

THE IMPACT OF TENNCARE

A Survey of Recipients, 2022

Prepared by

LeAnn Luna
Professor, BCBER

Emily Pratt
Research Associate, BCBER

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BOYD CENTER FOR BUSINESS &
ECONOMIC RESEARCH

Haslam College of Business
The University of Tennessee
716 Stokely Management Center
Knoxville, Tennessee 37996
Phone: (865) 974-5441
Fax: (865) 974-3100
<http://haslam.utk.edu/boyd-center>

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The Impact of TennCare: A Survey of Recipients, 2022

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 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 Division of TennCare.

The University of Tennessee Social Work Office of Research and Public Service (SWORPS) and Wilkins Research Services 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 2022. TennCare provided SWORPS with 10,000 (de-identified) phone numbers to help reach TennCare households. We also enhanced the telephone lists by using a larger web panel compared to the web panel used in previous years.¹

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 Spanish-speaking households without an available English speaker were reached, a person fluent in Spanish would call the household at a later time to conduct the survey. Approximately 27.8 percent of those who answered their land line phone or cell phone were willing to participate in the survey.² 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.³ (Table 1).

This is a follow-up to previous surveys of around 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 Beginning in 2017, SWORPS supplemented random dialing with a web panel of respondents. Prior to the survey, these web respondents provided some basic information such as age and income and were contacted to balance the distribution of responses across age and income combinations.

² In the land line phone sample, there were 2,788 completed surveys, 7,318 refusals, and 404 who did not qualify. In the cell phone sample, there were 729 completed surveys, 1,805 refusals, and 112 who did not qualify. There were 1,502 surveys completed by web panel participants. An individual will not qualify to participate if he/she is not a head of household, not a Tennessee resident or is under the age of 18.

³ 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 U.S. population and for parts of the U.S., such as states.

TABLE 1: Head of Household Age and Household Income

Age-Head of Household	Proportion in 2022 Survey (Percent)	Proportion in ACS* (Percent)	Deviation (Percent)
Under 25	7.7	4.1	-3.6
25-44	34.6	32.1	-2.5
45-64	37.8	37.5	-0.3
65+	19.9	26.3	6.4

Household Income Level	Proportion in 2022 Survey (Percent)	Proportion in ACS* (Percent)	Deviation (Percent)
Less than \$10,000	9.5	6.7	-2.8
\$10,000 to \$14,999	7.8	4.9	-2.9
\$15,000 to \$19,999	7.6	5.0	-2.6
\$20,000 to \$29,999	12.0	9.9	-2.1
\$30,000 to \$39,999	10.9	10.0	-0.9
\$40,000 to \$49,999	7.9	9.1	1.2
\$50,000 to \$59,999	8.3	8.2	-0.1
\$60,000 to \$99,999	17.8	22.8	5.0
\$100,000 to \$149,999	10.7	13.3	2.6
\$150,000 and over	7.5	10.1	2.6

*Census Bureau, 2016-2020 American Community Survey 5-year Estimates for Tennessee.

Estimates for Insurance Status

Estimates for the number of Tennesseans who are uninsured are presented below.⁴ These statewide estimates are extrapolated from the weighted sample. The estimated population of uninsured represents approximately 7.5 percent of the 6,975,218 Tennessee residents, down from 8.3 percent in 2021 (Table 2 and Figure 1).⁵ Further, the percent of uninsured adults fell from 9.9 percent in 2021 to 9.0 percent in 2022. The uninsured rate for children in 2022 is 2.3 percent (down from 2.5% in 2021) and the estimated number of uninsured children is 35,436 (Table 2a).

TABLE 2: Statewide Estimates of Uninsured Populations (2002–2022)

	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	370,115
Percent	10	9.9	9.5	9.2	9.6	7.2	5.7

	2016	2017	2018	2019	2020	2021	2022
State Total	368,792	408,083	451,627	468,096	566,523	564,452	522,097
Percent	5.6	6.1	6.7	6.9	8.3	8.3	7.5

TABLE 2a: Uninsured Tennesseans by Age (2009–2022)

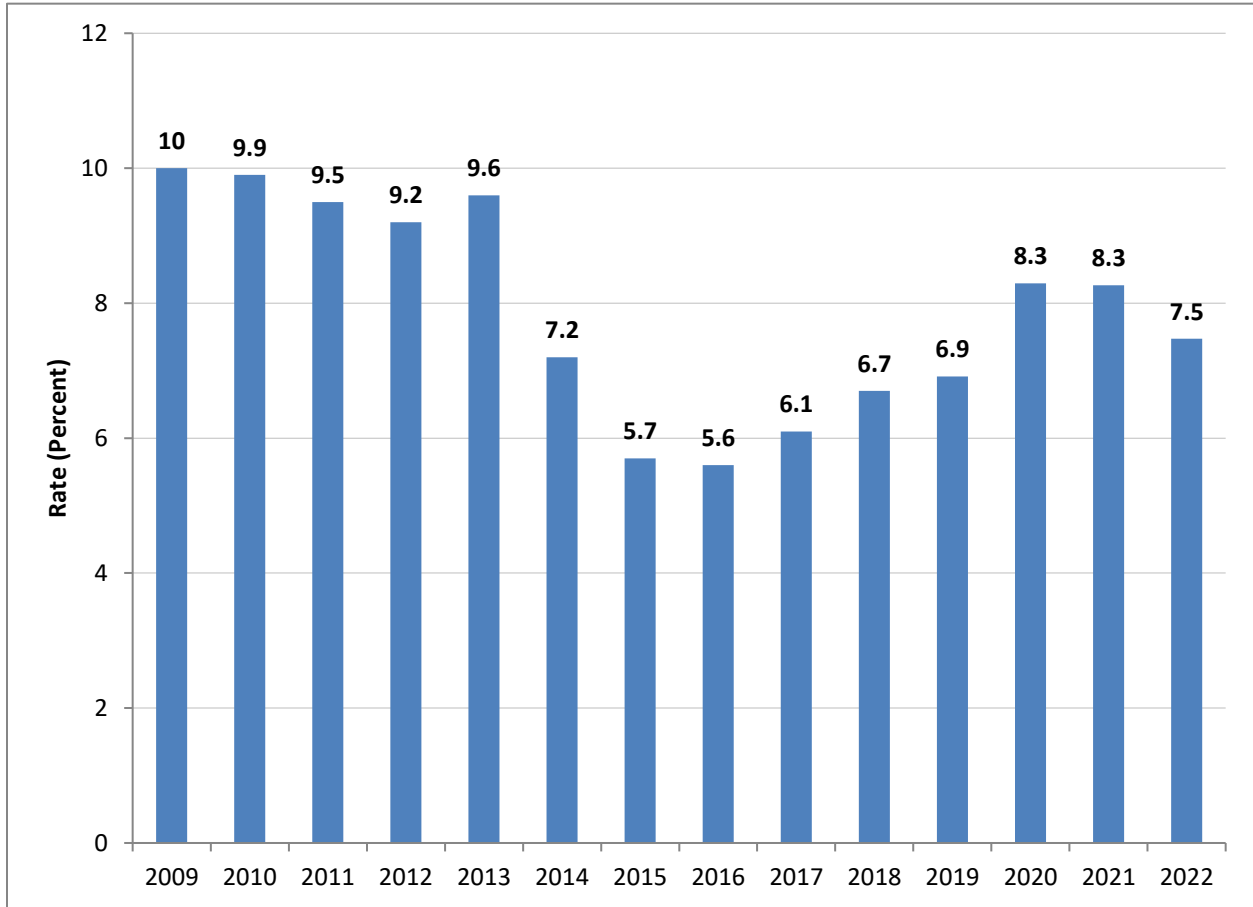
	2009	2010	2011	2012	2013	2014	2015
Under 18 Total	54,759	57,912	35,743	40,700	55,319	36,104	22,157
Under 18 Percent	3.7	3.9	2.4	2.7	3.7	2.4	1.5
18+ Total	562,208	560,532	568,479	537,113	556,049	435,904	347,958
18+ Percent	11.9	12	12	11.2	11.4	8.7	6.9

	2016	2017	2018	2019	2020	2021	2022
Under 18 Total	27,344	22,238	34,458	42,749	42,090	37,354	35,436
Under 18 Percent	1.8	1.5	2.3	2.8	2.8	2.5	2.3
18+ Total	341,449	385,800	417,170	425,347	524,433	527,098	486,661
18+ Percent	6.7	7.5	8.0	8.1	9.9	9.9	9.0

⁴ Changes in technology and hard-to-reach subgroups require continuous adjustments in research study design. While the estimated uninsured rate differs between some subgroups for adults, we do not believe that the differences impact the average uninsured rate in aggregate.

⁵ Population estimates are found using United States Census Bureau Population Estimates. In prior years (1993 to 2008), population figures were gathered from the “Interim State Population Projections,” also prepared by the United States Census Bureau.

FIGURE 1: Statewide Rate of Uninsured Populations (2009-2022)



Reasons for Failure to Obtain Medical Insurance

Affordability remains the top-cited reason for failing to obtain health insurance, with 82 percent of uninsured respondents who cited “cannot afford” as a major reason and 6 percent citing affordability as a minor reason (Table 3). We report the distribution of responses who cited affordability as a major reason by income bracket in Table 4. The share of households with income of \$40,000 or more had the largest change, declining from 78 percent in 2021 to 66 percent in 2022.

TABLE 3: Reasons for Not Having Insurance (2002–2022) (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
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
2017	78	9	13	11	15	74	13	13	74
2018	82	8	10	8	14	78	10	12	78
2019	81	8	11	11	15	74	13	12	75
2020	81	10	9	9	22	69	10	23	67
2021	80	6	14	12	22	66	11	18	71
2022	82	6	12	15	20	65	12	17	70

TABLE 4: “Cannot Afford” Major Reason for No Insurance: By Income (2017–2022) (Percent)⁶

Household Income	2017	2018	2019	2020	2021	2022
Less than \$20,000	80	81	80	76	78	77
\$20,000 - \$39,999	75	80	81	84	79	78
\$40,000 and above	42	77	68	79	78	66

⁶ Results in Table 4 omit respondents who did not report household income.

Evaluations of Medical Care and Insurance Coverage

Tennessee residents’ perceptions about the quality of care received have remained consistently high for the last decade. Since 2012, the share of all heads of households who rated quality of care received as “good” or “excellent” has ranged from 76 percent to 80 percent and was 76 percent in 2022. Since 2014, the share of TennCare heads of households who rated their quality of care as “good” or “excellent” has ranged from 70 percent to 76 percent and was 73 percent in 2022 (Table 5).

TABLE 5: Quality of Medical Care Received by Heads of Households (2012–2022) (Percent)

All Heads of Households	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Excellent	30	32	31	32	33	33	32	33	33	34	30
Good	46	46	47	46	45	45	45	47	46	45	46
Fair	17	16	16	17	17	17	17	15	16	15	18
Poor	7	6	6	5	5	5	6	5	5	6	6
Heads of Households w/ TennCare	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Excellent	24	24	25	28	31	27	26	30	30	30	27
Good	45	44	45	42	43	46	45	46	44	43	46
Fair	22	24	22	24	23	22	24	19	20	20	22
Poor	9	8	8	6	3	5	5	5	6	7	5

In 2022, all heads of households and heads of households with TennCare children reported similar levels of satisfaction with the quality of healthcare received by covered children. In 2022, 85 percent and 83 percent, respectively, reported quality of care received as “excellent” or “good.” These responses are consistent with long-term trends, indicating respondents remain satisfied with the quality of care received by their children (Table 6).

TABLE 6: Quality of Medical Care Received by Children of Heads of Households (2012–2022) (Percent)

All Heads of Households	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Excellent	42	43	41	45	46	43	44	45	45	44	40
Good	45	43	48	44	42	45	45	44	44	44	45
Fair	10	10	9	8	10	10	9	8	9	10	13
Poor	3	4	2	3	2	2	2	3	3	2	2
Heads of Households w/ TennCare⁷	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Excellent	38	35	38	41	43	39	43	45	41	44	40
Good	42	45	49	46	44	48	45	42	43	41	43
Fair	14	14	10	9	12	10	10	10	13	12	15
Poor	6	6	3	4	1	3	2	3	3	3	2

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), and satisfaction with the quality of care their children receive (untabulated). Specifically, 95 percent of respondents indicated they are “very satisfied” or “somewhat satisfied” with the TennCare program. Satisfaction rates have exceeded 90 percent for fourteen consecutive years.⁸ In addition, 96 percent are “very satisfied” or “somewhat satisfied” with the quality of care for their children.

TABLE 7: Percent Indicating Satisfaction with TennCare (2009–2022) (Percent)

2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
92	94	95	93	95	93	95	92	95	95	94	94	92	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). Reported behavior for 2022 is very consistent with recent surveys. Ninety-three percent of all heads of households sought care first at a doctor’s office or clinic, while 92 percent of TennCare heads of households did the same. In 2022, 2 percent of all households and 4 percent of TennCare households with children initially sought care at a hospital (Table 9). The 2022 results are similar to the amounts reported in 2021.

⁷ 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.

⁸ A three-point scale was used, and respondents could indicate “very satisfied,” “somewhat satisfied,” or “not satisfied.” We ask a related question about satisfaction with TennCare coverage, and 91 percent report that they are “satisfied.”

TABLE 8: Heads of Households: Medical Facilities Used When Medical Care Initially Sought (2012-2022) (Percent)

All Heads of Households	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Doctor's Office	82	81	81	81	80	80	79	78	78	77	76
Clinic	13	13	14	15	16	15	16	17	16	17	17
Hospital	4	4	3	3	3	3	3	3	4	4	4
Other	1	2	2	1	1	2	2	2	2	2	3
Heads of Households with TennCare	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Doctor's Office	75	80	72	76	78	79	76	76	79	76	75
Clinic	14	14	18	18	18	12	16	17	14	17	17
Hospital	10	6	8	6	3	7	7	6	6	6	6
Other	1	<1	2	0	1	2	1	1	1	1	2

TABLE 9: Children: Medical Facilities Used When Medical Care Initially Sought (2012-2022) (Percent)

All Heads of Households	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Doctor's Office	88	86	87	86	85	84	85	81	83	81	81
Clinic	10	12	12	12	13	13	13	15	14	15	16
Hospital	2	1	1	1	1	2	1	3	2	3	2
Other	<1	1	<1	<1	<1	<1	<1	1	1	1	1
Heads of Households with TennCare⁹	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Doctor's Office	86	84	84	83	86	85	85	78	83	82	82
Clinic	11	12	14	14	12	11	12	15	13	14	14
Hospital	3	3	1	3	2	4	2	6	3	4	4
Other	0	<1	1	0	<1	0	<1	<1	1	<1	<1

TennCare recipients continue to see physicians on a more frequent basis than the average Tennessee household (Table 10). The proportion of all heads of households that reported seeing a doctor at least weekly or monthly was 14 percent in 2022 (15 percent in 2021), versus 27 percent of TennCare heads of households (down from 31 percent in 2021). In 2022, 11 percent of all households reported taking their children to visit a doctor at least monthly versus 16 percent for TennCare children. The rate of frequent visits slightly decreased for TennCare children, but slightly increased for non-TennCare children (Table 11).

⁹ 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.

TABLE 10: Frequency of Visits to Doctor for Heads of Households (2012–2022) (Percent)

All Heads of Households	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Weekly	1	2	2	2	2	2	2	2	2	3	2
Monthly	11	11	11	11	12	12	11	13	12	12	12
Every Few Months	46	46	47	46	44	46	47	47	45	45	47
Yearly	25	24	25	25	26	26	25	23	25	24	23
Rarely	17	17	15	16	16	14	15	15	16	16	16
Heads of Households with TennCare	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Weekly	4	5	6	3	5	5	5	5	4	6	4
Monthly	31	34	31	26	31	28	26	28	22	25	23
Every Few Months	43	43	45	49	42	42	45	43	48	42	45
Yearly	8	8	11	9	10	14	12	12	15	14	15
Rarely	14	10	8	13	12	11	12	12	11	13	13

TABLE 11: Frequency of Visits to Doctor for Children (2012–2022) (Percent)

All Heads of Households	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Weekly	1	1	1	1	1	1	1	1	1	1	1
Monthly	8	9	9	7	8	7	7	10	8	8	10
Every Few Months	50	52	47	47	44	48	51	50	48	44	47
Yearly	35	30	35	36	38	36	35	32	36	40	35
Rarely	6	8	8	8	9	8	6	7	7	7	7
Heads of Households with TennCare¹⁰	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Weekly	0	1	2	1	3	3	2	2	2	4	3
Monthly	15	19	17	13	12	14	12	18	11	15	13
Every Few Months	58	53	53	51	53	48	57	52	51	46	52
Yearly	22	25	25	28	29	31	24	24	30	29	28
Rarely	4	5	2	2	5	3	5	4	6	6	4

¹⁰ 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.

Appointments

The reported time required to obtain an appointment increased overall compared to 2021, consistent with the trend since 2018. The share of respondents who obtained an appointment within one day fell from 35 percent to 32 percent. Moreover, 62 percent of TennCare recipients were able to make a doctor’s appointment within a week, down from 66 percent in 2021 and 75 percent in 2018. Twenty-seven percent reported waiting three weeks or longer for an appointment, up from 23 percent in 2021 (Table 12), and 15 percent in 2018. TennCare patients reported waiting on average 44 minutes after arriving for their appointments. The average travel time to a physician’s office was 25 minutes (Table 13).

TABLE 12: Time between Attempt to Make Appointment and First Availability of Appointment: TennCare Heads of Households (2012–2022) (Percent)

When you last made an appointment to see a primary care physician for an illness, in the past 12 months, how soon was the first appointment available?	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Same day	20	18	18	24	19	21	23	21	14	15	14
Next day	21	25	21	18	22	21	24	21	20	20	18
1 week	25	23	29	26	28	29	28	30	37	31	30
2 weeks	14	10	8	8	9	9	10	13	11	11	11
3 weeks	2	4	6	3	4	5	4	4	4	5	6
Over 3 weeks	18	20	19	21	18	15	11	11	14	18	21

TABLE 13: Wait for Appointments: TennCare Heads of Households (2012–2022) (Minutes)

	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Number of minutes wait past scheduled appointment time?	58	51	53	63	52	42	50	45	42	37	44
Number of minutes to travel to physician's office?	22	22	22	27	24	22	23	26	23	23	25

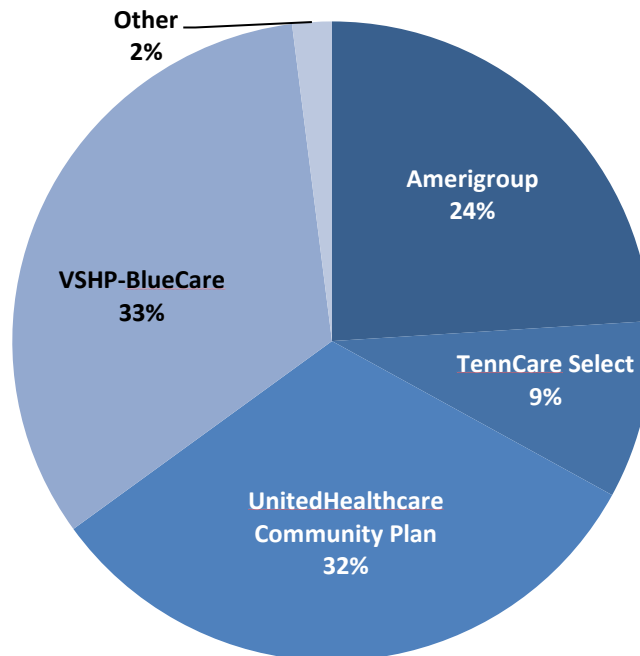
TennCare Plans

In 2022, 89 percent of TennCare survey household members reported being signed up with one of three plans: 33 percent in Volunteer State Health Plan (VSHP), 32 percent in UnitedHealthcare, 24 percent in Amerigroup—while 9 percent report being enrolled in TennCare Select. Reported enrollment in both TennCare Select and Amerigroup grew between 2021 and 2022, while reported UnitedHealthcare enrollment decreased. Although there are no other active TennCare plans, 2 percent of respondents indicated they are represented by some plan other than these four listed.

TABLE 14: Reported TennCare Plan (2017–2022) (Percent)

What company manages your TennCare plan?	2017	2018	2019	2020	2021	2022
Amerigroup	21	22	21	24	22	24
TennCare Select	9	6	8	7	7	9
UnitedHealthcare Community Plan (formerly AmeriChoice)	31	33	33	32	34	32
VSHP – BlueCare	36	36	36	34	34	33
Other	3	3	2	3	3	2

FIGURE 2: Reported TennCare Plan (2022)



Six percent of respondents indicated that they had changed plans within the preceding 12 months. Of that total, 38 percent requested the change. The most commonly cited reason for changing plans was “limited choice of doctors and hospitals.”

Seventy-four percent of TennCare heads of households reported receiving a list of rights and responsibilities this year. Sixty-one percent of households reported receiving an enrollment card and sixty-six percent reported receiving information about filing an appeal. These results are very similar to those reported in 2021 (Table 15).

TABLE 15: Households Receiving TennCare Information from Plans (2012–2022) (Percent)

Please indicate whether or not you or anyone in your household has received each of the following regarding TennCare	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
An enrollment card	62	69	63	69	67	71	67	69	59	62	61
Information on filing appeals	73	76	70	82	76	76	74	70	64	66	66
A list of rights and responsibilities	80	82	78	85	81	82	79	75	72	74	74
Name of MCO to whom assigned	79	76	76	84	81	81	75	76	71	72	73

Mail has held steady as the most popular mode of communication for TennCare households. Approximately 62 percent reported that mail is still the preferred method for receiving information. Website-based and email communication increased slightly from 2021, indicating that some respondents may have better access to the internet or electronic forms of communication (Table 16).

TABLE 16: Best Way to Get Information about TennCare (2012–2022) (Percent)

	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Mail	80	74	75	78	78	72	73	64	64	62	62
Doctor	6	9	5	4	5	6	3	6	5	7	5
Email					5	6	7	10	12	13	14
Website					4	4	6	7	5	4	6
Phone	4	6	6	8	4	5	4	4	6	6	6
Handbook	5	4	4	3	2	4	4	4	2	2	3
Drug Store	<1	<1	<1	<1	<1	<1	<1	<1	1	1	<1
Friends	<1	<1	<1	<1	<1	<1	<1	1	2	3	1
TV	<1	<1	<1	<1	<1	<1	<1	1	1	<1	1
Paper	<1	<1	<1	0	<1	<1	<1	<1	<1	<1	<1
Other	4	4	6	8	<1	<1	1	2	2	1	1

In the past 12 months, 14 percent of TennCare families used a non-emergency care provider that did not participate in their plan (13 percent in 2021), with 62 percent of that 14 percent stating that they used non-participating providers one to two times (Figure 3). Of the 14 percent of TennCare households using non-participating providers, the most common type of care sought was from a general medical care/family doctor, followed by dental care and non-surgical specialist care (Table 17 and Figure 4).

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

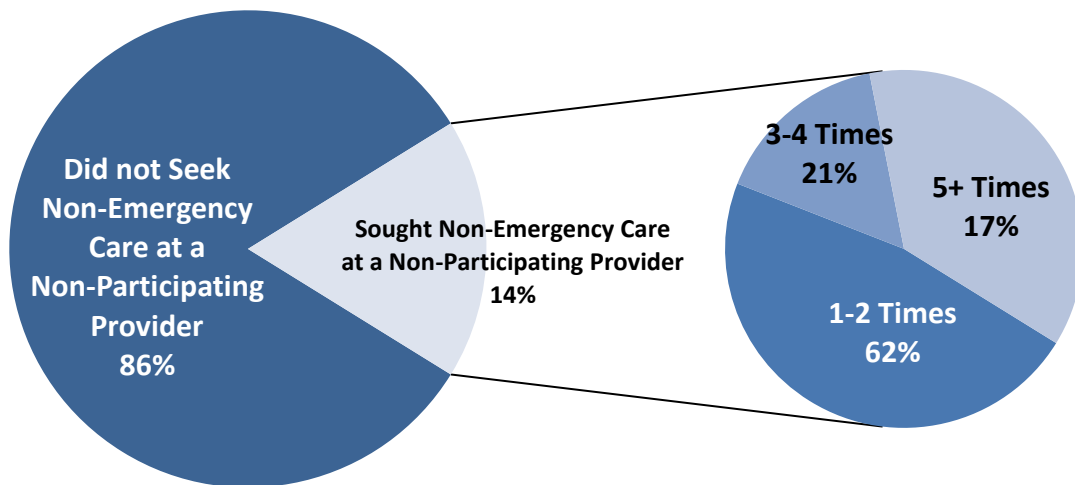
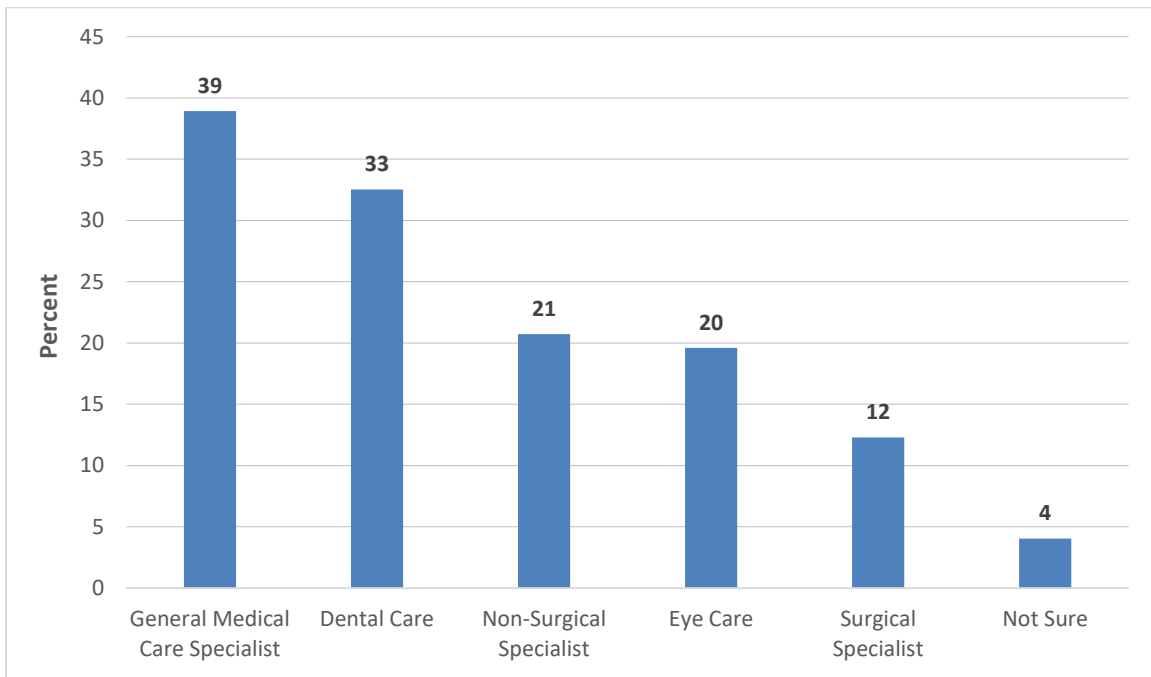


TABLE 17: Type of Non-Emergency Care Sought from a Non-TennCare Provider (2022) (Percent)

	2021	2022
General Medical Care Specialist	50	39
Dental Care	41	33
Eye Care	29	20
Non-Surgical Specialist	25	21
Surgical Specialist	17	12
Not Sure	5	4

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

FIGURE 4: Type of Non-Emergency Care Sought from a Non-TennCare Provider (2022)



Approximately 6 percent of all TennCare households sought care from a non-TennCare provider because the service was not covered under TennCare. Further, 2 percent of TennCare households sought care from a non-TennCare provider because there was not a TennCare provider in the area, and 2 percent because they were dissatisfied with the quality of service from the TennCare provider (Table 18). Over half of the respondents (59 percent) reported that TennCare helped them find a provider that participated in the TennCare plan.

TABLE 18: Reasons Sought Non-Emergency Care from a Non-TennCare Provider (2022) (Percent of TennCare Recipients)

	2022
Dissatisfaction with quality of service from TennCare provider	2
Service was not covered by TennCare	6
No TennCare provider in the area	2
Could not get timely appointment with TennCare provider	2
When I made the appointment or received care, I mistakenly thought the provider participated in my TennCare health care plan	2

COVID-19 Considerations

The 2020 through 2022 surveys include questions relating to COVID-19. Approximately 19 percent of respondents said that COVID-19 had impacted the quality of their healthcare. Approximately 2 percent of respondents stated they were unable to make an appointment to see a physician in the past 12 months due to the physician’s office being closed for non-emergency visits in 2022, compared with 13 percent in 2021. Similarly, 1.3 percent of heads of households reported that they were unable to make an appointment for their child to see a physician in the past 12 months due to the physician’s office being closed for non-emergency visits (down from 3.8 percent in 2021). (Table 19).

Respondents reported an increase in the use of telehealth and behavioral health services during the pandemic. Approximately 33 percent of respondents reported using telehealth services more frequently during the pandemic, and over 10 percent reported using behavioral health services for the first time or more frequently due to COVID-19. The majority (68 percent) of TennCare respondents reported receiving communications from TennCare or from their TennCare health plan about available services and testing for COVID-19.

Table 19: COVID-19 Summary (2021-2022) (Percent)

	2021	2022
Overall quality of medical care has been impacted by COVID-19	20.8	18.7
<i>Quality is better</i>	28.2	30.5
<i>Quality is worse</i>	71.8	69.5
Unable to see a physician because office was closed for non-emergency visits due to COVID-19	12.6	1.6
Unable to make an appointment for their child to see a physician due to COVID-19	3.8	1.3

Conclusion

The number of uninsured Tennesseans decreased by approximately 42,000 in 2022, representing a drop from 8.3 percent to 7.5 percent of the population. The proportion of uninsured adults decreased from 9.9 percent in 2021 to 9.0 percent in 2022, while the proportion of uninsured children decreased from 2.5 percent in 2021 to 2.3 percent in 2022.

Affordability continues to be the major reason for not having insurance, cited by approximately 82 percent of respondents across all income categories. At least 92 percent of heads of households first sought medical care at a doctor's office or clinic (versus a hospital) for themselves or their children. Only 14 percent of TennCare families reported needing to use non-emergency care providers that do not participate with their plan, primarily because the service was not provided by TennCare.

About 20 percent of respondents indicated that the overall quality of their medical care was impacted by COVID-19 in 2021 and 2022. However, the number of respondents unable to see a physician because the office was closed decreased from 12.6 percent in 2021 to 1.6 percent in 2022.

Overall, TennCare continues to receive positive feedback from its recipients, with 95 percent reporting satisfaction with the program. This positive feedback is a strong indication that TennCare is providing satisfactory medical care and meeting the expectations of those it serves.