

**From:** [Caroline Tippens](#)  
**To:** [Ann R. Reed](#); [Audra Allen](#)  
**Cc:** [Alecia L. Craighead](#); [Nathaniel Flinchbaugh](#)  
**Subject:** RE: [EXTERNAL] Request for Classification Guidance – Serenity Surgical Recovery  
**Date:** Tuesday, February 24, 2026 4:56:32 PM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)

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Hi Dr. Allen:

We work closely with Florida which is one of our Region 4 CMS partners. I'm aware that Florida has recently licensed the model of home which you are proposing called post-surgical recovery homes. Do you or the practitioners who would be working in this home happen to hold any certifications regarding surgical recovery, such as the Enhanced Recovery After Surgery Society (ERAS) or the American Society for Enhanced Recovery (ASER)?

I think the issue at hand will turn on the definition of home health service and the role of a potential home health aide.

Tenn. Comp. R. & Regs. 00720-27-.01(30) defines home health service. As defined by T.C.A. § 68-11-201, "home health service" means a service provided an **outpatient by an appropriately licensed health care professional** or an appropriately qualified staff member of a licensed home care organization **in accordance with orders recorded by a physician**, and which includes one (1) or more of the following:

- (a) **Skilled nursing care including part-time or intermittent supervision;**
- (b) Physical, occupational or speech therapy;
- (c) Medical social services;
- (d) **Home health aide services;**
- (e) **Medical supplies and medical appliances, other than drugs and pharmaceuticals, when provided or administered as part of or through the provision of, the services described in subparagraph (a) through (d); and**
- (f) Any of the foregoing items and services which are provided on an outpatient basis under arrangements made by the home care organization at a hospital, nursing home facility or rehabilitation center and the furnishing of which involves the use of equipment of such a nature that the items and services cannot readily be made available to the individual in the individual's home, or which are furnished at such facility while the individual is there to receive any such item or service, but not including transportation of the individual in connection with any such item or service.
- (g) Home health service does not include services provided in the home by a sole practice therapist, when such services are within the scope of the therapist's license and incidental to services provided by the sole practice therapist in the office. A sole practice therapist means a therapist licensed under Title 63, Chapter 13 or 17, who is in sole practice and not in a business arrangement with any other therapist or other healthcare provider. Sole practice

therapists are not excluded from the requirements of professional support services.

(29) Home Health Aide. A person who has completed a total of seventy-five (75) hours of training which included sixteen (16) hours of clinical training prior to or during the first three (3) months of employment and who is qualified to provide basic services, including simple procedures as extension of therapy services, personal care regarding nutritional needs, ambulation and exercise, and household services essential to health care at home.

Would the services provided in the client's home be incident to a physician's order? Would such services include skilled nursing care or administration of medical supplies/or physician prescribed garments/wound care/dressings incident to a physician's order?

Would the home health aide be providing services incident to a physician or non-physician provider's order? Is the lymphatic therapy/massage prescribed by a physician/NPP?

If you would provide us this information, we would greatly appreciate it. If necessary, we could bring this to the Commission for their interpretation, as well.

Thanks so much,

Caroline Tippens



**Caroline R. Tippens, Esq., C.H.C.**  
**Director, Licensure & Regulation**  
**Health Facilities Commission**

Andrew Jackson State Office Building

502 Deaderick Street, 9<sup>th</sup> Floor

Nashville, TN 37243

Office: (615) 741-7532

Mobile: (615) 806-3694

Email: [caroline.tippens@tn.gov](mailto:caroline.tippens@tn.gov)

<https://www.tn.gov/hfc>

*Mission Statement: Protecting patients and promoting quality in healthcare facilities.*

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**From:** Ann R. Reed <Ann.R.Reed@tn.gov>

**Sent:** Tuesday, February 24, 2026 4:13 PM

**To:** Audra Allen <audra@serenitysurgicalrecovery.com>

**Cc:** Alecia L. Craighead <Alecia.L.Craighead@tn.gov>; Caroline Tippens <Caroline.Tippens@tn.gov>; Nathaniel Flinchbaugh <Nathaniel.R.Flinchbaugh@tn.gov>

**Subject:** RE: [EXTERNAL] Request for Classification Guidance – Serenity Surgical Recovery

Dr. Allen

Good afternoon. I have a few additional questions. You list the following as being some of the services to be provided by Serenity Surgical Recovery. For the bullet points #4 and 5, will there be a physician order directing this care?

- Post-operative monitoring (non-hospital level)
- Assistance with activities of daily living
- Medication reminders (no prescribing)
- Dressing changes and basic wound care
- Lymphatic massage (performed by appropriately trained personnel)
- Meal preparation and recovery support
- Transportation coordination (if applicable)

Will a physician be involved in the care of the patients during the 1 to 5 day stay? If the location these patients are in for the 1-to-5-day time period is not their regular place of residence, would you call this a temporary place of residence for them? Will nursing assessments be conducted during the 1-to-5-day period? Will a plan of care or an equivalent be developed.

I have also included to this email Caroline Tippens, Director of Licensure and Regulation, and Nathaneil Flinchbaugh, Deputy General Counsel for the Health F  
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**Ann Rutherford Reed RN, BSN, MBA**  
**Deputy Director, Licensure & Regulation**  
**Health Facilities Commission**  
Andrew Jackson Building  
502 Deaderick Street, 9<sup>th</sup> Floor  
Ph: 615-532-6595  
Email: [ann.r.reed@tn.gov](mailto:ann.r.reed@tn.gov)  
<https://tn.gov/hfc>

***Mission Statement: Protecting patients and promoting quality in healthcare facilities.***

acilities Commission, for further thoughts and considerations.

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**From:** Alecia L. Craighead <[Alecia.L.Craighead@tn.gov](mailto:Alecia.L.Craighead@tn.gov)>

**Sent:** Friday, February 20, 2026 1:08 PM

**To:** Audra Allen <[audra@serenitysurgicalrecovery.com](mailto:audra@serenitysurgicalrecovery.com)>

**Cc:** Ann R. Reed <[Ann.R.Reed@tn.gov](mailto:Ann.R.Reed@tn.gov)>

**Subject:** RE: [EXTERNAL] Request for Classification Guidance – Serenity Surgical Recovery

Ms. Allen.

As mentioned on the phone, I do not believe what you are inquiring about will require a Certificate of Need. However, I am copying Ann Reed in the hopes she can help guide you on whether a license is required and which one.

Ann, If my interpretation is incorrect relating to Certificate of Need, please let me know so I can help guide her on that process.

Thank you.

Alecia

**Alecia Craighead** | Data and Analysis Administrator  
Health Facilities Commission

Andrew Jackson State Office Building, 9<sup>th</sup> Floor  
502 Deaderick Street, Nashville, TN 37243

p. 615-253-2782

c. 615.674.0370

[alecia.l.craighead@tn.gov](mailto:alecia.l.craighead@tn.gov)

[www.tn.gov/hfc](http://www.tn.gov/hfc)

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**From:** Audra Allen <[audra@serenitysurgicalrecovery.com](mailto:audra@serenitysurgicalrecovery.com)>

**Sent:** Wednesday, February 18, 2026 10:37 AM

**To:** Alecia L. Craighead <[Alecia.L.Craighead@tn.gov](mailto:Alecia.L.Craighead@tn.gov)>

**Subject:** [EXTERNAL] Request for Classification Guidance – Serenity Surgical Recovery

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Good Morning Ms. Craighead,

My name is Dr. Audra M. Allen, DNP, RN, and I am in the process of establishing a post-operative recovery service in Tennessee called Serenity Surgical Recovery. Before proceeding further with build-out or marketing, I would like clarification on how this type of service would be classified under Tennessee regulations.

Serenity Surgical Recovery will provide non-acute, short-term post-operative support for adult clients who have undergone elective cosmetic or plastic surgery procedures.

Services would include:

- Post-operative monitoring (non-hospital level)
- Assistance with activities of daily living
- Medication reminders (no prescribing)
- Dressing changes and basic wound care
- Lymphatic massage (performed by appropriately trained personnel)
- Meal preparation and recovery support
- Transportation coordination (if applicable)

The intent is not to provide hospital-level care, skilled nursing facility services, or emergency medical treatment. Clients would be medically stable and discharged by their surgeon prior to admission to our service.

At this time, I am exploring two possible models:

1. A small, luxury recovery residence where clients stay short-term (1–5 days) after surgery.
2. A mobile/home-care model where services are provided in the client’s residence or hotel.

Could you please advise:

- Whether this type of service requires licensure under the Tennessee Health Facilities Commission
- If so, under what facility classification it would fall
- Or if it would instead be regulated under home care, personal support services, or another category

My goal is full compliance with Tennessee law prior to launch. I would appreciate any guidance, relevant statutes, or direction to the appropriate regulatory body.

Thank you for your time and assistance. I look forward to your guidance.

Respectfully,  
Dr. Audra M. Allen, DNP, RN  
Founder, Serenity Surgical Recovery  
7068884650  
[audra@serenitysurgicalrecovery.com](mailto:audra@serenitysurgicalrecovery.com)