“When you’re explaining benefits or going over a claim, that personal interaction is so much easier to understand than just getting a piece of paper in the mail.”

Nikki White | Consumer Expert

Here For a Personal Connection

In her role as a consumer expert, Nikki White provides customer service for BlueCross BlueShield of Tennessee® members and providers who have questions or concerns about their dental plans, benefits and claims.

“I live to help, especially when it comes to helping someone resolve an issue,” Nikki says. “When members call our team, they’re dealing with an actual live person. And they often can’t believe how much we’re able to do for them, including placing calls to doctors’ offices on their behalf.”

Nikki comes to her passion for helping others – and dental plan members specifically – naturally. Her mom was a dental assistant for years when Nikki was growing up, and Nikki is a registered dental assistant herself.

“My mom did the fillings in my mouth – they’re holding on strong,” Nikki says, laughing. “If one of my kids starts complaining about a toothache, we’re both like, ‘Open your mouth, let me see!’

“So when I had the opportunity to come to BlueCross and be involved with dentistry while helping others, it was the best of both worlds.”
Right Here to Serve You

Ask any of our BlueCross customer service experts how they approach their daily contact with plan members. Then get ready for some lively responses.

Because you won’t hear talk about the volume. Or the complexity. Or the combined pressure perhaps both can create.

You’ll hear about people…and family. About meeting members’ emotional needs as well as health care needs.

“I give them the help I would want for my family.”
“I want to go out of my way to solve their worry.”
“We helped her go from stressed to calm.”
“I take every call personally.”

It’s easy to take things personally at BlueCross, because we have a personal connection to our customers and members. You’re our friends, neighbors and community members. We’re right here beside you, wherever you are.

In small towns and large cities across Tennessee, it’s being here – where you are – that matters.

And it’s being right here to serve you that matters most of all.
Our BlueCross Culture of Service

As the state’s largest health insurer, BlueCross BlueShield of Tennessee is in a unique position to be an advocate for our members, ensuring they have access to quality care, and supporting and empowering them to lead healthier lives. And at the heart of our work is service.

We serve members’ clinical care needs. With nearly 900 nurses on staff, the majority work directly with our members to ensure they get the right care at the right time – focusing on prevention and disease management to improve their health and well-being.

We serve quality of life needs. Our nurses frequently take unexpected steps to make it easier for our members to get well or stay well – making calls to ensure medical appointments are kept and medications are taken. Our nurses even coordinate with social agencies to help with food, household supplies and utility bills for members in need.

We serve the State of Tennessee and Tennessee employers with quality-centered, cost-effective health plans and wellness services to better the lives of the state’s residents and millions of Tennessee workers. Likewise, we serve our neighborhoods and communities through our charitable giving – which grew to more than $10.7 million in 2017.

And with six locations across the state, and more than 6,000 employees, we serve Tennessee itself with an ongoing economic impact of $1.6 billion each year.

We know that first and foremost, health insurance provides peace of mind – protection when it’s needed most for unexpected, unforeseen medical costs. But our mission of better health, reflected in our recognized culture of service at BlueCross, provides much more.
Our Commitment To Tennessee

More than 6,000 Employees
More than 70 years Expertise
3.5 Million Members
11K Employer Groups
☆☆☆☆☆ 4-STAR QUALITY
6 Local Offices and Service Centers
$10.7 million in community giving

We serve with an annual economic impact of $1.6 billion
First In Nation For NCQA LTSS Distinction

2017 J.D. POWER
Highest Member Satisfaction among Commercial Health Plans in the East South Central Region

BlueCross BlueShield of Tennessee received the highest numerical score among 7 commercial health plans in the East South Central region in the J.D. Power 2017 Member Health Plan Study, based on 33,624 total responses, measuring experiences and perceptions of members surveyed January 2017 – March 2017. Your experiences may vary. Visit jdpower.com
Great Job, Amber! Thanks for treating our members like family.

Kimberly Fryar

More than 250 Calls each week, each customer service person

“When I know a member is having an urgent issue, I like to do all the legwork for them. Knowing how grateful they are at the end of the day makes the extra steps worth it.”

Amber Nunez-Carthorn | Consumer Advisor

Here For Exceptional Service

At peak points during the year, each BlueCross customer service person may answer as many as 250 calls a week, helping 50 or more members with their benefits each day. And the goal is to make sure everything is answered the first time a member calls.

So every time consumer advisor Amber Nunez-Carthorn picks up the phone and connects with a member, she does her best to treat members the way that she would want someone to treat her. That proved especially true when she answered the call of a member in immediate need of medication following outpatient surgery.

The member was new to BlueCross – so new that she hadn’t received her ID card yet. She had just had a medical procedure that morning and needed to get a prescription filled quickly, but wasn’t able to do so at the pharmacy.

Amber kept her on the line while she called other BlueCross teams and the pharmacy. When she learned the member had not yet been entered into the pharmacy’s system, Amber made sure that the information was updated and that the prescription was immediately filled.

Before ending the call, Amber ensured that the member had everything she needed – including exceptional service from BlueCross.
Here To Tackle Tough Issues

Tennessee ranks second in opioid prescribing nationally, creating a public health crisis in our state, with more than 1,400 Tennesseans dying of overdose each year and more than 1,000 babies born each year addicted to drugs.

BlueCross has made a commitment to play a significant role in the fight against opioid abuse in Tennessee, taking steps such as setting quantity limits and prior authorizations on opioid prescriptions, and supporting provider education and community intervention.

In 2017, BlueCross representatives presented these changes and other recommendations to the Tennessee Senate Commerce & Labor Committee. The committee was shown scorecards many providers receive that show how their opioid prescribing practices line up with national standards and network peers.

Tackling this issue is also a focus of the Count It! Lock It! Drop It! program, that works to raise awareness about keeping drugs – especially opioid pain medication – out of abusers’ hands, and knowing where to dispose of any drugs that can be abused or misused.

A $1.3 million grant from the BlueCross BlueShield of Tennessee Health Foundation expanded the program’s training and outreach efforts to 63 counties and helped establish prescription drop boxes in all of Tennessee’s 95 counties.

In support of National Prescription Drug Take-Back Day in 2017, BlueCross helped set a new record, with Tennessee collecting 34 tons of prescription drugs in one day – an amount that far outpaced other states that have serious opioid abuse problems.

Pain medication is necessary to treat many conditions. But to address the state’s opioid epidemic and help prevent the tragedy of opioid abuse and misuse, BlueCross continues to take steps to increase public awareness of the issue, and undertake clinical efforts to help address the high rate of opioid prescriptions, addiction and deaths.
Here to Build Trust

BlueCross efforts to prevent the misuse of opioids can be a sensitive topic for some physicians, and provider relations teams make it a priority to address any concerns. When Joyce Banks, a Memphis-based network manager, was asked to contact a West Tennessee physician who publicly aired his issues on social media, she sprang into action to connect quickly and address the situation.

The physician was concerned because a member’s prior authorization request for pain medication had been denied, and he feared his patient would go into withdrawals. But Joyce immediately called the physician’s office and obtained the necessary information for a resolution. She was so effective in handling the situation, that the provider returned to social media a few hours later – this time, recanting his earlier frustration and expressing thanks for Joyce’s excellent service and support.

In the days that followed, Joyce stayed in constant contact with the practice and the pharmacy benefit manager until the issue was cleared up. Standard practice, she explains.

“Providers know they can count on me to get back with them. How you present yourself – how you listen and help resolve issues – matters. Building that foundation of excellence is critical in these relationships.”

Joyce Banks | Network Manager
Recognized For
Quality, Service
And Integrity

$14B Paid in Claims
$7.1B Paid to Hospitals
$5.1B Paid to Physicians
$1.8B Paid for Prescriptions

No. 1
Member Touchpoint Measures

Market Leader
Medicare Advantage

Recognized For
Workplace Culture

Lead2018 Award
Career Development

A Memphis
Top Workplace

 Won I4CP Award
(Along With Ford, Intel, Ingersoll Rand)

DiversityInc Top Company
Sustainability Community Champion Award
Inclusion By Design Award
Through more than 70 years as the state’s leading health insurer, BlueCross has always given back to the communities that have placed their trust in our products and services. In 2017, through the BlueCross BlueShield of Tennessee Health Foundation and Community Trust organization, BlueCross invested more than $10.7 million to support community organizations. Grants and awards were provided to support activities and programs ranging from direct provision of social services, to increasing access to quality care, to research for treatments of Tennessee infants for neonatal abstinence syndrome.

Included in the company’s annual giving tally are $9 million from the Health Foundation, $600,000 from the Community Trust, and $785,000 in corporate donations.

BlueCross is truly ‘of Tennessee,’ and committed to keeping families, neighborhoods and communities healthy and strong by making contributions to organizations that serve every corner of the state. Additional charitable activities and investments for 2017 included:

- $1.3 million to the Count It! Lock It! Drop It! campaign to reduce opioid misuse and abuse
- $500,000 to help fund the new Children’s Hospital Outpatient Center at Erlanger Hospital in Chattanooga
- $200,000 to the Public Education Foundation to support its STEP-UP Chattanooga internship program
- $200,000 to East Tennessee Children’s Hospital in Knoxville
- $200,000 to Dayspring Family Health Center in Jellico to fight neonatal abstinence syndrome
- $158,000 to the Clarksville Rotary Club for the construction of an accessible baseball field
- $75,000 to the American Red Cross for hurricane relief efforts
- $55,000 to the Mending Hearts Camp at the Orpheum Theatre in Memphis, which helps children grieving the loss of a parent
Here For Technology And Value

In 2017, BlueCare Tennessee®, a subsidiary of BlueCross BlueShield of Tennessee, introduced a new, HIPAA-compliant communications channel, a secure text messaging platform for members, providing supportive health plan messages and reminders for recommended screenings and medical appointments.

The new communications channel is easily accessible and intuitive — allowing members to have faster and easier access to their personal information and appointment schedules.

So far, more than 28 percent of BlueCare members have signed up to receive timely, relevant information via the platform.

One of the goals of the platform is to use targeted campaigns to reach younger BlueCare members, since teens and young adults can be a more difficult population to reach.

And the initial well care message campaign promoting a wellness screening resulted in 35 percent of the message recipients clicking through the link for more detailed information.

Though the service is currently exclusive to BlueCare members, its capabilities are being studied to expand its use to other lines to help all members better manage their health needs. And continue to deliver a direct line of communication through channels that members prefer.
Here To Drive Quality Care

For decades, insurers and patients alike have paid providers based on the quantity of health care services delivered. But today, quality counts. BlueCross pay-for-value efforts are supported in three distinct ways, and span every type of member served.

For clinical quality performance, physicians are incentivized to follow evidence-based guidelines for care, and rewarded for making sure preventive services and screenings are a priority in their daily work. Based on a variety of measures, such as adherence to diabetic screenings or recommended vaccinations, payments are raised or lowered based on comparisons to relevant benchmarks.

First, for clinical quality performance, physicians are incentivized to follow evidence-based guidelines for care, and rewarded for making sure preventive services and screenings are a priority in their daily work.

Next, the patient-centered medical home (PCMH) model of care applies a team approach to support people with chronic health conditions like diabetes or asthma. BlueCross-employed care coordinators work directly within some physicians’ offices, and physicians receive an additional monthly fee for increased engagement with patients who have chronic health needs.

"Partnerships with primary care providers and specialists in our Tennessee communities are making an impact on patient care. I am so proud of all of our PCMH care coordinators."

Nancy J. Muldowney | Clinical Operations Manager

The third type of pay-for-value program is a total cost of care arrangement. These programs are built on a foundation of clinical quality and integrated care. Providers who want to participate have to achieve 3- or 4-star quality ratings, but commit to go further. Physicians are empowered to drive value by delivering services more efficiently across a tightly integrated continuum of care while closely managing costs. BlueCross and the physician then share in any savings together.

The PCMH program at BlueCross is the largest in Tennessee, with 32 practices and 1,600 providers serving more than 350,000 BlueCross members. PCMH results show lower cost trends and higher quality scores when compared to non-PCMH practices.
Here To Promote Diversity

Results from an August 2017 survey by Forbes ranked BlueCross 33rd out of 250 organizations in its inaugural list of Best Employers for Diversity, placing BlueCross as the highest-ranked Tennessee-based company and the second-highest rated health insurer on the nationwide list.

The list positions BlueCross just above Google and as the fifth most-diverse insurer in America. Other recognizable names in the top 50 include Starbucks (26), Walt Disney (29), Johnson & Johnson (37), and PricewaterhouseCoopers (47).

Unlike some ranking programs, the Forbes list does not directly involve employers in surveying employees, but independently contacts more than 30,000 employees working for thousands of large U.S. companies and organizations and asks them to voluntarily evaluate their employers on issues of diversity in the workplace.

As a result, the company’s score was determined by four components:

- Direct recommendations: Statements by employees who rated their employer on diversity and inclusion in terms of gender, ethnicity, LGBTQ, age and disability.

- Public perception: Statements regarding employers – other than their own – who were recommended among surveyed minority groups.

- Percentage share: Percentage of women who fill top executive and board positions.

- Public information index: Publicly available diversity key performance indicators such as a department/position responsible for diversity and proactive communication of diversity in company culture.
At BlueCross, we’ve taken steps to ensure that our claims process runs smoothly, quickly, and with as little work for members as possible. Every month, BlueCross receives an average of 4.7 million claims on behalf of our 3.5 million members, and 84 percent of claims are processed electronically within one day.

About 98 percent of claims are received in electronic format, letting our automated claims system interpret the data and either process it immediately or mark it for further attention.

Around 99 percent of all claims BlueCross receives are processed within 30 days.

Though BlueCross takes steps to ensure claims are processed promptly, no two claims are exactly alike, and at times there can be hiccups. Delayed claims are usually resolved quickly, but there are instances where a claim can be denied. Common reasons include a claim for non-covered services, instances where prior authorization is required, or transcription errors or missing information that needs attention.

A claim isn’t often denied. But when that happens, BlueCross works closely with the member to investigate the issue through the grievance process.

While advances in technology have made the claims process smooth and efficient for members, there’s also a time and place to get people actively involved and carefully considering the unexpected factors and scenarios that arise and directly affect members’ lives. In essence, BlueCross provides a hands-on team in place and ready to resolve issues on a member’s behalf.
Meet Our Leaders

Generations of strong leadership, and seven decades of service to Tennesseans and the state, have made BlueCross BlueShield of Tennessee the insurer of choice for thousands of Tennessee businesses. Today, industry-recognized men and women provide leadership and expertise to support the company’s long-standing commitment to service, quality, innovation and value.

JD Hickey, M.D.
President & CEO

Scott Pierce
Executive Vice President and Chief Operating Officer

John Giblin
Executive Vice President and Chief Financial Officer

Anne Hance
Senior Vice President, General Counsel, and Chief Privacy Officer

Andrea Willis, M.D.
Senior Vice President and Chief Medical Officer

Karen Ward
Senior Vice President and Chief Human Resources Officer

Roy Vaughn
Senior Vice President and Chief Communications Officer

Dakasha Winton
Senior Vice President and Chief Government Relations Officer

Ron Harris
Senior Vice President, Diversity and Inclusion

Board of Directors

Marty G. Dickens, Chairman of the Board
Retired Executive
AT&T – Tennessee

Lamar J. Partridge
Vice Chairman
Retired Executive
Valley Capital Corporation

JD Hickey, M.D., CEO
BlueCross BlueShield of Tennessee

Bruce Bosse
Merit Construction, Inc.

Miles Burdine
Kingsport Chamber of Commerce

Reginald W. Coopwood, M.D.
Regional One Health

Herbert H. Hilliard
Retired Executive
First Tennessee Bank

James B. Baker
River Associates Investments, LLC

Jack B. McCallie, M.D.
Ridgeway Internal Medicine

James M. Phillips
Covenant Ventures

Emily J. Reynolds
Former Secretary of U.S. Senate

Lottie Ryans
First Tennessee Development District

Martha S. Wallen
Pinnacle Financial Partners
Our Family of Companies

BlueCross BlueShield of Tennessee works to improve the health of our customers and communities with innovative products and services that provide access to cost-effective, quality-based care.

Through our subsidiaries and affiliates, we provide a comprehensive range of group and individual health plan products, ancillary benefits, and health and wellness management services. Our health innovation initiatives, technology services, and charitable giving work together to improve the health of Tennesseans and drive health care system improvement. Our family of companies includes these subsidiaries and affiliates:

- Volunteer State Health Plan, Inc., doing business as BlueCare Tennessee, is a wholly owned subsidiary of BlueCross BlueShield of Tennessee. Founded in 1993 as Volunteer State Health Plan, the Chattanooga-based company focuses on managing care and providing quality health care products, services, and information for government programs. It was organized to participate, by contract with the State of Tennessee, as a managed care organization in the state’s TennCare program, and has remained a valuable partner for more than two decades, providing innovative and cost-effective plan services to the State of Tennessee, and vital health care access and quality care to the residents of Tennessee. BlueCare Tennessee is a licensed HMO subject to regulation by the Tennessee Department of Commerce and Insurance and is licensed with the BlueCross BlueShield Association.

- Onlife Health, Inc., is a national, personal health coaching company and industry leader in population health management, dedicated to positive living through effective engagement. Built on more than 15 years of scientific research and work, Onlife’s positive living programs are designed to foster highly personalized and sustained engagement. Through effective coaching that delivers real results, Onlife works to mitigate the rising cost of health care by encouraging the formation of healthy lifestyle behaviors, and providing case management for existing illnesses. The company combines a dedicated health coach, support communities, onsite events and the latest technologies to create an integrated, easy-to-use member experience. Onlife Health is a wholly owned subsidiary of BlueCross BlueShield of Tennessee.

- Shared Health, Inc., a wholly owned subsidiary of BlueChoice BlueShield of Tennessee, provides a portfolio of policies for specific and aggregate medical stop-loss coverage for the benefit of Tennessee businesses. It is licensed with the BlueCross BlueShield Association.

- SecurityCare of Tennessee, Inc., doing business as BlueRe of Tennessee, is a wholly owned subsidiary of BlueCross BlueShield of Tennessee. Golden Security offers a portfolio of policies for specific and aggregate medical stop-loss coverage for the benefit of Tennessee businesses. It is licensed with the BlueCross BlueShield Association.

- The BlueCross BlueShield of Tennessee Community Trust is a not-for-profit Tennessee corporation that allows BlueCross BlueShield of Tennessee to offer generous support to organizations and communities to help improve the social welfare of Tennesseans. Contribution dollars support Tennessee communities, emphasizing healthy living and quality of life. It is an affiliate of BlueCross BlueShield of Tennessee, licensed by the BlueCross BlueShield Association.
More About
BlueCross BlueShield of Tennessee

BlueCross BlueShield of Tennessee, Inc. is a not-for-profit corporation and the state’s trusted leader in providing health coverage and wellness solutions. BlueCross BlueShield of Tennessee is taxed and regulated in a manner similar to other commercial insurance companies.

Founded in 1945, the company and its subsidiaries and affiliates provide a comprehensive range of group and individual health insurance plans, benefit products, and health and wellness services to more than 3.4 million people and thousands of Tennessee businesses. BlueCross BlueShield of Tennessee is an independent organization governed by its own board of directors, and it is responsible for its own obligations.

In 2017, BlueCross BlueShield of Tennessee paid more than $13.9 billion in health care benefits on behalf of members, while employing more than 6,000 people. In 2017, the company achieved a net gain of $4272 million. For the same year, the company incurred more than $495 million in federal, state and local tax expenses, a decrease of $53.4 million from 2016.

BlueCross BlueShield of Tennessee owns and operates several subsidiaries, including Volunteer State Health Plan, Inc., doing business as BlueCare Tennessee, a licensed HMO; Onlife Health, Inc., a population health management company; Group Insurance Services, Inc., an insurance agency for ancillary and flexible benefit programs; Golden Security Insurance Company, Inc., offering policies for specific and aggregate stop-loss coverage, doing business as BlueRe of Tennessee; SecurityCare of Tennessee, doing business as BlueChoice Tennessee, a licensed HMO; Riverbend Government Benefits Administrator, Inc.; RiverTrust Solutions, Inc.;

Southern Diversified Business Services, Inc.; BeneVive, Inc.; and Shared Health, a Medicaid and long-term care services support company. BlueCare Tennessee, BlueRe of Tennessee and BlueChoice Tennessee are licensed with the BlueCross BlueShield Association.

BlueCross BlueShield of Tennessee operates two affiliates, the BlueCross BlueShield of Tennessee Health Foundation, a 501c(3) organization that promotes the philanthropic mission of the company; and the BlueCross BlueShield of Tennessee Community Trust, a 501c(4) organization with the purpose of improving the quality of health in Tennessee. They are independent licensees of the BlueCross BlueShield Association and offer certain products and services under the BlueCross and BlueShield names.