Tennessee Board for Licensing Health Care Facilities

Newsletter

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BOARD MEMBER APPOINTMENTS/REAPPOINTMENTS

The Board for Licensing Health Care Facilities had the following new appointment, Patsy E. Crihfield, registered nurse representative and the following re-appointments, Janet Williford, home health agency administrator representative, Patricia Ketterman, hospital operated nursing home administrator representative, and Roger Mynatt, nursing home industry representative at the October 3, 2018 Board meeting.

CURRENT COMPOSITION OF THE BOARD

The Board for Licensing Health Care Facilities is composed of the following members: René Saunders, MD, chairman; Roger Mynatt, nursing home industry representative; Patti Ketterman, hospital operated nursing home administrator representative; Carissa S. Lynch, Pharm.D., doctor of pharmacy representative; Thomas Gee, hospital administrator representative; Paul Boyd, consumer representative; Jennifer Gordon-Maloney, D.D.S., oral surgeon representative; Lisa Piercey, MD, hospital administrator representative; Patsy E. Crihfield, R.N., registered nurse representative; Robert Breeden, nursing home industry representative; Janet Williford, home health agency administrator representative; Chuck V. Griffin, architect representative; Joshua Crisp, RHA/assisted living representative; Evelyn J. Brock, D.O., osteopathic medicine representative; Sherry L. Robbins, MD, physician-medicine representative; Gina Thornberry, ambulatory surgical treatment center representative; Bobby Wood, consumer representative; Jim Shulman, Commission on Aging and Disability representative, ex officio. There is currently one vacancy of the Board’s representatives, physician-surgeon representative.

BOARD MEETING DATES

February 5th & 6th, 2019
June 5th & 6th, 2019
October 2nd & 3rd, 2019

All board meetings begin at 9:00 a.m., Central Time. Board meetings are held at the board's office and are open to the public. Dates are subject to change, but are listed on the board’s website. In the event of an electronic meeting, a conference room is made available to the public and is the location from which the electronic meeting is conducted.

BOARD STANDING COMMITTEES

The following standing committees of the Board met during the period from March 1, 2017 through August 31, 2017.

Performance Improvement Issues

April 17, 2018: The standing committee addressed two items at this meeting. The first item for discussion was final approval of Board Policy #81 unexpected loss of nursing home administrator. Board Policy #81 was approved for presentation to the Board. The last item for discussion was a request for CHOW denial presented at the February 2018 Board meeting. At the February meeting, many issues were raised regarding the CHOW process such as lender impact, new operators to the state, and TNCare’s issuance of Medicaid ID numbers. The committee approved changes to the CHOW application to include lessor/lessee transactions, lessee applicant approval to share licensing/compliance information with lessor, clean-up of the accreditation question, and change of the approval process to move CHOW applications forward without certification documentation for presentation to the Board. Full set of approved minutes may be found at: https://www.tn.gov/content/dam/tn/health/healthprofboards/minutes/hcf/HCF04172018-.
September 17, 2018:
There were three items before the standing committee on this date. The first item was discussion on an interpretation of hospital rule 1200-08-01-10, Infectious Waste and Hazardous Waste section. Members of the Communicable and Environmental Diseases and Emergency Preparedness section of the Department of Health presented at this meeting. The standing committee approved presented rule language by the Communicable and Environmental Diseases' representatives and the development of an interpretative guideline for said language for presentation to the Board. The second item was presentation of rule language revisions for professional support services agency facility type. The standing committee approved the recommended revisions for presentation to the Board. The final item was consideration for rule language for newly enacted public chapters 626, 655, 675, 722, and 1015. It was determined interpretative guidelines would be developed for all presented rule language. The standing committee approved the presented rule language and interpretative guidelines for presentation to the Board. Full set of approved minutes may be found at: https://www.tn.gov/content/dam/tn/health/healthprofboards/minutes/hcf/Public%20Notice_Agenda%20and%20Minutes-September%2017_2018.pdf.

Assisted Care Living Facility
April 18, 2018: There were four items before this standing committee on this date. The first item was to discuss the use of the term “physician” in the ACLF regulations. The issue centered around the role and use of nurse practitioners and physician assistants in the ACLF when the regulations call for a physician. The standing committee approved the development of an interpretative guideline for presentation to the Board. Also discussed was the use of sitters employed by ACLF residents and those sitters passing medication. The standing committee directed this item to remain on the agenda for future follow-up. The second item was to revisit the ACLF administrator training and testing requirements. This served as an update to the standing committee on previous work around this item. OGC is currently reviewing the rules and will have these before the Board for rulemaking hearing this year. The third item was a request by the department to change the renewal date for ACLF/RHA administrator certifications to the birth date of the applicant on a bi-annual timeframe. The standing committee approved this change for presentation to the Board. The final item was a report to the standing committee by Legacy Assisted Living and Memory Care. The standing committee took no action on this item. Full set of approved minutes may be found at: https://www.tn.gov/content/dam/tn/health/healthprofboards/minutes/hcf/HCF04182018Assisted%20Care%20Living%20Facility%20Standing%20Committee%20Meeting.pdf.

August 28, 2018: There were three items for discussion before this standing committee. The first item was to revisit the “physician” term use in the ACLF regulations. The standing committee worked on this item in April of this year and approved an interpretative guideline to be presented to the full Board. The Board moved the item back to the ACLF Standing Committee for further work. TNCal presented recommended language which was considered, reworked and approved for presentation to the Board. The motion also included approval for rulemaking on the language. The second item was presentation of rule language changes for approval. Language was presented for revisions to the Disaster Preparedness section of multiple facility rules. The standing committee approved the recommended rule changes for presentation to the Board. Other life safety rule language changes were presented regarding code references, chapter references, etc in the ACLF and RHA regulations. The standing committee approved the recommended rule changes for presentation to the Board. The final item was the presentation by the Board of Examiners for Nursing Home Administrators (BENHA) for a collaborative workgroup between the BENHA Board and the Health Care Facilities Board. Two ACLF Standing Committee members were requested to be a part of such workgroup. Joshua Crisp and Roger Mynatt were chosen. Ongoing work will be provided to both the BENHA and Health Care Facilities’ Board. Full set of approved minutes may be found at: https://www.tn.gov/content/dam/tn/health/healthprofboards/minutes/hcf/Public%20Notice_Agenda%20and%20Minutes-August%2028_2018.pdf.

Facilities Construction
May 7, 2018: There was one item before this standing committee on this date. This item was a waiver request by Southern Tennessee Regional Health System – Pulaski for the building code requiring a seclusion room for short-term occupancy. A representative was not present at this meeting. The standing committee denied the waiver request. Full set of approved minutes may be found at: https://www.tn.gov/content/dam/tn/health/healthprofboards/minutes/hcf/HCF05072018-Facilities%20Construction%20Standing%20Committee%20Meeting.pdf.

LICENSURE STATISTICS
The Board for Licensing Health Care Facilities has licensed the following number of health care facilities as of November 30, 2018:
- Hospitals: 124
- Nursing homes: 320
- Homes for the aged (RHA): 65
- Assisted care living facilities (ACLF): 310
- Adult care homes (ACH): 3
- Residential hospices: 6
- Birthing centers: 1
- Home health agencies: 146
- Ambulatory surgical treatment centers (ASTC): 145
- End stage renal dialysis clinics (ESRD): 194
- Home medical equipment providers (HME): 267
INACTIVE LICENSES

Milan Health Care Center, Milan – nursing home; a first extension of inactive status was granted on June 6, 2018 until June 2019. The facility’s license was first placed on inactive status June 7, 2017.

Nashville Metro Care and Rehabilitation Center, Nashville – nursing home; inactive status granted for two years until June 2020.

Associates of Memorial/Mission Outpatient Surgery Center, LLC, Chattanooga – ambulatory surgical treatment center; a third extension of the inactive status was granted for this facility’s license on June 6, 2018 until June 2019. The facility’s license was first placed on inactive status on May 6, 2015, an extension of the inactive status for this facility’s license was granted on May 4, 2016, and a second extension was granted on June 7, 2017.

Jackson Park Christian Home, Inc., Nashville – nursing home; a sixth extension for inactive status was granted on June 6, 2018 for 24 months to June 2020. The facility’s license was first placed on inactive status May 2, 2012, a first extension was granted on May 1, 2013, a second extension was granted on May 8, 2014, a third extension was granted on May 6, 2015, a fourth extension was granted on May 6, 2016, and a fifth extension was granted on June 7, 2017.

Siskin Hospital’s Subacute Rehabilitation Program, Chattanooga – nursing home; an extension of the inactive status was granted on June 6, 2018 until June 2019. The facility’s license first inactive status was granted June 7, 2017.

Baptist Trinity Home Care-Private Pay Division, Memphis – home health agency; inactive status granted June 6, 2018 until June 2019.

Christian Care Center of Bolivar fka Pleasant View Health Care Center, Bolivar – nursing home; an extension of the inactive status was granted on October 3, 2018 until October 2019. The facility’s license was first placed on inactive status October 4, 2017.

Hancock County Home Health and Hospice Agency, Sneedville – hospice agency; inactive status granted October 3, 2018 until October 2021.

Tennova Healthcare Hospice In-Patient Hospice House, Knoxville – residential hospice; an extension of the inactive status was granted on October 3, 2018 until October 2019. The facility’s license was first placed on inactive status October 4, 2017.

Pendleton House of Love, Memphis – home for the aged; an extension of the inactive status was granted on October 3, 2018 until June 30, 2019. The facility’s license was first placed on inactive status October 4, 2017.

Copper Basin Medical Center, Copperhill – hospital; an extension of the inactive status was granted on October 3, 2018 until October 2019. The facility’s license was first placed on inactive status October 4, 2017.

RATIFIED APPLICATIONS FOR June 2018

INITIALS

Assisted care living facilities:
1. BeeHive Homes of Powell, Powell
2. The Pinnacle on Schaeffer, Knoxville
3. The Reserve at Spring Hill, Spring Hill
4. The Village of Murfreesboro, Murfreesboro

Home medical equipment providers:
1. Breath of Life Medical, Lebanon
2. CHG Solutions, LLC; Chattanooga
3. Forward Healthcare, LLC; Lenoir City
4. Gordian Medical, Inc; Nashville
5. Jensen Little, LLC; Hendersonville
6. Neurotech NA, Inc; Nashville
7. The Jones Solution, LLC; Nashville
8. Trust Home Medical, LLC; Hendersonville
9. Medline Industries Holdings, LP; Memphis

Professional support services providers:
1. Healing Hearts, Inc.; Mt. Juliet
2. Mobility Rehab; Jamestown

End stage renal dialysis clinics:
1. Dialysis Care Center Tipton County, LLC; Covington
2. River Oaks Dialysis, Memphis
3. Vanderbilt Home Dialysis Clinic, Nashville

Outpatient diagnostic center:
1. Premier Radiology New Salem, Murfreesboro

Adult care home – level 2:
1. Kinser Cottage, Limestone

Ambulatory surgical treatment center:
1. Eye Surgery Center of Knoxville, LLC; Powell

CHANGES OF OWNERSHIP (CHOW)

Ambulatory surgical treatment center:
1. Wartburg Surgery Center, LLC; Wartburg

Home health agency:
1. Ascension at Home Saint Thomas, Nashville
Nursing homes:
1. MidSouth Health and Rehab, Memphis
2. Midtown Center for Health and Rehabilitation, LLC; Memphis

Home medical equipment providers:
1. DME Care, Nashville
2. Hospice Source, LLC; Chattanooga
3. National Searing & Mobility, Inc.; Chattanooga

Home for the aged facilities:
1. Loving Arms of Memphis, Inc.; Memphis
2. Patriot Hills Assisted Living, LLC; Oak Ridge

October 2018

Assisted care living facilities:
1. Autumn Care III, LLC; Farragut
2. Arcadia Senior Living Clarksville, Clarksville
3. Canterfield of Franklin, Brentwood
4. Maple Cottage Assisted Living, Hendersonville
5. Sycamore Place Alzheimer’s Special Care Center, Memphis
6. The Lantern at Morning Pointe of Franklin, Franklin

Nursing homes:
1. Douglas Health and Rehabilitation, Milan
2. Palmyra Health and Rehabilitation, Palmyra
3. Rainbow Rehabilitation and Healthcare Center, Bartlett
4. Towne Square Care of Puryear, Puryear
5. The Reserve at Spring Hill, Spring Hill
6. Stones River Manor, Inc; Murfreesboro

Ambulatory surgical treatment center:
1. Phoenix Ambulatory Surgery Center, LLC; Lebanon

End stage renal dialysis clinics:
1. Dialysis Clinic, Inc-Caryville; Caryville
2. Fresenius Kidney Care Parkwest Home, Knoxville
3. Lamar Crossing Dialysis, Memphis
4. Metro Center Dialysis, Nashville

Home for the aged:
1. Trinity Manor Suites, Gallatin

Home medical equipment providers:
1. Opry Medical Group, LLC; Nashville
2. Currie Medical Specialties, Inc.; Franklin
3. Integrated Ortho Services, Inc.; Nashville

Professional support services agencies:
1. Access MedStaffing Solutions Healthcare, LLC; Memphis
2. All Ways Therapies, LLC; Memphis
3. Hardin County Skills, Inc.; Savannah
4. Milestone Home Health Care, LLC; Nolensville
5. Speaking Life Healthcare, Memphis

CHANGES OF OWNERSHIP (CHOW)

Assisted care living facilities:
1. Avenir Memory Care at Knoxville, Knoxville
2. Hearthside Senior Living of Bartlett, Bartlett
3. Traditions of Spring Hill, Spring Hill

Nursing homes:
1. Magnolia Healthcare and Rehabilitation Center, Columbia
2. StoneRidge Health Care, LLC; Goodlettsville

CHANGE OF INFORMATION

Change in your contact information must be reported (in writing or by e-mail) to the board’s office within 30 days! Please include the following:

- Your name and license number;
- Your facility type;
- Your old address and phone number;
- Your new address and phone number, e-mail address, and/or your fax number;
- Your SIGNATURE!

Keeping the board’s administrative staff up to date on your facility’s location and other important information concerning the operation of your facility facilitates the timely notification to you of important information such as your application for licensure renewal and important statutory and rule changes. You may fax your change to the board’s administrative office at (615) 253-8798 or by mail at: 665 Mainstream Drive, 2nd Floor, Nashville, TN 37243. You also can e-mail the board at: TN.Health@state.tn.us.

Board’s Fax Number: (615) 253-8798
Board’s Website: www.tn.gov/health

BOARD APPEARANCE PROCESS

To make an appearance before the Board for Licensing Health Facilities, your facility must make a written request regarding the reason for appearing before the board i.e. waiver request, consent calendar request, etc. The written request must be received in the board’s administrative office two (2) weeks prior to the scheduled board meeting date with any/all supporting documentation sufficient for the board to make an informed decision on the request. Address your request to Mrs. Ann Rutherford Reed, R.N., Director of the Board for Licensing Health Care Facilities. You may fax your request to the board’s administrative office at (615) 741-7051 or (615) 253-8798 or by mail to: 665 Mainstream Drive, 2nd floor, Nashville, TN 37243. A letter specifying that your request has been accepted and placed on the agenda will be sent to you with the date, time, place, location and the need of a representative if required to appear before the board. If more
information is needed, the department will inform you immediately. Please note: If you have not received a letter informing you that your facility has been placed on the board agenda following submission of your request, please contact this office immediately.

If you have any questions or concerns regarding the board agenda or meeting, please contact Wanda E. Hines, board administrator at (615) 741-7586 or wanda.e.hines@tn.gov.

EMS REPORT

At the June 6, 2018 Board for Licensing Health Care Facilities meeting, Robert Seesholtz, EMS Trauma System Manager, presented the EMS report. He provided to the following information to the Board –

- February 9, 2018 Trauma Care Advisory Council (TCAC) meeting minutes
- Summit Medical Center with Level III designation recommended following a follow-up site visit on May 11, 2018
- Hendersonville Medical Center with Level III provisional designation recommended following a site visit on May 14, 2018
- Erlanger Medical Center with Level I revalidation recommended following a site visit on May 15, 2018

Mr. Shulman made a motion to accept the above report; seconded by Ms. Ketterman. The motion was approved.

Mr. Seesholtz also sought guidance from the Board related to off campus emergency departments' (ED) designation as a trauma center specifically a Level IV Trauma Center. The TCAC addressed the issue voting that off campus EDs would not be allowed to designate as a trauma center.

Mr. Shulman made a motion to stand with TCAC’s decision above; seconded by Mr. Gee. The motion was approved.

At the October 3, 2018 Board for Licensing Health Care Facilities meeting, Mr. Seesholtz presented the following information as the EMS report to the Board –

- April 11, 2018 Trauma Care Advisory Council (TCAC) meeting minutes were noted as available
- Bristol Regional Medical Center with Level II designation recommended following a follow-up site visit on May 30, 2018
- StoneCrest Medical Center with full Level III designation recommended following a site visit on July 16, 2018
- The Annual Report on Trauma Care in Tennessee has been approved by the Commissioner

Mr. Mynatt made a motion to accept above report; seconded by Dr. Robbins. The motion was approved.

NURSE AIDE REPORT

Wanda King, Nurse Aide Program Manager, presented the Nurse Aide Report. There was not a report at the June 6, 2018 Board meeting. For the October 3, 2018 Board meeting, Ms. King was not present and Ms. Reed presented the following information to the Board on behalf of Ms. King –

- Nurse Aide Certification – as of August 31, 2018, 37,387 active nurse aides were certified in Tennessee with 6,470 new applicants certified during 2018. 27 certifications were revoked and nine were suspended for failure to pay child support.
- Abuse Registry – as of August 31, 2018, 2,396 persons were on the Registry of Persons Who Have Abused, Neglected, or Misappropriated the Personal Property of Vulnerable Individuals. To date there have been 115 placements during 2018 and breakdown as follows
  - County Courts: 37
  - TN Dept of Health: 8
  - DIDD: 44
  - APS: 7
  - MHSAS: 0
- Training Programs – there are 143 approved nursing home based training programs and 168 private training programs.

INTERPRETIVE GUIDELINES

The following interpretive guidelines have been approved by the Board for Licensing Health Care Facilities and can be accessed in their final version at:


1. SUBJECT: Use of ‘Physician’ Term
   DATE: October 3, 2018
   RULES: Assisted Care Living Facility, 1200-08-25-.08(5)(a)(b) & 1200-08-25-.08(9)(a)

   The Board for Licensing Health Care Facilities for the purposes of this interpretive guideline adopts the following definitions:
   “Treating physician” refers to the primary physician who is responsible for managing the resident’s medical care.
   “Non-physician practitioner (NPP)” is a nurse practitioner (NP), clinical nurse specialist (CNS), or physician assistant (PA).
   “Nurse practitioner” shall have the same definition as found at Tenn. Code Ann. § 63-7-126
   “Clinical nurse specialist” shall have the same definition as found at Tenn. Code Ann. § 1000-04-.02(2)
   “Physician assistant” shall have the same definition as found at Tenn. R. & Regs. § 1200-08-25-.02(30)

   The Board for Licensing Health Care Facilities interprets Tenn. R & Reg § 1200-08-25-.08(9)(a) to
be read in conjunction with existing Tennessee law allowing the delegation of physician tasks. Any “physician” under the provision of the noted regulation may delegate to a NPP any interdisciplinary team activity otherwise allowed under the provisions of Tennessee law to be delegated, so long as the following conditions are met:

(a) The NPP to whom tasks are delegated must maintain a relationship with the physician and must be acting as the agent of the physician and be under their supervision or delegation.

(b) The NPP may not be employed by the assisted care living facility where the resident resides.

(c) Compliance with all other laws and regulations is maintained.

2. SUBJECT: Disaster Preparedness Tennessee Emergency Management Agency (TEMA) participation/completion of TEMA form

DATE: October 3, 2018

RULES: Assisted Care Living Facility, 1200-08-25-.16(3)(a), RHA 1200-08-11-.13(2), ACH-Level 2
1200-08-36-.17(3)(a), TB1 1200-08-37-.17(3)(a), Prescribed Child Care Centers 1200-08-02-.13(2),
ASTC 1200-08-10-.14(2), ESRD 1200-08-32-.14(1)(f), & ODC 1200-08-35-.14.

The Board for Licensing Health Care Facilities interprets the above regulations containing reference to completion of a TEMA form to mean instead the establishment and maintenance by the facility of communications with the county Emergency Management Agency. This includes the provision of the information and procedures that are needed for the local comprehensive emergency plan. The facility shall cooperate, to the extent possible, in the area disaster drills and local emergency situations.

3. SUBJECT: Change in Infectious Waste definition & language in Infectious Waste and Hazardous Waste

DATE: October 3, 2018

RULES: All relevant licensed facility type regulations shall have the term infectious waste removed from the Definitions and Infectious Waste and Hazardous Waste sections. In these same regulations, the term regulated waste will be defined to mean liquid or semi-liquid blood or other potentially infectious materials; contaminated items that would release blood or other potentially infectious materials in a liquid or semi-liquid state if compressed; items that are caked with dried blood or other potentially infectious materials and are capable of releasing these materials during handling; contaminated sharps; and pathological and microbiological wastes containing blood or other potentially infectious materials, as defined in United States Department of Labor Occupational Safety & Health Administration, 1910.1030, Bloodborne Pathogens. The term regulated waste will be further referenced in the newly renamed section Regulated Waste and Hazardous Waste.

4. SUBJECT: Reporting of suspected opioid abuse or diversion – notice to employees of health care facilities

DATE: October 3, 2018

RULES: All health care facilities licensed pursuant to T.C.A. §§ 68-11-201, et. seq. shall provide information to employees about reporting suspected opioid abuse or diversion. The information may be provided to each employee individually in writing, documented by the employing entity, OR by posting the following in a conspicuous location in a non-public employee area:

(a) A statement indicating the following, “NOTICE: PLEASE REPORT ANY SUSPECTED ABUSE OR DIVERSION OF OPIOIDS, OR ANY OTHER IMPROPER BEHAVIOR WITH RESPECT TO OPIOIDS, TO THE DEPARTMENT OF HEALTH’S COMPLAINT INTAKE LINE.

(b) Contact information including the Department of Health’s Complaint Intake Line: 800-852-2187.”

(c) Such information shall be provided on a sign at least eleven inches (11”) in height and seventeen inches (17”) in width.

5. SUBJECT: Hospital Rule 1200-01-.03(1) Disciplinary Procedures Report of Involuntary Commitments

DATE: October 3, 2018

RULES: Failure to report involuntary commitments to local law enforcement pursuant to Tenn. Code Ann. § 33-3-117 will result in Board disciplinary action.

6. SUBJECT: Third revisit survey and recoupment of associated costs

DATE: October 3, 2018

RULES: For all licensed facility types if the same or different deficiencies are cited on the third revisit, then the department may pursue disciplinary action against the facility before the board, including seeking reimbursement for the un-recouped costs associated with subsequent revisit surveys that were incurred by the department.

7. SUBJECT: Hospital Rule 1200-08-01-.02(2) Licensing Procedures ST Elevation Myocardial Infarction (STEMI) and stroke designations
DATE: October 3, 2018
RULES: The applicant shall disclose ST-elevation myocardial infarction (STEMI) and stroke related designations.

STATUTORY CHANGES OF INTEREST TO TENNESSEE HEALTH CARE FACILITIES

The 2018 Legislative Session has ended and the Board for Licensing Health Care Facilities’ administrative staff has monitored several bills that are of interest to the licensed health care facilities in the state of Tennessee. Below is a brief summary of those bills. If you wish to review any of these public chapters in their entirety, please visit: http://www.ten.gov/sos/acts/108/pub/pc0004.pdf or follow the Public Chapter number link included below by (Ctrl + click).

PUBLIC CHAPTER NO. 0611
This legislation requires an agency holding a public hearing as part of its rulemaking process to make copies of the rule available in “redline form” to people attending the hearing. This act took effect July 1, 2018.

PUBLIC CHAPTER NO. 0618
This legislation requires each hospital licensed under title 33 or the hospital’s designated entity to report all claims data found on the UB-92 form (or successor form) on every inpatient and outpatient discharge to the Commissioner of Health. This act took place on July 1, 2018.

PUBLIC CHAPTER NO. 0626
This legislation requires the Department of Health (TDH) to recognize hospitals that meet the criteria of a ST-elevation myocardial (STEMI) receiving center or STEMI referring center. TDH must list such centers on the division of emergency medical services’ website. To be recognized as a STEMI center, a hospital must submit written notification and proof of qualifications to the Board for Licensing Health Care Facilities. Likewise, if a hospital loses its certification or accreditation it must notify the Board. The act also requires each ambulance service to develop protocol plans related to assessing, treating, and transporting STEMI patients. The EMS Board has the authority to promulgate rules to implement and enforce this section. This act took effect on April 2, 2018.

PUBLIC CHAPTER NO. 0655
This legislation was brought by the Department of Health and is known as the CORE Act. This act makes a variety of changes to existing law regarding nursing homes, assisted care facilities and the abuse registry. This act establishes that the TDH Commissioner has the authority to suspend admission of any new patients or residents to any facility or licensee in those cases where there is a factual basis that the conditions are, or are likely to be, detrimental to the health, safety, or welfare of a patient or resident. The act lays out the suspension process, appeals process, and time windows required. It also establishes that the Board has the authority to continue, revoke, or modify the suspension of admissions and enter other such orders as it deems necessary. The act also creates a requirement on homes for the aged, traumatic brain injury residential homes, assisted care living facilities, and adult care homes to notify resident of their right to file a complaint and the process to do so. The legislation also prohibits facilities from retaliatory actions against residents for filing a complaint. Those filing complaints in good faith are immune from civil liability. The CORE act also establishes TDH’s ability to act in regard to entities operating unlicensed facilities and establishes the penalties that TDH may pursue or assess. Finally, the act makes clarifications of those individuals that TDH will list on the abuse registry and the requirements of the disposition order from TBI. This act took effect on July 1, 2018.

PUBLIC CHAPTER NO. 0671
This legislation redefines “trauma service codes”. Previously, it was defined as “the ICD-9-CM discharge codes designated as trauma service codes by the American College of Surgeons Committee on Trauma.” The new definition will be “a subset of the ICD-10-CM diagnosis codes, or the most relevant versions of the International Classification of Disease and Related Health Problems (ICD) required by the Centers for Medicare and Medicaid services for coding hospital discharges designated as trauma service codes by the American College of Surgeons Committee on Trauma.” This act took effect on April 12, 2018.

PUBLIC CHAPTER NO. 0675
This legislation requires the Department of Health to accept allegations of opioid abuse or diversion and for the Department to publicize a means of reporting allegations. Any entity that prescribes, dispenses, or handles opioids is required to provide information to employees about reporting suspected opioid abuse/diversion. That notice is to either be provided individually to the employee in writing and documented by the employer or by posting a sign in a conspicuous, non-public area of minimum height and width stating: “NOTICE: PLEASE REPORT ANY SUSPECTED ABUSE OR DIVERSION OF OPIOIDS, OR ANY OTHER IMPROPER BEHAVIOR WITH RESPECT TO OPIOIDS, TO THE DEPARTMENT OF HEALTH’S COMPLAINT INTAKE LINE: 800-852-2187.” Whistleblower protections are also established. An individual who makes a report in good faith may not be terminated or suffer adverse licensure action solely based on the report. The individual also is immune from any civil liability related to a good faith report. This act takes effect January 1, 2019.

PUBLIC CHAPTER NO. 0722
This act requires the Board for Licensing Health Care Facilities to promulgate rules establishing a procedure for recognizing hospitals that have stroke-related designations. The law establishes the requirements for such hospitals to be recognized and the Board’s obligation to remove designation if the facility fails to comply with the procedures of the Board. The Emergency Medical Services Board is required to promulgate rules establishing protocol guidelines for evidence based pre-hospital assessment, treatment, education and
transport of stroke patients by emergency medical providers. This act takes effect July 1, 2018.

**PUBLIC CHAPTER NO. 0750**
This chapter updates the specific language required to be in the notice given to mammogram patients that are revealed to have dense breasts or extremely dense breasts. This act takes effect July 1, 2018.

**PUBLIC CHAPTER NO. 0754**
This chapter prevents any board, commission, committee, etc. created by statute from promulgating rules, issuing statements, or issuing intra-agency memoranda that infringe on an entity member’s freedom of speech. Freedom of speech includes, but is not limited to a member’s freedom to express an opinion concerning any matter relating to that governmental entity, excluding matters deemed to be confidential under TCA 10-7-504. Violations as determined by a joint evaluation committee may result in recommendations to the general assembly concerning the entity’s sunset status, rulemaking authority and funding. This act took effect April 18, 2018.

**PUBLIC CHAPTER NO. 0855**
This act prohibits alcohol and drug treatment facilities (ADTF), healthcare providers and healthcare facilities from certain practices in regard to solicitation and marketing of alcohol and drug treatment services. This act takes effect July 1, 2018.

**PUBLIC CHAPTER NO. 0862**
This act requires that induced termination of pregnancy (ITOP) reports to include whether a heartbeat was detected if an ultrasound was performed prior to the ITOP. The department of health shall include data about the detection of heartbeats and the method employed for ITOPs in an annual report. The report shall differentiate between medical and surgical methods and between surgical methods to the extent data permits. This act also requires that if an ultrasound is performed prior to an abortion, the person who performs the ultrasound shall offer the woman the opportunity to learn the results of the ultrasound. If the woman elects to learn the results, the person performing the ultrasound or a qualified healthcare provider shall inform her of the presence or absence of a heartbeat and document that the patient was informed. This act takes effect January 1, 2019.

**PUBLIC CHAPTER NO. 0929**
This act redefines policy and rule and requires each agency to submit a list of all policies, with certain exceptions, that have been adopted or changed in the previous year to the chairs of the government operations committees on July 1 of each year. The submission shall include a summary of the policy and the justification for adopting a policy instead of a rule. This act also prohibits any policy or rule by any agency that infringes upon an agency member’s freedom of speech. Finally, this act establishes that an agency’s appointing authority shall have the sole power to remove a member from a board, committee, etc. This act takes effect July 1, 2018 and applies to policies adopted on or after that date.

**PUBLIC CHAPTER NO. 0978**
This act makes a number of revisions to opioid treatment regulations. The definition of "nonresidential office-based opiate treatment facility" (OBOT) has been changed to encompass more facilities. The Commissioner of Mental Health is required to revise the rules of OBOTs to be consistent with state and federal law for such facilities to establish certain new protocols. Rules regarding OBOTs are to be reviewed each even-numbered year and the Department of Mental Health and Substance Abuse Services shall submit the rules for OBOTs to each health related board that licensed any practitioner authorized by the state to prescribe products for treatment of an opioid use disorder. Each board is required to enforce the rules. Each board is required to post the rules on the board’s website. Violation of a rule is grounds for disciplinary action by the board. The act also makes revisions to the licensing fees of OBOTs. The act requires revision of the buprenorphine treatment guidelines. The legislation also requires (subject to 42 CFR part 2) that dispensing of buprenorphine be subject to the controlled Substance Monitoring Database (CSMD) requirements. The act prohibits dispensing of buprenorphine except by certain individuals/facilities and requires pharmacies/distributors to report to the Department of Health (TDH) the quantities of buprenorphine that are delivered to OBOTs in the state. The act also makes revisions to the high-volume prescriber list compiled by TDH. The act requires the comptroller to complete a study of statistically abnormal prescribing patterns. After the study TDH shall identify prescribers and shall inquire to respond within 30 days. Each board is required to report the total number of prescribers disciplined each year, as well as other information. TDH shall report a summary of the data and of the disciplinary actions to the chairs of the health committees. The act also comprises a task force to create minimum disciplinary actions for prescribing practices that are a significant deviation from sound medical judgement. The Board of Medical Examiners, Osteopathic Examination, Dentistry, Podiatric Medical Examiners, Optometry, Nursing and Medical Examiner’s Committee on physician assistants shall select one member each for the task force before September 1, 2018. This act took effect for rulemaking on May 21, 2018 and takes effect July 1, 2018 for all other purposes.

**PUBLIC CHAPTER NO. 1015**
This legislation lays out the specific requirements of hospitals to notify law enforcement of involuntary commitments as well as the possible penalties for failure to comply. Inspections of hospitals by the Department of Mental Health and the Department of Health shall include a determination of the hospital’s compliance with the reporting requirements of this act. The act also allows a pharmacist the right to provide information to an insured regarding the amount of the insured’s cost share for a prescription drug. Neither a pharmacy nor a pharmacist shall be penalized by a pharmacy benefits manager for discussing such information or selling a lower priced drug if one is available. This act takes effect July 1, 2018.
PUBLIC CHAPTER NO. 1021
This act allows for appeals of contested case hearings to be in the chancery court nearest the residence of the person contesting the agency action or at that person’ discretion, in the chancery court nearest the place the action arose, or in the chancery court of Davidson County. Petitions seeking review must be filed within 60 days after entry of the agency’s final order. This act takes effect July 1, 2018.

PUBLIC CHAPTER NO. 1054
This chapter establishes the minimum age and certification requirements to practice ultrasound sonography in a nonclinical boutique setting. Nonclinical boutique setting is to be defined by the Commissioner of Health by rule. This act takes effect January 1, 2019.

PUBLIC CHAPTER NO. 1055
This act requires the Department of Economic and Community Development (ECD) in consultation with an advisory committee, to manage the rural hospital transformation program. The advisory committee is to be composed of one or more representatives each from the Department of Health, the Department of Labor and Workforce Development, TennCare, the Board of Regents, and other public and private stake holders as deemed necessary by ECD. ECD in consultation with the advisory committee shall identify one or more contractors to provide consultations to target hospitals for the creation of transformation plans. Requirements of the transformation plans are laid out in the act. This act takes effect July 1, 2018 and terminates July 1, 2021.

REGULATION UPDATE
EFFECTIVE 10/8/18:
1. 1200-08-01, Standards for Hospitals: 1200-08-01-.01 Definitions; 1200-08-01-.05 Admissions, Discharges, and Transfers; 1200-08-01-.06 Basic Hospital Functions; and 1200-08-01-.07 Optional Hospital Services
2. 1200-08-06, Standards for Nursing Homes: 1200-08-06-.01 Definitions
3. 1200-08-10, Standards for Ambulatory Surgical Treatment Centers: 1200-08-10-.14 Administration & 1200-08-10-.11 Records and Reports
4. 1200-08-11, Standards for Homes for the Aged: 1200-08-11-.01 Definitions
5. 1200-08-25, Standards for Assisted Care Living Facilities: 1200-08-25-.02 Definitions; 1200-08-25-.03 Licensing Requirements; 1200-08-25-.07 Services Provided; 1200-08-25-.08 Admissions, Discharges, and Transfers; 1200-08-25-.10 Life Safety
6. 1200-08-34, Standards for Home Care Organizations Providing Professional Support Services: 1200-08-34-.05 Admissions, Discharges, and Transfers

TOP CITED DEFICIENCIES -
July 1, 2018 thru December 31, 2018

TOP FIVE -
Homes for the aged:
5. Tag 412, Administration, 1200-08-11-.04(5); Tag 415, Administration, 1200-08-11-.04(6); Tag 509, Admissions, Discharges and Transfers, 1200-08-11-.05(3)
4. Tag 427, Administration, 1200-08-11-.04(7)
3. Tag 1302, Disaster Preparedness, 1200-08-11-.13(1)(b) & Tag 1306, Disaster Preparedness, 1200-08-11-.13(1)(f)
2. Tag 1302, Disaster Preparedness, 1200-08-11-.13(1)(c) & Tag 1305, Disaster Preparedness, 1200-08-11-.13(1)(e)
1. Tag 821, Life Safety, 1200-08-11-.08(21)

TOP TEN -
Assisted care living facility:
10. Tag 624, Administration, 1200-08-25-.06(5)
9. Tag 608, Administration, 1200-08-25-.06(1)
8. Tag 832, Admissions, Discharges and Transfers, 1200-08-25-.08(a) & Tag 1606, Disaster Preparedness, 1200-08-25-.16(1)
7. Tag 1605, Disaster Preparedness, 1200-08-25-.16(1)(e)
6. Tag 1027, Life Safety, 1200-08-25-.10(5)
5. Tag 1223, Resident Records, 1200-08-25-.12(5)(a)
4. Tag 1028, Life Safety, 1200-08-25-.10(5)(g)
3. Tag 1607, Disaster Preparedness, 1200-08-25-.16(2)
2. Tag 901, Building Standards, 1200-08-25-.09(1)
1. Tag 1035, Life Safety, 1200-08-25-.10(8)(a)

Nursing home:
There were two licensure tags cited for nursing homes during this time period – Tag 831, Building Standards, 1200-08-06-.08(1) and Tag 848, Building Standards, 1200-08-06-.08(18).
DISCIPLINARY ACTION
2018

The board and/or Commissioner of Health took action against the following licensed health care facilities:

JUNE 2018

Licensee: Legacy Assisted Living and Memory Care – assisted care living facility
Violation: Survey of 5/23/18 found poor quality of care and detriment to patient health, safety, and welfare
Action: Board order effective 6/6/18 - Suspension of Admissions (SOA)

Licensee: Midsouth Health and Rehabilitation Center – nursing home
Violation: Deficiencies cited rising to the level of immediate detriment to the health, safety, and welfare of residents and requiring Board action.
Action: Board order effective 6/6/18 - license on six (6) month probation and facility to hire consultant or management company for six (6) months to cure cited deficiencies

Licensee: Hearth at Hendersonville – assisted care living facility
Violation: Deficiencies cited rising to the level of civil monetary penalty (CMP) imposition
Action: CMP assessed in total amount of $1,000.00

Licensee: The Gardens at Providence Place – assisted care living facility
Violation: Deficiencies cited rising to the level of civil monetary penalty (CMP) imposition
Action: CMP assessed in total amount of $500.00

Licensee: Raintree Terrace – assisted care living facility
Violation: Deficiencies cited rising to the level of civil monetary penalty (CMP) imposition
Action: CMP assessed in total amount of $500.00

Licensee: Creekside Villas 500 – assisted care living facility
Violation: Deficiencies cited rising to the level of civil monetary penalty (CMP) imposition
Action: CMP assessed in total amount of $1,000.00

Licensee: Family Ministries John M Reed – assisted care living facility
Violation: Deficiencies cited rising to the level of civil monetary penalty (CMP) imposition
Action: CMP assessed in total amount of $500.00

Licensee: The Terrace at Mountain Creek – assisted care living facility
Violation: Deficiencies cited rising to the level of civil monetary penalty (CMP) imposition
Action: CMP assessed in total amount of $500.00

SEPTEMBER 2018

Unlicensed Facility: Magnolia Manor – home for the aged
Violation: Operation of an unlicensed facility.
Action: Assessment of eight (8) civil penalties in the amount of $16,000.00 total, application for licensure as home for the aged prior to September 5, 2018, submission of architectural plans by September 21, 2018, and application to be completed within six (6) months of the date of the order. Order effective 9/5/18.

Licensee: Prestige Assisted Living – assisted care living facility
Violation: Deficiencies cited rising to the level of civil monetary penalty (CMP) imposition
Action: CMP assessed in total amount of $1,500.00

Licensee: Brookdale Goodlettsville II – assisted care living facility
Violation: Deficiencies cited rising to the level of civil monetary penalty (CMP) imposition
Action: CMP assessed in total amount of $2,000.00

Licensee: Deane Hill Place – assisted care living facility
Violation: Deficiencies cited rising to the level of civil monetary penalty (CMP) imposition
Action: CMP assessed in total amount of $2,500.00

Licensee: Dominion Senior Living of Sevierville – assisted care living facility
Violation: Deficiencies cited rising to the level of civil monetary penalty (CMP) imposition
Action: CMP assessed in total amount of $2,000.00

Licensee: Asbury Cove – assisted care living facility
Violation: Deficiencies cited rising to the level of civil monetary penalty (CMP) imposition
Action: CMP assessed in total amount of $1,500.00

Licensee: Broadmore Assisted Living – assisted care living facility
Violation: Deficiencies cited rising to the level of civil monetary penalty (CMP) imposition
Action: CMP assessed in total amount of $1,500.00

Licensee: Freedom Senior Living – assisted care living facility
Violation: Deficiencies cited rising to the level of civil monetary penalty (CMP) imposition
Action: CMP assessed in total amount of $1,500.00

Licensee: Northshore Senior Living – assisted care living facility
Violation: Deficiencies cited rising to the level of civil monetary penalty (CMP) imposition
Action: CMP assessed in total amount of $1,000.00

Licensee: Grace Manor – assisted care living facility
Violation: Deficiencies cited rising to the level of civil monetary penalty (CMP) imposition
OCTOBER 2018

**Licensee:** Manor House Assisted Living – assisted care living facility  
**Violation:** Deficiencies cited rising to the level of civil monetary penalty (CMP) imposition  
**Action:** CMP assessed in total amount of $3,500.00

**Licensee:** Prestige Assisted Living of Loudon – assisted care living facility  
**Violation:** Deficiencies cited rising to the level of immediate detriment to the health, safety, and welfare of residents. Under a Commissioner Suspension of Admissions (SOA) effective 7/14/18.  
**Action:** Board order effective 10/3/18 – one (1) year probation and continue under SOA, present reports to the Board during 2019, submit acceptable POC, & CMP assessed total in amount of $10,000.00

**Licensee:** Unity Medical Center – hospital  
**Violation:** Delinquent bed tax fees  
**Action:** Board order effective 10/3/18 – submit payment to TennCare & submit POC

**Licensee:** Carriage Court – assisted care living facility  
**Violation:** Deficiencies cited rising to the level of civil monetary penalty (CMP) imposition.  
**Action:** CMP assessed in total amount of $1,000.00.

**Licensee:** Sycamore Terrace, LLC – assisted care living facility  
**Violation:** Deficiencies cited rising to the level of civil monetary penalty (CMP) imposition.  
**Action:** CMP assessed in total amount of $1,000.00.

DEFICIENCY FREE SURVEYS

**MARCH 2018**

**PROFESSIONAL SUPPORT SERVICES AGENCY:**  
Milestone Home Health Care LLC, Nolensville

**NURSING HOMES:**  
Savannah Healthcare and Rehab, Savannah  
Christian Care Center of Bristol, Bristol  
Fort Sanders Transitional Care Unit, Knoxville

**HOME MEDICAL EQUIPMENT PROVIDER:**  
Medline Industries Holdings LP, Memphis

**ASSISTED CARE LIVING FACILITIES:**  
The Village of Murfreesboro, Lafollette  
NHC Healthcare Assisted Living, Johnson City

**HOME HEALTH AGENCY:**  
Careall Home Care Services, Knoxville

**APRIL 2018**

**PROFESSIONAL SUPPORT SERVICES AGENCIES:**  
Eagle Medical Staffing, Cordova  
Functional Independence, Cordova  
Meritan, Memphis

**ASSISTED CARE LIVING FACILITY:**  
The Reserve at Spring Hill, Spring Hill

**HOME MEDICAL EQUIPMENT PROVIDERS:**  
Neurotech NA LLC, Nashville  
Phipps Pharmacy, McKenzie

**NURSING HOMES:**  
NHC Healthcare Tullahoma, Tullahoma  
Senator Ben Atchley State Veterans’ Home, Knoxville

**HOME HEALTH AGENCIES:**  
Home Care Solutions, Nashville  
Maxim Healthcare Services, Johnson City

**MAY 2018**

**HOME HEALTH AGENCIES:**  
Adoration Home Health, Nashville  
Amedisys Home Care, Memphis  
Baptist Trinity Home Care, Memphis  
Coram CVS/Specialty Infusion Service, Memphis  
Extendicare of West Tennessee Inc, Jackson  
Guardian Home Care of Nashville LLC, Franklin  
Home Choice Health Service, Memphis  
NHC Homecare Milan, Milan  
NHC Homecare Columbia, Columbia  
Optum Women’s & Children’s Health, Memphis  
Quality First Home Care, Columbia  
Tennessee Quality Homecare Southwest, Parsons  
Vanderbilt HC/Walgreens IV and RT Services, Nashville  
Smoky Mountain Home Health & Hospice, Newport  
Quality Home Health, Jamestown

**PROFESSIONAL SUPPORT SERVICES AGENCIES:**  
Behavioral Services of TN Inc., Cordova  
Independent Therapy Network LLC, Germantown  
Kim Musicante, Memphis  
Michele Gaur, Germantown

**ASSISTED CARE LIVING FACILITIES:**  
Arcadia of Clarksville, Clarksville  
The Bridge at Rhea County, Dayton  
Beehive Homes of Powell, Powell

**NURSING HOMES:**  
Humboldt Healthcare and Rehab, Humboldt  
Paris Healthcare Nursing and Rehab, Paris  
West TN Transitional Care, Jackson

**HOME MEDICAL EQUIPMENT PROVIDERS:**  
MedCare Equipment Co, Camden  
Meditrust Medical Equipment, Adamsville
END STAGE RENAL DIALYSIS CLINIC:
Fresenius Medical Care Knoxville Home Dialysis, Knoxville

JUNE 2018

ASSISTED CARE LIVING FACILITIES:
The Lantern at Morning Pointe of Franklin, Franklin
Autumn Care III LLC, Farragut

HOME HEALTH AGENCY:
Camilla Home Health, Knoxville

HOME MEDICAL EQUIPMENT PROVIDERS:
Integrated Ortho Services Inc, Nashville
Little Drugs, Sweetwater

HOSPICE:
Amedisys Hospice An Adventa Company, Knoxville

JULY 2018

HOME HEALTH AGENCIES:
Willowbrook Home Health Care, Nashville
Elk Valley Health Services, Nashville
Implanted Pump Management, Knoxville
Coram CVS Specialty Infusion Services, Knoxville
Professional Case Management of Tennessee, Oak Ridge

HOME MEDICAL EQUIPMENT PROVIDERS:
Medical Center Medical Products, Jackson
Opry Medical Group, Nashville

NURSING HOMES:
Life Care Center of Bruceton-Hollow Rock, Bruceton
NHC Healthcare Somerville, Somerville

HOME FOR THE AGED:
The Meadows, Nashville

ASSISTED CARE LIVING FACILITIES:
Lynnfield Place, Selmer
The Lodge at Wood Village, Sweetwater
Cornerstone Village North Assisted Living, Johnson City

AMBULATORY SURGICAL TREATMENT CENTER:
Vanderbilt-Ingram Cancer Center @ Maury Regional, Spring Hill

AUGUST 2018

HOME HEALTH AGENCIES:
Deaconess Home Care, Savannah
Intrepid USA Healthcare, Cookeville
Suncrest Home Health, Smithville
Amedisys Home Health of TN, Tazewell
NHC Homecare Chattanooga, Chattanooga

ASSISTED CARE LIVING FACILITY:
Crown Cypress, Kingsport

HOME MEDICAL EQUIPMENT PROVIDERS:
Riverside Medical Inc., Savannah
Wound Care Resources, Yorkville

PROFESSIONAL SUPPORT SERVICES AGENCY:
Cornerstone, Camden

HOSPICE PROVIDERS:
Home Health Care of East TN & Hospice, Cleveland
Wellmont Hospice, Bristol

HOME FOR THE AGED:
Trinity Manor Suites, Gallatin

AMBULATORY SURGICAL TREATMENT CENTER:
Baptist Surgery Center LP, Nashville

NURSING HOME:
NHC Healthcare Sequatchie, Dunlap

SEPTEMBER 2018

ASSISTED CARE LIVING FACILITIES:
Brookdale Hixson, Hixson
Sunset Garden, Mountain City

HOME MEDICAL EQUIPMENT PROVIDERS:
5 Star Medical, Memphis
Active Medical and Mobility Inc., Adamsville
HCMC In Home Equipment and Supplies, Paris
Home Medical Products, Jackson
Minimed Distribution Corp, Memphis
Scooters Unlimited Jackson Med Supply, Jackson
US Med LLC, Nashville
Anderson Drugs and Home Care Center, Etowah
Weaver Mobility Systems, Lebanon
Choice Medical Inc, Knoxville
National Seating, Kingsport

HOSPICE PROVIDERS:
Kindred Hospice, Cookeville
Caris Healthcare Hospice, Chattanooga

HOME HEALTH AGENCIES:
Intrepid USA Healthcare Services, Memphis
Lincoln Medical Home Health and Hospice, Fayetteville
Friendship Home Health, Nashville
NHC Homecare Murfreesboro, Murfreesboro
Pentec, Nashville
Kindred at Home, Nashville
American National Home Health, Lebanon
NHC Homecare Athens, Athens
Encompass Home Health of Tennessee, Winchester

NURSING HOMES:
Dyersburg Nursing and Rehab, Dyersburg
Hardin Home, Savannah
NHC Healthcare Dickson, Dickson
Fort Sanders Sevier Nursing Home, Sevierville

AMBULATORY SURGICAL TREATMENT CENTERS:
Cape Surgery Center, LLC; Dyersburg
Memphis Eye & Cataract Ambulatory Surgery Center, Memphis
Midsouth Interventional Pain Institute, Germantown

RESIDENTIAL HOSPICE PROVIDERS:
Wellmont Hospice House, Bristol
Cumberland House, Crossville

OCTOBER 2018

HOME HEALTH AGENCIES:
No Place Like Home Inc., Collierville
Optum Women’s & Children’s Health, Nashville
Premiere Home Health, Madison
Home Health Care of Middle TN, Nashville
Amedisys Home Health Services, Goodlettsville
Intrepid USA Healthcare, Nashville
Kindred At Home 1, Lebanon

NURSING HOMES:
Decatur County Health Care and Rehabilitation, Parsons
McKenzie Health and Rehabilitation, McKenzie

OUTPATIENT DIAGNOSTIC CENTER:
The Imaging Center at Wolf River, Germantown

AMBULATORY SURGICAL TREATMENT CENTER:
Memphis Center for Reproductive Health, Memphis

HOME MEDICAL EQUIPMENT PROVIDERS:
Doc Supply of West Tennessee, Humboldt
Pain Therapy Solutions LLC, Brentwood

HOSPICE PROVIDERS:
Unity Hospice Care of TN, Linden
University of Tennessee Medical Center Home, Knoxville
Hearth Hospice, Chattanooga
Caris Healthcare, Murfreesboro
Hospice Compassus-The Highland Rim, Tullahoma

ASSISTED CARE LIVING FACILITIES:
NHC Place Farragut, Knoxville
Courtyard Senior Living Briarcliff, Oak Ridge

NOVEMBER 2018

NURSING HOME:
NHC Healthcare Farragut, Knoxville

ASSISTED CARE LIVING FACILITIES:
Atria Weston Place, Knoxville
Courtyard Senior Living Knoxvilie, Knoxville

AMBULATORY SURGICAL TREATMENT CENTER:
UCH Vascular Access, Memphis

DECEMBER 2018

PROFESSIONAL SUPPORT SERVICES AGENCIES:
Best Nurses, Memphis
Mid-South Area Residential Services, Memphis