



**State of Tennessee
Health Facilities Commission**

502 Deaderick Street, Andrew Jackson Building, 9th Floor, Nashville, TN 37243

www.tn.gov/hsda

Phone: 615-741-2364

hsda.staff@tn.gov

LETTER OF INTENT

The Publication of Intent is to be published in The Commercial Appeal, Tennessee, on or before 10/09/2024 for one day.

This is to provide official notice to the Health Facilities Commission and all interested parties, in accordance with T.C.A. §68-11-1601 et seq., and the Rules of the Health Facilities Commission, that All About You Home Health Care, a/an Home Health Agency owned by Daughters of Zion with an ownership type of Corporation (Not-for-Profit) and to be managed by itself intends to file an application for a Certificate of Need for the establishment of a home care organization and the initiation of home health services. The proposed service area consists of Shelby County. Services to be provided includes a comprehensive range of healthcare services, including skilled nursing, physical and occupational therapy, medical social work, and certified nursing assistant support. The goal is to improve access to quality care for underserved, high-risk populations, particularly in areas with significant health disparities.. The address of the project will be 4400 Hickory Hill Road, Memphis, Shelby County, Tennessee, 38141. The estimated project cost will be \$53,000.

The anticipated date of filing the application is 10/30/2024

The contact person for this project is Executive Director Gerald Kiner who may be reached at Daughter of Zion - 4400 HICKORY HILL RD – Contact No. 901-650-7340.

Gerald Kiner

10/04/2024

gkiner@daughtersofzion.org

Signature of Contact

Date

Contact's Email Address

The Letter of Intent must be received between the first and the fifteenth day of the month. If the last day for filing is a Saturday, Sunday, or State Holiday, filing must occur on the next business day. Applicants seeking simultaneous review must publish between the sixteenth day and the last day of the month of publication by the original applicant.

The published Letter of Intent must contain the following statement pursuant to T.C.A. §68-11-1607 (c)(1). (A) Any healthcare institution wishing to oppose a Certificate of Need application must file a written notice with the Health Facilities Commission no later than fifteen (15) days before the regularly scheduled Health Facilities Commission meeting at which the application is originally scheduled; and (B) Any other person

wishing to oppose the application may file a written objection with the Health Facilities Commission at or prior to the consideration of the application by the Commission, or may appear in person to express opposition. Written notice of opposition may be sent to: Health Facilities Commission, Andrew Jackson Building, 9th Floor, 502 Deaderick Street, Nashville, TN 37243 or email at hsda.staff@tn.gov .



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PUBLICATION OF INTENT

The following shall be published in the “Legal Notices” section of the newspaper in a space no smaller than two (2) columns by two (2) inches.

NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED

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