THE IMPACT OF TENNCARE

A Survey of Recipients, 2024

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January 2025



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The Impact of TennCare: A Survey of Recipients, 2024

Method

The Boyd Center for Business and Economic Research at the University of Tennessee, Knoxville, 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, use of medical facilities, and their level of satisfaction with the TennCare program. A sample size of more than 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 set of landline and cell phone numbers between May and July 2024. TennCare provided SWORPS with 10,000 (de-identified) phone numbers to ensure adequate representation from 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 later to conduct the survey. Approximately 40.3 percent of those who answered their landline or cell phone were willing to participate in the survey. The large sample size allowed for the weighting of responses by income and age to provide unbiased estimates for the entire population. Except where noted, all statewide estimates are adjusted for the degree to which the sample over- or under-represented Tennesseans grouped by household income and head of household age. (Table 1).

This survey of approximately 5,000 Tennessee households has been 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 landline phone sample, there were 2,788 completed surveys, 4,844 refusals, and 296 who did not qualify. In the cell phone sample, there were 733 completed surveys, 1,027 refusals, and 153 who did not qualify. There were 1,503 surveys completed by web panel participants. Our final sample included 5,024 responses. 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 Bureau 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 2024 Survey (Percent)	Proportion in ACS* (Percent)	Deviation (Percentage point)
Under 25	5.1	4.2	0.9
25-44	34.2	32.3	1.8
45-64	42.0	36.7	5.3
65+	18.8	26.8	-8.0
Household Income Level	Proportion in 2024 Survey (Percent)	Proportion in ACS* (Percent)	Deviation (Percentage point)
Less than \$10,000	9.0	5.3	3.7
\$10,000 to \$14,999	9.4	4.5	4.9
\$15,000 to \$19,999	6.7	4.1	2.6
\$20,000 to \$29,999	11.3	8.5	2.8
\$30,000 to \$39,999	10.6	8.6	2.0
\$40,000 to \$49,999	8.8	8.4	0.4
\$50,000 to \$59,999	9.1	7.8	1.3
\$60,000 to \$99,999	18.0	23.0	-5.0
\$100,000 to \$149,999	10.3	15.7	-5.5
\$150,000 and over	6.7	14.0	-7.3

 $[\]hbox{*Census Bureau, 2018-2022 American Community Survey 5-year Estimates for Tennessee.}\\$

Estimates for Insurance Status

Estimates for the number of Tennesseans who are uninsured are presented below. While other results are weighted as described above, state uninsured rates are weighted to match to Census Bureau estimates of state-level demographics and estimates of publicly insured Tennesseans. The estimated number of uninsured Tennesseans is between 7.6 and 9.6 percent of the population (between 439,332 and 680,437 persons). The uninsured rate for children in 2024 is estimated to fall between 3.2 and 4.4 percent, and the estimated number of uninsured children is between 50,170 and 68,984 (Table 2).4

TABLE 2: Statewide Estimates of Uninsured Populations 2024

	Total	Under 18	18 and Older
State Total (Upper Bound)	680,437	68,984	611,453
Percent	9.6	4.4	11.0
State Total (Lower Bound)	539,332	50,170	489,162
Percent	7.6	3.2	8.8

Reasons for Failure to Obtain Medical Insurance

Affordability remains the top-cited reason for failing to obtain health insurance. Eighty percent of uninsured respondents cited "cannot afford" as a major reason and 7 percent cited affordability as a minor reason (Table 3). We report the distribution of respondents who cited affordability as a major reason by income bracket in Table 4. Across income brackets, the share of households citing affordability as a major reason for lack of insurance remained relatively steady between this and last year's survey. Beginning with this year's survey, respondents indicating they were uninsured could indicate whether they were turned down after having applied. Twenty-nine percent of respondents indicated that being turned down for insurance was a major reason for their lack of coverage.

⁴ These calculations reflect a change in methodology from previous years in two ways. In previous years, these estimates were calculated using household-level weights, as are all other estimates in this report. However, because these are person-level calculations, we use raked person-level weights to match state-level characteristics in terms of Medicaid receipt, householder age, marital status, and employment status separately for children and adults.

Second, the range in percentages is not a confidence interval but reflects that some respondents refused to answer or did not know about the insurance status of other members in the household. However, these missing values are not random. Respondents who were themselves uninsured were four times as likely to refuse or not know about the insurance status of others in the household. Respondents who were themselves uninsured were also five times as likely to have other uninsured adults living in the household. It is therefore likely, but unknowable, that a considerable share of the individuals whose insurance status is unknown are uninsured.

TABLE 3: Reasons for Not Having Insurance (2004–2024) (Percent)

Reason	Ca	annot Affor	d	Dio	d Not Get to) It		Oo Not Need	t
Year	Major Reason	Minor Reason	Not a Reason	Major Reason	Minor Reason	Not a Reason	Major Reason	Minor Reason	Not a Reason
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	11	8	14	78	10	12	78
2019	81	8	11	11	15	74	13	12	75
2020	81	10	9	9	22	68	10	23	67
2021	80	6	14	12	22	66	11	18	71
2022	82	6	12	15	20	65	14	17	70
2023	78	7	15	14	22	64	15	21	64
2024	80	7	13	12	19	69	11	15	74

TABLE 4: "Cannot Afford" Major Reason for No Insurance: By Income (2018–2024) (Percent) ⁵

Household Income	2018	2019	2020	2021	2022	2023	2024
Less than \$20,000	81	80	76	78	77	75	77
\$20,000 - \$39,999	80	81	84	79	80	76	75
\$40,000 and above	77	68	79	78	66	71	73

⁵ 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 2015, the share of all heads of households who rated quality of care received as "good" or "excellent" has ranged from 77 percent to 80 percent. This year, 79 percent rated their quality of care as "good" or better. Since 2015, the share of TennCare heads of households who rated their quality of care as "good" or "excellent" has ranged from 70 percent to 77 percent, and in 2024 was 74 percent (Table 5).

TABLE 5: Quality of Medical Care Received by Heads of Households (2015–2024) (Percent)

All Heads of Households	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Excellent	32	33	33	32	33	33	34	30	30	32
Good	46	45	45	45	47	46	45	46	47	47
Fair	17	17	17	17	15	16	15	18	17	16
Poor	5	5	5	6	5	6	6	6	6	5
Heads of Households w/ TennCare	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Excellent	28	31	27	26	30	30	30	27	32	27
Good	42	43	46	45	46	44	43	46	45	47
Fair	24	23	22	24	19	20	20	22	18	22
Poor	5	3	5	5	5	6	7	5	5	4

In 2024, 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 2024, 86 percent of all households with children and 85 percent of TennCare households with children reported quality of care received as "excellent" or "good." Forty-one percent of households with TennCare children reported quality of care as "excellent", which is the same percentage as reported among all households with children. 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 (2015–2024) (Percent)

All Heads of Households	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Excellent	45	46	43	44	45	45	44	40	39	41
Good	44	42	45	45	44	44	44	45	47	45
Fair	8	10	10	9	8	9	10	13	12	11
Poor	3	2	2	2	3	3	2	2	2	3
Heads of Households w/ TennCare ⁶	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Excellent	41	43	39	43	45	41	44	40	44	41
Good	46	44	48	45	42	43	41	43	42	44
Fair	9	12	11	10	11	13	12	15	12	13
Poor	4	1	3	2	3	3	3	2	2	2

Overall Satisfaction with the TennCare Program

TennCare recipients continue to show high levels of satisfaction with the program (Table 7). Specifically, 96 percent of respondents indicated they are "very satisfied" or "somewhat satisfied" with the TennCare program, and rates have consistently exceeded 90 percent over time. In addition, 96 percent are "very satisfied" or "somewhat satisfied" with the TennCare program for their children (not tabulated).

TABLE 7: Percent Indicating Satisfaction with TennCare (2012–2024) (Percent)

2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
93	95	93	95	92	95	95	94	94	92	95	95	96

⁶ 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.

⁷ 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."

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 2024 is very consistent with recent surveys. Ninety-four percent of all heads of households first sought care at a doctor's office or clinic, while 91 percent of TennCare heads of households did the same. In 2024, 96 percent of all households with children, and 94 percent of TennCare households with children first sought care at a doctor's office or clinic (Table 9).

TABLE 8: Heads of Households: Medical Facilities Used When Medical Care Initially Sought (2015-2024) (Percent)

All Heads of Households	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Doctor's Office	81	80	80	79	78	78	77	76	74	77
Clinic	15	16	15	16	17	16	17	17	18	17
Hospital	3	3	3	3	3	4	4	4	5	4
Other	1	2	2	2	2	2	2	3	3	2
Heads of Households with TennCare	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Doctor's Office	76	78	79	76	76	79	76	75	73	71
Clinic	18	18	13	15	17	14	17	17	17	20
Hospital	7	3	7	7	6	6	6	6	7	8
Other	0	2	2	1	1	1	1	2	3	1

TABLE 9: Children: Medical Facilities Used When Medical Care Initially Sought (2015-2024) (Percent)

All Heads of Households	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Doctor's Office	86	85	84	85	78	83	81	81	80	81
Clinic	12	13	13	13	17	14	15	16	16	15
Hospital	1	1	2	2	3	2	3	2	3	3
Other	<1	<1	<1	<1	2	1	1	1	1	1
Heads of Households with TennCare ⁸	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Doctor's Office	83	86	85	85	78	83	82	82	80	79
Clinic	14	12	11	12	15	13	14	14	15	15
Hospital	3	2	4	2	6	3	4	4	4	6
Other	0	<1	0	<1	<1	1	<1	<1	<1	<1

⁸ 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.

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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 2024, versus 28 percent of TennCare heads of households. In 2024, 11 percent of all households reported taking their children to visit a doctor at least monthly versus 19 percent for TennCare children.

TABLE 10: Frequency of Visits to Doctor for Heads of Households (2015–2024) (Percent)

All Heads of Households	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Weekly	2	2	2	2	2	2	3	2	3	2
Monthly	11	12	12	11	13	12	12	12	14	12
Every Few Months	46	44	46	47	47	45	45	47	47	51
Yearly	25	26	26	25	23	25	24	23	21	23
Rarely	16	16	15	15	15	16	16	16	16	12
Heads of Households w/ TennCare	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Weekly	3	5	5	5	5	4	6	4	5	3
Monthly	26	31	28	26	28	22	25	23	24	25
Every Few Months	49	42	42	45	43	48	42	45	45	48
Yearly	9	10	14	12	12	15	14	15	14	14
Rarely	13	12	11	12	13	11	13	13	12	10

TABLE 11: Frequency of Visits to Doctor for Children (2015–2024) (Percent)

All Heads of Households	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Weekly	1	1	1	1	1	1	1	1	2	2
Monthly	7	8	7	7	10	8	8	10	12	9
Every Few Months	47	44	48	51	50	48	44	47	49	50
Yearly	36	38	36	35	32	36	40	35	31	33
Rarely	8	9	7	6	7	7	7	7	6	6
Heads of										
Households with TennCare ⁹	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Weekly	1	3	3	2	2	2	4	3	3	2
Monthly	13	12	14	12	19	11	15	13	16	17
Every Few Months	51	53	48	57	52	51	46	52	51	50
Yearly	28	29	31	24	24	30	29	28	26	27
Rarely	5	4	4	5	4	6	6	4	4	4

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.

Ease of Obtaining a Doctor's Appointment

The reported time required to obtain an appointment increased overall compared to 2023. The share of respondents who obtained an appointment within one day declined from 39 percent to 34 percent. Approximately 67 percent of TennCare recipients were able to make a doctor's appointment within a week. This figure has been consistent over the last decade. Twenty-one percent of TennCare heads of household reportedly waited 3 or more weeks for an appointment. TennCare patients reported waiting an average of 38 minutes after arriving for their appointments after an average travel time to the appointment of 22 minutes (Table 13).

TABLE 12: Time between Attempt to Make Appointment and First Availability of Appointment: TennCare Heads of Households (2015–2024) (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?	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Same day	24	19	21	23	21	14	15	14	18	15
Next day	18	22	21	24	21	20	20	18	21	19
1 week	26	28	29	28	30	37	31	30	30	33
2 weeks	8	9	9	10	13	11	11	11	12	12
3 weeks	3	4	5	4	4	4	5	6	5	5
Over 3 weeks	21	18	14	11	11	14	18	21	14	16

TABLE 13: Wait for Appointments: TennCare Heads of Households (2015–2024) (Minutes)

	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Number of minutes wait past scheduled appointment time?	63	52	42	50	45	42	37	44	44	38
Number of minutes to travel to physician's office?	27	24	22	23	26	23	23	25	21	22

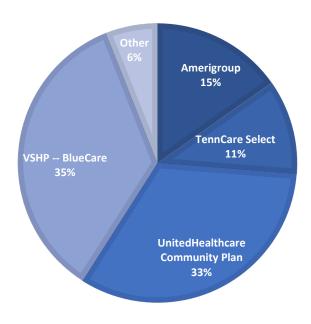
TennCare Plans

TennCare participants are covered by one of four plans. Table 14 and Figure 1 below report the responses from our 2024 survey. About 83 percent of TennCare household members surveyed reported being signed up with Volunteer State Health Plan (35 percent), UnitedHealthcare (33 percent), or Amerigroup (15 percent). The remaining 17 percent report being enrolled in TennCare Select or gave an incorrect answer.

TABLE 14: Reported TennCare Plan (2019–2024) (Percent)

What company manages your TennCare plan?	2019	2020	2021	2022	2023	2024
Amerigroup ¹⁰	21	24	22	24	23	15
TennCare Select	8	7	7	9	7	11
UnitedHealthcare Community Plan (formerly AmeriChoice)	33	32	34	32	33	33
VSHP BlueCare	36	34	34	33	35	35
Other	2	3	3	2	2	6

FIGURE 1: Reported TennCare Plan (2024)



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¹⁰ In 2024, Amerigroup's name was changed to Wellpoint.

About 10 percent of respondents indicated that they had changed plans within the preceding 12 months. Of that total, 34 percent requested the change. The most cited reason for changing plans was "limited choice of doctors and hospitals," as it was in 2023.

Seventy-eight percent of TennCare heads of households reported receiving a list of rights and responsibilities this year. The proportion of households reportedly receiving an enrollment card jumped to 73 percent this year over 59 percent in 2023, and a similar increase was observed in households having received information about filing an appeal (75 percent over 67 percent in 2023) (Table 15). Overall, positive responses are above pre-pandemic levels and are returning to 2015 levels.

TABLE 15: Households Receiving TennCare Information from Plans (2015–2024) (Percent)

Please indicate whether you or anyone in your household has received each of the following regarding TennCare	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
An enrollment card	69	67	71	67	69	59	62	61	59	73
Information on filing appeals	82	76	76	74	70	64	66	66	67	75
A list of rights and responsibilities	85	81	82	79	75	72	74	74	76	78
Name of MCO to whom assigned	84	81	81	75	76	71	72	73	77	82

Results about preferred communication remained stable between this year and last. Mail remains the most popular way to reach TennCare households at 59 percent. Web-based methods gained some popularity that mail lost this year, with 25 percent saying they prefer getting information via email or website in 2024 (Table 16).

TABLE 16: Best Way to Get Information about TennCare (2015–2024) (Percent)

	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Mail	78	78	72	73	64	64	62	62	63	59
Doctor	4	5	6	3	6	5	7	5	5	5
Phone	8	4	5	4	4	6	6	6	5	5
Handbook	3	2	4	4	4	2	2	3	2	2
Drug Store	<1	<1	<1	<1	<1	1	1	<1	<1	<1
Friends	<1	<1	<1	<1	<1	2	3	1	1	1
TV	<1	<1	<1	<1	1	1	<1	1	<1	1
Paper	0	<1	<1	<1	<1	<1	<1	<1	<1	0
Email		5	5	7	10	12	13	14	14	18
Website		4	4	6	7	5	4	6	7	7
Other	6	<1	<1	1	2	2	1	1	1	1

In the past 12 months, 14 percent of TennCare households used a non-emergency care provider that did not participate in their plan (up from 12 percent in 2023). Of that 14 percent, nearly two-thirds did so between one and two times. (Figure 2). Among those TennCare households using non-participating providers, the most common types of care sought remain general medical care, followed by dental care and eye care. (Table 17 and Figure 3).

FIGURE 2: Number of Times Sought Non-Emergency Care at a Non-Participating Provider in Past 12 Months (Percent)

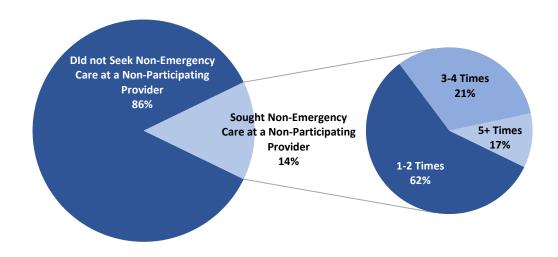


TABLE 17: Type of Non-Emergency Care Sought from a Non-TennCare Provider (2023-2024) (Percent)

	2023	2024
General Medical Care	55	72
Dental Care	50	65
Eye Care	37	49
Non-Surgical Specialist	28	37
Surgical Specialist	19	26
Not Sure	5	5

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

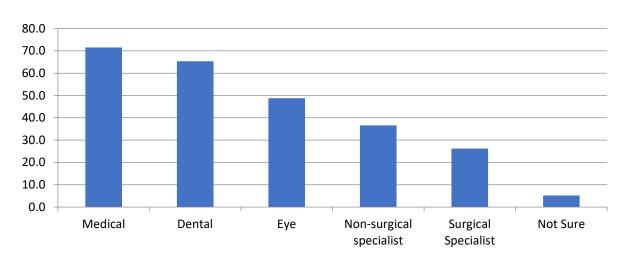


FIGURE 3: Type of Non-Emergency Care Sought from a Non-TennCare Provider (2024)

Approximately 6 percent of all TennCare households who sought care from a non-TennCare provider did so because the service was not covered under TennCare, 3 percent because there was not a TennCare provider in the area, and 3 percent mistakenly made an appointment with a provider that did not accept TennCare. Only 1 percent sought alternative care because they were dissatisfied with the quality of service from the TennCare provider (Table 18). More than half of the respondents (55 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 (2024) (Percent of TennCare Recipients)

	2024
Dissatisfaction with quality of service from TennCare provider	1
Service was not covered by TennCare	6
No TennCare provider in the area	3
Could not get timely appointment with TennCare provider	3
When I made the appointment or received care, I mistakenly thought the provider participated in my TennCare health care plan	3

Conclusion

Overall, the uninsured population is very similar to 2023, but there is no exact comparison available due to a change in methodology. The rate of uninsured Tennesseans falls within a range of 7.6 percent (539,332 people) and 9.6 percent (680,437 people) in 2024, which is close to 2023's estimate of 7.7 percent (541,900 people). The proportion of uninsured adults (8.8 percent to 11 percent) also falls in line with 2023's estimate (9.1 percent), while the proportion of uninsured children increased slightly from 2.5 percent (39,001 children) in 2023 to somewhere between 3.2 percent (50,170 children) and 4.4 percent (68,984 children) in 2024.

Affordability continues to be the major reason for not having insurance, cited by approximately 80 percent of respondents across all income categories.

About 74 percent of TennCare heads of households reported that quality of care was excellent or good, and 85 percent of TennCare households reported excellent or good quality of care for their children.

For those covered by TennCare, 91 percent of heads of households and 94 percent of their children first sought medical care at a doctor's office or clinic versus a hospital. Only 14 percent of TennCare families reported needing to use non-emergency care providers that do not participate in their plan, primarily because the service was not provided by TennCare.

Ninety-six percent of TennCare households report they are very or somewhat satisfied with the program overall—the highest level of satisfaction reported since the TennCare survey began in 1993. This positive feedback is a strong indication that TennCare provides satisfactory medical care and meets the expectations of those it serves.