



State of Tennessee
Health Facilities Commission
Andrew Jackson State Building
502 Deaderick Street, 9th Floor, Nashville, TN 37243
www.tn.gov/hfc Phone: 615-741-7221

May 7, 2026

Sent Via Email

Linnea Stewart (Linnea.Stewart@SurgeryVentures.com)

Lebanon Center for Outpatient Surgery
125 Willard Hagan Drive
Lebanon, Tennessee 37090

Facility Type: Ambulatory Surgical Treatment Center

Dear Linnea Stewart:

It is my pleasure to inform you that your application for licensure of Lebanon Center for Outpatient Surgery located at 125 Willard Hagan Drive, Lebanon, Tennessee 37090 has been initially approved for existing surgery center changing from hospital license to freestanding ASTC. Facility has 3 operating rooms, 9 recovery rooms, 5 pre-op rooms, 2 locker rooms, waiting room, nurses station, 4 patient restrooms, medical gas room, 1 procedure room, 1 physical therapy room, 1 scope processing and cleanup, 2 dictation rooms, nourishment, pharmacy, 2 storage rooms, autoclave room, soiled work room, sterile work room, mechanical and electric rooms, 2 janitors closets, communications room, office space. Effective May 7, 2026. The license number shall be 279. For this initial approval to become final and permanent, your application must be ratified by the Commission pursuant to T.C.A. §68-11-206. The Commission will consider your application at its next meeting, scheduled for June 24, 2026. **You are hereby authorized to commence operation pending the final decision of the Commission.**

For certification purposes, please be advised it is your responsibility to contact your Health Facilities Commission regional office for participation in Medicare/Medicaid. The West Regional Office phone number is 731-984-9684.

If the Commission **does** ratify the approval of your application, the license number listed above will become your permanent license number and a letter will be forwarded to you within three (3) business days, notifying you of the Commission's final decision.

If the Commission **does not** ratify the initial approval of your application, a letter will be forwarded to you providing an explanation and specific instructions as to any action(s) you may take to have the decision reviewed, at which time this authorization shall cease to be effective.

Please contact me if I can be of further assistance.

Sincerely,

Amy Whitaker

Amy Whitaker, ASA 2
Health Facilities Commission
Phone: (615) 741-7188
Fax: (615) 253-8798
Email: Amy.Whitaker@tn.gov

cc: West Tennessee Regional Office



APPROVAL FOR FACILITY LICENSURE OR OCCUPANCY

Facility Type: ASTC License # (if applicable): NEW County: Wilson
Initial Renovation _____ Satellite/Off Campus Location _____
Physical Plant/Services/New Addition _____ Relocation/Replacement Facility _____
(Circle One) (Circle One)

Facility Name: Lebanon Center for Outpatient Surgery

Address: 125 Willard Hagan Dr City: Lebanon Zip Code: 37090

Application and fee on file in Central Office (CO)?: Yes No _____ CON #: CN2504-013A

Project #: 2025-12-05-03 Phase: 1 of 1

Facility approved for (if satellite/off campus site include address): Approval for existing surgery center changing from hospital license to freestanding ASTC. Facility has 3 operating rooms, 9 recover rooms, 5 preop rooms, 2 locker rooms, waiting room, nurses station, 4 patient restrooms, medical gas room, 1 procedure room, 1 physical therapy room, 1 scope processing and clean up, 2 dictation rooms, nourishment, pharmacy, 2 storage rooms, autoclave room, soiled work room, sterile work room, mechanical and electric rooms, 2 janitors closets, communications room, office space

Sprinklered: 100 (Full 100%) Partial: _____ (%)

Licensed bed count from: _____ to _____ Number of beds increased/decreased: 0

Total Licensed bed count: _____

If secured unit, number of beds in unit: _____ If Alzheimer's unit, number of beds in unit: _____
(NOTE: If this is an increase in the number of beds in a secured Alzheimer's unit, indicate number of beds approved for the increase number only)

Health Surveyor: Brandi Blair Date: 05/07/2026

Fire Safety: Britni Spears Date: 04/13/2026

CD Approved: Yes No _____ N/A _____ Health Survey Required: Yes No _____; if Yes, please indicate which region: WTRO

Facility's Letter of Notification received in Licensure: Yes _____ No (CON Approved)
(Completed by Central Office Licensure Staff)

CMS Paperwork (855, etc) approved and received in regional office: Yes _____ No _____
(NOTE: With exception of Initial Licensure Approvals)

Effective date: 05/07/2026 Licensure is recommended: Yes No _____
(Completed by Central Office Licensure Staff)

Brandi Blair, WTRO Complaint Supervisor 05/07/2026
Regional Administrator/Facilities Construction Director or Designee Date

Licensure Program Unit Staff Amy Whitaker 05/07/2026



RECEIVED 11/25/2025

WTRO APPL#10146
ISTD FILE# 279
P/R

**AMBULATORY SURGICAL TREATMENT CENTERS
APPLICATION FOR INITIAL LICENSURE**

All applicable laws, rules, policies, and guidelines affecting your practice are available for viewing at <https://www.tn.gov/hfc/division-of-licensure-and-regulation/hfc-licensure/licensure-applications.html>. Please check this website periodically for updates.

Name of the Facility/Agency Lebanon Surgicenter, LLC d/b/a Lebanon Center for Outpatient Surgery

Location of the Facility:

Street 125 Willard Hagan Drive City Lebanon

County Wilson County State Tennessee Zip 37090

Phone Number (615) 449-1150 Fax Number (615) 449-1162

Twenty-four (24) Hour Emergency Phone Number (615) 449-1150

E-Mail Address ~~Daniel.Winkler@SurgeryVentures.com~~ Linnea.Stewart@SurgeryVentures.com

AKW

Administrator Information:

Administrator See attached. Linnea Stewart AKW

Have you (Administrator) ever been convicted of a crime involving injury or harm to person(s), financial or business management (e.g., assault, battery, robbery, embezzlement, or fraud)? Yes No

If yes, what charge(s)? _____

Location of Conviction _____ Date _____
(City) (County) (State)

Mailing address if different from the Facility location address:

Name N/A (same as Facility address)

Street _____

City _____ State _____ Zip _____

Ownership of Building:

Name Hartmann SC Partners Phone Number (615) 855-2230

Street 7101 Sharondale Court, Suite 600

City Brentwood State Tennessee Zip 37027

1. Check classification of institution for which application is made:

General Surgical Maternity _____ Gynecological _____ Other (specify)

Cancer Treatment _____ Plastic Surgery _____ Ophthalmological _____
Orthopedic Surgery, Total Joint Replacement, Orthopedic Spine Surgery, Podiatry, and Pain Management.

EENT Urological _____ Gastroenterology
Dental _____ Acupuncture _____ Abortion (* See 3.) _____

2. Briefly state the overall objective of the surgical treatment center: See attached.

3. Are you a Physician's Practice performing more than 50 surgical abortions annually? Yes _____ No

If yes, when was the Physician's Practice established to provide surgical abortions _____

4. Provide proof of the ability to meet the financial needs of the facility. See attached.

OWNERSHIP OF BUSINESS:

1. a. Check the type of Legal Entity:

Individual _____ Partnership _____ Corporation _____ Limited Liability Company

Church Related _____ Government/County _____ Other _____

b. Check one: For Profit Non-profit _____

c. Legal Entity checked in 1.a:

Name Lebanon Surgicenter, LLC Phone Number (615) 449-1150

Street 125 Willard Hagan Drive

City Lebanon State Tennessee Zip 37090

List name(s) and address(es) of individual owners, partners, directors of the corporation, or head of the governmental entity:

See attached.

Name	Street	City, State, Zip
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Name	Street	City, State, Zip
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(If additional space is needed, please use a separate sheet)

e. If a government/county owned facility, does the administrator have authority to act on behalf of the government/county as it relates to the operation of this facility? Yes _____ No _____

f. If no to e., who has said authority? _____

2. a. Is the ambulatory surgical treatment center a hospital-based ambulatory surgical treatment center? Yes _____ No

b. Is the ambulatory surgical treatment center a non-hospital ambulatory surgical treatment center? Yes No _____

3. a. Is your facility/organization accredited by a **federally approved** accrediting body including but not limited to JCAHO, CARF, etc.? **Provide proof of accreditation.**

Yes _____ No _____ Expiration Date Not currently, but the facility will pursue TJC accreditation.

4. Is this facility chain affiliated? Yes No _____

5. If you have a parent company, please provide the following information:
 Name Surgicare of Lebanon, LLC Phone Number (615) 344-9551
 Address 1 Park Plaza
 City Nashville State Tennessee Zip 37203
6. a. If a corporation, is there a holding company? Yes ___ No ___ N/A; applicant is an LLC rather than a corporation.
 b. If yes, list the name, address, and phone number of the holding company:
 Name N/A; applicant is an LLC rather than a corporation. Phone Number ()
 Street _____
 City _____ State _____ Zip _____
7. a. Are any owners of the disclosing entity also owners of other health care facilities in Tennessee and/or other states? Yes No ___
 b. If yes, list names and addresses of all such facilities:
See attached.
8. a. Do you have a contract with a management firm to operate this facility? Yes No ___ See attached.
 If yes, specify dates: From 01/31/2026 To 01/31/2036 AKW
 b. If yes, specify name of firm: Surgicare of Lebanon, LLC
 Street 13355 Noel Road, Suite 1200 Phone Number (615) 344-9551
 City Dallas State TX Zip 75240
9. For any item in (8) a-h below, please identify, explain and provide documentation of the item(s) noted if response is "Yes". Have either the licensed entity for any of the other health care facilities in Tennessee and/or other states on the list in question (6.b.) above, OR the management firm listed in question (7.) above; been subjected to any of the following within the last (5) years:
- a. Licensure**
- i) denied a license ? Yes ___ No
- ii) had a license suspended or revoked by any state licensure agency? Yes ___ No
- iii) been subject to a final order or judgment in a state licensure action? Yes ___ No
- b. Convictions**
- i) convicted of a criminal offense related to that person's involvement in any program under any state or Federal health care program (including Medicare, Medicaid, and Tricare)? Yes ___ No
- c. Exclusion**
- i) excluded from participation in Federal health care programs (Medicare, Medicaid, CHIP, or Tricare) in the past? Yes ___ No
- (Note: "Excluded" is defined as a provider or entity has been told by the Department of Health and Human Services, Office of the Inspector General (HHS-OIG) that they may no longer be a provider for any federally funded healthcare program).*

Please Note: We understand "suspended or terminated from participation" to refer to involuntary program actions for cause. We have not included administrative disenrollments associated with revalidation timing.

d. Termination/Suspension

i) suspended or terminated from participation in Medicare or Medicaid/TennCare programs? Yes ___ No X

(Note: This would include involuntary termination of a nursing facility or skilled nursing facility by the Centers for Medicare and Medicaid Services (CMS) or state Medicaid agency).

e. Fraud and Abuse

i) paid through settlement, or civil or criminal fines, any monies to the federal government or any state as a result of any administrative or judicial proceeding based on allegations of fraud or abuse involving claims related to the provision of health care items and services? Yes ___ No X

f. Corporate Integrity Agreement

i) Is presently an entity covered by and subject the terms of a corporate integrity agreement? Yes ___ No X

(Note: If yes, provide a copy of CIA)

g. Bankruptcy

i) filed bankruptcy under any provision of the United States Bankruptcy Code? Yes ___ No X

h. Civil Monetary Penalty (CMP)

i) paid to the Centers for Medicare and Medicaid Services or any state Medicaid agency a civil money penalty equal to or greater than \$250,000.00 as a result of an enforcement action during a survey? Yes ___ No X

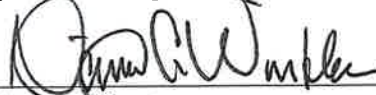
Failure to provide true and correct copies of any documents related to the items list in 8(a-h) listed above may be grounds for referral of the application for special consideration, and/or may be grounds for disciplines.

If the applicant answered "Yes" to any of the questions (a)-(h) above, please provide copies of any documentation associated with the event and/or sanction. The documentation should provide the Health Facilities Commission with sufficient information regarding the nature of the event and/or sanction, the current status of the issue, as well as details regarding what corrective action have been implemented (as applicable).

VERIFICATION BY NOTARY PUBLIC:

Signee for application certifies that he or she is of responsible character and able to comply with the minimum standards and regulations established by Tennessee pertaining to the type of facility or agency for which application for licensure is made and with the rules promulgated under Tennessee Code Annotated (TCA §68-11-201.

Signee also certifies that a policy has been implemented to inform all employees of their obligation under TCA § 71-6-103 to report incidents of abuse or neglect.

 Vice President of Surgicare of Lebanon, LLC, the Sole Member of Applicant
Applicant Signature Title or Position Date 11/24/2025

STATE OF TENNESSEE

County of Williamson

The above named applicant (print name) Daniel Winkler, being by me duly sworn on his/her oath, deposes and says that he/she read the foregoing application and knows the contents thereof that the statements concerning the above named facility or agency, therein contained, are correct and true to his/her own knowledge.

Subscribed to and sworn to on this 24th day of November 2025
Month Year

Notary Public: Elizabeth A. Duprez

My commission expires: 10-17-26

FEE SCHEDULE: (FEES ARE NON-REFUNDABLE) **\$1,404**



EXHIBIT F:

Ownership and Board Disclosures

List name(s) and address(es) of individual owners, partners, directors of the corporation, or head of the governmental entity:

Direct and Indirect Owners of the Company:

Name	Street	City, State, Zip	Ownership Percentage
Surgicare of Lebanon, LLC	1 Park Plz	Nashville, TN 37203	100% ownership of Lebanon Surgicenter, LLC
Medical Care America, LLC	1 Park Plz	Nashville, TN 37203	100% ownership of Surgicare of Lebanon, LLC
Healthtrust, Inc. – The Hospital Company	1 Park Plz	Nashville, TN 37203	100% ownership of medical Care America, LLC
HCA Inc.	1 Park Plz	Nashville, TN 37203	100% ownership of HCA, Inc.
HCA Healthcare, Inc. (<i>a publicly traded company</i>)	1 Park Plz	Nashville, TN 37203	100% ownership of Healthtrust, Inc. – The Hospital Company
Hercules Holding II	3100 West End Avenue, Suite 500	Nashville, TN 37203	Owns 29% of common stock of HCA Healthcare, Inc.
Frisco, Inc.	3100 West End Avenue, Suite 500	Nashville, TN 37203	Owns approximately 53% of Hercules Holding II

*For convenience, please see the attached organizational chart for the Company.

**Given that HCA Healthcare, Inc. (“HCA”) is a publicly traded company, we have disclosed its largest reportable beneficial owner as of the filing date. For information regarding each person known to beneficially own more than five percent (5%) of HCA’s outstanding common stock, please refer to HCA’s most recent proxy statement (DEF 14A) filed with the SEC. Beyond those reportable holders, HCA’s remaining equity is broadly dispersed among public shareholders with non-controlling stakes.

***Prior to opening, physicians will have the opportunity collectively to acquire up to forty-nine percent (49%) of the membership interests in the Company. The syndication period is expected to run from November 2025 through January 2026, with such ownership interests becoming effective immediately prior to the Center’s opening. Following consultation with Ann Reed, we understand and have been advised that the Commission may accept and process this Application

notwithstanding the anticipated ownership changes, without penalty or adverse consequence, provided that we timely update the Application after the syndication closes. For the avoidance of doubt, the information reported in the Application is accurate based on current ownership, and we will provide prompt notice and any necessary updates immediately after the close of syndication.

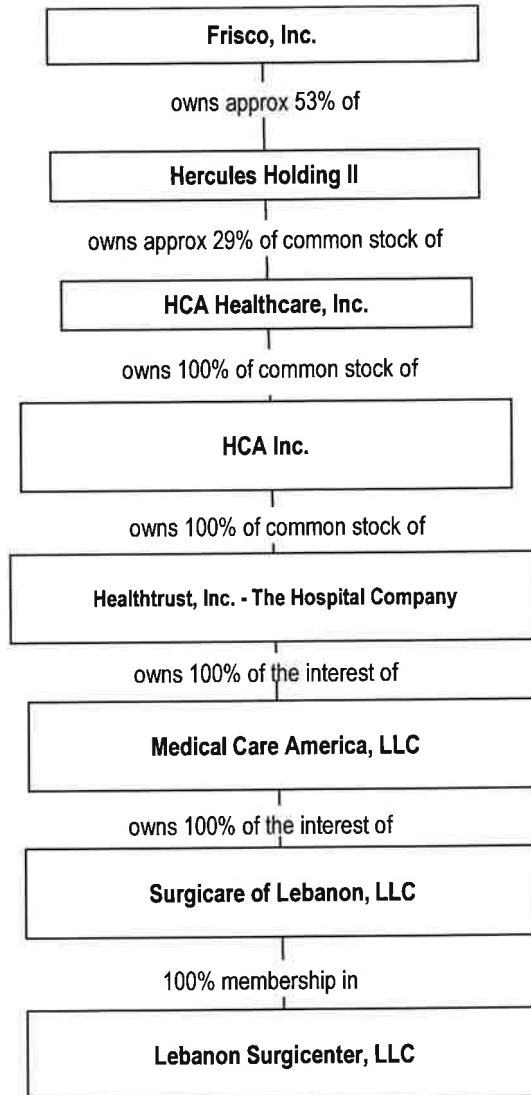
Members of the Board of Managers of the Company:

The Company does not have its own board of managers. Accordingly, we have provided the members of the board of managers for its sole owner, Surgicare of Lebanon, LLC. Please see the information below:

Name	Street	City, State, Zip	Ownership Percentage
Gregary Beasley	13355 Noel Road Ste. 1200	Dallas, TX 75240	0%
Jon M. Foster	1 Park Plz	Nashville, TN 37203	0%
John M. Franck II	1 Park Plz	Nashville, TN 37203	0%

*It may be the case this information will change in connection with the above-described transaction. We will notify the agency as soon as possible once this information is known.

Lebanon Surgicenter, LLC
Organizational Chart



Long Name	Address 1	Address 2	City	State	Zip
Alaska Surgery Center	1230 Northway Drive		Anchorage	AK	99508
All Saints Surgery Center	11377 Cortez Blvd.		Brooksville	FL	34613
Alpine Surgery Center	3801 Lake Otis Parkway	Suite 100	Anchorage	AK	99508
Ambulatory Surgery Center - Tampa	4500 East Fletcher Avenue		Tampa	FL	33613-4910
Arapahoe Endoscopy Center	1001 Southpark Drive		Littleton	CO	80120-5641
Augusta Evans CBO	7004 Evans Town Center Blvd.	Suite 200 2nd Floor	Evans	GA	30809-4314
Augusta Surgical Center	915 Russell Street		Augusta	GA	30904-4115
Aurora Endoscopy Surgicenter	14272 East Evans Ave.		Aurora	CO	80014
Austin GI Surgicenter I	8015 Shoal Creek Blvd	Suite 300	Austin	TX	78757
Austin GI Surgicenter II	4310 James Casey Street	Suite 4B	Austin	TX	78745
Austin GI Surgicenter III	3944 Ranch Road 620 South	103	Bee Cave	TX	78738
Austin GI Surgicenter IV	1361 Hero Way	Suite # 100	Leander	TX	78641
Bailey Square Surgery Center	1111 West 34th Street	Pt Reg/Bus Off 4th floor, Suite 400	Austin	TX	78705-1900
Bay Area Houston Endoscopy	1015 Medical Ctr. Blvd	Suite 1200	Webster	TX	77598-4055
Bay Area Surgicare Center	502 Medical Center Boulevard		Webster	TX	77598-4220
Bayonet Point Surgery & Endoscopy Center	14104 Yosemite Drive		Hudson	FL	34667-6554
Bayside Ambulatory Surgery Center	3641 South Miami Avenue		Miami	FL	33133-4205
Belleair Surgery Center	1130 Ponce De Leon Boulevard		Clearwater	FL	33756-1041
Blue Ridge Surgery Center	1802 Braeburn Drive		Salem	VA	24153-7357
Blue River Surgery Center	1318 E 104TH Street		Kansas City	MO	64131
Boulders Ambulatory Surgery Center	1115 Boulders Parkway	Suite 210	Richmond	VA	23225-4067
Brandon Surgery Center	516 Vonderburg Drive		Brandon	FL	33511
Brentwood Surgery Center	1001 Health Park Drive	Suite 101	Brentwood	TN	37027
Brownsville Surgery Center	5700 North Expressway	Suite 201	Brownsville	TX	78526
Calloway Creek Surgery Center	4300 City Point Drive	Suite 100	North Richland Hills	TX	76180-8380
CAREOS Surgicenter	3705 Medical Parkway	Suite 110	Austin	TX	78705
Centennial Surgery Center	345 23rd Avenue North	Suite 201	Nashville	TN	37203-1513
Centerpoint Ambulatory Surgery Center	19550 East 39th Street	Suite 100	Independence	MO	64057-1917
Central Park Surgery Center	900 West 38th Street	Suite 200	Austin	TX	78705
Central Utah Surgical Center	640 West 800 North		Orem	UT	84057
Central West Texas ASD CBO	7800 Shoal Creek Blvd.	Suite 200-East	Austin	TX	78757
Centrum Surgical Center	8200 E. Belleview Ave	Suite 300E	Greenwood Village	CO	80111-2884
Clear Creek Surgery Center	7809 W. 38th Avenue	Suite 100	Wheat Ridge	CO	80033-6183
College Park Surgery Center	10787 Nall Avenue	Suite 100	Overland Park	KS	66211-1373
Colorado Springs Surgicenter, LLC	9925 Federal Dr	Suite 130	Colorado Springs	CO	80921
Comprehensive Digestive Surgicenter	8440 W. Warm Springs		Las Vegas	NV	89113
Countryside Surgery Center	3291 N. McMullen Booth Road		Clearwater	FL	33761-2010
Denver Endoscopy Center	8155 East 1st Avenue		Denver	CO	80230-7163
Doctors Same Day Surgery Center	5741 Bee Ridge Road	Suite 100	Sarasota	FL	34233-5060
East Florida Central Business Office	2824 Corporate Way		Miramar	FL	33025-6546
Endoscopy Center of Silicon Valley	2410 Samaritan Drive	Suite 100	San Jose	CA	95124
Fairfax Surgical Center	10730 Main Street		Fairfax	VA	22030-3704
Fannin Surgicare	7700 Fannin Street		Houston	TX	77054-1908
Far West CBO	7250 W. Cathedral Rock Dr.	Suite 200	Las Vegas	NV	89128
Flamingo Surgery Center	2565 East Flamingo Road		Las Vegas	NV	89121-5203
Focus Hand and Arm Surgery Center	601 E. Hampden Avenue	Suite 510	Englewood	CO	80113-2771
Gastrointestinal Endoscopy Center	1600 Coit Road	Suite 401A	Plano	TX	75075-6174
Georgia Eye Institute Surgery Center	4720 Waters Avenue	Suite 300	Savannah	GA	31404
Gramercy Outpatient Surgery Center	2727 Gramercy Street	Suite 100	Houston	TX	77025-1617
Grande Dunes Surgery Center	1021 Cipriana Drive	Suite 100	Myrtle Beach	SC	29572-4621
Gulf Coast Surgery Center	411 Second Street East		Bradenton	FL	34208-1001
Gulf Pointe Surgery Center	21260 Olean Blvd.	Suite 105	Port Charlotte	FL	33952-6742
HCA HealthONE CBO	6501 E. Belleview Ave.	Suite 240	Englewood	CO	80111
HMU Surgical Center	4219 Richmond Avenue	Suite 100	Houston	TX	77027-6813
Houston CBO	16840 Buccaneer Lane	Suite 150	Houston	TX	77058
Humble Kingwood Endoscopy Center	19502 McKay	Suite 101	Humble	TX	77338-5707
Jacksonville CBO	4500 Salisbury Road	Suite 511	Jacksonville	FL	32216

Jacksonville Surgery Center	7021 A. C. Skinner Parkway		Jacksonville	FL	32256-6932
Katy Endoscopy Center	21814 Katy Freeway	Suite 100	Katy	TX	77494
Kingsley Endoscopy Center	870 Kingsley Drive		Orange Park	FL	32073
Kissimmee Surgery Center	2275 North Central Avenue		Kissimmee	FL	34741-2342
Lakeview Endoscopy Center	620 East Medical Dr	Suite 200	Bountiful	UT	84010-5173
Lee's Summit Surgicenter, LLC	1950 SE Blue Parkway		Lee's Summit	MO	64063
Lincoln Surgery Center	11960 Lioness Way	Suite 120	Parker	CO	80134-5640
Lone Peak Surgery Center	96 East Kimballs Lane	100	Draper	UT	84020-5002
Los Gatos Surgical Center	15195 National Avenue	Suite 100	Los Gatos	CA	95032-2631
Los Robles SurgiCenter	2190 Lynn Road	Suite 100	Thousand Oaks	CA	91360-8019
McAllen Surgicenter, LLC	4211 North Jackson Rd	Suite 100	McAllen	TX	78504
Medical City Dallas Ambulatory Surgery Center	7777 Forest Lane	Suite C-150	Dallas	TX	75230-2571
Medical City Specialty Surgicenter of Dallas	12228 North Central Expressway	Suite 100	Dallas	TX	75243
Medical City Surgery Center Allen	1125 Raintree Circle	Suite 200	Allen	TX	75013
Medical City Surgery Center Alliance	8900 Medical City Way		Fort Worth	TX	76177
Medical City Surgery Center -DENTON	3316 Colorado Blvd.		Denton	TX	76210-6864
Medical City Surgery Center Fort Worth	909 Ninth Avenue		Ft. Worth	TX	76104-3903
Medical City Surgery Center Frisco	5575 Frisco Square Blvd.	Suite 100	Frisco	TX	75034
Medical City Surgery Center McKinney	4510 Medical Center Drive	Suite 150	McKinney	TX	75069-0144
Medical City Surgery Center of North Texas	330 N. Standridge Blvd		Anna	TX	75409
Medical City Surgery Center Park Central	12200 Park Central Drive	Suite 300	Dallas	TX	75251-2117
Medical City Surgery Center Southlake	2815 W. Southlake Blvd.	Suite 100	Southlake	TX	76092
Methodist Ambulatory Surgery Center - Medical Center	4411 Medical Drive	Suite 200	San Antonio	TX	78229-3824
Methodist Ambulatory Surgery Center - North Central	19010 Stone Oak Parkway		San Antonio	TX	78258-3225
Methodist Ambulatory Surgery Center of Boerne	110 Menger Springs		Boerne	TX	78006
Methodist Surgery Center Landmark	5510-B Presidio Parkway	Suite 100	San Antonio	TX	78249
Methodist Surgery Center Texas Center for Athletes	21 Spurs Lane	Suite SL-100	San Antonio	TX	78240-1672
MHS ASC CBO	4330 Medical Drive	Suite 340	San Antonio	TX	78229
Mid-America Surgery Institute	5525 West 119th Street	Suite 100	Overland Park	KS	66209-3723
Midtown Surgical Center	1919 E. 18th Avenue		Denver	CO	80206-1107
Midwest CBO	8787 Ballentine	Suite 1300	Overland Park	KS	62214
Midwest Pain Management Center	200 NE Missouri Road	Suite 100	Lee's Summit	MO	64086-4772
Mountain Division CBO	1120 W. Sportsplex Dr.		Kaysville	UT	84037-9591
Mountain West Endoscopy Center	6360 South 3000 East	Suite 320	Salt Lake City	UT	84121-6932
MountainWest Surgical Center	1551 S. Renaissance Towne Drive	Suite 200	Bountiful	UT	84010-7668
Mt. Ogden Surgical Center	4364 Washington Blvd.		Ogden	UT	84403-1866
Mt. Olympus Surgery Center	1250 East 3900 South	Suite 100	Salt Lake City	UT	84124-1363
New England Center for Orthopaedic Surgery	1900 Lafayette Road	Building 2	Portsmouth	NH	03801
New Port Richey Surgery Center	9332 State Road 54	Suite 100	Trinity	FL	34655-1810
North Austin Surgery Center	12201 Renfert Way	Suite 120	Austin	TX	78758-5367
North County Surgicenter	4000 Burns Road		Palm Beach Gardens	FL	33410-4604
North Cypress Surgicenter	10425 Huffmeister Road	Suite 100	Cypress	TX	77065
North Florida Surgical Pavilion	6705 NW 10th Place		Gainesville	FL	32605-4212
North Metro Surgery Center	9005 Grant Street	Suite 300	Thornton	CO	80229-4384
North Texas Central Business Office	1755 Wittington Place	Suite 550	Farmers Branch	TX	75234
Oakwood Surgery Center	16030 Park Valley Drive	Suite 100	Round Rock	TX	78681-3648
Oklahoma Surgicare	4317 W. Memorial Road		Oklahoma City	OK	73134-1720
Outpatient Surgical Services	301 N.W. 82nd Avenue		Plantation	FL	33324-1811
Overland Park Surgery Center	10601 Quivira Road	Suite 100	Overland Park	KS	66215-2320
Palms West Surgicenter	12961 Palms West Drive		Loxahatchee	FL	33470-4989
Park Ridge Surgery Center	10450 Park Meadows Drive	Suite 200	Lone Tree	CO	80124-5528
Parkside Surgery Center	2731 Park Street		Jacksonville	FL	32205-7607
Parkside Surgery Center - Conroe	690 South Loop 336 West	Suite 130	Conroe	TX	77304

Performance Health Surgery Center	9500 Gulf Research Lane		Fort Myers	FL	33912
Physicians Endoscopy Center	3030 S. Gessner	Suite 150	Houston	TX	77063-3777
Physicians Pavilion Surgery Center	545 Stonecrest Parkway		Smyrna	TN	37167
Pinnacle Surgicenter, LLC	2770 No. Union Blvd	Suite 180	Colorado Springs	CO	80909
Premier Orthopaedic Surgery Center	394 Harding Place	Suite 100	Nashville	TN	37211-3980
Red Rocks Surgery Center	400 Indiana Street	Suite 100	Golden	CO	80401-5027
Reston Surgery Center	1860 Town Center Drive	Parkway Medical Tower, Suite G100	Reston	VA	20190-5896
Ridge View Endoscopy Center	10103 Ridge Gate Parkway	Suite 312	Lone Tree	CO	80124-5525
Ridgeline Surgicenter	6028 S. Ridgeline Drive		South Ogden	UT	84405-6916
Riverside Endoscopy Center	2151 Riverside Ave	Suite 1	Jacksonville	FL	32204
Riverwalk Surgery Center	8350 Riverwalk Park Blvd.	Suite 4	Fort Myers	FL	33919-8759
Rocky Mountain Surgery Center	401 W. Hampden Place	Suite 100	Englewood	CO	80110-2471
Rose Surgical Center	4700 East Hale Parkway	Suite 200	Denver	CO	80220-4051
Sahara Surgery Center	2401 Paseo Del Prado		Las Vegas	NV	89102-4363
Same Day SurgiCenter of Orlando	88 West Kaley Street		Orlando	FL	32806-2931
San Antonio Gastroenterology Endo - Downtown	520 E. Euclid Avenue		San Antonio	TX	78212
San Antonio Gastroenterology Endo - Medical Center	2833 Babcock Rd.	Suite 120	San Antonio	TX	78229
San Antonio Gastroenterology Endo - North	150 E. Sonterra Blvd.	Suite 110	San Antonio	TX	78258
Sarasota Central Business Office	5184 Station Way		Sarasota	FL	34233-3221
Silicon Valley Surgery Center	2605 S. Winchester Blvd		Campbell	CA	95008
Sky Ridge Surgical Center	10099 Ridge Gate Parkway	Suite 100	Lone Tree	CO	80124-5532
South Denver Endoscopy	499 E. Hampden Avenue	Suite 430	Englewood	CO	80113-2794
Southern Joint Surgery Center	1717 Patterson Street		Nashville	TN	37203
Southern Kentucky Surgicenter	484 Golden Autumn Way	Suite 100	Bowling Green	KY	42103
Specialty Surgery Center	7250 Cathedral Rock Drive		Las Vegas	NV	89128-0433
St. David's Austin Area ASC	12200 Renfert Way	Suite G2	Austin	TX	78758
Stone Oak Surgicenter, LLC	123 N Loop 1604 E	Suite 107	San Antonio	TX	78232
Stone Springs Ambulatory Surgery Center	24570 Medical Drive		Dulles	VA	20166
Sugar Land Surgery Center	15300 SW Freeway	Suite 100	Sugar Land	TX	77478-3827
Summit Surgery Center	3901 Central Pike	Suite 152	Hermitage	TN	37076-3420
Surgery Center at Coral Springs	967 University Drive		Coral Springs	FL	33071-7048
Surgery Center at St. Andrews	1350 E. Venice Avenue		Venice	FL	34285-9066
Surgery Center of Anchorage	4001 Laurel Street	Suite 101	Anchorage	AK	99508-5368
Surgery Center of Atlantis	5645 South Military Trail		Lake Worth	FL	33463-6978
Surgery Center of Aventura	20601 East Dixie Highway	Suite 400	Aventura	FL	33180-1542
Surgery Center of Clarksville	121 Hillcrest Drive		Clarksville	TN	37043-5088
Surgery Center of Plano	4005 W. 15th Street		Plano	TX	75093-5818
Surgical Center of El Paso	1815 North Stanton		El Paso	TX	79902-3511
Surgicare of South Austin	4307 James Casey		Austin	TX	78745-3365
Surgicare of Wichita	2818 N. Greenwich Road		Wichita	KS	67226-8210
Surgicenter of Johnson County	8740 Nieman Rd		Overland Park	KS	66214
Surgicenter of Kansas City	701 East 101st Terrace		Kansas City	MO	64131-4271
Synergy Surgery Center	500 East Hampden Avenue	Suite 500	Englewood	CO	80113
Tallahassee Outpatient Surgery Center	3334 Capital Medical Blvd.	Suite 500	Tallahassee	FL	32308-4483
Tampa Eye and Specialty Surgery Center	4302 North Gomez Avenue		Tampa	FL	33607-6312
TOC Spine & Joint	2629 Welaunec Blvd		Tallahassee	FL	32308
Trident Surgery Center	9313 Medical Plaza Drive	Suite 102	Charleston	SC	29406-9153
Trinity Park Surgery Center	3501 Matlock		Arlington	TX	76015-3604
Utah County Surgicenter, LLC	3300 North 1200 West	Suite 100	Lehi	UT	84043
Utah Surgical Center	3715 West 4100 South	Suite 100	West Valley	UT	84120-5537
Venture Ambulatory Surgery Center	16853 NE 2nd Ave	Suite 400	North Miami Beach	FL	33162-1776
Wasatch Endoscopy Surgery Center	1220 E. 3900 South	Suite #1B	Salt Lake City	UT	84124-1327
West El Paso Surgical Center	820 E. Redd Rd	Bldg. C	El Paso	TX	79912
Willis Surgery Center	9863 W FM 1097		Willis	TX	77318
	8580 N Green Hills Rd	Suite B	Kansas City	MO	64154

Maddie Spearman

Associate
mspearman@bradley.com
(615) 252-2251 direct



March 18, 2026

**Via Overnight Delivery and
Email to ann.r.reed@tn.gov**

Tennessee Health Facilities Commission
Division of Licensure and Regulation
Andrew Jackson State Building
502 Deaderick St., 9th Floor
Nashville, TN 37243

Re: Supplement to Initial Application for a License to Operate an Ambulatory Surgical Treatment Center: Lebanon Surgicenter, LLC d/b/a Lebanon Center for Outpatient Surgery

Dear Ms. Reed:

I write on behalf of Lebanon Surgicenter, LLC (the “**Company**”), which intends to open and operate that certain ambulatory surgical treatment center known as Lebanon Center for Outpatient Surgery (the “**Center**”) located at 125 Willard Hagan Drive, Lebanon, Tennessee 37090 (the “**Site**”). The anticipated opening date of the Center is **May 1, 2026**.

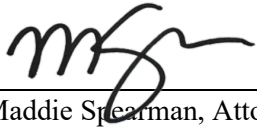
The Company submitted an application to the Health Facilities Commission for a license to operate the Center as an Ambulatory Surgical Treatment Center on November 25, 2025 (the “**Application**”). As noted in the Application, various physicians were afforded the right to collectively acquire a minority ownership interest in the Company, with such ownership interests becoming effective prior to the Center’s opening (the “**Syndication**”). Following consultation with Ann Reed, we understood and were advised that the Commission would accept and process the Application notwithstanding the anticipated ownership changes, without penalty or adverse consequence, provided that we timely update the Application after the syndication closed.

The syndication closed on **January 31, 2026**. The purpose of this correspondence is to provide supplemental information reflecting the ownership changes resulting from the closed syndication. Additionally, now that the Center’s opening is approaching, the Company has hired an Administrator for the Center and intends to report that appointment as well. Accordingly, please find the supplemental information for the Application attached hereto as **Exhibit A**. Unless modified pursuant to this supplement, all information reported in the Application remains unchanged.

Thank you for your attention to this matter. If any further information is required, or if you have any questions, please let us know as soon as possible. I can be reached via phone at (615) 252-2251 and via email at mspearman@bradley.com.

Very truly yours,

BRADLEY ARANT BOULT CUMMINGS, LLP

By: 
Maddie Spearman, Attorney

Enclosures

Exhibit A:

Supplement to Initial ASTC Facility License Application

1. Administrator Information.

Administrator: **Linnea Stewart**

Have you (Administrator) ever been convicted of a crime involving injury or harm to person(s), financial or business management (e.g., assault, battery, robbery, embezzlement, or fraud)?
No.

2. Ownership of Business.

List name(s) and address(es) of individual owners, partners, directors of the corporation, or head of the governmental entity:

Name	Street	City, State, Zip	Ownership Percentage
Amit S. Patel, M.D.	3616 W. End Avenue Unit D	Nashville, TN 37205	1.0% ownership of Lebanon Surgicenter, LLC
Matthew A. King, Jr., M.D.	504 Crieve Road	Nashville, TN 37220	1.0% ownership of Lebanon Surgicenter, LLC
Daniel Hagaman, M.D.	622 Merritt Avenue Unit 604	Nashville, TN 37203	1.0% ownership of Lebanon Surgicenter, LLC
William Melton, M.D.	112 Myrtle Street	Nashville, TN 37206	2.0% ownership of Lebanon Surgicenter, LLC
Sean Kaminsky, M.D.	609 Belle Meade Blvd	Nashville, TN 37205	2.0% ownership of Lebanon Surgicenter, LLC
Christopher Cook, M.D.	151 Governors Way	Brentwood, TN 37027	2.0% ownership of Lebanon Surgicenter, LLC
Shawn Mountain, M.D.	125 Lakewood Rd	Lebanon, TN 37087	6.0% ownership of Lebanon Surgicenter, LLC
Lucas Richie Consulting, LLC	1200 Gay Winds Drive	Mt. Juliet, TN 37122	10.0% ownership of Lebanon Surgicenter, LLC
Lucas Richie, M.D.	1200 Gay Winds Drive	Mt. Juliet, TN 37122	51.0% ownership of Lucas Richie Consulting, LLC
Kristina Richie	1200 Gay Winds Drive	Mt. Juliet, TN 37122	49.0% ownership of Lucas Richie Consulting, LLC
Plettenberg, LLC	3501 Trimble Road	Nashville, TN 37215	15.0% ownership of Lebanon Surgicenter, LLC
Jonathan Cornelius, M.D.	3501 Trimble Road	Nashville, TN 37215	100% ownership of Plettenberg, LLC
Surgicare of Lebanon, LLC	1 Park Plz	Nashville, TN 37203	60.0% ownership of Lebanon Surgicenter, LLC
Medical Care America, LLC	1 Park Plz	Nashville, TN 37203	100% ownership of Surgicare of Lebanon, LLC
Healthtrust, Inc. – The Hospital Company	1 Park Plz	Nashville, TN 37203	100% ownership of Medical Care America, LLC

Name	Street	City, State, Zip	Ownership Percentage
HCA Inc.	1 Park Plz	Nashville, TN 37203	100% ownership of Healthtrust, Inc. – The Hospital Company
HCA Healthcare, Inc. <i>(a publicly traded company)</i>	1 Park Plz	Nashville, TN 37203	100% ownership of HCA Inc.
Hercules Holding II	3100 West End Ave Suite 500	Nashville, TN 37203	Owens 14.4% of common stock of HCA Healthcare, Inc.
Frisco Holding II	3100 West End Ave Suite 500	Nashville, TN 37203	Owens 16.3% of common stock of HCA Healthcare, Inc.

*The above ownership information represents the ownership of the Company following the Syndication and effective as of January 31, 2026.

For convenience, please find enclosed as **Exhibit B the attached updated organizational chart for the Company.

***Given that HCA Healthcare, Inc. (“HCA”) is a publicly traded company, we have disclosed its largest reportable beneficial owner as of the filing date. For information regarding each person known to beneficially own more than five percent (5%) of HCA’s outstanding common stock, please refer to HCA’s most recent proxy statement (DEF 14A) filed with the SEC. Beyond those reportable holders, HCA’s remaining equity is broadly dispersed among public shareholders with non-controlling stakes.

3. **Board of Managers.**

The Company does not have its own board of managers. Accordingly, the Application identified the board of managers for the Company’s majority member, Surgicare of Lebanon, LLC. We have confirmed that the composition of this board did not change following the Syndication and related changes to the Company’s ownership.

4. **Affiliated Health Care Facilities.**

Are any owners of the disclosing entity also owners of other health care facilities in Tennessee and/or other states? **Yes.**

If yes, list names and addresses of all such facilities. **Please see attached as Exhibit C. Exhibit C reports such information exclusively with respect to the new owners in the Company following the closing of the Syndication; information for the owners who owned interests in the Company prior to the Syndication was included in our original filing.**

5. **Management Firm Contract.**

Do you have a contract with a management firm to operate this facility? **Yes.**

If yes, specify dates: **The Effective Date of the management contract is January 31, 2026, and the term of the management contract will continue until the later of (i) the date which**

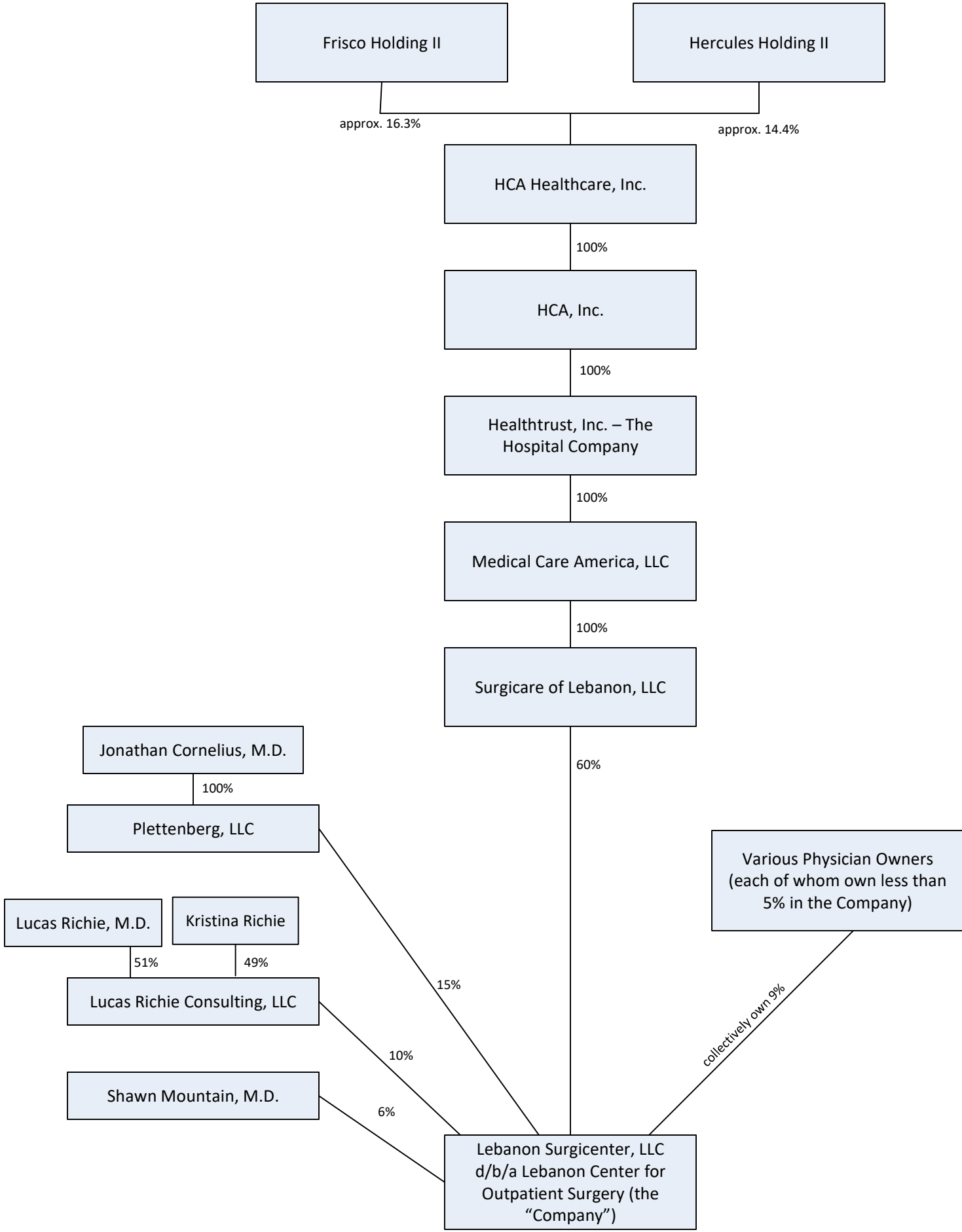


EXHIBIT C:

Affiliated Health Care Facilities

Please be advised that this **Exhibit C** reports such information exclusively with respect to the new owners in the Company following the closing of the Syndication; information for the owners who owned interests in the Company prior to the Syndication was included in our original filing.

Facility	Address
Summit Surgery Center, L.P.	3901 Central Pike, Suite 152 Hermitage, TN 37076
Premier ASC, LLC	394 Harding Pl Suite 100 Nashville, TN 37211
Premier Orthopaedics & Sports Medicine, PLC*	*
Providence Surgery Center	5002 Crossings Circle, Suite 110 Mt. Juliet, TN 37122
Pavilion Surgicenter, LLC	545 Stonecrest Pkwy Smyrna, TN 37167-6804

**We are actively confirming the address of Premier Orthopaedics & Sports Medicine, PLC, and will notify HFC once confirmed.*

Maddie Spearman

Associate
mspearman@bradley.com
(615) 252-2251 direct



March 23, 2026

**Via Overnight Delivery and
Email to ann.r.reed@tn.gov**

Tennessee Health Facilities Commission
Division of Licensure and Regulation
Andrew Jackson State Building
502 Deaderick St., 9th Floor
Nashville, TN 37243

Re: Second Supplement to Initial Application for a License to Operate an Ambulatory Surgical Treatment Center: Lebanon Surgicenter, LLC d/b/a Lebanon Center for Outpatient Surgery

Dear Ms. Reed:

I write on behalf of Lebanon Surgicenter, LLC (the “**Company**”), which intends to open and operate that certain ambulatory surgical treatment center known as Lebanon Center for Outpatient Surgery (the “**Center**”) located at 125 Willard Hagan Drive, Lebanon, Tennessee 37090 (the “**Site**”). The anticipated opening date of the Center is **May 1, 2026**.


The Company submitted an application to the Health Facilities Commission for a license to operate the Center as an Ambulatory Surgical Treatment Center on November 25, 2025 (the “**Application**”). As noted in the Application, various physicians were afforded the right to collectively acquire a minority ownership interest in the Company, with such ownership interests becoming effective prior to the Center’s opening (the “**Syndication**”). Following consultation with Ann Reed, we understood and were advised that the Commission would accept and process the Application notwithstanding the anticipated ownership changes, without penalty or adverse consequence, provided that we timely update the Application after the syndication closed.

The syndication closed on **January 31, 2026**, and we submitted a supplement to the Application on **March 18, 2026** (the “**First Supplement**”) which contained information required to complete the Application save for final confirmation of the address for Premier Orthopaedics & Sports Medicine, PLC. The purpose of this correspondence is to provide final confirmation of the address for Premier Orthopaedics & Sports Medicine, PLC. Accordingly, please find this information attached hereto as **Exhibit A**. Unless modified pursuant to this supplement, all information reported in the Application remains unchanged.

Thank you for your attention to this matter. The information provided herein should complete the Application; however, if any further information is required, or if you have any questions, please let us know as soon as possible. I can be reached via phone at (615) 252-2251 and via email at mspearman@bradley.com.

Very truly yours,

BRADLEY ARANT BOULT CUMMINGS, LLP

By: 
Maddie Spearman, Attorney

Enclosures

EXHIBIT A:

Affiliated Health Care Facilities

Please be advised that this **Exhibit A** reports such information exclusively with respect to the new owners in the Company following the closing of the Syndication; information for the owners who owned interests in the Company prior to the Syndication was included in our original filing and our First Supplement.

Facility	Address
Premier Orthopaedics & Sports Medicine, PLC*	394 Harding Pl Suite 100 Nashville, TN 37211

**We have confirmed this is the correct address for Premier Orthopaedics & Sports Medicine, PLC as of March 20, 2026.*

April 6, 2026

To: Tennessee Health Services Board

Re: Notice of Cessation of Services at 125 Willard Hagan Drive, Lebanon TN

Dear Members of the Tennessee Health Facilities Commission:

This letter serves as formal notice that TriStar Summit Medical Center will cease providing services under the hospital's license at 125 Willard Hagan Drive, Lebanon, TN 37090 effective April 30, 2026.


The cessation of services is due to the transition of this location to an ASTC, owned and operated by Lebanon Surgicare, LLC. We will ensure an orderly wind-down of operations, including appropriate patient/client notification and transition planning, continuity of care arrangements, and maintenance of required records in accordance with applicable state and federal requirements.

Please direct any questions or correspondence regarding this notice to:

Lauren Sligh, CFO
TriStar Summit Medical Center
5655 Frist Blvd
Hermitage TN 37076
615-316-3000

Thank you for your attention to this matter.

Sincerely,


Drew Grey
Chief Operating Officer

STATE OF TENNESSEE
Health Facilities Commission



Certificate of Need # **CN2504-013A** is hereby granted under the provisions of T.C.A. § 68-11-1601, *et seq.*, and rules and regulations issued thereunder by this Commission.

To: **Lebanon Surgicenter, LLC**
One Park Plaza
Nashville, TN 37203

For: **Lebanon Center for Outpatient Surgery**

This Certificate is issued for:

For the establishment of a multispecialty ambulatory surgical treatment center (ASTC). The ASTC will consist of approximately 17,350 square feet with two (2) operating rooms and one (1) procedure room. The surgical specialties to be offered at the ASTC will be General Surgery, ENT surgery, GI/Endoscopy, Orthopedic Surgery, Total Joint Replacement, Orthopedic Spine Surgery, Podiatry, and Pain Management Procedures. The facility will replace the existing TriStar Summit Hospital Outpatient Department. The service area for the project includes Wilson County. The applicant will be wholly owned by Lebanon Surgicenter, LLC, whose ultimate parent is HCA Healthcare, Inc. Following approval of the CON, the physicians on the medical staff at LCOS will have the opportunity to collectively become up to 49 percent owners of Lebanon Surgicenter, LLC, not to exceed 5 percent ownership individually.

On the premises located at: **125 Willard Hagan Dr.**
Lebanon (Wilson County), TN 37090

For an estimated project cost of **\$15,870,573.**

The Expiration Date for this Certificate of Need is **August 1, 2027**, or upon completion of the action for which the Certificate of Need was granted, whichever occurs first. After the expiration date, this Certificate of Need is null and void.

Date Approved: June 25, 2025

Date Issued: July 23, 2025


Chairman

Executive Director



State of Tennessee
Health Facilities Commission

Andrew Jackson Building
502 Deaderick Street, 9th Floor, Nashville, TN 37243
www.tn.gov/hfc Phone: 615-741-2364

July 23, 2025

Daniel Winkler, Vice President
Surgery Venture, Powered by HCA Healthcare
1000 Healthpark Drive, Bldg. 3, Suite 500
Brentwood, TN 37027

RE: Lebanon Center for Outpatient Surgery – CN2504-013A

Dear Mr. Winkler:

As referenced in our recent letter, please find enclosed your Certificate of Need for the above-referenced application that was approved at the June 25, 2025, meeting of the Tennessee Health Facilities Commission.

The Health Facilities Commission Rules require that an Annual Progress Report be submitted each year, and a Final Project Report form is to be submitted within ninety (90) days after completion of a project which shall include completion date, final costs, and other relevant information in regard to the project, per § 68-11-1611.

The aforementioned forms can be found on the Commission's website at www.tennessee.gov/HSDA. Should you have any questions or require further information regarding this Certificate, please do not hesitate to contact this office.

Sincerely,

Logan Grant
Executive Director

cc: Trent Sansing, TDH/Health Statistics, PPA
Ann R. Reed, HFC