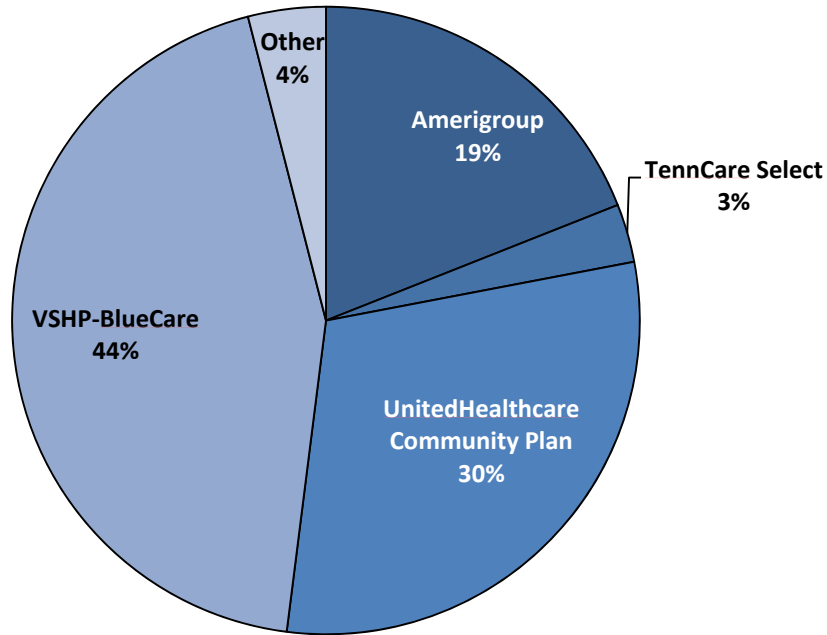
TennCare Plans

The largest number of TennCare survey household members (44 percent) report being signed up with Volunteer State Health Plan (BlueCare). UnitedHealthcare accounts for 30 percent, followed by Amerigroup with 19 percent and TennCare Select with 3 percent. Although there are no other active TennCare plans, 4 percent indicate they are represented by some plan other than these four listed.

TABLE 14: Reported TennCare Plan (2011–2016) (Percent)

What company manages your TennCare plan?	2011	2012	2013	2014	2015	2016
Amerigroup	16	20	17	19	20	19
TennCare Select	8	6	5	4	4	3
UnitedHealthcare Community Plan (formerly AmeriChoice)	41	37	41	42	33	30
VSHP – BlueCare	32	33	30	30	36	44
Other	4	4	7	5	7	4

FIGURE 2: Reported TennCare Plan (2016)



Only four out of five TennCare heads of households know the name of the managed care organization (MCO) they are assigned to, and two-thirds of them report receiving an enrollment card (Table 15). These rates are not remarkably different from last year. There was a notable decrease in the number of people who reported receiving information about filing appeals (76 percent, down 6 percentage points) and receiving a list of rights and responsibilities (81 percent, down 4 percentage points).

Postal mail remains the preferred method for receiving information about TennCare, with 78 percent reporting it was the best way (Table 16). Approximately 9 percent prefer to receive communication electronically by email or through online resources.

TABLE 15: Households Receiving TennCare Information from Plans (2007–2016) (Percent)

Please indicate whether or not you or anyone in your household has received each of the following regarding TennCare	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
An enrollment card	78	78	77	74	61	62	69	63	69	67
Information on filing grievances	46	41	41	43	29					
Information on filing appeals ⁹						73	76	70	82	76
A list of rights and responsibilities	77	73	75	74	68	80	82	78	85	81
Name of MCO to whom assigned	81	79	79	79	76	79	76	76	84	81

TABLE 16: Best Way to Get Information about TennCare (2007–2016) (Percent)

	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Mail	72	73	71	72	78	80	74	75	78	78
Doctor	8	5	6	5	5	6	9	5	4	5
Phone	8	11	10	11	5	4	6	6	8	4
Handbook	6	6	7	5	6	5	4	4	3	2
Drug Store	1	1	1	<1	<1	<1	<1	<1	<1	<1
Friends	1	<1	1	1	2	<1	<1	<1	<1	<1
TV	0	1	<1	<1	<1	<1	<1	<1	<1	<1
Paper	0	<1	1	<1	0	<1	<1	<1	0	<1
Email										5
Website										4
Other	5	4	3	3	4	4	4	6	8	<1

Six percent of respondents indicated that either they or someone else in their family had changed plans within the preceding 12 months. Of that total, 71 percent requested the change. The two most commonly cited reasons for changing plans was “limited choice of doctors and hospitals” and “location of providers.”

In the past 12 months, 8 percent of TennCare families used a non-emergency care provider that did not participate in their plan, with six out of 10 of this population using non-participating providers 1 to 2 times (Figure 3). For the 8 percent who used a non-participating provider, the most common type used

⁹Before 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.”

by TennCare families was a general medical care/family doctor (49 percent) followed by a non-surgical specialist (32 percent) (Table 17 and Figure 4). Approximately 36 percent of survey responders who sought care from a non-TennCare provider stated that they did so because the service was not covered under TennCare, while only 5 percent stated that they were dissatisfied with the quality of service from the TennCare provider (Table 18). Over half of the 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)

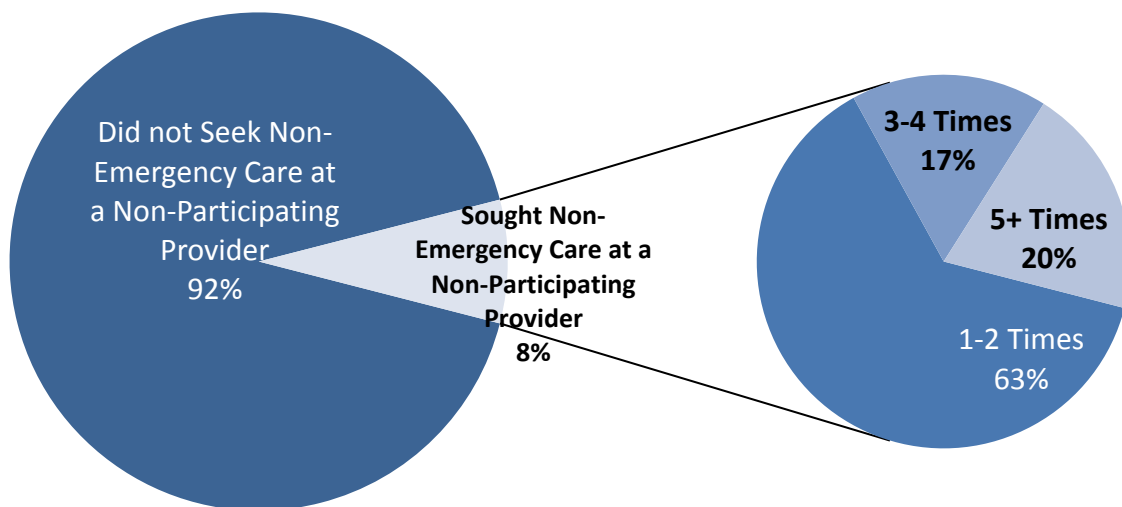


TABLE 17: Type of Non-Emergency Care Sought from a Non-TennCare Provider (2016) (Percent)

	2016
Eye Care	6
Dental Care	8
General Medical Care Specialist	49
Non-Surgical Specialist	32
Surgical Specialist	16
Not Sure	7

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

FIGURE 4: Type of Non-Emergency Care Sought from a Non-TennCare Provider (2016)

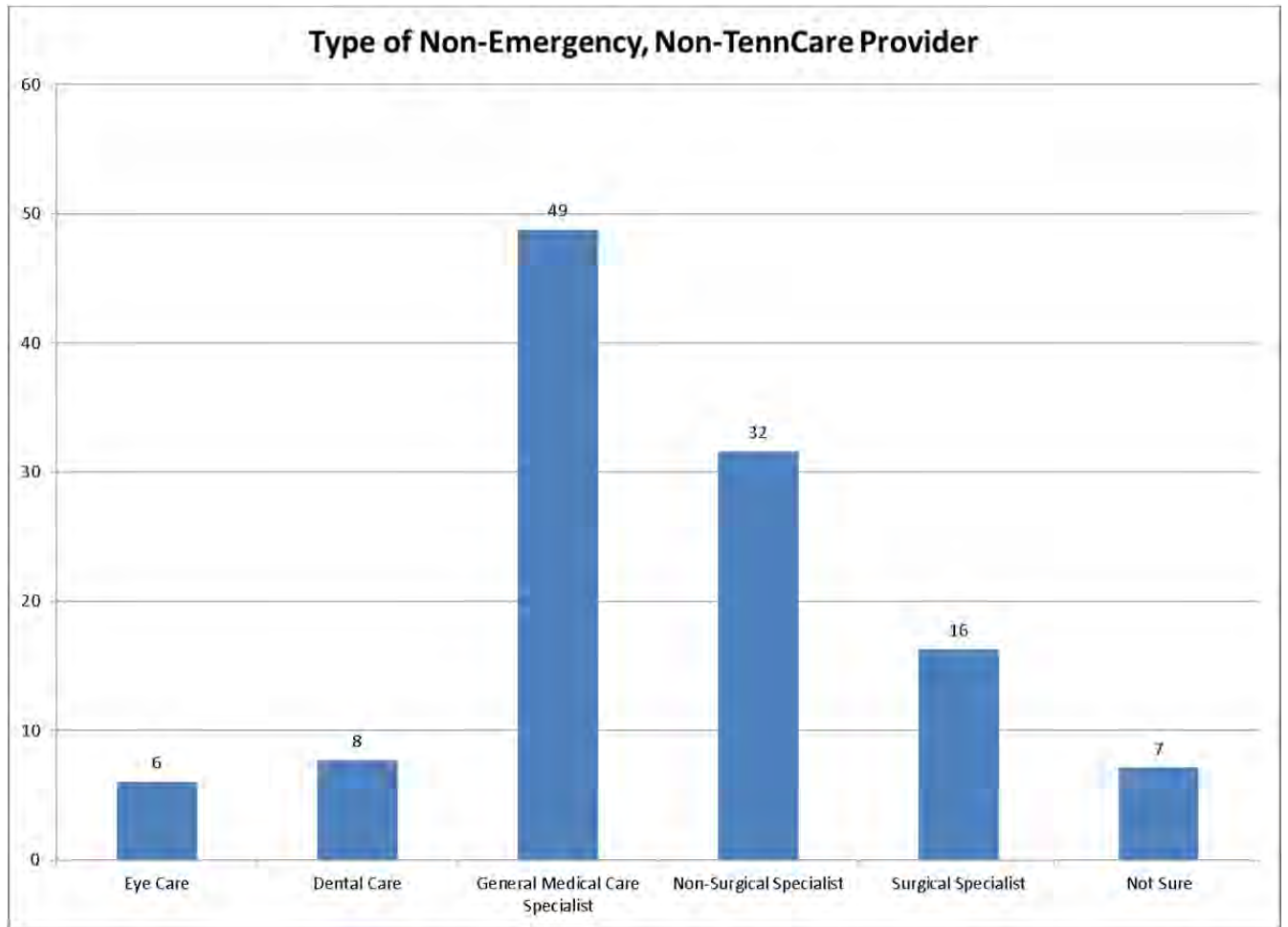


TABLE 18: Reasons Sought Non-Emergency Care from a Non-TennCare Provider (2016) (Percent)

	2016
Dissatisfaction with quality of service from TennCare provider	5
Service was not covered by TennCare	36
No TennCare provider in the area	11
Could not get timely appointment with TennCare provider	5
When I made the appointment or received care, I mistakenly thought the provider participated in my TennCare health care plan	20
Not Sure	23

Conclusion

Tennessee's 5.5 percent rate of uninsured in 2016 is the lowest uninsured rate in the entire 24-year history of the TennCare survey, and the rate has continued to decline since 2013. The number of uninsured children has remained steady since last year at less than 2 percent. The decrease in uninsured adults represents almost 67,000 Tennesseans.

An interesting finding in this year's study is a small, but notable, 5 percent decrease in the percentage of people who cite affordability as a reason for not obtaining health insurance (90 percent in 2015 to 85 percent in 2016). There is also a profound increase in the uninsured respondents reporting that they do not need health insurance (19 percent in 2015 to 30 percent in 2016).

TennCare enrollees are now equally likely (96 percent) as all households to seek initial care at a doctor's office or clinic, and there was a decrease, from 6 percent to 3 percent, among TennCare heads of households who first sought treatment at a hospital. There continues to be a trend in both TennCare heads of households and their children to have more doctor visits than the general population. However, the number of children receiving at least monthly visits to a doctor was lower in 2015 and 2016 than it had been in the preceding few years.

Overall, TennCare continues to receive positive feedback from its recipients, with 92 percent reporting satisfaction with the program, indicating TennCare is providing medical care in a satisfactory manner and meeting the expectations of those it serves.