

# PARTNERS

BlueCare Tennessee Managed Long-Term Services and Supports Program

News and tips to support MLTSS partners and enhanced care for our members

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## Submit Home Health Critical Incidents



It's essential to submit all Home Health Critical Incidents (HHCI) to the BlueCare Tennessee Quality of Care Oversight (QOC) department. This meets contractual requirements and helps ensure member safety. HHCI must be reported to QOC as soon as possible.

HHCI include any significant events that occur during home health services involving all BlueCare Tennessee members, including CHOICES and non-CHOICES members.

### Types of incidents include:

- Unexpected death, regardless of whether the death occurs during home health services
- Major/severe injury
- Safety issues
- Suspected physical, mental or sexual abuse
- Neglect
- Life-threatening medical emergency
- Medication error
- Financial exploitation
- Theft

The HHCI form is available online at: <https://bluecare.bcbst.com/forms/Provider%20Forms/HHCI-Form.pdf>.

Email the completed form to [BlueCareQOC@bcbst.com](mailto:BlueCareQOC@bcbst.com) or fax it to **1-855-339-3022**.

## Reminder About Recent Changes for Dual-Eligible Members

As of Jan. 1, 2026, the Centers for Medicare and Medicaid Services and the Division of TennCare have expanded the Fully Integrated Dual Eligible Special Needs Plans (FIDE SNP) model to improve care for people who qualify for both Medicare and Medicaid.

Our members with BlueCare<sup>SM</sup> Medicaid and a BlueCare Plus Tennessee Dual Eligible Special Needs Plan are now in either the BlueCare Plus (HMO D-SNP)<sup>SM</sup> or BlueCare Plus Choice (HMO D-SNP)<sup>SM</sup> plan. This means we manage Medicare and Medicaid services under one plan. Members have one Member ID card for all services. ID cards show the BlueCare Plus Tennessee plan name and policy number. Having one plan managed by one organization helps make navigating benefits easier and enhances care coordination.

Important reminders:

- New authorizations with updated Member ID numbers took effect Jan. 1, 2026. These authorizations will keep their original end dates as stated in the member's Person-Centered Support Plan.
- Claims need to match the correct Member ID number.
- If you use Electronic Visit Verification, you'll need to create new schedules based on the new authorizations, if you haven't already done so.
- If you submit claims through Availity®, you'll need to submit claims with the new authorization and Member ID.

If you have any questions about these changes, please contact us. You can reach LTSS Provider Relations by email at [CHOICESProviderRelations@bcbst.com](mailto:CHOICESProviderRelations@bcbst.com) or by calling your assigned Provider Network Manager. You can also reach the Provider Inquiry Specialist Team by email at [ProviderAuthIssues@bcbst.com](mailto:ProviderAuthIssues@bcbst.com) or by calling **1-888-747-8955 (option 2)**.



## Provider Agencies Can Now Hire Family Caregivers

Due to the passage of Public Chapter 182 of 2025, provider agencies can now hire family members and household members as paid caregivers for eligible individuals receiving home and community-based services (HCBS) and certain Medicaid services. This change took effect in July 2025.

Under the new rules, provider agencies can hire these family members to deliver HCBS across all Long-Term Services and Supports (LTSS) waiver programs, including CHOICES, Employment and Community First (ECF) CHOICES, Katie Beckett Part A and the 1915(c) waivers.

After they meet standard qualifications (licensure, background checks and training), family caregivers can also provide Medicaid services like:

- Private Duty Nursing
- Home Health Aid
- Home Health Nursing

TennCare used to allow family members to provide HCBS with some restrictions. A rule under Public Chapter 621 of 2024 removes those limits. Family caregivers can now provide all HCBS waiver services. TennCare is also proposing similar flexibility for Medicaid nursing and aid services. These updates aim to give provider agencies greater opportunity to hire qualified family caregivers while complying with program standards. However, there are some important exceptions.

Exceptions:

- Conservators and court-appointed legal guardians can't be employed as family caregivers unless explicitly permitted by the guardianship order. However, parents of minor children are eligible without court approval.
- Agencies must follow standard employment practices (timekeeping and recordkeeping) and can't impose additional restrictions based on family relationships, residence, age or waiver program enrollment.
- Compensation is limited to the amount authorized in the individual's person-centered plan.

This guidance doesn't apply to consumer-directed HCBS services, where members act as employers for their own caregivers. Those interested in consumer direction should contact their BlueCare Tennessee Coordinator for more information.

For additional questions, please contact us at [CHOICESProviderRelations@bcbst.com](mailto:CHOICESProviderRelations@bcbst.com).

# Quality Corner: Helping Members with Medication Compliance

Taking medication as it's prescribed can be challenging for many people. But we're here to help members stay on top of their medication.

In 2024, the CDC reported one in three adults in Tennessee has a functional disability and takes at least one prescribed medication. Recent statistics from America's Health Rankings also estimate 16.1% of adults in Tennessee have three or more chronic conditions.

These disabilities and conditions can often make taking medication more difficult. Issues include unclear instructions, changes to regular medication routines, visual changes, forgetfulness, complicated medication schedules and changes in caregiver support. Adults with intellectual and developmental disabilities (I/DD) often have complex medication regimens and multiple prescriptions, which can lead to confusion.

Here are some things you can do to help improve medication adherence:

- **Ask members to review medications with their providers during medical appointments.** They can ask if any medications can be reduced (taken once a day instead of twice or three times a day) or changed to a different form (liquid instead of pill for those who have trouble swallowing).
- **If a medication looks different, members can contact their pharmacist to make sure it's the right one.** With different manufacturers, medications can be different colors, shapes or flavors. This can cause confusion and even be upsetting for those with I/DD.
- **Explore assistive technology opportunities for members.** Options include medication packs with clear, easy-to-read labels with larger print or pictures, and electronic reminders on phones or tablets. Members can contact their Support Coordinator or Care Manager to learn more about assistive technology options.
- **Encourage members to talk to their doctors if they're having issues taking their medication.** If the directions don't clearly explain how to take the medication, encourage members to talk to their doctor or pharmacist about it. There may be a different medication that's easier to administer, and pharmacists can explain directions to help them be easier to follow.

Our members with disabilities can experience unique medication challenges. Communication, education and collaboration with caregivers and providers can help decrease these issues.

## Resources

- [americashealthrankings.org/explore/measures/CHC/TN](https://americashealthrankings.org/explore/measures/CHC/TN)
- <https://www.cdc.gov/nchs/data/nhsr/nhsr209.pdf>
- <https://www.cdc.gov/dhds/impacts/index.html#Disability%20Impacts>
- <https://www.cdc.gov/dhds/impacts/index.html#Disability%20Impacts>
- <https://nchsdata.cdc.gov/DQS/?topic=prescription-medication-use-among-adults&group=functioning-difficulties-status&subgroup=&range=2023-to-2024&subtopic=&estimate=>
- <https://pmc.ncbi.nlm.nih.gov/articles/PMC7237632/#s3>
- <https://pmc.ncbi.nlm.nih.gov/articles/PMC7207012/>
- <https://www.hopkinsmedicine.org/health/wellness-and-prevention/help-for-managing-multiple-medications>
- <https://pmc.ncbi.nlm.nih.gov/articles/PMC8309154/>
- <https://onlinelibrary.wiley.com/doi/full/10.1111/jar.70059?msocid=3ba53e7e8ab86e7f32a028ac8bee6f66>



## Provider Spotlight: HandiAccess, Inc. – Innovating for Independence

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It can be life changing when creativity meets compassion. ECF CHOICES provider HandiAccess recently helped a member achieve greater independence and safety at home.

One of our members worked with a support coordinator to address a unique challenge. The member's automated Hoyer lift was too wide to fit through the door for shower access.

Rather than simply widening the door, HandiAccess designed and created a **custom cased opening**, ensuring the lift could move freely. This also respected the family's preference not to install a traditional door. By listening to the family's needs and prioritizing safety, they enabled our member to enjoy a comfortable, independent life at home.

The family expressed their appreciation for the provider's professionalism and ingenuity. HandiAccess exemplifies what it means to be a partner in care—transforming challenges into opportunities for independence and dignity.

## BlueCare Tennessee Highlights SHIFT During 2025 West Region 4th Quarter Provider Presentation

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Technology First SHIFT presented during the BlueCare Tennessee 2025 West Region 4th Quarter provider presentation. SHIFT is a nationally recognized leader in advancing Technology First standards and best practices. They deliver comprehensive education, accreditation and practical tools that help agencies transform how they provide services.

SHIFT believes that technology and technology-enhanced support models should be considered early in the person-centered planning process. And they encourage long-term support professionals to explore how technology can meaningfully enhance the lives of the people they serve.

Providers received an in-depth overview of SHIFT's mission, services and the valuable support it offers to organizations and direct support professionals. SHIFT shared information on training opportunities, professional certifications and scholarship programs designed to strengthen employee career development. Through their accreditation and educational programs, SHIFT aims to help state agencies, provider organizations and other partners make the shift toward Technology First. To view the presentation, please email Christian Ceccotti, BlueCare Workforce Development Manager, at [Christian\\_Ceccotti@bcbst.com](mailto:Christian_Ceccotti@bcbst.com).

## Responding to Requests for Informational Findings: What Providers Need to Know

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A formal action plan isn't required when a Reportable Event Management investigation is unsubstantiated to address informational findings promptly.

The Department of Disability and Aging (DDA) and/or BlueCare Tennessee may request follow-up actions for unsubstantiated findings, including issues like late reporting. We know you may have already taken steps to address these findings. For quality assurance, we'll request an update on the actions taken for each noted item.

### Response Options:

- A brief email outlining actions taken, OR
- Supporting documents (e.g., updated policies, training records, disciplinary actions), OR
- Provider Reportable Event Review Team minutes showing resolution of findings

**Reminder:** You must respond to each individual informational finding. This ensures all noted concerns are addressed thoroughly and tracked appropriately.

### Purpose of the Request:

- To document and track provider efforts
- To ensure quality care and reduce future risks
- To support collaboration and reporting across DDA, TennCare and other stakeholders

# The Value of Part-Time Direct Support Professional Roles for Tennessee College Students

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College students across Tennessee are navigating class schedules, internships and extracurriculars. In addition to managing these responsibilities, they're also looking for flexible job opportunities that offer income and meaningful experience.

Part-time positions as Direct Support Professionals (DSPs) can be a great start. DSPs provide essential assistance to individuals with disabilities, helping them with daily living activities and making everyday life easier. These positions offer a blend of professional development and competitive pay. And many students enjoy their job duties.

DSP roles are known for their flexible schedules. Many organizations offer evening, weekend and hybrid shifts. This lets students stay on top of their coursework while also building industry experience. DSP roles also equip students with transferable skills they can use in the workforce. Students gain empathy, communication skills, problem-solving abilities, teamwork skills and adaptability. These skills are highly valued in many career paths, including nursing, social work, psychology, education and other human services careers.

Many positions pay well above minimum wage. And they offer premium rates for weekend or holiday shifts.

Many students find being a DSP is meaningful well beyond professional development and pay. In this role, they help people with disabilities build greater independence and become more involved in their communities. Their work creates a direct and positive impact in people's lives. This experience adds purpose to their college experience and can lead to a future in a service-oriented career.

For students seeking flexible and purpose-driven part-time roles, DSP positions are a great option.

## In-Home Respite

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In-Home Respite (IHR) provides short-term care for members who are unable to care for themselves when their unpaid support person needs relief. These services are available for CHOICES Members in Groups 2 and 3, and ECF CHOICES members in Groups 4, 5, 6 and 7.

Respite can be provided in the member's home or in the community, and it's intended for members who need care when their unpaid support person is busy or needs a break.

It's appropriate on a scheduled, short-term basis.

### Important Guidelines

- IHR is only available to members living with unpaid caregivers or those living independently and receiving routine support from unpaid caregivers that need relief from that support.
- This service isn't available for members living in a Community-Based Residential Alternative or receiving Short-Term Stabilization Services.
- Providers are responsible for tracking and billing IHR units within the calendar year.

### Benefit Limits

- 216 hours per calendar year (January to December)
- Service units reset in January each year

### Provider Action Steps

#### To provide IHR:

- Review credentialed and contracted services to ensure readiness to support members upon approval.
- Update internal processes and documentation to reflect this benefit.
- Clearly identify staff names and titles/roles in monthly reporting (DSP and/or BSS) and document member hours supported.
- Ensure DSPs receive training on personal care and support planning.

If you have any questions, please email us at [ChoicesProviderRelations@bcbst.com](mailto:ChoicesProviderRelations@bcbst.com).

# Common Claim Denial Reasons and How to Prevent Them

It's important to address claim denials when improving accuracy, reimbursement timelines and the compliance process. We've analyzed recent claim submissions and identified the most frequent denial reasons to help you avoid them.

## Top Denial Reasons and Percentages

- Claim doesn't meet the timely filing requirements – 33.27%
- Provider Medicaid ID is inactive on the date of service – 28.44%
- No approved authorization for service billed – 15.92%
- Duplicate claim – 12.88%
- Invalid procedure code/revenue code for provider – 4.80%
- Missing or invalid occurrence code – 4.65%

We gathered these percentages from all claim denials.

## What You Can Do

To reduce the number of denials:

- Verify claim details before submitting. This includes making sure all codes, authorizations and provider IDs are correct.
- Monitor filing deadlines. It's important to submit claims on time to avoid filing denials.
- Check your enrollment status. Confirm your Medicaid ID is active for the date of service.
- Avoid duplicate submissions. Make sure you review your claim history before resubmitting.

Sharing this feedback with your billing agencies is also important. Accurate claims reduce administrative burden and improve payment turnaround.

# Start 2026 with a Strong Workforce Development Strategy

As we move further into 2026, our Workforce Development Team is here to help you build a stronger and more sustainable workforce strategy for your agency.

With other Managed Care Organizations (MCOs), we've developed a new tool called the Provider Profile. It helps us learn more about your agency and allows us to explore important workforce topics, like recruitment, retention, recognition, onboarding and training, in more detail.

## How we can help

Using this tool, we'll review what your agency has already implemented, explore new strategies and identify innovative ideas tailored to your needs. Then we'll work together to find ways to maximize your agency's strengths and identify areas of improvement. Based on that info, we'll create a customized strategy to help your agency succeed.

Our Workforce Development Team works with many agencies across the state. That allows us to gather valuable insights and creative ideas that may help your agency as you plan for the year ahead. If your agency completed the annual Tennessee LTSS Workforce Quality Improvement Survey this year, our team can also help you use that data to update your workforce strategy for 2026.

Once you complete your Provider Profile, we'll schedule workforce consultations on a schedule that works best for you, whether that's weekly, monthly or quarterly. These sessions provide ongoing support, resources, connections and recommendations to help you implement the strategies we identify during the profile process.

## Ready to get started?

We're here to help as you strengthen your workforce. If you're ready to complete your Provider Profile and start building your strategy, please email Christian Ceccotti, BlueCare Workforce Development Manager, at [Christian\\_Ceccotti@bcbst.com](mailto:Christian_Ceccotti@bcbst.com) to be connected with the Workforce Development Specialist for your region.



## Reportable Events and Interventions

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Your compassion while serving our members is invaluable to their experience, but so are your observations. Reportable Event Management (REM) is one important component of an overall approach for ensuring the health, safety, individual freedom and quality of life of members receiving home- and community-based services and intermediate care facilities for individuals with intellectual disabilities services. When members are at risk, you're required to Report It Now. When you report these issues, they can be addressed, which helps keep the members you serve safe. Documenting the risk also helps protect you if there's ever a question in the future.

[Click here](#) to learn more about Report It Now and who to contact for a Reportable Event.

## Committed to Service

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As your partner in serving our CHOICES and ECF CHOICES members, we're committed to providing you unmatched service and support. Stay current with the most current news and program guidance. Visit us at [bluecare.bcbst.com](http://bluecare.bcbst.com) to find resources, updates and the most recent version of the CHOICES newsletter.

### How Are We Doing?

As a valued BlueCare Tennessee provider, we welcome your feedback and want to hear from you. If you have questions and/or concerns about a process, or if there's an individual that you'd like to point out for good service, please email us at: [CHOICESProviderRelations@bcbst.com](mailto:CHOICESProviderRelations@bcbst.com). We look forward to hearing from you.



## Provider Network Manager and Workforce Development Contacts

Manager	Region	Phone	Email
Britney Douglas, Provider Relations Supervisor	Statewide	(615) 427-3782	<a href="mailto:britney_douglas@bcbst.com">britney_douglas@bcbst.com</a>
Phyllis White, Director, MLTSS	Middle	(615) 295-9680	<a href="mailto:phyllis_white@bcbst.com">phyllis_white@bcbst.com</a>
Recie Gunartt, Provider Network Manager	West	(901) 201-7786	<a href="mailto:recie_gunartt@bcbst.com">recie_gunartt@bcbst.com</a>
Marilyn Turner, Provider Network Manager	West	(901) 573-2607	<a href="mailto:marilyn_turner@bcbst.com">marilyn_turner@bcbst.com</a>
Tanya Glover, Provider Network Manager	Middle	(615) 393-9117	<a href="mailto:tanya_glover@bcbst.com">tanya_glover@bcbst.com</a>
Marea Sweeney, Provider Network Manager	Middle	(615) 946-3101	<a href="mailto:marea_sweeney@bcbst.com">marea_sweeney@bcbst.com</a>
Mark Watson, Provider Network Manager	Middle	(615) 598-2816	<a href="mailto:mark_watson@bcbst.com">mark_watson@bcbst.com</a>
Marquita Wilson, Provider Network Manager	Middle	(423) 413-5384	<a href="mailto:marquita_wilson@bcbst.com">marquita_wilson@bcbst.com</a>
Kevin Brooks, Provider Network Manager	East	(423) 290-8768	<a href="mailto:kevin_brooks@bcbst.com">kevin_brooks@bcbst.com</a>
Rainey Johnson, Provider Network Manager	East	(865) 712-5980	<a href="mailto:rainey_johnson@bcbst.com">rainey_johnson@bcbst.com</a>
Robert Dugger, Provider Network Manager	East	(865) 617-2980	<a href="mailto:robert_dugger@bcbst.com">robert_dugger@bcbst.com</a>
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Tonya Starks, Workforce Development Specialist	West	(901) 713-9602	<a href="mailto:tonya_starks@bcbst.com">tonya_starks@bcbst.com</a>
Kylie Hennie, Workforce Development Specialist	Middle	(615) 924-3424	<a href="mailto:kylie_hennie@bcbst.com">kylie_hennie@bcbst.com</a>
Patrick Hampton, Workforce Development Specialist	East	(423) 509-3791	<a href="mailto:patrick_hampton@bcbst.com">patrick_hampton@bcbst.com</a>
Brittney Cook, Claims Liaison	East	(423) 637-0734	<a href="mailto:brittney_cook@bcbst.com">brittney_cook@bcbst.com</a>
Nichole Phillips-Brock, Employment Services & Supports Specialist	Statewide	(615) 651-9076	<a href="mailto:nichole_phillips@bcbst.com">nichole_phillips@bcbst.com</a>
Aimee Rogers, Employment Services & Supports Specialist	Statewide	(423) 362-2562	<a href="mailto:aimee_rogers@bcbst.com">aimee_rogers@bcbst.com</a>
Kathryn Walters, Technology Champion	Statewide	(865) 340-1363	<a href="mailto:kathryn_walters@bcbst.com">kathryn_walters@bcbst.com</a>
Evy Boyer, Housing and Transition Manager	Statewide	(615) 218-2642	<a href="mailto:evelyn_boyer@bcbst.com">evelyn_boyer@bcbst.com</a>

## Where to Turn for Help

Your Service Need	Operational Area	Contact
Eligibility Services, Claims, Inquiries	BlueCare Provider Services/ Eligibility Service Line	1-888-747-8955
General Contracting/ Credentialing Questions	Provider Network Services/ Credentialing	1-800-924-7141, ext. 5775 (Provider Network Services) 1-800-357-0395 (Credentialing)
Member Related Questions/Supports, Member Emergencies (After Hours/Weekends Only) During Regular Hours Contact Coordinator Directly	Support/Care Coordination	1-800-262-2873
Sandata/EVV Tech Support	Sandata Client Relations (EVV)	1-855-389-4843
Availity Claim Submission Tech Support	Availity	1-800-282-4548
CHOICES Web Portal Claims Tech Support	e-Business	(423) 535-5717, select option 2
Provider Education, General Provider Support, Assistance with Contracting/Credentialing	CHOICES/ECF Provider Relations	<a href="mailto:CHOICESProviderRelations@bcbst.com">CHOICESProviderRelations@bcbst.com</a>
Authorizations Support, General Billing – Release of Units	Provider Inquiry Specialist Team	<a href="mailto:ProviderAuthIssues@bcbst.com">ProviderAuthIssues@bcbst.com</a> OR call 1-888-747-8955, select option 2
Change of Ownership Notifications, Questions/Concerns	Provider Relations	<a href="mailto:Provider_CHOW@bcbst.com">Provider_CHOW@bcbst.com</a>
EVV Exceptions	Provider Specialist Team	<a href="mailto:EVV_Exceptions@bcbst.com">EVV_Exceptions@bcbst.com</a>