

# PERSONNEL 3.0

## TennCare Impartiality Statement -- 3.16

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**Date Issued:** December 31, 1998

**Date Last**

**Revised:**

**Signature:**

**By:** Cathy R. Taylor, DrPH, MSN, RN  
Assistant Commissioner  
Bureau of Health Services

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### **POLICY**

All employees, including part-time, temporary, contractual, and volunteers, who are involved in the TennCare program in any manner are obligated to offer factual and impartial information when discussing TennCare managed care organizations (MCOs) and behavioral health organizations (BHOs) with TennCare recipients and potential enrollees.

### **APPLICABILITY**

This policy applies to Local Health Department, Regional and Central Office personnel.

### **PURPOSE**

To furnish accurate and unbiased information concerning TennCare MCOs and BHOs to the public.

### **PROCEDURE**

A TennCare Impartiality Statement must be signed by all employees who are involved in the TennCare program in any manner. The completed statement shall be filed in the employee's personnel file after the supervisor signs it.

### **NECESSARY FORM**

[TennCare Impartiality Statement](#)

### **OFFICE OF PRIMARY RESPONSIBILITY**

Human Resources Section, Bureau of Health Services, (615)741-7305