



To: TennCare MCOs and TennCare Providers
From: Johnny Lai, Director of Managed Care Operations Date: March 7, 2025
Subject: Update - TennCare Guidance for Telehealth Services

As updates to telehealth coverage, reimbursement, and coding practices evolve at the federal level, TennCare continuously partners with its managed care organizations (MCOs) to revise telehealth guidance for TennCare providers. Telehealth guidance for TennCare providers can be found within each MCO's reimbursement policy which is available online:

BlueCare: [BlueCare Policies](#)

UnitedHealthcare: [UnitedHealthcare Policies](#)

Note: For UnitedHealthcare Community Plan's Reimbursement Policies Terms and Conditions, you must select "Yes I Agree" and then type 'telehealth' into the field where you input search terms.

WellPoint: [WellPoint Policies](#)

Note: For WellPoint Tennessee's Reimbursement Policies, you must select the search/magnifying glass icon in the upper right corner of the webpage, then type 'telehealth' into the field where you input search terms.

As noted on the Centers for Medicare & Medicaid Services' (CMS) website under [State Telehealth Flexibilities](#), for most Medicaid benefits, federal Medicaid law and regulations do not specifically address telehealth delivery methods or the criteria for implementation of telehealth. As a result, states have broad flexibility in designing the parameters of telehealth delivery methods to furnish services. The underlying services must continue to meet the requirements of Tennessee statute and the overarching federal provisions in Title XIX of the Social Security Act (the Act), regulations, the federal policy framework of the covered Medicaid benefit, and the parameters of the state's CMS-approved Medicaid state plan or a subsequent state plan amendment (SPA). To access TennCare's memos regarding telehealth, please visit [TennCare Memos to MCOs/Providers](#). TennCare partners with its MCOs to ensure that there is alignment regarding telehealth guidance. Federal changes to telehealth coverage, reimbursement, and coding are reviewed by TennCare's MCOs and their Medical Directors, and a recommendation is shared with TennCare; TennCare will engage other stakeholders as needed and will provide feedback to TennCare's MCOs. TennCare's MCOs will share telehealth updates via revisions to the MCO's provider reimbursement policy.

The U.S. Department of Health and Human Services (HHS) has a webpage specific to [HHS telehealth guidance](#). CMS maintains distinct webpages for its guidance specific to [Medicare telehealth](#) and [Medicaid telehealth](#), and Health Resources and Services Administration (HRSA) has [HRSA telehealth guidance](#) specific to federally qualified health centers (FQHCs) and rural health clinics (RHCs).

If a TennCare provider has a question concerning telehealth guidance that is not addressed in the MCO's reimbursement policy, please share your question with the MCO. TennCare's MCOs will share your question with TennCare, and if needed, TennCare and its MCOs will revise the MCOs' telehealth guidance and release updates via each MCO's reimbursement policy.