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HEALTH FACILITIES COMMISSION
SEPTEMBER 23, 2026
APPLICATION REVIEW

NAME OF PROJECT: Sunray HHA TN, LLC

PROJECT NUMBER: CN2607-015

ADDRESS: 740 Cool Springs Blvd., Suite 120, Office 1
Franklin (Williamson County), TN 37067

LEGAL OWNER: Sunray HHA TN, LLC
1012 Madison Avenue, Suite A
Madison (Madison County), MS 39110

OPERATING ENTITY: N/A

CONTACT PERSON: Michael Brent, Bradley Arant Boult Cummings
(615) 252-2361

DATE FILED: July 30, 2026

PROJECT COST: \$202,418

PURPOSE FOR FILING: Establishment of a home care organization and the initiation of home health services.

Staff Review

Note to Commission members: This staff review is an analysis of the statutory criteria of Need, Consumer Advantage Attributed to Competition, and Quality Standards, including data verification of the original application and, if applicable, supplemental responses submitted by the applicant. Any Health Facilities Commission Staff comments will be presented as a "Note to Commission members" in bold italic.

PROJECT DESCRIPTION:

This applicant is requesting approval for the establishment of a home care organization and the initiation of home health services limited to home infusion services located at 740 Cool Springs Blvd., Suite 120, Office 1, Franklin (Williamson County), Tennessee 37067. The project will be limited to home infusion services. The proposed service area will consist of 95 counties including CON-exempt Lake and Pickett Counties.

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Executive Summary

- If approved, the applicant projects the project will open for service in January 2027.
- The applicant is seeking to establish a home care organization and initiate home health services limited to home infusion care for pharmacy patients of SunRay RX NSHTN, LLC d/b/a Vital Care of Franklin.
- The applicant's home health office will be co-located with its affiliate pharmacy which has recently been licensed (July 2026) by the Tennessee Department of Health Board of Pharmacy (license #00008332).
- The applicant is affiliated with Sunray Companies which is a Mississippi-based group of companies involved in hotels, and other businesses, some of which are subject to licensing through State health licensing boards such as cosmetology and massage therapy. The applicant does not have previous experience as a home health or home infusion provider.
- The applicant will be a franchisee of Vital Care – a national provider that has 6 current locations in Tennessee as either a pharmacy or home infusion agency. Four CON applications have been approved in the past four years for Vital Care franchises for the establishment of home care organizations limited to the provision of home infusion services to patients of their affiliated pharmacy:
 - River City Infusion, LLC CN2511-042A
 - Blueberry Health Infusion Nursing, LLC, CN2505-019A
 - Tristate Infusion CN2409-024A
 - Tristate Infusion, LLC CN2204-022A
- The applicant states that it is not aware of any material differences between its proposed operating plan or projected utilization and other recently approved CON projects for Vital Care franchisees.
- The applicant is requesting approval for a statewide service area and states that it will initially focus on Middle TN counties in Year 1 before expanding into East and West Tennessee.
- The applicant intends to operate an ambulatory infusion center at its pharmacy office site in addition to the proposed home infusion agency.
- The applicant does not plan to serve pediatric patients initially and will not provide chemotherapy services.
- Please see application Item 1E. on page 6 for the applicant's executive summary overview that includes project description, ownership, service area, existing similar service providers, project cost, and staffing.

Note to Commission members: Of the four CONs projects affiliated with Vital Care, only two: Tristate Infusion, LLC (CN2409-024A & CN2204-022A) have reported utilization through the 2025 JAR. Across the two Tristate Infusion, LLC projects, the applicant projected Year 1 Utilization of 212 patients across 68 counties. In 2025 TriState reported serving 247 patients across 22 counties with most of the patients being residents of Shelby County, 158 patients (64%). See Appendix A.

Consent Calendar: ☐ Yes ☒ No

- Executive Director's Consent Memo Attached: ☐ Yes ☒ Not applicable

Facility Information

- The project office site, Suite 120 is being leased to the applicant, Sunray RX NSHTN, LLC d/b/a Vital Care of Franklin, TN, through the landlord HSRE-SG I, GP. See Attachment 9A, Lease Agreement and the Floor plan attached as Attachment 10A.
- The office space of approximately 300 square feet will be subleased to the applicant from its affiliate - Sunray RX NSHTN, LLC.
- The applicant is not proposing to establish any branch offices.

Ownership

- The applicant is an affiliate of Sunray RX NSHTN LLC, D/B/A Vital Care of Franklin, TN and is ultimately owned by Sunray RX LLC. There are four individuals with an ownership share in Sunray RX, LLC. See Attachment 7A.

Project Cost Chart

- The total project cost is \$202,418. Of this amount, the highest line-item costs of the project are Facility Lease Costs (\$89,418); Legal, Administrative, Consultant Fees Costs (\$60,000); and Contingency Fund Costs (\$50,000).
- Please see the Project Cost Chart on Page 9 of the application.

NEED

The applicant provided the following supporting the need for the proposed project:

- Improved access to in-home infusion therapy service to the patients of the applicant's affiliated licensed pharmacy. The applicant states that other CONs have been approved for franchisees of Vital Care in three other major metropolitan areas (Memphis, Chattanooga and Knoxville) and this project represents Greater Nashville as its home office.
- The State's home health need formula does not take the specialized nature of home infusion into consideration. Only 13 of the licensed home health agencies in Tennessee report providing home infusion services.
- The applicant states that there is a need for specialty home infusion services of the applicant's pharmacies which require the administration of specialty drugs, administered frequently for longer sessions that required for traditional home health care nursing visits, as well as complex coordination of nursing staff and medication administration methods.
- The need to expand cost-effective home infusion care into rural areas of Tennessee where residents face challenges around travel, lack of insurance, and health literacy.

(For applicant discussion, see the Original Application, Pages 7-8)

SERVICE SPECIFIC CRITERIA AND STANDARD REVIEW

Home Health Services:

All applicable criteria and standards were met except for the following:

- Did not meet the standard of **#1. Determination of Need** **“In a given county, 1.5 percent of the total population will be considered as the need estimate for home health services in that county. This 1.5 percent formula will be applied as a general guideline, as a means of comparison within the proposed Service Area.”** *This project proposes to initiate home health services on a statewide basis. The statewide service area cumulatively reflects a surplus of (58,918) home health admissions according to the standard of (1.5%) of the total population of the counties included in the project service area. The three counties included in the service area which show the largest surplus are the following: Hamilton County (4,032), Davidson County (3,601), and Sullivan County (3,035). See Attachment 1N, Home Health Services Standards and Criteria #1 Determination of Need.*
- Did not meet the standard of **#4. County Need Standard: “The applicant should demonstrate that there is a need for home health services in each county in the proposed Service Area by providing documentation (e.g., letters) where: a) health care providers had difficulty or were unable successfully to refer a patient to a home care organization and/or were dissatisfied with the quality of services provided by existing home care organizations based on Medicare’s system Home Health Compare and/or similar data; b) potential patients or providers in the proposed Service Area attempted to find appropriate home health services but were not able to secure such services; c) providers supply an estimate of the potential number of patients that they might refer to the applicant.”** *The applicant has included three letters of support from physicians documenting general challenges in accessing home infusion care and the benefits of expanding access to infusion care will provide. However, the applicant has not provided support letters documenting the specific elements a. – c. of this criterion. None of the letters provided are geographically specific. See Attachment 1N, Home Health Services Standards and Criteria #4 County Need Standard and Attachment 6N for the Letters of Support.*
- Partially met the standard of **#7. Community Linkage Plan: “The applicant should provide a community linkage plan that demonstrates factors such as, but not limited to, referral arrangements with appropriate health care system providers/services (that comply with CMS patient choice protections) and working agreements with other related community services assuring continuity of care focusing on coordinated, integrated systems. A new provider may**

submit a proposed community linkage plan.” *The applicant has not identified any specific service area providers that it intends to include in its proposed community linkage plan stating it: “is now in the process of hiring such employees to engage with social workers, discharge planners and various other healthcare professions as to the assistance the pharmacy can provide to such healthcare professionals for their patients who may be in need of in-suite infusions, as well as home infusions....no specific arrangements have yet been made with any healthcare providers, but those are anticipated to be finalized in the near future.” Therefore, this criterion appears to be partially met. See Attachment 1N, Home Health Services Standards and Criteria #7 Community Linkage Plan and Supplemental 2, Question 3, Pages 1 & 2.*

Note to Commission members: HFC staff has compiled a list of CONs approved for home health infusion services since 2022 for member reference. Those approved projects are listed in the table below. Projects that have reported data through the most recent Joint Annual Report are highlighted in red:

- *KabaFusion TN (CN2405-012A and CN2408-021A);*
- *TwelveStone Infusion Support, LLC (CN2210-042A and CN2205-025A);*
- *CareMax Pharmacy of Loudon, Inc (CN2210-039A and CN2210-040A) and*
- *TriState Infusion, LLC (CN2409-024A and CN2204-022A).*

Of the eight approved CON projects listed above, only TriState Infusion, which is a Vital Care franchisee, has met or exceeded the projected number of patients identified in its application for the first year of operation across its two applications. Two of the approved CONs from CareMax Pharmacy of Loudon, Inc. are now closed. See Appendix A of this summary for a comparison of projections vs. utilization for these projects.

County	CN #	License #	Project Name
Knox	CN2604-009A	NA	Naven Health, Inc.
Knox	CN2602-006A	NA	OPTIV Infusion
Hamilton	CN2511-042A	NA	River City Infusion, LLC
Knox	CN2505-019A	709	Blueberry Health Infusion Nursing, LLC
Hamilton	CN2503-008A	708	Amerita, Inc
Davidson	CN2405-012A	692	KabaFusion TN
Davidson	CN2408-021A	692	KabaFusion TN
Shelby	CN2409-024A	675	Tristate Infusion
Davidson	CN2210-040A	NA	CareMax Pharmacy of Loudon, Inc. (Middle)
Knox	CN2210-039A	NA	CareMax Pharmacy of Loudon, Inc. (East)
Rutherford	CN2210-042A	649	TwelveStone Infusion Support, LLC
Rutherford	CN2205-025A	649	TwelveStone Infusion Support, LLC
Shelby	CN2204-022A	675	Tristate Infusion, LLC

A full list of county level home infusion use rates per 100,000 population is provided as Appendix B to this staff summary.

Please see Attachment 1N for a full listing of the criteria and standards and the applicant's responses.

Service Area Demographics

- The target population consists of all age categories. (See Attachment 3NBR for more demographic details.)

Service Area Demographics Table

Service Area County	2025 Population	2028 Population	% Change	Median Household Income	Persons Below Poverty Level	TennCare %
Tennessee Total	7,242,733	7,410,264	2.3%	\$69,595	14.7%	18.7%

Source: CN2607-015, Attachment 3N.B The University of Tennessee Center for Business and Economic Research Population Projection Data Files, Reassembled by the Tennessee Department of Health, Division of Policy, Planning and Assessment, Office of Health Statistics.

Service Area- Historical Utilization (Home Health Agencies)

Utilization of all service area home health providers for the past three years (2023-2025) has been provided by the applicant in Attachment 5N. The following table is a summary of the statewide home health utilization from 2023 to 2025 and is not specific to infusion services:

	Total Patients				% Change 23-25
	2023	2024	2025	Total 2023-2025	
Home Health Agencies Serving Patients in the 95 counties	164,990	165,681	168,139	498,810	1.9%

Source: CN2607-015, Attachment 5N, Utilization of Existing Home Health Providers.

The applicant provides the following utilization data for the licensed home health agencies in the state that provided home infusion services in the statewide service area between 2023-2025:

2025 Home Infusion Services Utilization Statewide

Home Health Agency	Home County	State ID	2025 Infusion Visits - Pain Management	2025 Infusion Hours - Pain Management	2025 Infusion Visits - Other	2025 Infusion Hours - Other
Amedisys Home Health	Davidson	19674	0	0	7	0
Coram CVS Specialty Infusion Services	Williamson	19734	560	3,422	0	0
Advanced Nursing Solutions	Blount	19754	752	3,402	420	476
KabaFusion TN LLC	Davidson	19914	36	251	17	17
Vanderbilt HC Option Care IV Services	Davidson	19994	4,679	4,340	1,121	1,076
Coram CVS Specialty Infusion Services	Knox	47442	738	5,717	2	3
Implanted Pump Management LLC	Knox	47452	0	0	360	102
Twelvestone Infusion Support	Rutherford	75084	207	898	467	636
Accredo Health Group, Inc.	Shelby	79456	385	1,480	802	872
Coram CVS Specialty Infusion Service	Shelby	79556	441	2,998	19	29
Hemophilia Preferred Care of Memphis, Inc.	Shelby	79566	0	0	3	3
Optum Infusion Services LLC	Williamson	79856	1,463	7,467	116	185
Tristate Infusion LLC	Shelby	79926	973	4,263	973	1,203
Home Health Agencies (Infusion) Serving Patients in the 95 Counties			10,234	34,238	4,300	4,602

Source: CN2607-015, Attachment 5N, Utilization of Existing Home Health Providers.

Applicant's Historical and Projected Utilization

The applicant does not currently operate a home health agency, and therefore there is no historical utilization data. The following table indicates the applicant's projected home health utilization by number of patients in Year 1 (2027) of the proposed project.

Projected Utilization – Sunray HHA TN, LLC

Service Area County	Projected Utilization Patients Year 1 (2027)	% of Patients Year 1 (2027)
Williamson	27	18.2%
Davidson	26	17.6%
Rutherford	17	11.5%
Wilson	9	6.1%
Maury	9	6.1%
Sumner	8	5.4%
Marshall	6	4.1%
Montgomery	6	4.1%
Dickson	5	3.4%
Bedford	5	3.4%
Robertson	4	2.7%
Coffee	4	2.7%
Giles	3	2.0%
Cheatham	3	2.0%
Moore	3	2.0%
Lincoln	2	1.4%
Hickman	2	1.4%
Lawrence	2	1.4%
Franklin	2	1.4%
Other Counties <1	5	3.4%
Total	148	100%

Source: CN2607-015, Application, Page 11

- The applicant projects that each home infusion therapy patient will average six visits with significant variations between patients.
- The applicant states that it does not have any specific arrangements with healthcare providers in the state at this time but will establish relationships with discharge planners, social workers and other healthcare providers regarding its infusion pharmacy services once established.

CONSUMER ADVANTAGE ATTRIBUTED TO COMPETITION

- The applicant states that the number of infusion medications approved for home administration and the expansion of payor willingness to cover home infusion of these therapies requires increased access to providers.
- Patients will benefit from the reduced physical, financial and logistical burdens of receiving infusion therapies in a hospital or ambulatory setting.
- The approval of this application will improve access to medically necessary infusion services, particularly in underserved and rural communities, without increasing consumer charges for these services.

Charges

- The applicants' proposed charges are listed on Page 21. The applicant's unit of measure for calculating charge information is home infusion patients.

	Projected Data Chart	
	Year 1	Year 2
Gross Charges	\$620.40	\$620.40
Deduction from Revenue	\$40.33	\$40.32
Average Net Charges	\$580.07	\$580.08

Source: CN2607-015, Application, Page 21.

Summary of Infusion Therapy Providers 2025 Average Charge Per Patient, Visit & Hour

Facility Name	State ID	County	Patients	Visits	Hours	Gross Revenue	Per Patient	Per Visit	Per Hour
Amedisys Home Health	19674	Davidson	3,315	72,055	0	\$26,695,084	\$8,052.82	\$370.48	-
Coram CVS Specialty Infusion Services	19734	Williamson	32	560	3,422	\$127,388	\$3,980.88	\$227.48	\$37.23
Advanced Nursing Solutions	19754	Blount	144	1,172	3,878	\$189,838	\$1,318.32	\$161.98	\$48.95
KabaFusion TN LLC	19914	Davidson	11	53	268	\$15,245	\$1,385.91	\$287.64	\$56.88
Vanderbilt HC Option Care IV Services	19994	Davidson	472	6,195	5,979	\$2,112,969	\$4,476.63	\$341.08	\$353.40
Coram CVS Specialty Infusion Services	47442	Knox	32	740	5,720	\$210,920	\$6,591.25	\$285.03	\$36.87
Implanted Pump Management LLC	47452	Knox	85	360	102	\$54,300	\$638.82	\$150.83	\$532.35
Twelvestone Infusion Support	75084	Rutherford	80	674	1,534	\$136,315	\$1,703.94	\$202.25	\$88.86
Accredo Health Group, Inc.	79456	Shelby	462	1,187	2,352	\$213,895	\$462.98	\$180.20	\$90.94
Coram CVS Specialty Infusion Service	79556	Shelby	20	460	3,027	\$127,915	\$6,395.75	\$278.08	\$42.26
Hemophilia Preferred Care of Memphis, Inc.	79566	Shelby	1	3	3	\$1	\$1.00	\$0.33	\$0.33
Optum Infusion Services LLC	79856	Williamson	138	1,579	7,652	\$351,787	\$2,549.18	\$222.79	\$45.97
Tristate Infusion LLC	79926	Shelby	247	1,946	5,466	\$221,500	\$896.76	\$113.82	\$40.52
Totals			5,039	86,984	39,403	\$30,457,157	\$6,044	\$350	\$772.96

Source: CN2607-015, Joint Annual Report, HFC Staff Compiled, Average Charges for Infusion Providers

- Seven of the thirteen agencies reporting home infusion services in Tennessee in 2025 did not list their average charge per visit in the Joint Annual Report. Of the six that did, one reported an average \$150 per visits charge, four reported a \$200 per visit charge and one - Methodist Alliance Home Care - ID 79316 (Shelby County) reported a \$300 per visit charge. See Attachment 9C.

Project Payor Mix

	Percentage of Gross Operating Revenue						
	Medicare/ Medicare Advantage	Medicaid/ TennCare	Commercial	Self-Pay	Other	Total	Charity Care
Year 1	22.5%	0%	76.5%	1%	100%	100%	3%

Source: CN2607-015, Application, Page 22

- The applicant states that it will participate in traditional Medicare including Part B (as a Home Infusion Therapy provider) and Part D, Medicare Advantage.
- The applicant states that it does not plan to participate in TennCare networks as it understands that many infusion medication types are not covered and believes that reimbursement for home infusion nursing services is inadequate due to

limitations in hours per visit and per week. The applicant states that it will continue to monitor changes to TennCare MCO networks.

- The applicant states that it will evaluate referrals for TennCare patients in the same manner as other referrals and will apply its financial hardship policies for patients when coverage is limited or unavailable. For patients who do not qualify for financial hardship, a referral may be made to the applicant's affiliated ambulatory infusion services.
- The applicant's affiliated pharmacy intends to be a supplier of DME for home infusion care.
- The applicant has included its Charity Care policy as Attachment 10C-CCP.

Agreements

- The applicant does not identify any specific transfer agreements.

Staffing

- Direct Care positions include the following: Infusion Nurse – RN (4.5 FTEs).
- Non-Patient Care positions include the following: Administrative Staff (0.5 FTE).
- The applicant states that it understands the unique requirements of infusion nursing staffing and will leverage the support of its franchisor, Vital Care Infusion Services, to hire, train, and assess the performance of its infusion nursing staff.
- The lead pharmacist for the applicant's affiliate pharmacy will supervise a nurse manager and be responsible for oversight of all pharmaceutical administration including intravenous care. The lead pharmacist will ultimately report to the General Counsel and Director of Sunray RX, LLC, which is the parent company of the applicant and its affiliate pharmacy.
- The applicant states that while it plans to directly employ direct care staff, it does intend to occasionally utilize contract staff or third-party staffing agencies such as Naven Health in its operations. The applicant does not identify specific instances where contracted staff may be necessary.

QUALITY STANDARDS

- The applicant commits to obtaining the following:

Licensure	Certification	Accreditation
Health Facilities Commission	Medicare	ACHC – Accreditation Commission for Health Care

Source: CN2607-015, Application, Page 24

- The applicant states that it will pursue Medicare certifications and accreditation by Accreditation Commission for Health Care (ACHC) for infusion nursing certification and this accreditation will apply to its home health agency in Tennessee once established.

- The applicant states that it will comply with accreditation requirements through ACHC which require the adoption of policies monitoring the quality of care provided by its home health care agency, as well as ongoing quality improvement efforts including process and outcome monitoring.
- The applicant states that it is unable to provide any comparative quality measurement data from other Vital Care franchisees in Tennessee because it is proprietary. Vital Care supports franchisees with guidance on Quality Control and Monitoring as well as case management protocols and family support training.
- The applicant has included examples of policies, procedures, administrative support and operational resources as Attachment VCSD.

Application Comments

Application Comments may be filed by the Department of Health, Department of Mental Health, and Substance Abuse Services, and the Department of Disability and Aging. The following department(s) filed comments with the Commission and are attached:

- ☐ Department of Health
- ☐ Department of Mental Health and Substance Abuse Services
- ☐ Department of Disability and Aging
- ☒ **No comments were filed**

Should the Commission vote to approve this project, the CON would expire in **two** years.

CERTIFICATE OF NEED INFORMATION FOR THE APPLICANT:

There are no other Letters of Intent, denied, pending applications, or outstanding Certificates of Need on file for this applicant.

CERTIFICATE OF NEED INFORMATION FOR OTHER SERVICE AREA FACILITIES:

There are no other denied applications on file for other entities proposing this type of service.

Outstanding Applications

Project Name	Naven Health, Inc., CN2604-009A
Project Cost	\$142,733
Meeting Date	June 24, 2026
Description	The establishment of a home care organization and the initiation of home health services located at 9041 Executive Park Dr., Suite 250, Room 6, Knoxville (Knox County), Tennessee 37923. The project will be limited to home infusion services. The proposed service area will consist of 95 counties including CON-exempt Grundy and Lake Counties. The applicant is owned by SPNN Holdings, LLC which is ultimately owned by Option Care Enterprises, Inc.
Project Status	This project was recently approved.
Expiration	August 1, 2028

Project Name	CLGLHealth LLC, dba homeRN Franklin, CN2603-007A
Project Cost	\$60,800
Meeting Date	June 24, 2026
Description	The establishment of a home care organization and the initiation of home health services located at 1035 Westhaven Blvd, S-301, Franklin (Williamson County), Tennessee 37064. The proposed service area consists of Williamson County. The applicant is owned by Emily Manning, PA-C with an ownership type of Limited Liability Company.
Project Status	This project was recently approved.
Expiration	August 1, 2028

Project Name	AMA Home Care Services LLC, dba homeRN Nashville, CN2603-008A
Project Cost	\$60,200
Meeting Date	June 24, 2026
Description	The establishment of a home care organization and the initiation of home health services located at 4350 Sneed Road, Nashville (Davidson County), TN 37215. The proposed service area consists of Davidson County. The applicant is owned by Aubrey Austin, NP with an ownership type of Limited Liability Company.
Project Status	This project was recently approved.
Expiration	August 1, 2028

Project Name	AHC Home Health & Hospice of Nashville, LLC, CN2604-011
Project Cost	\$190,840
Meeting Date	June 24, 2026
Description	The modification of the scope of services of the existing Agency's home health services, whose parent office is located at 627 19th Ave. N., Nashville (Davidson County), TN 37203. The approval of this application will remove the condition on the existing home health agency license #667 limiting its home health services to only those patients who have received services at AHC Nashville, LLC, d/b/a Advanced Health Care of Nashville, an existing skilled nursing facility (the "Center"), also located at 627 19th Ave. N., Nashville, TN 37203. The approval will grant the Agency an unrestricted home health agency license in Cheatham, Davidson, Robertson, Rutherford, Sumner, Williamson and Wilson Counties. The applicant is owned by owned by LHM MAN HHH, LLC. a holding company which is ultimately owned by The Larry H. Miller Company.
Project Status	This project was recently approved.
Expiration	June 1, 2028

Project Name	OPTIV Infusion, LLC, CN2602-006A
Project Cost	\$100,000
Meeting Date	April 22, 2026
Description	The establishment of home care organization and the initiation of home health services located at 1600 Breda Drive, Floor B, Knoxville (Knox County), TN 37918. The proposed home health agency will be limited to home infusion and related nursing services for pharmacy patients of OPTIVRX, LLC. The proposed service area will represent a 29-County service area that includes Anderson, Bledsoe, Blount, Campbell, Carter, Claiborne, Cocke, Cumberland, Fentress, Grainger, Greene, Hamblen, Hancock, Hawkins, Jefferson, Johnson, Knox, Loudon, McMinn, Meigs, Monroe, Rhea, Roane, Scott, Sevier, Sullivan, Unicoi, Union, and Washington Counties. The applicant is owned by OPTIVRX Infusion, LLC.
Project Status	This project was recently approved.
Expiration	June 1, 2028

Project Name	River City Infusion, LLC, CN2511-042A
Project Cost	\$180,000
Meeting Date	February 25, 2026
Description	The establishment of a home care organization and the initiation of home health services limited to home infusion and related nursing services for pharmacy patients of RCIV, LLC d/b/a Vital Care of Chattanooga. The project will serve a proposed service area of 95 counties. The address of the project will be 1200 Mountain Creek Road, Suite 440, Chattanooga, (Hamilton County), Tennessee 37405. The applicant is owned by River City Infusion, LLC.
Project Status	This project was recently approved.
Expiration	April 1, 2028

Project Name	Abe's Garden at Home, CN2509-035A
Project Cost	\$27,636
Meeting Date	February 25, 2026
Description	The establishment of a non-Medicare Certified home health agency and the initiation of home health services in Coffee, Davidson, Maury, Wilson, and Williamson Counties. The address of the project will be 115 Woodmont Blvd., Nashville (Davidson County), Tennessee 37205. The applicant is owned by Abe's Garden Community.
Project Status	This project was recently approved.
Expiration	April 1, 2028

Project Name	MGA Home Healthcare Tennessee dba MGA Homecare, CN2409-025A
Project Cost	\$1,402,000
Meeting Date	January 22, 2025
Description	For to removal of the age limitation (currently limited to pediatric patients pursuant to TCA 68-11-1607 (s) (1)) from its current Home Health Agency license (#0000000640), so that the agency can provide in-home home health services in Bedford, Cheatham, Davidson, Dickson, Fayette, Rutherford, Shelby, Sumner, Tipton and Williamson Counties, which will continue to be self-managed. Its parent office is located at 1669 Kirby Parkway, Suite 100, Memphis (Shelby County), TN 38120 and its branch office is located at 3310 West End Avenue, Suite 500, Nashville (Davidson County), TN 37203. The address of the project will be 1669 Kirby Parkway, Suite 100, Memphis (Shelby County), Tennessee 38120. The applicant is owned by MGA Home Healthcare Tennessee Holdings, LLC.
Project Status	Project Status September 2026 - Occupancy approval was received from HFC November 7, 2025. The project is reported as complete. Final report is pending.
Expiration	March 1, 2027

Project Name	Maxim Healthcare Services, Inc, CN2508-029A
Project Cost	\$2,381,275
Meeting Date	October 22, 2025
Description	To remove the license limitation (currently limited to pediatric patients pursuant to TCA 68-11-1607 (s) (1) and adult patients served under the federal Energy Employees Occupational Illness Compensation Program Act of 2000, as permitted under TCA 68-11-1607 (r) (1)) from its current Home Health Agency license (#0000000615) so that the agency can provide in-home home health services in Giles, Jackson, Lawrence, Lewis, Lincoln, Macon, Moore, Putnam, Smith, Trousdale, Warren, and Wayne counties, Tennessee. The agency will continue to be self-managed. The address of the project will be 115 East Park Drive, Suite 200, Brentwood (Williamson County), Tennessee 37027.
Project Status	Project Status September 2026 - Maxim Healthcare is fully operational and available to provide homecare services in the counties approved for CON project CN2508-029A. Maxim is currently providing homecare services to several patients and is actively working through referrals with expected admission dates over the next several weeks. A project status report is due in December 2026.
Expiration	December 1, 2027

Project Name	Maxim Healthcare Services, Inc, CN2507-023A
Project Cost	\$2,050,364
Meeting Date	September 24, 2025
Description	For removal of the license limitation (currently limited to pediatric patients pursuant to TCA 68-11-1607 (s) (1) and adult patients served under the federal Energy Employees Occupational Illness Compensation Program Act of 2000, as permitted under TCA 68-11-1607 (r) (1)) from its current Home Health Agency license (#0000000613) and to initiate home health services in Cumberland County, Tennessee, so the agency can provide in-home home health services in Bledsoe, Cumberland, Franklin, Monroe, Polk, Van Buren, Warren, and White counties, Tennessee. The agency will continue to be self-managed. The address of the project will be 555 Walnut Street, Suite 150, Chattanooga (Hamilton County), Tennessee 37402. The applicant is directly owned by Maxim Healthcare Services Holdings, Inc., which serves as the parent entity in the corporate structure. The indirect owners of Maxim Healthcare Services, Inc., through Maxim Healthcare Services Holdings, Inc., include Oak Investment Trust with 39.47% ownership, Oak Investment Trust II with 38.95% ownership, and Stephen Bisciotti with 19.74% ownership.
Project Status	Project Status September 2026 – Occupancy approval was received from HFC November 7, 2025. The project is still outstanding. The Annual Progress Report for this project is due on November 1, 2026.
Expiration	November 1, 2027

Project Name	Blueberry Health Infusion Nursing, LLC, CN2505-019A
Project Cost	\$74,919
Meeting Date	July 23, 2025
Description	The establishment of a home care organization and the initiation of home health services with a home office located at 6700 Baum Drive, Suite 22, Knoxville (Knox County), TN 37919. The application is limited to home infusion and related nursing services for pharmacy patients of Schwabing Corp, doing business as Vital Care of Knoxville. The proposed service area will consist of 94 Tennessee counties including Grundy, Lake, and Perry Counties that are Certificate of Need exempt under the economically distressed designation effective July 1, 2025. The only Tennessee County not in the applicant's proposed service area is Macon County due to not meeting publication requirements. The applicant is owned by Blueberry Health Infusion, LLC consisting of the following three members: Robert Bindner, Laura Binder, and SchwaBing Corporation. Each owner has an equal one-third ownership interest.
Project Status	Project Status Update: September 2026 – Licensure survey was conducted on February 5, 2025, and a licensing letter was provided February 6 th . A September progress report is pending.
Expiration	September 1, 2027

Project Name	Amerita, Inc., CN2503-008A
Project Cost	\$352,581
Meeting Date	May 28, 2025
Description	The establishment of a home care organization and the initiation of home health services limited to home infusion and related nursing services for patients of pharmacies owned by Amerita, Inc. The project will serve a proposed service area of 80 counties: Anderson, Bedford, Benton, Bledsoe, Blount, Bradley, Campbell, Cannon, Carroll, Carter, Cheatham, Claiborne, Clay, Cocke, Coffee, Cumberland, Davidson, Decatur, DeKalb, Dickson, Fentress, Franklin, Giles, Grainger, Greene, Grundy, Hamblen, Hamilton, Hancock, Hardin, Hawkins, Henderson, Henry, Hickman, Houston, Humphreys, Jackson, Jefferson, Johnson, Knox, Lawrence, Lewis, Lincoln, Loudon, Macon, Marion, Marshall, Maury, McMinn, Meigs, Monroe, Montgomery, Moore, Morgan, Overton, Pickett, Polk, Putnam, Rhea, Roane, Robertson, Rutherford, Scott, Sequatchie, Sevier, Smith, Stewart, Sullivan, Sumner, Trousdale, Unicoi, Union, Van Buren, Warren, Washington, Wayne, White, Williamson, and Wilson Counties, as well as CON-exempt Perry County. The address of the project will be 5959 Shallowford Road, Suite 104, Chattanooga (Hamilton County), Tennessee 37421. The applicant, Amerita, Inc., is a for-profit corporation owned by Pharmacy Corporation of America (100%).
Project Status	Status Update – September 2026: The project is reported as complete. Final report is pending resubmission.
Expiration	July 1, 2027

Project Name	Tennessee Quality Care Home Health (West), CN2402-004AE
Project Cost	\$261,969
Meeting Date	April 24, 2024
Description	The establishment of a home care organization and the initiation of home health services in a 13-county service area that includes: Carroll, Crockett, Dyer, Fayette, Gibson, Haywood, Henry, Lauderdale, Obion, Shelby, Tipton and Weakley Counties, as well as Certificate of Need-exempt Lake County. Lake County meets the criteria under T.C.A. § 68-11-1607(q) for designation as an economically distressed county and is not subject to Certificate of Need review. Upon approval of this project, the 13 proposed service area counties will be removed from the 51-county licensed service area of Tennessee Valley Home Care, LLC, d/b/a Tennessee Quality Care – Home Health (License No. 221), an existing home care organization located at 580 Tennessee Avenue, North, Parsons (Decatur County), Tennessee that is also owned by American Home Care, LLC. The address of the project will be 115 Neal Street, Suite E&F, Martin (Weakley County), Tennessee 38237. The applicant is owned (100%) by American Home Care LLC, which is (100%) owned by Addus HealthCare, Inc., which is (100%) owned by Addus HomeCare Corporation.
Project Status	Status Update – June 2026: The project was approved 5/20/2026 for 18-month extension to 12/1/27.
Expiration	June 1, 2026

TPP (9/15/2026)

Staff Summary Appendix A – Vital Care Franchisees Home Infusion Patients Year 1
CON Projections vs 2025 JAR

County Health Statistics ID	Davidson			Knox			Rutherford			Shelby				
	19914			47492			75084			79926				
Agency Name	KabaFusion TN, LLC			Paragon Infusion (CareMax Pharmacy of Loudon) (Closed 10/1/2025)			TwelveStone Infusion Support			Tristate Infusion, LLC				
Agency Type	Home			Home			Home			Home				
Number Counties Being Served	95	'KabaFusion TN, LLC Projections Year 1 (Combined CN2405-012A & CN2408-021A)	'Difference Year 1	25	'Paragon Infusion Projections Year 1 (CN2210-039A only)	'Difference Year 1	95	'TwelveStone Infusion Projections Year 1 (Combined CN2210-042A & CN2205-025A)		65	'TriState Infusion Projections Year 1 (CN2204-022A)	'TriState Infusion Projections Year 1 (CN2409-024A)	TriState Infusion Combined (CN2204-022A & CN2409-024A)	'Difference Year 1
Anderson	2	1	1		7	-7		2	-2				2	-2
Bedford								3	-3			2	2	
Benton							1	1	0	3	1		1	2
Bledsoe					1	-1		1	-1			1	1	-1
Blount					12	-12	1	2	-1					
Bradley					10	-10	2	3	-1			4	4	-4
Campbell					3	-3	1	1	0					
Cannon							1	2	-1			1	1	-1
Carroll								2	-2		1		1	-1
Carter								1	-1					
Cheatham		1	-1					2	-2			1	1	-1
Chester								1	-1	2	1		1	1
Claiborne		1	-1		3	-3	1	1	0					
Clay		2	-2					1	-1			1	1	-1
Coke					3	-3		2	-2					
Coffee		2	-2				3	5	-2			2	2	-2
Crockett								1	-1	1	1		1	0
Cumberland		3	-3		5	-5	2	2	0			2	2	-2
Davidson	1	20	-19				13	16	-3	4		18	18	-14
Decatur		2	-2					1	-1	1	1		1	0
DeKalb		2	-2					2	-2			1	1	-1
Dickson		5	-5				2	3	-1	2	2		2	0
Dyer		2	-2				2	2	0		2		2	-2
Fayette	1	2	-1					1	-1	9	2		2	7
Fentress		2	-2		2	-2	2	2	0				0	0
Franklin	1	2	-1					2	-2			1	1	-1
Gibson		2	-2					2	-2	9	2		2	7
Gilles		2	-2					2	-2			1	1	-1
Grainger					2	-2		1	-1					
Greene								1	-1					
Grundy		2	-2					2	-2			1	1	-1
Hamblen		1	-1		6	-6		2	-2					
Hamilton		2	-2		33	-33	1	8	-7	2		10	10	-8
Hancock								1	-1					
Hardeman		2	-2					2	-2	3	1		1	2
Hardin		2	-2					1	-1		1		1	-1
Hawkins								1	-1					
Haywood		2	-2					2	-2	1	1		1	0
Henderson								1	-1	3	1		1	2
Henry		2	-2					1	-1	2	2		2	0
Hickman								1	-1		1		1	-1
Houston		2	-2					1	-1		1		1	-1
Humphreys		2	-2				1	1	0		1		1	-1
Jackson		2	-2					1	-1			1	1	-1
Jefferson		2	-2		5	-5	3	1	2					
Johnson								1	-1					
Knox		4	-4		42	-42	2	6	-4					-1
Lake								1	-1		1		1	
Lauderdale								1	-1	4	1		1	3
Lawrence								1	-1		2		2	-2
Lewis								2	-2		1		1	-1
Lincoln								2	-2			1	1	-1
Loudon		1	-1		5	-5		2	-2					
McMinn					5	-5	1	1	0					
McNairy								2	-2	3	1		1	2
Macon							1	1	0			1	1	-1
Madison	1	1	0					2	-2	14	5		5	9
Marion					2	-2		2	-2			1	1	-1
Marshall								1	-1			9	9	-9
Maury		3	-3				1	3	-2			4	4	-4
Meigs					1	-1	1	1	0			1	1	-1
Monroe					4	-4		2	-2					
Montgomery		1	-1				1	5	-4		12		12	-12
Moore								1	-1			1	1	-1
Morgan		1	-1		2	-2		1	-1					
Obion								2	-2	2	2		2	0
Overton							1	1	0			1	1	-1
Perry								1	-1		1		1	-1
Pickett		2	-2					1	-1			1	1	-1
Polk								1	-1					
Putnam		2	-2				6	5	1			3	3	-3
Rhea					3	-3		2	-2			1	1	-1
Roane					5	-5	1	2	-1					
Robertson		5	-5					2	-2			3	3	-3
Rutherford	1	5	-4				2	18	-16	3		9	9	-6
Scott		1	-1					1	-1					
Sequatchie					1	-1		1	-1			1	1	-1
Sevier					9	-9	3	1	2					
Shelby		1	-1				3	7	-4	158	49		49	109
Smith	1	3	-2					2	-2			1	1	-1
Stewart		2	-2					1	-1		1		1	-1
Sullivan							3	2	1					
Sumner		10	-10				4	6	-2			6	6	-6
Tipton	1	2	-1				1	2	-1	18	3		3	15
Trousdale		2	-2					1	-1			1	1	-1
Unicoi								1	-1					
Union					2	-2	2	1	1					
Van Buren								1	-1			1	1	-1
Warren	1		1					3	-3			1	1	-1
Washington							1	2	-1					
Wayne								2	-2		1		1	-1
Weakley							2	1	1	1	2		2	-1
White							3	2	1			1	1	-1
Williamson		5	-5				1	6	-5			8	8	-8
Wilson		5	-5				3	6	-3	2		5	5	-3
Unknown/Other		25	-25				1		1				0	0
Total	10	153	-143	0	173	-173	80	216	-136	247	104	108	212	35

Staff Summary Appendix B – Infusion Use Patients per 100,000 Population

County	TOTAL Patients	2025 Population	Use Rate Patients per 100,000
Houston	0	8,181	0.00
Lake	0	6,376	0.00
Pickett	0	5,048	0.00
Polk	0	18,244	0.00
Carter	1	55,741	1.79
Bedford	1	54,010	1.85
Rhea	1	33,948	2.95
Grainger	1	24,579	4.07
Lawrence	2	46,311	4.32
Scott	1	21,975	4.55
Johnson	1	18,008	5.55
Bledsoe	1	15,248	6.56
Greene	5	72,656	6.88
Montgomery	20	251,815	7.94
Jackson	1	12,180	8.21
Rutherford	34	388,909	8.74
Roane	5	55,607	8.99
Fentress	2	19,687	10.16
Knox	53	508,654	10.42
Wilson	18	171,708	10.48
Washington	15	140,553	10.67
Hamilton	42	385,843	10.89
Hardin	3	27,405	10.95
Unicoi	2	17,613	11.36
Sullivan	20	164,002	12.19
Wayne	2	16,112	12.41
Davidson	93	728,443	12.77
Robertson	10	77,700	12.87
Maury	15	116,119	12.92
Giles	4	30,757	13.01
Cannon	2	15,075	13.27
Clay	1	7,499	13.34
Cocke	5	37,242	13.43
Marion	4	29,265	13.67
Dyer	5	36,105	13.85
Monroe	7	48,951	14.30
Meigs	2	13,769	14.53
Grundy	2	13,743	14.55
Hancock	1	6,810	14.68
Moore	1	6,795	14.72
Williamson	41	277,193	14.79
Bradley	17	113,913	14.92
Van Buren	1	6,604	15.14
Hawkins	9	58,537	15.37
Trousdale	2	12,512	15.98
Coffee	10	61,896	16.16
Putnam	14	85,418	16.39
Cheatham	7	42,603	16.43

Staff Summary Appendix B – Infusion Use Patients per 100,000 Population

County	TOTAL Patients	2025 Population	Use Rate Patients per 100,000
Hamblen	11	66,340	16.58
Sumner	36	215,234	16.73
Sevier	17	101,026	16.83
Decatur	2	11,549	17.32
Haywood	3	17,222	17.42
Campbell	7	39,385	17.77
Franklin	8	44,787	17.86
DeKalb	4	21,727	18.41
Blount	28	144,400	19.39
Loudon	12	61,596	19.48
White	6	28,569	21.00
Stewart	3	14,231	21.08
Cumberland	14	65,861	21.26
Overton	5	23,336	21.43
Claiborne	7	32,413	21.60
Crockett	3	13,818	21.71
Anderson	18	80,627	22.33
Perry	2	8,952	22.34
Lewis	3	13,172	22.78
McNairy	6	26,089	23.00
Warren	10	42,888	23.32
Morgan	5	21,091	23.71
Hardeman	6	25,028	23.97
Union	5	20,745	24.10
Smith	5	20,715	24.14
Lincoln	9	36,570	24.61
Jefferson	15	58,783	25.52
Dickson	15	57,739	25.98
Marshall	10	37,788	26.46
Obion	8	30,207	26.48
McMinn	15	55,752	26.90
Madison	28	99,089	28.26
Sequatchie	5	17,603	28.40
Fayette	13	44,948	28.92
Macon	8	27,378	29.22
Humphreys	6	19,372	30.97
Hickman	8	25,688	31.14
Henderson	9	27,958	32.19
Gibson	17	51,352	33.10
Lauderdale	8	24,139	33.14
Chester	6	17,741	33.82
Weakley	12	32,535	36.88
Carroll	11	28,559	38.52
Henry	13	32,439	40.08
Shelby	425	911,049	46.65
Benton	8	15,837	50.51
Tipton	32	62,044	51.58
Unknown/Other	63		
Total	1454	7,242,733	20.08

Source: HFC Staff, Joint Annual Report for Home Health 2025, Tennessee State Data Center, Boyd Center for Business and Economic Research. Green = Bottom Quartile of TN, Red = Top Quartile.

CRITERIA AND **STANDARDS**

COMBINED:

ATTACHMENT 1N

ATTACHMENT 1NC

ATTACHMENT 1N9

ATTACHMENT 1N

Joint Annual Report of Home Health Agencies - 2025 Final*
Comparison of Population Based Need Projection vs. Actual Utilization (2025 vs. 2028)**

Service Area	Agencies Report Serving	Total Patients Served	Estimated 2025 Pop.	Use Rate	Projected 2028 Pop.	Projected Capacity	Projected Need (.015 x 2028 Pop.)	Need or (Surplus) for 2028
Tennessee	1,894	166,227	7,242,733	0.0229508668	7,410,264	170,072	111,154	(58,918)
Anderson	37	2,436	80,627	0.0302132040	81,949	2,476	1,229	(1,247)
Bedford	18	1,415	54,010	0.0261988521	56,016	1,468	840	(627)
Benton	13	709	15,837	0.0447685799	15,619	699	234	(465)
Bledsoe	14	282	15,248	0.0184942288	15,596	288	234	(54)
Blount	31	2,854	144,400	0.0197645429	148,094	2,927	2,221	(706)
Bradley	24	2,662	113,913	0.0233687112	116,791	2,729	1,752	(977)
Campbell	28	1,198	39,385	0.0304176717	39,040	1,188	586	(602)
Cannon	17	525	15,075	0.0348258706	15,283	532	229	(303)
Carroll	19	1,233	28,559	0.0431737806	28,564	1,233	428	(805)
Carter	13	1,170	55,741	0.0209899356	54,921	1,153	824	(329)
Cheatham	26	867	42,603	0.0203506795	43,156	878	647	(231)
Chester	13	495	17,741	0.0279014712	17,797	497	267	(230)
Claiborne	18	1,015	32,413	0.0313145960	32,276	1,011	484	(527)
Clay	10	243	7,499	0.0324043206	7,370	239	111	(128)
Cocke	20	882	37,242	0.0236829386	37,372	885	561	(324)
Coffee	21	2,054	61,896	0.0331846969	63,886	2,120	958	(1,162)
Crockett	13	425	13,818	0.0307569836	13,727	422	206	(216)
Cumberland	26	1,927	65,861	0.0292585901	67,514	1,975	1,013	(963)
Davidson	50	14,432	728,443	0.0198121198	748,344	14,826	11,225	(3,601)
Decatur	14	517	11,549	0.0447657806	11,494	515	172	(342)
DeKalb	17	656	21,727	0.0301928476	22,316	674	335	(339)
Dickson	26	1,631	57,739	0.0282478048	59,394	1,678	891	(787)
Dyer	11	1,172	36,105	0.0324608780	35,690	1,159	535	(623)
Fayette	20	676	44,948	0.0150396013	45,972	691	690	(2)
Fentress	7	891	19,687	0.0452582923	19,880	900	298	(602)
Franklin	22	1,177	44,787	0.0262799473	45,420	1,194	681	(512)
Gibson	19	1,812	51,352	0.0352858701	51,761	1,826	776	(1,050)
Giles	13	734	30,757	0.0238644861	30,899	737	463	(274)
Grainger	23	639	24,579	0.0259978030	24,753	644	371	(272)
Greene	24	1,859	72,656	0.0255863246	73,351	1,877	1,100	(777)
Grundy	14	469	13,743	0.0341264644	13,664	466	205	(261)
Hamblen	27	1,708	66,340	0.0257461562	67,301	1,733	1,010	(723)
Hamilton	27	9,720	385,843	0.0251915935	395,600	9,966	5,934	(4,032)
Hancock	12	125	6,810	0.0183553598	6,740	124	101	(23)
Hardeman	14	820	25,028	0.0327633051	24,488	802	367	(435)
Hardin	13	910	27,405	0.0332056194	27,580	916	414	(502)
Hawkins	25	1,244	58,537	0.0212515161	58,654	1,246	880	(367)
Haywood	12	420	17,222	0.0243874115	16,856	411	253	(158)
Henderson	17	908	27,958	0.0324772874	27,882	906	418	(487)
Henry	16	1,033	32,439	0.0318443848	32,368	1,031	486	(545)
Hickman	17	704	25,688	0.0274057926	25,781	707	387	(320)
Houston	8	262	8,181	0.0320254248	8,131	260	122	(138)
Humphreys	18	688	19,372	0.0355151765	19,525	693	293	(401)
Jackson	11	352	12,180	0.0288998358	12,277	355	184	(171)
Jefferson	26	1,060	58,783	0.0180324243	60,245	1,086	904	(183)
Johnson	8	466	18,008	0.0258773878	17,844	462	268	(194)
Knox	42	8,947	508,654	0.0175895599	521,808	9,178	7,827	(1,351)
Lake	5	257	6,376	0.0403074028	6,178	249	93	(156)
Lauderdale	14	753	24,139	0.0311943328	23,432	731	351	(379)
Lawrence	16	1,340	46,311	0.0289348103	47,052	1,361	706	(656)
Lewis	10	394	13,172	0.0299119344	13,334	399	200	(199)

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Joint Annual Report of Home Health Agencies - 2025 Final*
Comparison of Population Based Need Projection vs. Actual Utilization (2025 vs. 2028)**

Service Area	Agencies Report Serving	Total Patients Served	Estimated 2025 Pop.	Use Rate	Projected 2028 Pop.	Projected Capacity	Projected Need (.015 x 2028 Pop.)	Need or (Surplus) for 2028
Lincoln	15	1,145	36,570	0.0313098168	37,055	1,160	556	(604)
Loudon	35	1,950	61,596	0.0316578999	64,471	2,041	967	(1,074)
McMinn	24	1,624	55,752	0.0291289999	56,485	1,645	847	(798)
McNairy	13	990	26,089	0.0379470275	26,078	990	391	(598)
Macon	18	657	27,378	0.0239973702	28,444	683	427	(256)
Madison	19	2,709	99,089	0.0273390588	98,555	2,694	1,478	(1,216)
Marion	19	663	29,265	0.0226550487	29,303	664	440	(224)
Marshall	19	747	37,788	0.0197681804	39,397	779	591	(188)
Mauzy	26	2,463	116,119	0.0212109991	123,660	2,623	1,855	(768)
Meigs	29	494	13,769	0.0358776963	14,149	508	212	(295)
Monroe	27	1,445	48,951	0.0295193152	49,711	1,467	746	(722)
Montgomery	25	4,223	251,815	0.0167702480	268,290	4,499	4,024	(475)
Moore	11	106	6,795	0.0155997057	6,840	107	103	(4)
Morgan	29	590	21,091	0.0279740174	20,806	582	312	(270)
Obion	15	1,074	30,207	0.0355546728	29,907	1,063	449	(615)
Overton	14	739	23,336	0.0316678094	23,525	745	353	(392)
Perry	8	258	8,952	0.0288203753	9,153	264	137	(126)
Pickett	4	176	5,048	0.0348652932	4,989	174	75	(99)
Polk	13	474	18,244	0.0259811445	18,500	481	278	(203)
Putnam	22	2,288	85,418	0.0267859233	87,978	2,357	1,320	(1,037)
Rhea	20	938	33,948	0.0276304937	34,085	942	511	(431)
Roane	34	1,837	55,607	0.0330354092	55,778	1,843	837	(1,006)
Robertson	25	1,628	77,700	0.0209523810	79,710	1,670	1,196	(474)
Rutherford	40	6,095	388,909	0.0156720467	415,694	6,515	6,235	(279)
Scott	18	683	21,975	0.0310807736	21,863	680	328	(352)
Sequatchie	15	348	17,603	0.0197693575	18,204	360	273	(87)
Sevier	27	2,029	101,026	0.0200839388	102,966	2,068	1,544	(523)
Shelby	39	16,171	911,049	0.0177498686	904,554	16,056	13,568	(2,487)
Smith	20	670	20,715	0.0323437123	20,871	675	313	(362)
Stewart	9	469	14,231	0.0329562223	14,369	474	216	(258)
Sullivan	23	5,456	164,002	0.0332678870	166,122	5,527	2,492	(3,035)
Sumner	34	4,527	215,234	0.0210329223	226,250	4,759	3,394	(1,365)
Tipton	27	1,443	62,044	0.0232576881	62,080	1,444	931	(513)
Trousdale	13	261	12,512	0.0208599744	12,825	268	192	(75)
Unicoi	13	753	17,613	0.0427525123	17,472	747	262	(485)
Union	23	447	20,745	0.0215473608	20,926	451	314	(137)
Van Buren	8	122	6,604	0.0184736523	6,748	125	101	(23)
Warren	21	1,479	42,888	0.0344851707	43,540	1,501	653	(848)
Washington	24	4,117	140,553	0.0292914417	143,951	4,217	2,159	(2,057)
Wayne	9	677	16,112	0.0420183714	15,869	667	238	(429)
Weakley	20	1,035	32,535	0.0318118949	31,915	1,015	479	(537)
White	17	706	28,569	0.0247121005	28,977	716	435	(281)
Williamson	37	4,264	277,193	0.0153827838	293,501	4,515	4,403	(112)
Wilson	34	4,089	171,708	0.0238136837	183,713	4,375	2,756	(1,619)

*Most recent year of Joint Annual Report data for Home Health Agencies

**Data is projected three years from the latest available year of final Home Health Joint Annual Report data.

Projections Source: Boyd Center for Business and Economic Research, University of Tennessee, Knoxville
 Reassembled by the Tennessee Department of Health, Division of Policy, Planning and Assessment
 Note: Totals may not match due to rounding. (TN_CoPopProj_2023 series)

ATTACHMENT 1NC

Infusion Home Health Agencies by Licensed Counties

Home Health Agencies by Licensed Counties

Health Statistics ID	Agency County	Agency Name	Type	Licensed County	Agency Infusion Only
01052	Anderson	The Home Option	Home	Scott	Yes
01082	Anderson	The Homecare Company of Tennessee, LLC	Home	Scott	Yes
01112	Anderson	Trinity Homecare & Consulting Services, LLC	Home	Scott	Yes
47498	Anderson	Truth Home Care PLLC	Home	Scott	Yes
19754	Blount	Advanced Nursing Solutions	Home	Scott	Yes
19494	Davidson	Elk Valley Health Services LLC	Home	Scott	Yes
19914	Davidson	KabaFusion TN, LLC	Home	Scott	Yes
19994	Davidson	Vanderbilt HC w/ Option Care IV Services	Home	Scott	Yes
25044	Fentress	Quality Home Health	Home	Scott	Yes
25034	Fentress	Quality Private Duty Care	Home	Scott	Yes
	Fentress	Support Private Duty Care	Home	Scott	Yes
32132	Hamblen	Premier Support Services, Inc	Home	Scott	Yes
	Hamilton	Amerita, Inc.	Home	Scott	Yes
19744	Hamilton	Pentec Health, Inc.	Home	Scott	Yes
47202	Knox	Amedisys Home Health Care	Home	Scott	Yes
	Knox	Betterlives LLC	Home	Scott	Yes
	Knox	Blueberry Health Infusion Nursing	Home	Scott	Yes
62052	Knox	CenterWell Home Health	Home	Scott	Yes
47497	Knox	Coal Miner Nursing Services	Home	Scott	Yes
47442	Knox	Coram CVS/Specialty Infusion Services	Home	Scott	Yes
47222	Knox	East Tennessee Children's Hospital Home Health	Home	Scott	Yes
47062	Knox	Enhabit Home Health	Home	Scott	Yes
47452	Knox	Implanted Pump Management	Home	Scott	Yes
47432	Knox	Maxim Healthcare Services, Inc	Home	Scott	Yes
	Knox	Personalized Caregiving of Tennessee LLC	Home	Scott	Yes
47496	Knox	Stand Out Home Care	Home	Scott	Yes
47092	Knox	Tennova Healthcare Home Health	Home	Scott	Yes
47493	Knox	Tola LLC	Home	Scott	Yes
47494	Knox	Trusted Ally Home Care	Home	Scott	Yes
42012	Loudon	The Care Hive, LLC	Home	Scott	Yes
	Loudon	TheraStaffing, LLC	Home	Scott	Yes
19544	Maury	Home Care Solutions	Home	Scott	Yes
	Morgan	Energy Workers Home Health	Home	Scott	Yes
96030	Other	Professional Home Health Care Agency	Home	Scott	Yes
67024	Overton	Amedisys Home Health	Home	Scott	Yes
73032	Roane	Haven Home Health Care	Home	Scott	Yes
73012	Roane	VIP Family Homecare	Home	Scott	Yes
	Roane	Your Choice Home Care	Home	Scott	Yes
75084	Rutherford	TwelveStone Infusion Services	Home	Scott	Yes
76042	Scott	Energy Employee Services	Home	Scott	Yes
79456	Shelby	Accredo Health Group, Inc	Home	Scott	Yes
	Shelby	AOC TN, LLC	Home	Scott	Yes

Home Health Agencies by Licensed Counties

Health Statistics ID	Agency County	Agency Name	Type	Licensed County	Agency Infusion Only
79466	Shelby	Optum Women's and Children's Health LLC	Home	Scott	Yes
79856	Williamson	Optum Infusion Services 305, LLC	Home	Scott	Yes
01032	Anderson	Clinch River Home Health	Home	Sequatchie	Yes
01072	Anderson	CNSCares	Home	Sequatchie	Yes
01092	Anderson	Giving Home Health Care	Home	Sequatchie	Yes
47499	Anderson	Harmony Wellness Home Health	Home	Sequatchie	Yes
	Anderson	Nuclear Care Partners, LLC	Home	Sequatchie	Yes
01042	Anderson	Professional Case Management of Tennessee	Home	Sequatchie	Yes
	Anderson	Right Choice Homecare	Home	Sequatchie	Yes
01112	Anderson	Trinity Homecare & Consulting Services, LLC	Home	Sequatchie	Yes
47498	Anderson	Truth Home Care PLLC	Home	Sequatchie	Yes
19754	Blount	Advanced Nursing Solutions	Home	Sequatchie	Yes
33303	Bradley	Tennessee Home Health	Home	Sequatchie	Yes
16034	Coffee	Suncrest Home Health	Home	Sequatchie	Yes
19494	Davidson	Elk Valley Health Services LLC	Home	Sequatchie	Yes
19914	Davidson	KabaFusion TN, LLC	Home	Sequatchie	Yes
19994	Davidson	Vanderbilt HC w/ Option Care IV Services	Home	Sequatchie	Yes
25034	Fentress	Quality Private Duty Care	Home	Sequatchie	Yes
26054	Franklin	Amedisys Home Care	Home	Sequatchie	Yes
26024	Franklin	Enhabit Home Health	Home	Sequatchie	Yes
33083	Hamilton	AccentCare Home Health of Tennessee	Home	Sequatchie	Yes
33103	Hamilton	Amedisys Home Health	Home	Sequatchie	Yes
	Hamilton	Amerita, Inc.	Home	Sequatchie	Yes
33213	Hamilton	Beacon Home Health	Home	Sequatchie	Yes
33093	Hamilton	CenterWell Home Health	Home	Sequatchie	Yes
33253	Hamilton	CHI Memorial Health at Home	Home	Sequatchie	Yes
33383	Hamilton	Erlanger Continucare Home Health (Continucare II)	Home	Sequatchie	Yes
33433	Hamilton	Maxim Healthcare Services	Home	Sequatchie	Yes
33033	Hamilton	NHC Homecare	Home	Sequatchie	Yes
19744	Hamilton	Pentec Health, Inc.	Home	Sequatchie	Yes
33363	Hamilton	SunCrest Home Health	Home	Sequatchie	Yes
	Knox	Blueberry Health Infusion Nursing	Home	Sequatchie	Yes
47062	Knox	Enhabit Home Health	Home	Sequatchie	Yes
47452	Knox	Implanted Pump Management	Home	Sequatchie	Yes
47496	Knox	Stand Out Home Care	Home	Sequatchie	Yes
47493	Knox	Tola LLC	Home	Sequatchie	Yes
47494	Knox	Trusted Ally Home Care	Home	Sequatchie	Yes
19544	Maury	Home Care Solutions	Home	Sequatchie	Yes
	Morgan	Energy Workers Home Health	Home	Sequatchie	Yes
73032	Roane	Haven Home Health Care	Home	Sequatchie	Yes
	Roane	Your Choice Home Care	Home	Sequatchie	Yes
75084	Rutherford	TwelveStone Infusion Services	Home	Sequatchie	Yes

Home Health Agencies by Licensed Counties

Health Statistics ID	Agency County	Agency Name	Type	Licensed County	Agency Infusion Only
79456	Shelby	Accredo Health Group, Inc	Home	Sequatchie	Yes
	Shelby	AOC TN, LLC	Home	Sequatchie	Yes
79466	Shelby	Optum Women's and Children's Health LLC	Home	Sequatchie	Yes
79926	Shelby	Tristate Infusion, LLC	Home	Sequatchie	Yes
89074	Warren	Adoration Home Health McMinnville	Home	Sequatchie	Yes
19734	Williamson	Coram CVS Specialty Infusion Services	Home	Sequatchie	Yes
79856	Williamson	Optum Infusion Services 305, LLC	Home	Sequatchie	Yes
	Anderson	Atomic Care Home Health, LLC	Home	Sevier	Yes
01032	Anderson	Clinch River Home Health	Home	Sevier	Yes
01072	Anderson	CNSCares	Home	Sevier	Yes
	Anderson	Family Hearts Home Care LLC	Home	Sevier	Yes
01092	Anderson	Giving Home Health Care	Home	Sevier	Yes
47499	Anderson	Harmony Wellness Home Health	Home	Sevier	Yes
	Anderson	Nuclear Care Partners, LLC	Home	Sevier	Yes
01042	Anderson	Professional Case Management of Tennessee	Home	Sevier	Yes
	Anderson	Right Choice Homecare	Home	Sevier	Yes
01052	Anderson	The Home Option	Home	Sevier	Yes
01082	Anderson	The Homecare Company of Tennessee, LLC	Home	Sevier	Yes
01112	Anderson	Trinity Homecare & Consulting Services, LLC	Home	Sevier	Yes
47498	Anderson	Truth Home Care PLLC	Home	Sevier	Yes
19754	Blount	Advanced Nursing Solutions	Home	Sevier	Yes
05012	Blount	Blount Memorial Hospital Home Health Services	Home	Sevier	Yes
19494	Davidson	Elk Valley Health Services LLC	Home	Sevier	Yes
19914	Davidson	KabaFusion TN, LLC	Home	Sevier	Yes
19994	Davidson	Vanderbilt HC w/ Option Care IV Services	Home	Sevier	Yes
25034	Fentress	Quality Private Duty Care	Home	Sevier	Yes
32102	Hamblen	Amedisys Home Health Care	Home	Sevier	Yes
32132	Hamblen	Premier Support Services, Inc	Home	Sevier	Yes
	Hamilton	Amerita, Inc.	Home	Sevier	Yes
19744	Hamilton	Pentec Health, Inc.	Home	Sevier	Yes
47202	Knox	Amedisys Home Health Care	Home	Sevier	Yes
	Knox	Betterlives LLC	Home	Sevier	Yes
	Knox	Blueberry Health Infusion Nursing	Home	Sevier	Yes
47042	Knox	CenterWell Home Health	Home	Sevier	Yes
47442	Knox	Coram CVS/Specialty Infusion Services	Home	Sevier	Yes
47222	Knox	East Tennessee Children's Hospital Home Health	Home	Sevier	Yes
47062	Knox	Enhabit Home Health	Home	Sevier	Yes
47452	Knox	Implanted Pump Management	Home	Sevier	Yes
47432	Knox	Maxim Healthcare Services, Inc	Home	Sevier	Yes
47012	Knox	NHC Homecare	Home	Sevier	Yes
	Knox	Personalized Caregiving of Tennessee LLC	Home	Sevier	Yes
47482	Knox	Remain At Home Senior Care, LLC	Home	Sevier	Yes

Home Health Agencies by Licensed Counties

Health Statistics ID	Agency County	Agency Name	Type	Licensed County	Agency Infusion Only
47496	Knox	Stand Out Home Care	Home	Sevier	Yes
47092	Knox	Tennova Healthcare Home Health	Home	Sevier	Yes
47493	Knox	Tola LLC	Home	Sevier	Yes
47494	Knox	Trusted Ally Home Care	Home	Sevier	Yes
	Loudon	TheraStaffing, LLC	Home	Sevier	Yes
19544	Maury	Home Care Solutions	Home	Sevier	Yes
	Morgan	Energy Workers Home Health	Home	Sevier	Yes
73032	Roane	Haven Home Health Care	Home	Sevier	Yes
73012	Roane	VIP Family Homecare	Home	Sevier	Yes
	Roane	Your Choice Home Care	Home	Sevier	Yes
75084	Rutherford	TwelveStone Infusion Services	Home	Sevier	Yes
76042	Scott	Energy Employee Services	Home	Sevier	Yes
79456	Shelby	Accredo Health Group, Inc	Home	Sevier	Yes
	Shelby	AOC TN, LLC	Home	Sevier	Yes
79466	Shelby	Optum Women's and Children's Health LLC	Home	Sevier	Yes
79856	Williamson	Optum Infusion Services 305, LLC	Home	Sevier	Yes
01032	Anderson	Clinch River Home Health	Home	Shelby	Yes
01072	Anderson	CNSCares	Home	Shelby	Yes
01092	Anderson	Giving Home Health Care	Home	Shelby	Yes
47499	Anderson	Harmony Wellness Home Health	Home	Shelby	Yes
	Anderson	Nuclear Care Partners, LLC	Home	Shelby	Yes
01042	Anderson	Professional Case Management of Tennessee	Home	Shelby	Yes
	Anderson	Right Choice Homecare	Home	Shelby	Yes
01112	Anderson	Trinity Homecare & Consulting Services, LLC	Home	Shelby	Yes
47498	Anderson	Truth Home Care PLLC	Home	Shelby	Yes
19754	Blount	Advanced Nursing Solutions	Home	Shelby	Yes
19494	Davidson	Elk Valley Health Services LLC	Home	Shelby	Yes
19914	Davidson	KabaFusion TN, LLC	Home	Shelby	Yes
19994	Davidson	Vanderbilt HC w/ Option Care IV Services	Home	Shelby	Yes
20045	Decatur	Tennessee Quality Homecare - Southwest	Home	Shelby	Yes
57095	Dyer	Extendicare Home Health of West Tennessee	Home	Shelby	Yes
19744	Hamilton	Pentec Health, Inc.	Home	Shelby	Yes
	Knox	Blueberry Health Infusion Nursing	Home	Shelby	Yes
47452	Knox	Implanted Pump Management	Home	Shelby	Yes
47496	Knox	Stand Out Home Care	Home	Shelby	Yes
47493	Knox	Tola LLC	Home	Shelby	Yes
47494	Knox	Trusted Ally Home Care	Home	Shelby	Yes
19544	Maury	Home Care Solutions	Home	Shelby	Yes
	Roane	Your Choice Home Care	Home	Shelby	Yes
75084	Rutherford	TwelveStone Infusion Services	Home	Shelby	Yes
79936	Shelby	901 Home Health Care	Home	Shelby	Yes
79886	Shelby	AccentCare Home Health of West Tennessee	Home	Shelby	Yes

Home Health Agencies by Licensed Counties

Health Statistics ID	Agency County	Agency Name	Type	Licensed County	Agency Infusion Only
79456	Shelby	Accredo Health Group, Inc	Home	Shelby	Yes
79486	Shelby	Adoration Home Health of West Tennessee	Home	Shelby	Yes
79136	Shelby	Advantage Home Care	Home	Shelby	Yes
79146	Shelby	Amedisys Home Care	Home	Shelby	Yes
79246	Shelby	Amedisys Home Health Care	Home	Shelby	Yes
	Shelby	AOC TN, LLC	Home	Shelby	Yes
79276	Shelby	Baptist Home Care and Hospice	Home	Shelby	Yes
79386	Shelby	Beacon Home Health	Home	Shelby	Yes
79546	Shelby	Best Nurses, Inc.	Home	Shelby	Yes
79226	Shelby	CenterWell Home Health	Home	Shelby	Yes
79556	Shelby	Coram CVS/Specialty Infusion Service	Home	Shelby	Yes
79496	Shelby	Functional Independence Home Care, Inc	Home	Shelby	Yes
79566	Shelby	Hemophilia Preferred Care of Memphis, Inc.	Home	Shelby	Yes
79376	Shelby	Homechoice Health Services	Home	Shelby	Yes
79896	Shelby	MALC, LLC	Home	Shelby	Yes
79536	Shelby	Maxim Healthcare Services, Inc.	Home	Shelby	Yes
79106	Shelby	Meritan, Inc.	Home	Shelby	Yes
79316	Shelby	Methodist Alliance Home Care	Home	Shelby	Yes
79876	Shelby	MGA Homecare	Home	Shelby	Yes
24026	Shelby	NHC Homecare	Home	Shelby	Yes
79506	Shelby	No Place Like Home, Inc	Home	Shelby	Yes
79466	Shelby	Optum Women's and Children's Health LLC	Home	Shelby	Yes
79906	Shelby	Residential Solutions, LLC	Home	Shelby	Yes
79866	Shelby	St. Jude Children's Research Hospital Homecare LLC	Home	Shelby	Yes
79526	Shelby	Still Waters Home Health Agency	Home	Shelby	Yes
79946	Shelby	The Good Care Helpers LLC	Home	Shelby	Yes
79926	Shelby	Tristate Infusion, LLC	Home	Shelby	Yes
79516 or 24C	Shelby	Where the Heart Is, Inc	Home	Shelby	Yes
79856	Williamson	Optum Infusion Services 305, LLC	Home	Shelby	Yes
01032	Anderson	Clinch River Home Health	Home	Smith	Yes
01072	Anderson	CNSCares	Home	Smith	Yes
01092	Anderson	Giving Home Health Care	Home	Smith	Yes
47499	Anderson	Harmony Wellness Home Health	Home	Smith	Yes
	Anderson	Nuclear Care Partners, LLC	Home	Smith	Yes
01042	Anderson	Professional Case Management of Tennessee	Home	Smith	Yes
	Anderson	Right Choice Homecare	Home	Smith	Yes
01112	Anderson	Trinity Homecare & Consulting Services, LLC	Home	Smith	Yes
47498	Anderson	Truth Home Care PLLC	Home	Smith	Yes
19754	Blount	Advanced Nursing Solutions	Home	Smith	Yes
19714	Davidson	Adoration Home Health, LLC	Home	Smith	Yes
19674	Davidson	Amedisys Home Health (10 Ave)	Home	Smith	Yes
19024	Davidson	Amedisys Home Health (Old Hickory Blvd)	Home	Smith	Yes

Home Health Agencies by Licensed Counties

Health Statistics ID	Agency County	Agency Name	Type	Licensed County	Agency Infusion Only
19684	Davidson	Beacon Home Health	Home	Smith	Yes
19494	Davidson	Elk Valley Health Services LLC	Home	Smith	Yes
19914	Davidson	KabaFusion TN, LLC	Home	Smith	Yes
19324	Davidson	Suncrest Home Health	Home	Smith	Yes
19504	Davidson	TriStar Healthcare at Home	Home	Smith	Yes
19394	Davidson	Vanderbilt Community & Home Services	Home	Smith	Yes
19994	Davidson	Vanderbilt HC w/ Option Care IV Services	Home	Smith	Yes
20045	Decatur	Tennessee Quality Homecare - Southwest	Home	Smith	Yes
21024	DeKalb	Suncrest Home Health	Home	Smith	Yes
26024	Franklin	Enhabit Home Health	Home	Smith	Yes
19744	Hamilton	Amerita, Inc.	Home	Smith	Yes
	Hamilton	Pentec Health, Inc.	Home	Smith	Yes
	Knox	Blueberry Health Infusion Nursing	Home	Smith	Yes
47452	Knox	Implanted Pump Management	Home	Smith	Yes
47496	Knox	Stand Out Home Care	Home	Smith	Yes
47493	Knox	Tola LLC	Home	Smith	Yes
19544	Maury	Home Care Solutions	Home	Smith	Yes
19724	Morgan	Energy Workers Home Health	Home	Smith	Yes
	Putnam	Adoration Home Health Nashville South	Home	Smith	Yes
	Putnam	Cookeville Regional Home Health	Home	Smith	Yes
71014	Roane	Your Choice Home Care	Home	Smith	Yes
19694	Rutherford	Aveanna Home Health	Home	Smith	Yes
75024	Rutherford	NHC Homecare	Home	Smith	Yes
75084	Rutherford	TwelveStone Infusion Services	Home	Smith	Yes
79456	Shelby	Accredo Health Group, Inc	Home	Smith	Yes
79466	Shelby	AOC TN, LLC	Home	Smith	Yes
	Shelby	Optum Women's and Children's Health LLC	Home	Smith	Yes
	Shelby	Tristate Infusion, LLC	Home	Smith	Yes
83114	Sumner	Highpoint Homecare	Home	Smith	Yes
89074	Warren	Adoration Home Health McMinnville	Home	Smith	Yes
89084	Warren	HomeFirst Home Healthcare	Home	Smith	Yes
19734	Williamson	Coram CVS Specialty Infusion Services	Home	Smith	Yes
94104	Williamson	Maxim Healthcare Services, Inc.	Home	Smith	Yes
79856	Williamson	Optum Infusion Services 305, LLC	Home	Smith	Yes
95074	Wilson	CenterWell Home Health	Home	Smith	Yes
95034	Wilson	Home Care Solutions	Home	Smith	Yes
01032	Wilson	Tennessee Quality Care Home Health (East)	Home	Smith	Yes
	Anderson	Clinch River Home Health	Home	Stewart	Yes
	Anderson	CNSCares	Home	Stewart	Yes
01092	Anderson	Giving Home Health Care	Home	Stewart	Yes
47499	Anderson	Harmony Wellness Home Health	Home	Stewart	Yes
47499	Anderson	Nuclear Care Partners, LLC	Home	Stewart	Yes

Home Health Agencies by Licensed Counties

Health Statistics ID	Agency County	Agency Name	Type	Licensed County	Agency Infusion Only
01042	Anderson	Professional Case Management of Tennessee	Home	Stewart	Yes
	Anderson	Right Choice Homecare	Home	Stewart	Yes
01112	Anderson	Trinity Homecare & Consulting Services, LLC	Home	Stewart	Yes
47498	Anderson	Truth Home Care PLLC	Home	Stewart	Yes
19024	Davidson	Amedisys Home Health (Old Hickory Blvd)	Home	Stewart	Yes
19494	Davidson	Elk Valley Health Services LLC	Home	Stewart	Yes
19914	Davidson	KabaFusion TN, LLC	Home	Stewart	Yes
19994	Davidson	Vanderbilt HC w/ Option Care IV Services	Home	Stewart	Yes
20045	Decatur	Tennessee Quality Homecare - Southwest	Home	Stewart	Yes
27085	Gibson	Volunteer Home Care, Inc	Home	Stewart	Yes
	Hamilton	Amerita, Inc.	Home	Stewart	Yes
19744	Hamilton	Pentec Health, Inc.	Home	Stewart	Yes
40075	Henry	West TN Healthcare Henry County Home Health	Home	Stewart	Yes
	Knox	Blueberry Health Infusion Nursing	Home	Stewart	Yes
47452	Knox	Implanted Pump Management	Home	Stewart	Yes
47496	Knox	Stand Out Home Care	Home	Stewart	Yes
47493	Knox	Tola LLC	Home	Stewart	Yes
19544	Maury	Home Care Solutions	Home	Stewart	Yes
60024	Maury	NHC Homecare	Home	Stewart	Yes
63034	Montgomery	Suncrest Home Health	Home	Stewart	Yes
63044	Montgomery	Suncrest Home Health	Home	Stewart	Yes
	Roane	Your Choice Home Care	Home	Stewart	Yes
19694	Rutherford	Aveanna Home Health	Home	Stewart	Yes
75084	Rutherford	TwelveStone Infusion Services	Home	Stewart	Yes
79456	Shelby	Accredo Health Group, Inc	Home	Stewart	Yes
	Shelby	AOC TN, LLC	Home	Stewart	Yes
79556	Shelby	Coram CVS/Specialty Infusion Service	Home	Stewart	Yes
79466	Shelby	Optum Women's and Children's Health LLC	Home	Stewart	Yes
79926	Shelby	Tristate Infusion, LLC	Home	Stewart	Yes
92025	Weakley	Adoration Home Health Martin	Home	Stewart	Yes
94074	Williamson	AccentCare Home Health of Nashville	Home	Stewart	Yes
94104	Williamson	Maxim Healthcare Services, Inc.	Home	Stewart	Yes
79856	Williamson	Optum Infusion Services 305, LLC	Home	Stewart	Yes
	Anderson	Atomic Care Home Health, LLC	Home	Sullivan	Yes
01032	Anderson	Clinch River Home Health	Home	Sullivan	Yes
01072	Anderson	CNSCares	Home	Sullivan	Yes
01092	Anderson	Giving Home Health Care	Home	Sullivan	Yes
47499	Anderson	Harmony Wellness Home Health	Home	Sullivan	Yes
	Anderson	Nuclear Care Partners, LLC	Home	Sullivan	Yes
01042	Anderson	Professional Case Management of Tennessee	Home	Sullivan	Yes
	Anderson	Right Choice Homecare	Home	Sullivan	Yes
01112	Anderson	Trinity Homecare & Consulting Services, LLC	Home	Sullivan	Yes

Home Health Agencies by Licensed Counties

Health Statistics ID	Agency County	Agency Name	Type	Licensed County	Agency Infusion Only
47498	Anderson	Truth Home Care PLLC	Home	Sullivan	Yes
19754	Blount	Advanced Nursing Solutions	Home	Sullivan	Yes
10031	Carter	Amedisys Home Health Care	Home	Sullivan	Yes
19494	Davidson	Elk Valley Health Services LLC	Home	Sullivan	Yes
19914	Davidson	KabaFusion TN, LLC	Home	Sullivan	Yes
19994	Davidson	Vanderbilt HC w/ Option Care IV Services	Home	Sullivan	Yes
30021	Greene	Adoration Home Health	Home	Sullivan	Yes
30041	Greene	Ballad Health Homecare	Home	Sullivan	Yes
32132	Hamblen	Premier Support Services, Inc	Home	Sullivan	Yes
	Hamilton	Amerita, Inc.	Home	Sullivan	Yes
19744	Hamilton	Pentec Health, Inc.	Home	Sullivan	Yes
45012	Jefferson	Suncrest Home Health	Home	Sullivan	Yes
47202	Knox	Amedisys Home Health Care	Home	Sullivan	Yes
	Knox	Blueberry Health Infusion Nursing	Home	Sullivan	Yes
47442	Knox	Coram CVS/Specialty Infusion Services	Home	Sullivan	Yes
47452	Knox	Implanted Pump Management	Home	Sullivan	Yes
	Knox	Personalized Caregiving of Tennessee LLC	Home	Sullivan	Yes
47482	Knox	Remain At Home Senior Care, LLC	Home	Sullivan	Yes
47496	Knox	Stand Out Home Care	Home	Sullivan	Yes
47493	Knox	Tola LLC	Home	Sullivan	Yes
47494	Knox	Trusted Ally Home Care	Home	Sullivan	Yes
19544	Maury	Home Care Solutions	Home	Sullivan	Yes
	Morgan	Energy Workers Home Health	Home	Sullivan	Yes
73032	Roane	Haven Home Health Care	Home	Sullivan	Yes
	Roane	Your Choice Home Care	Home	Sullivan	Yes
75084	Rutherford	TwelveStone Infusion Services	Home	Sullivan	Yes
76042	Scott	Energy Employee Services	Home	Sullivan	Yes
79456	Shelby	Accredo Health Group, Inc	Home	Sullivan	Yes
	Shelby	AOC TN, LLC	Home	Sullivan	Yes
79466	Shelby	Optum Women's and Children's Health LLC	Home	Sullivan	Yes
82051	Sullivan	Adoration Home Health	Home	Sullivan	Yes
82061	Sullivan	CenterWell Home Health	Home	Sullivan	Yes
90121	Washington	Amedisys Home Health	Home	Sullivan	Yes
90081	Washington	Ballad Health Homecare	Home	Sullivan	Yes
90141	Washington	Maxim Healthcare Services	Home	Sullivan	Yes
90131	Washington	NHC Homecare	Home	Sullivan	Yes
79856	Williamson	Optum Infusion Services 305, LLC	Home	Sullivan	Yes
01032	Anderson	Clinch River Home Health	Home	Sumner	Yes
01072	Anderson	CNSCares	Home	Sumner	Yes
01092	Anderson	Giving Home Health Care	Home	Sumner	Yes
47499	Anderson	Harmony Wellness Home Health	Home	Sumner	Yes
	Anderson	Nuclear Care Partners, LLC	Home	Sumner	Yes

Home Health Agencies by Licensed Counties

Health Statistics ID	Agency County	Agency Name	Type	Licensed County	Agency Infusion Only
01042	Anderson	Professional Case Management of Tennessee	Home	Sumner	Yes
	Anderson	Right Choice Homecare	Home	Sumner	Yes
01112	Anderson	Trinity Homecare & Consulting Services, LLC	Home	Sumner	Yes
47498	Anderson	Truth Home Care PLLC	Home	Sumner	Yes
19754	Blount	Advanced Nursing Solutions	Home	Sumner	Yes
19714	Davidson	Adoration Home Health, LLC	Home	Sumner	Yes
	Davidson	Advanced Home Health & Hospice of Nashville, LLC	Home	Sumner	Yes
19674	Davidson	Amedisys Home Health (10 Ave)	Home	Sumner	Yes
19024	Davidson	Amedisys Home Health (Old Hickory Blvd)	Home	Sumner	Yes
19684	Davidson	Beacon Home Health	Home	Sumner	Yes
19904	Davidson	Continuum Pediatric Nursing Services	Home	Sumner	Yes
19494	Davidson	Elk Valley Health Services LLC	Home	Sumner	Yes
19084	Davidson	Gentiva Certified Health Care Corp (CenterWell)	Home	Sumner	Yes
	Davidson	Heart to Heart Holistics Healthcare Services	Home	Sumner	Yes
19614	Davidson	HomeFirst Home Healthcare	Home	Sumner	Yes
19914	Davidson	KabaFusion TN, LLC	Home	Sumner	Yes
19854	Davidson	St. Thomas Home Health dba Ascension at Home	Home	Sumner	Yes
19324	Davidson	Suncrest Home Health	Home	Sumner	Yes
19504	Davidson	TriStar Healthcare at Home	Home	Sumner	Yes
19394	Davidson	Vanderbilt Community & Home Services	Home	Sumner	Yes
19994	Davidson	Vanderbilt HC w/ Option Care IV Services	Home	Sumner	Yes
19314	Davidson	Vanderbilt Home Care Services	Home	Sumner	Yes
20045	Decatur	Tennessee Quality Homecare - Southwest	Home	Sumner	Yes
	Hamilton	Amerita, Inc.	Home	Sumner	Yes
19744	Hamilton	Pentec Health, Inc.	Home	Sumner	Yes
	Knox	Blueberry Health Infusion Nursing	Home	Sumner	Yes
47452	Knox	Implanted Pump Management	Home	Sumner	Yes
47496	Knox	Stand Out Home Care	Home	Sumner	Yes
47493	Knox	Tola LLC	Home	Sumner	Yes
47494	Knox	Trusted Ally Home Care	Home	Sumner	Yes
19544	Maury	Home Care Solutions	Home	Sumner	Yes
63044	Montgomery	Suncrest Home Health	Home	Sumner	Yes
	Morgan	Energy Workers Home Health	Home	Sumner	Yes
19724	Putnam	Adoration Home Health Nashville South	Home	Sumner	Yes
	Roane	Your Choice Home Care	Home	Sumner	Yes
74064	Robertson	Lifeline Home Health Care	Home	Sumner	Yes
74054	Robertson	NHC Homecare	Home	Sumner	Yes
19694	Rutherford	Aveanna Home Health	Home	Sumner	Yes
19584	Rutherford	Home Health Care of Middle Tennessee	Home	Sumner	Yes
75084	Rutherford	TwelveStone Infusion Services	Home	Sumner	Yes
79456	Shelby	Accredo Health Group, Inc	Home	Sumner	Yes
	Shelby	AOC TN, LLC	Home	Sumner	Yes

Home Health Agencies by Licensed Counties

Health Statistics ID	Agency County	Agency Name	Type	Licensed County	Agency Infusion Only
79876	Shelby	MGA Homecare	Home	Sumner	Yes
79466	Shelby	Optum Women's and Children's Health LLC	Home	Sumner	Yes
79926	Shelby	Tristate Infusion, LLC	Home	Sumner	Yes
83114	Sumner	Highpoint Homecare	Home	Sumner	Yes
89064	Warren	CenterWell Home Health	Home	Sumner	Yes
94074	Williamson	AccentCare Home Health of Nashville	Home	Sumner	Yes
22014	Williamson	Bayada Home Health Care, Inc.	Home	Sumner	Yes
19734	Williamson	Coram CVS Specialty Infusion Services	Home	Sumner	Yes
94104	Williamson	Maxim Healthcare Services, Inc.	Home	Sumner	Yes
79856	Williamson	Optum Infusion Services 305, LLC	Home	Sumner	Yes
95074	Wilson	CenterWell Home Health	Home	Sumner	Yes
95034	Wilson	Home Care Solutions	Home	Sumner	Yes
	Wilson	Tennessee Quality Care Home Health (East)	Home	Sumner	Yes
01032	Anderson	Clinch River Home Health	Home	Tipton	Yes
01072	Anderson	CNSCares	Home	Tipton	Yes
01092	Anderson	Giving Home Health Care	Home	Tipton	Yes
47499	Anderson	Harmony Wellness Home Health	Home	Tipton	Yes
	Anderson	Nuclear Care Partners, LLC	Home	Tipton	Yes
01042	Anderson	Professional Case Management of Tennessee	Home	Tipton	Yes
	Anderson	Right Choice Homecare	Home	Tipton	Yes
01112	Anderson	Trinity Homecare & Consulting Services, LLC	Home	Tipton	Yes
47498	Anderson	Truth Home Care PLLC	Home	Tipton	Yes
19754	Blount	Advanced Nursing Solutions	Home	Tipton	Yes
19494	Davidson	Elk Valley Health Services LLC	Home	Tipton	Yes
19914	Davidson	KabaFusion TN, LLC	Home	Tipton	Yes
19994	Davidson	Vanderbilt HC w/ Option Care IV Services	Home	Tipton	Yes
20045	Decatur	Tennessee Quality Homecare - Southwest	Home	Tipton	Yes
57095	Dyer	Extendicare Home Health of West Tennessee	Home	Tipton	Yes
19744	Hamilton	Pentec Health, Inc.	Home	Tipton	Yes
38015	Haywood	Adoration Home Health Brownsville	Home	Tipton	Yes
	Knox	Blueberry Health Infusion Nursing	Home	Tipton	Yes
47452	Knox	Implanted Pump Management	Home	Tipton	Yes
47496	Knox	Stand Out Home Care	Home	Tipton	Yes
47493	Knox	Tola LLC	Home	Tipton	Yes
47494	Knox	Trusted Ally Home Care	Home	Tipton	Yes
57075	Madison	Amedisys Home Health Care	Home	Tipton	Yes
57165	Madison	CenterWell Home Health	Home	Tipton	Yes
19544	Maury	Home Care Solutions	Home	Tipton	Yes
	Roane	Your Choice Home Care	Home	Tipton	Yes
75084	Rutherford	TwelveStone Infusion Services	Home	Tipton	Yes
79936	Shelby	901 Home Health Care	Home	Tipton	Yes
79886	Shelby	AccentCare Home Health of West Tennessee	Home	Tipton	Yes

Home Health Agencies by Licensed Counties

Health Statistics ID	Agency County	Agency Name	Type	Licensed County	Agency Infusion Only
79456	Shelby	Accredo Health Group, Inc	Home	Tipton	Yes
79486	Shelby	Adoration Home Health of West Tennessee	Home	Tipton	Yes
79136	Shelby	Advantage Home Care	Home	Tipton	Yes
79146	Shelby	Amedisys Home Care	Home	Tipton	Yes
79246	Shelby	Amedisys Home Health Care	Home	Tipton	Yes
	Shelby	AOC TN, LLC	Home	Tipton	Yes
79276	Shelby	Baptist Home Care and Hospice	Home	Tipton	Yes
79386	Shelby	Beacon Home Health	Home	Tipton	Yes
79546	Shelby	Best Nurses, Inc.	Home	Tipton	Yes
79226	Shelby	CenterWell Home Health	Home	Tipton	Yes
79556	Shelby	Coram CVS/Specialty Infusion Service	Home	Tipton	Yes
79496	Shelby	Functional Independence Home Care, Inc	Home	Tipton	Yes
79376	Shelby	Homechoice Health Services	Home	Tipton	Yes
79896	Shelby	MALC, LLC	Home	Tipton	Yes
79536	Shelby	Maxim Healthcare Services, Inc.	Home	Tipton	Yes
79316	Shelby	Methodist Alliance Home Care	Home	Tipton	Yes
79876	Shelby	MGA Homecare	Home	Tipton	Yes
24026	Shelby	NHC Homecare	Home	Tipton	Yes
79506	Shelby	No Place Like Home, Inc	Home	Tipton	Yes
79466	Shelby	Optum Women's and Children's Health LLC	Home	Tipton	Yes
79906	Shelby	Residential Solutions, LLC	Home	Tipton	Yes
79866	Shelby	St. Jude Children's Research Hospital Homecare LLC	Home	Tipton	Yes
79946	Shelby	The Good Care Helpers LLC	Home	Tipton	Yes
79926	Shelby	Tristate Infusion, LLC	Home	Tipton	Yes
79516 or 240	Shelby	Where the Heart Is, Inc	Home	Tipton	Yes
79856	Williamson	Optum Infusion Services 305, LLC	Home	Tipton	Yes
01032	Anderson	Clinch River Home Health	Home	Trousdale	Yes
01072	Anderson	CNSCares	Home	Trousdale	Yes
01092	Anderson	Giving Home Health Care	Home	Trousdale	Yes
47499	Anderson	Harmony Wellness Home Health	Home	Trousdale	Yes
	Anderson	Nuclear Care Partners, LLC	Home	Trousdale	Yes
01042	Anderson	Professional Case Management of Tennessee	Home	Trousdale	Yes
	Anderson	Right Choice Homecare	Home	Trousdale	Yes
01112	Anderson	Trinity Homecare & Consulting Services, LLC	Home	Trousdale	Yes
47498	Anderson	Truth Home Care PLLC	Home	Trousdale	Yes
19754	Blount	Advanced Nursing Solutions	Home	Trousdale	Yes
19714	Davidson	Adoration Home Health, LLC	Home	Trousdale	Yes
19674	Davidson	Amedisys Home Health (10 Ave)	Home	Trousdale	Yes
19024	Davidson	Amedisys Home Health (Old Hickory Blvd)	Home	Trousdale	Yes
19494	Davidson	Elk Valley Health Services LLC	Home	Trousdale	Yes
19084	Davidson	Gentiva Certified Health Care Corp (CenterWell)	Home	Trousdale	Yes
19914	Davidson	KabaFusion TN, LLC	Home	Trousdale	Yes

Home Health Agencies by Licensed Counties

Health Statistics ID	Agency County	Agency Name	Type	Licensed County	Agency Infusion Only
19324	Davidson	Suncrest Home Health	Home	Trousdale	Yes
19504	Davidson	TriStar Healthcare at Home	Home	Trousdale	Yes
19394	Davidson	Vanderbilt Community & Home Services	Home	Trousdale	Yes
19994	Davidson	Vanderbilt HC w/ Option Care IV Services	Home	Trousdale	Yes
20045	Decatur	Tennessee Quality Homecare - Southwest	Home	Trousdale	Yes
	Hamilton	Amerita, Inc.	Home	Trousdale	Yes
19744	Hamilton	Pentec Health, Inc.	Home	Trousdale	Yes
	Knox	Blueberry Health Infusion Nursing	Home	Trousdale	Yes
47452	Knox	Implanted Pump Management	Home	Trousdale	Yes
47496	Knox	Stand Out Home Care	Home	Trousdale	Yes
47493	Knox	Tola LLC	Home	Trousdale	Yes
19544	Maury	Home Care Solutions	Home	Trousdale	Yes
	Morgan	Energy Workers Home Health	Home	Trousdale	Yes
19724	Putnam	Adoration Home Health Nashville South	Home	Trousdale	Yes
71014	Putnam	Cookeville Regional Home Health	Home	Trousdale	Yes
	Roane	Your Choice Home Care	Home	Trousdale	Yes
19694	Rutherford	Aveanna Home Health	Home	Trousdale	Yes
19584	Rutherford	Home Health Care of Middle Tennessee	Home	Trousdale	Yes
75024	Rutherford	NHC Homecare	Home	Trousdale	Yes
75084	Rutherford	TwelveStone Infusion Services	Home	Trousdale	Yes
79456	Shelby	Accredo Health Group, Inc	Home	Trousdale	Yes
	Shelby	AOC TN, LLC	Home	Trousdale	Yes
79466	Shelby	Optum Women's and Children's Health LLC	Home	Trousdale	Yes
79926	Shelby	Tristate Infusion, LLC	Home	Trousdale	Yes
83114	Sumner	Highpoint Homecare	Home	Trousdale	Yes
89084	Warren	HomeFirst Home Healthcare	Home	Trousdale	Yes
94074	Williamson	AccentCare Home Health of Nashville	Home	Trousdale	Yes
19734	Williamson	Coram CVS Specialty Infusion Services	Home	Trousdale	Yes
94104	Williamson	Maxim Healthcare Services, Inc.	Home	Trousdale	Yes
79856	Williamson	Optum Infusion Services 305, LLC	Home	Trousdale	Yes
95074	Wilson	CenterWell Home Health	Home	Trousdale	Yes
95034	Wilson	Home Care Solutions	Home	Trousdale	Yes
	Wilson	Tennessee Quality Care Home Health (East)	Home	Trousdale	Yes
	Anderson	Atomic Care Home Health, LLC	Home	Unicoi	Yes
01032	Anderson	Clinch River Home Health	Home	Unicoi	Yes
01072	Anderson	CNSCares	Home	Unicoi	Yes
01092	Anderson	Giving Home Health Care	Home	Unicoi	Yes
47499	Anderson	Harmony Wellness Home Health	Home	Unicoi	Yes
	Anderson	Nuclear Care Partners, LLC	Home	Unicoi	Yes
01042	Anderson	Professional Case Management of Tennessee	Home	Unicoi	Yes
	Anderson	Right Choice Homecare	Home	Unicoi	Yes
01112	Anderson	Trinity Homecare & Consulting Services, LLC	Home	Unicoi	Yes

Home Health Agencies by Licensed Counties

Health Statistics ID	Agency County	Agency Name	Type	Licensed County	Agency Infusion Only
47498	Anderson	Truth Home Care PLLC	Home	Unicoi	Yes
19754	Blount	Advanced Nursing Solutions	Home	Unicoi	Yes
05012	Blount	Blount Memorial Hospital Home Health Services	Home	Unicoi	Yes
10031	Carter	Amedisys Home Health Care	Home	Unicoi	Yes
19494	Davidson	Elk Valley Health Services LLC	Home	Unicoi	Yes
19914	Davidson	KabaFusion TN, LLC	Home	Unicoi	Yes
19994	Davidson	Vanderbilt HC w/ Option Care IV Services	Home	Unicoi	Yes
30041	Greene	Ballad Health Homecare	Home	Unicoi	Yes
32132	Hamblen	Premier Support Services, Inc	Home	Unicoi	Yes
	Hamilton	Amerita, Inc.	Home	Unicoi	Yes
19744	Hamilton	Pentec Health, Inc.	Home	Unicoi	Yes
45012	Jefferson	Suncrest Home Health	Home	Unicoi	Yes
47202	Knox	Amedisys Home Health Care	Home	Unicoi	Yes
	Knox	Blueberry Health Infusion Nursing	Home	Unicoi	Yes
47442	Knox	Coram CVS/Specialty Infusion Services	Home	Unicoi	Yes
47452	Knox	Implanted Pump Management	Home	Unicoi	Yes
	Knox	Personalized Caregiving of Tennessee LLC	Home	Unicoi	Yes
47482	Knox	Remain At Home Senior Care, LLC	Home	Unicoi	Yes
47496	Knox	Stand Out Home Care	Home	Unicoi	Yes
47493	Knox	Tola LLC	Home	Unicoi	Yes
47494	Knox	Trusted Ally Home Care	Home	Unicoi	Yes
	Loudon	TheraStaffing, LLC	Home	Unicoi	Yes
	Morgan	Energy Workers Home Health	Home	Unicoi	Yes
73032	Roane	Haven Home Health Care	Home	Unicoi	Yes
	Roane	Your Choice Home Care	Home	Unicoi	Yes
75084	Rutherford	TwelveStone Infusion Services	Home	Unicoi	Yes
76042	Scott	Energy Employee Services	Home	Unicoi	Yes
79456	Shelby	Accredo Health Group, Inc	Home	Unicoi	Yes
	Shelby	AOC TN, LLC	Home	Unicoi	Yes
79466	Shelby	Optum Women's and Children's Health LLC	Home	Unicoi	Yes
82051	Sullivan	Adoration Home Health	Home	Unicoi	Yes
82061	Sullivan	CenterWell Home Health	Home	Unicoi	Yes
90121	Washington	Amedisys Home Health	Home	Unicoi	Yes
90081	Washington	Ballad Health Homecare	Home	Unicoi	Yes
90141	Washington	Maxim Healthcare Services	Home	Unicoi	Yes
90131	Washington	NHC Homecare	Home	Unicoi	Yes
79856	Williamson	Optum Infusion Services 305, LLC	Home	Unicoi	Yes
01032	Anderson	Clinch River Home Health	Home	Union	Yes
01072	Anderson	CNSCares	Home	Union	Yes
	Anderson	Family Hearts Home Care LLC	Home	Union	Yes
01092	Anderson	Giving Home Health Care	Home	Union	Yes
47499	Anderson	Harmony Wellness Home Health	Home	Union	Yes

Home Health Agencies by Licensed Counties

Health Statistics ID	Agency County	Agency Name	Type	Licensed County	Agency Infusion Only
	Anderson	Nuclear Care Partners, LLC	Home	Union	Yes
01042	Anderson	Professional Case Management of Tennessee	Home	Union	Yes
	Anderson	Right Choice Homecare	Home	Union	Yes
01052	Anderson	The Home Option	Home	Union	Yes
01082	Anderson	The Homecare Company of Tennessee, LLC	Home	Union	Yes
01112	Anderson	Trinity Homecare & Consulting Services, LLC	Home	Union	Yes
47498	Anderson	Truth Home Care PLLC	Home	Union	Yes
19754	Blount	Advanced Nursing Solutions	Home	Union	Yes
05012	Blount	Blount Memorial Hospital Home Health Services	Home	Union	Yes
13022	Claiborne	Amedisys Home Health of Tennessee	Home	Union	Yes
19494	Davidson	Elk Valley Health Services LLC	Home	Union	Yes
19914	Davidson	KabaFusion TN, LLC	Home	Union	Yes
19994	Davidson	Vanderbilt HC w/ Option Care IV Services	Home	Union	Yes
25034	Fentress	Quality Private Duty Care	Home	Union	Yes
32102	Hamblen	Amedisys Home Health Care	Home	Union	Yes
32132	Hamblen	Premier Support Services, Inc	Home	Union	Yes
	Hamilton	Amerita, Inc.	Home	Union	Yes
19744	Hamilton	Pentec Health, Inc.	Home	Union	Yes
45012	Jefferson	Suncrest Home Health	Home	Union	Yes
47202	Knox	Amedisys Home Health Care	Home	Union	Yes
	Knox	Blueberry Health Infusion Nursing	Home	Union	Yes
62052	Knox	CenterWell Home Health	Home	Union	Yes
47042	Knox	CenterWell Home Health	Home	Union	Yes
47497	Knox	Coal Miner Nursing Services	Home	Union	Yes
47442	Knox	Coram CVS/Specialty Infusion Services	Home	Union	Yes
47222	Knox	East Tennessee Children's Hospital Home Health	Home	Union	Yes
47062	Knox	Enhabit Home Health	Home	Union	Yes
47452	Knox	Implanted Pump Management	Home	Union	Yes
47432	Knox	Maxim Healthcare Services, Inc	Home	Union	Yes
47012	Knox	NHC Homecare	Home	Union	Yes
	Knox	Personalized Caregiving of Tennessee LLC	Home	Union	Yes
47482	Knox	Remain At Home Senior Care, LLC	Home	Union	Yes
47496	Knox	Stand Out Home Care	Home	Union	Yes
47092	Knox	Tennova Healthcare Home Health	Home	Union	Yes
47493	Knox	Tola LLC	Home	Union	Yes
47494	Knox	Trusted Ally Home Care	Home	Union	Yes
	Loudon	TheraStaffing, LLC	Home	Union	Yes
19544	Maury	Home Care Solutions	Home	Union	Yes
	Morgan	Energy Workers Home Health	Home	Union	Yes
96030	Other	Professional Home Health Care Agency	Home	Union	Yes
73032	Roane	Haven Home Health Care	Home	Union	Yes
73012	Roane	VIP Family Homecare	Home	Union	Yes

Home Health Agencies by Licensed Counties

Health Statistics ID	Agency County	Agency Name	Type	Licensed County	Agency Infusion Only
	Roane	Your Choice Home Care	Home	Union	Yes
75084	Rutherford	TwelveStone Infusion Services	Home	Union	Yes
76042	Scott	Energy Employee Services	Home	Union	Yes
79456	Shelby	Accredo Health Group, Inc	Home	Union	Yes
	Shelby	AOC TN, LLC	Home	Union	Yes
79466	Shelby	Optum Women's and Children's Health LLC	Home	Union	Yes
79856	Williamson	Optum Infusion Services 305, LLC	Home	Union	Yes
01032	Anderson	Clinch River Home Health	Home	Van Buren	Yes
01072	Anderson	CNSCares	Home	Van Buren	Yes
01092	Anderson	Giving Home Health Care	Home	Van Buren	Yes
47499	Anderson	Harmony Wellness Home Health	Home	Van Buren	Yes
	Anderson	Nuclear Care Partners, LLC	Home	Van Buren	Yes
01042	Anderson	Professional Case Management of Tennessee	Home	Van Buren	Yes
	Anderson	Right Choice Homecare	Home	Van Buren	Yes
01112	Anderson	Trinity Homecare & Consulting Services, LLC	Home	Van Buren	Yes
47498	Anderson	Truth Home Care PLLC	Home	Van Buren	Yes
19754	Blount	Advanced Nursing Solutions	Home	Van Buren	Yes
16034	Coffee	Suncrest Home Health	Home	Van Buren	Yes
19714	Davidson	Adoration Home Health, LLC	Home	Van Buren	Yes
19494	Davidson	Elk Valley Health Services LLC	Home	Van Buren	Yes
19914	Davidson	KabaFusion TN, LLC	Home	Van Buren	Yes
19504	Davidson	TriStar Healthcare at Home	Home	Van Buren	Yes
19994	Davidson	Vanderbilt HC w/ Option Care IV Services	Home	Van Buren	Yes
25044	Fentress	Quality Home Health	Home	Van Buren	Yes
25034	Fentress	Quality Private Duty Care	Home	Van Buren	Yes
26054	Franklin	Amedisys Home Care	Home	Van Buren	Yes
26024	Franklin	Enhabit Home Health	Home	Van Buren	Yes
33103	Hamilton	Amedisys Home Health	Home	Van Buren	Yes
	Hamilton	Amerita, Inc.	Home	Van Buren	Yes
33253	Hamilton	CHI Memorial Health at Home	Home	Van Buren	Yes
33433	Hamilton	Maxim Healthcare Services	Home	Van Buren	Yes
33033	Hamilton	NHC Homecare	Home	Van Buren	Yes
	Knox	Blueberry Health Infusion Nursing	Home	Van Buren	Yes
47452	Knox	Implanted Pump Management	Home	Van Buren	Yes
47496	Knox	Stand Out Home Care	Home	Van Buren	Yes
47493	Knox	Tola LLC	Home	Van Buren	Yes
52024	Lincoln	Deaconess Homecare	Home	Van Buren	Yes
19544	Maury	Home Care Solutions	Home	Van Buren	Yes
	Morgan	Energy Workers Home Health	Home	Van Buren	Yes
19724	Putnam	Adoration Home Health Nashville South	Home	Van Buren	Yes
73032	Roane	Haven Home Health Care	Home	Van Buren	Yes
	Roane	Your Choice Home Care	Home	Van Buren	Yes

Home Health Agencies by Licensed Counties

Health Statistics ID	Agency County	Agency Name	Type	Licensed County	Agency Infusion Only
75024	Rutherford	NHC Homecare	Home	Van Buren	Yes
75084	Rutherford	TwelveStone Infusion Services	Home	Van Buren	Yes
79456	Shelby	Accredo Health Group, Inc	Home	Van Buren	Yes
	Shelby	AOC TN, LLC	Home	Van Buren	Yes
79466	Shelby	Optum Women's and Children's Health LLC	Home	Van Buren	Yes
79926	Shelby	Tristate Infusion, LLC	Home	Van Buren	Yes
89074	Warren	Adoration Home Health McMinnville	Home	Van Buren	Yes
89064	Warren	CenterWell Home Health	Home	Van Buren	Yes
89084	Warren	HomeFirst Home Healthcare	Home	Van Buren	Yes
79856	Williamson	Optum Infusion Services 305, LLC	Home	Van Buren	Yes
01032	Anderson	Clinch River Home Health	Home	Warren	Yes
01072	Anderson	CNSCares	Home	Warren	Yes
01092	Anderson	Giving Home Health Care	Home	Warren	Yes
47499	Anderson	Harmony Wellness Home Health	Home	Warren	Yes
	Anderson	Nuclear Care Partners, LLC	Home	Warren	Yes
01042	Anderson	Professional Case Management of Tennessee	Home	Warren	Yes
	Anderson	Right Choice Homecare	Home	Warren	Yes
01112	Anderson	Trinity Homecare & Consulting Services, LLC	Home	Warren	Yes
47498	Anderson	Truth Home Care PLLC	Home	Warren	Yes
19754	Blount	Advanced Nursing Solutions	Home	Warren	Yes
16034	Coffee	Suncrest Home Health	Home	Warren	Yes
19714	Davidson	Adoration Home Health, LLC	Home	Warren	Yes
19494	Davidson	Elk Valley Health Services LLC	Home	Warren	Yes
19914	Davidson	KabaFusion TN, LLC	Home	Warren	Yes
19504	Davidson	TriStar Healthcare at Home	Home	Warren	Yes
19994	Davidson	Vanderbilt HC w/ Option Care IV Services	Home	Warren	Yes
21024	DeKalb	Suncrest Home Health	Home	Warren	Yes
25044	Fentress	Quality Home Health	Home	Warren	Yes
26054	Franklin	Amedisys Home Care	Home	Warren	Yes
26024	Franklin	Enhabit Home Health	Home	Warren	Yes
33103	Hamilton	Amedisys Home Health	Home	Warren	Yes
	Hamilton	Amerita, Inc.	Home	Warren	Yes
33433	Hamilton	Maxim Healthcare Services	Home	Warren	Yes
33033	Hamilton	NHC Homecare	Home	Warren	Yes
19744	Hamilton	Pentec Health, Inc.	Home	Warren	Yes
	Knox	Blueberry Health Infusion Nursing	Home	Warren	Yes
47452	Knox	Implanted Pump Management	Home	Warren	Yes
47496	Knox	Stand Out Home Care	Home	Warren	Yes
47493	Knox	Tola LLC	Home	Warren	Yes
52024	Lincoln	Deaconess Homecare	Home	Warren	Yes
19544	Maury	Home Care Solutions	Home	Warren	Yes
	Morgan	Energy Workers Home Health	Home	Warren	Yes

Home Health Agencies by Licensed Counties

Health Statistics ID	Agency County	Agency Name	Type	Licensed County	Agency Infusion Only
19724	Putnam	Adoration Home Health Nashville South	Home	Warren	Yes
71014	Putnam	Cookeville Regional Home Health	Home	Warren	Yes
73032	Roane	Haven Home Health Care	Home	Warren	Yes
	Roane	Your Choice Home Care	Home	Warren	Yes
75054	Rutherford	Amedisys Home Health	Home	Warren	Yes
75064	Rutherford	Amedisys Home Health Care	Home	Warren	Yes
19694	Rutherford	Aveanna Home Health	Home	Warren	Yes
75024	Rutherford	NHC Homecare	Home	Warren	Yes
75084	Rutherford	TwelveStone Infusion Services	Home	Warren	Yes
79456	Shelby	Accredo Health Group, Inc	Home	Warren	Yes
	Shelby	AOC TN, LLC	Home	Warren	Yes
79466	Shelby	Optum Women's and Children's Health LLC	Home	Warren	Yes
79926	Shelby	Tristate Infusion, LLC	Home	Warren	Yes
89074	Warren	Adoration Home Health McMinnville	Home	Warren	Yes
89064	Warren	CenterWell Home Health	Home	Warren	Yes
89084	Warren	HomeFirst Home Healthcare	Home	Warren	Yes
19734	Williamson	Coram CVS Specialty Infusion Services	Home	Warren	Yes
94104	Williamson	Maxim Healthcare Services, Inc.	Home	Warren	Yes
79856	Williamson	Optum Infusion Services 305, LLC	Home	Warren	Yes
95074	Wilson	CenterWell Home Health	Home	Warren	Yes
95034	Wilson	Home Care Solutions	Home	Warren	Yes
	Anderson	Atomic Care Home Health, LLC	Home	Washington	Yes
01032	Anderson	Clinch River Home Health	Home	Washington	Yes
01072	Anderson	CNSCares	Home	Washington	Yes
01092	Anderson	Giving Home Health Care	Home	Washington	Yes
47499	Anderson	Harmony Wellness Home Health	Home	Washington	Yes
	Anderson	Nuclear Care Partners, LLC	Home	Washington	Yes
01042	Anderson	Professional Case Management of Tennessee	Home	Washington	Yes
	Anderson	Right Choice Homecare	Home	Washington	Yes
01082	Anderson	The Homecare Company of Tennessee, LLC	Home	Washington	Yes
01112	Anderson	Trinity Homecare & Consulting Services, LLC	Home	Washington	Yes
47498	Anderson	Truth Home Care PLLC	Home	Washington	Yes
19754	Blount	Advanced Nursing Solutions	Home	Washington	Yes
05012	Blount	Blount Memorial Hospital Home Health Services	Home	Washington	Yes
10031	Carter	Amedisys Home Health Care	Home	Washington	Yes
19494	Davidson	Elk Valley Health Services LLC	Home	Washington	Yes
19914	Davidson	KabaFusion TN, LLC	Home	Washington	Yes
19994	Davidson	Vanderbilt HC w/ Option Care IV Services	Home	Washington	Yes
30021	Greene	Adoration Home Health	Home	Washington	Yes
30041	Greene	Ballad Health Homecare	Home	Washington	Yes
32132	Hamblen	Premier Support Services, Inc	Home	Washington	Yes
	Hamilton	Amerita, Inc.	Home	Washington	Yes

Home Health Agencies by Licensed Counties

Health Statistics ID	Agency County	Agency Name	Type	Licensed County	Agency Infusion Only
19744	Hamilton	Pentec Health, Inc.	Home	Washington	Yes
45012	Jefferson	Suncrest Home Health	Home	Washington	Yes
47202	Knox	Amedisys Home Health Care	Home	Washington	Yes
	Knox	Blueberry Health Infusion Nursing	Home	Washington	Yes
47442	Knox	Coram CVS/Specialty Infusion Services	Home	Washington	Yes
47452	Knox	Implanted Pump Management	Home	Washington	Yes
	Knox	Personalized Caregiving of Tennessee LLC	Home	Washington	Yes
47482	Knox	Remain At Home Senior Care, LLC	Home	Washington	Yes
47496	Knox	Stand Out Home Care	Home	Washington	Yes
47493	Knox	Tola LLC	Home	Washington	Yes
47494	Knox	Trusted Ally Home Care	Home	Washington	Yes
	Morgan	Energy Workers Home Health	Home	Washington	Yes
73032	Roane	Haven Home Health Care	Home	Washington	Yes
	Roane	Your Choice Home Care	Home	Washington	Yes
75084	Rutherford	TwelveStone Infusion Services	Home	Washington	Yes
76042	Scott	Energy Employee Services	Home	Washington	Yes
79456	Shelby	Accredo Health Group, Inc	Home	Washington	Yes
	Shelby	AOC TN, LLC	Home	Washington	Yes
79466	Shelby	Optum Women's and Children's Health LLC	Home	Washington	Yes
82051	Sullivan	Adoration Home Health	Home	Washington	Yes
82061	Sullivan	CenterWell Home Health	Home	Washington	Yes
90121	Washington	Amedisys Home Health	Home	Washington	Yes
90081	Washington	Ballad Health Homecare	Home	Washington	Yes
90141	Washington	Maxim Healthcare Services	Home	Washington	Yes
90131	Washington	NHC Homecare	Home	Washington	Yes
79856	Williamson	Optum Infusion Services 305, LLC	Home	Washington	Yes
01032	Anderson	Clinch River Home Health	Home	Wayne	Yes
01072	Anderson	CNSCares	Home	Wayne	Yes
01092	Anderson	Giving Home Health Care	Home	Wayne	Yes
47499	Anderson	Harmony Wellness Home Health	Home	Wayne	Yes
	Anderson	Nuclear Care Partners, LLC	Home	Wayne	Yes
01042	Anderson	Professional Case Management of Tennessee	Home	Wayne	Yes
	Anderson	Right Choice Homecare	Home	Wayne	Yes
01112	Anderson	Trinity Homecare & Consulting Services, LLC	Home	Wayne	Yes
47498	Anderson	Truth Home Care PLLC	Home	Wayne	Yes
19754	Blount	Advanced Nursing Solutions	Home	Wayne	Yes
19494	Davidson	Elk Valley Health Services LLC	Home	Wayne	Yes
19914	Davidson	KabaFusion TN, LLC	Home	Wayne	Yes
19994	Davidson	Vanderbilt HC w/ Option Care IV Services	Home	Wayne	Yes
20045	Decatur	Tennessee Quality Homecare - Southwest	Home	Wayne	Yes
20055	Decatur	Volunteer Homecare of West Tennessee	Home	Wayne	Yes
	Hamilton	Amerita, Inc.	Home	Wayne	Yes

Home Health Agencies by Licensed Counties

Health Statistics ID	Agency County	Agency Name	Type	Licensed County	Agency Infusion Only
19744	Hamilton	Pentec Health, Inc.	Home	Wayne	Yes
36025	Hardin	Deaconess Homecare	Home	Wayne	Yes
36035	Hardin	Hardin Medical Center Home Health	Home	Wayne	Yes
	Knox	Blueberry Health Infusion Nursing	Home	Wayne	Yes
47452	Knox	Implanted Pump Management	Home	Wayne	Yes
47496	Knox	Stand Out Home Care	Home	Wayne	Yes
47493	Knox	Tola LLC	Home	Wayne	Yes
19544	Maury	Home Care Solutions	Home	Wayne	Yes
60044	Maury	Maury Regional Home Services	Home	Wayne	Yes
60024	Maury	NHC Homecare	Home	Wayne	Yes
19724	Putnam	Adoration Home Health Nashville South	Home	Wayne	Yes
	Roane	Your Choice Home Care	Home	Wayne	Yes
19694	Rutherford	Aveanna Home Health	Home	Wayne	Yes
75084	Rutherford	TwelveStone Infusion Services	Home	Wayne	Yes
79456	Shelby	Accredo Health Group, Inc	Home	Wayne	Yes
	Shelby	AOC TN, LLC	Home	Wayne	Yes
79556	Shelby	Coram CVS/Specialty Infusion Service	Home	Wayne	Yes
79466	Shelby	Optum Women's and Children's Health LLC	Home	Wayne	Yes
79926	Shelby	Tristate Infusion, LLC	Home	Wayne	Yes
94104	Williamson	Maxim Healthcare Services, Inc.	Home	Wayne	Yes
79856	Williamson	Optum Infusion Services 305, LLC	Home	Wayne	Yes
01032	Anderson	Clinch River Home Health	Home	Weakley	Yes
01072	Anderson	CNSCares	Home	Weakley	Yes
01092	Anderson	Giving Home Health Care	Home	Weakley	Yes
47499	Anderson	Harmony Wellness Home Health	Home	Weakley	Yes
	Anderson	Nuclear Care Partners, LLC	Home	Weakley	Yes
01042	Anderson	Professional Case Management of Tennessee	Home	Weakley	Yes
	Anderson	Right Choice Homecare	Home	Weakley	Yes
01112	Anderson	Trinity Homecare & Consulting Services, LLC	Home	Weakley	Yes
47498	Anderson	Truth Home Care PLLC	Home	Weakley	Yes
19754	Blount	Advanced Nursing Solutions	Home	Weakley	Yes
19494	Davidson	Elk Valley Health Services LLC	Home	Weakley	Yes
19914	Davidson	KabaFusion TN, LLC	Home	Weakley	Yes
19994	Davidson	Vanderbilt HC w/ Option Care IV Services	Home	Weakley	Yes
20045	Decatur	Tennessee Quality Homecare - Southwest	Home	Weakley	Yes
20055	Decatur	Volunteer Homecare of West Tennessee	Home	Weakley	Yes
57095	Dyer	Extendicare Home Health of West Tennessee	Home	Weakley	Yes
27025	Gibson	NHC Homecare	Home	Weakley	Yes
27085	Gibson	Volunteer Home Care, Inc	Home	Weakley	Yes
19744	Hamilton	Pentec Health, Inc.	Home	Weakley	Yes
38015	Haywood	Adoration Home Health Brownsville	Home	Weakley	Yes
40075	Henry	West TN Healthcare Henry County Home Health	Home	Weakley	Yes

Home Health Agencies by Licensed Counties

Health Statistics ID	Agency County	Agency Name	Type	Licensed County	Agency Infusion Only
	Knox	Blueberry Health Infusion Nursing	Home	Weakley	Yes
47452	Knox	Implanted Pump Management	Home	Weakley	Yes
47496	Knox	Stand Out Home Care	Home	Weakley	Yes
47493	Knox	Tola LLC	Home	Weakley	Yes
57075	Madison	Amedisys Home Health Care	Home	Weakley	Yes
57165	Madison	CenterWell Home Health	Home	Weakley	Yes
57055	Madison	Medical Center Home Health	Home	Weakley	Yes
19544	Maury	Home Care Solutions	Home	Weakley	Yes
66035	Obion	Extendicare Home Health of Western Tennessee	Home	Weakley	Yes
	Roane	Your Choice Home Care	Home	Weakley	Yes
75084	Rutherford	TwelveStone Infusion Services	Home	Weakley	Yes
79456	Shelby	Accredo Health Group, Inc	Home	Weakley	Yes
	Shelby	AOC TN, LLC	Home	Weakley	Yes
79556	Shelby	Coram CVS/Specialty Infusion Service	Home	Weakley	Yes
79466	Shelby	Optum Women's and Children's Health LLC	Home	Weakley	Yes
79946	Shelby	The Good Care Helpers LLC	Home	Weakley	Yes
79926	Shelby	Tristate Infusion, LLC	Home	Weakley	Yes
92025	Weakley	Adoration Home Health Martin	Home	Weakley	Yes
79856	Williamson	Optum Infusion Services 305, LLC	Home	Weakley	Yes
01032	Anderson	Clinch River Home Health	Home	White	Yes
01072	Anderson	CNSCares	Home	White	Yes
01092	Anderson	Giving Home Health Care	Home	White	Yes
47499	Anderson	Harmony Wellness Home Health	Home	White	Yes
	Anderson	Nuclear Care Partners, LLC	Home	White	Yes
01042	Anderson	Professional Case Management of Tennessee	Home	White	Yes
	Anderson	Right Choice Homecare	Home	White	Yes
01112	Anderson	Trinity Homecare & Consulting Services, LLC	Home	White	Yes
47498	Anderson	Truth Home Care PLLC	Home	White	Yes
19754	Blount	Advanced Nursing Solutions	Home	White	Yes
16034	Coffee	Suncrest Home Health	Home	White	Yes
19494	Davidson	Elk Valley Health Services LLC	Home	White	Yes
19914	Davidson	KabaFusion TN, LLC	Home	White	Yes
19504	Davidson	TriStar Healthcare at Home	Home	White	Yes
19994	Davidson	Vanderbilt HC w/ Option Care IV Services	Home	White	Yes
20045	Decatur	Tennessee Quality Homecare - Southwest	Home	White	Yes
21024	DeKalb	Suncrest Home Health	Home	White	Yes
25044	Fentress	Quality Home Health	Home	White	Yes
25034	Fentress	Quality Private Duty Care	Home	White	Yes
26024	Franklin	Enhabit Home Health	Home	White	Yes
	Hamilton	Amerita, Inc.	Home	White	Yes
33433	Hamilton	Maxim Healthcare Services	Home	White	Yes
19744	Hamilton	Pentec Health, Inc.	Home	White	Yes

Home Health Agencies by Licensed Counties

Health Statistics ID	Agency County	Agency Name	Type	Licensed County	Agency Infusion Only
	Knox	Blueberry Health Infusion Nursing	Home	White	Yes
47452	Knox	Implanted Pump Management	Home	White	Yes
47496	Knox	Stand Out Home Care	Home	White	Yes
47493	Knox	Tola LLC	Home	White	Yes
47494	Knox	Trusted Ally Home Care	Home	White	Yes
52024	Lincoln	Deaconess Homecare	Home	White	Yes
19544	Maury	Home Care Solutions	Home	White	Yes
	Morgan	Energy Workers Home Health	Home	White	Yes
67024	Overton	Amedisys Home Health	Home	White	Yes
19724	Putnam	Adoration Home Health Nashville South	Home	White	Yes
71084	Putnam	CenterWell Home Health	Home	White	Yes
71014	Putnam	Cookeville Regional Home Health	Home	White	Yes
73032	Roane	Haven Home Health Care	Home	White	Yes
	Roane	Your Choice Home Care	Home	White	Yes
75064	Rutherford	Amedisys Home Health Care	Home	White	Yes
19694	Rutherford	Aveanna Home Health	Home	White	Yes
75024	Rutherford	NHC Homecare	Home	White	Yes
75084	Rutherford	TwelveStone Infusion Services	Home	White	Yes
79456	Shelby	Accredo Health Group, Inc	Home	White	Yes
	Shelby	AOC TN, LLC	Home	White	Yes
79466	Shelby	Optum Women's and Children's Health LLC	Home	White	Yes
79946	Shelby	The Good Care Helpers LLC	Home	White	Yes
79926	Shelby	Tristate Infusion, LLC	Home	White	Yes
89074	Warren	Adoration Home Health McMinnville	Home	White	Yes
89064	Warren	CenterWell Home Health	Home	White	Yes
19734	Williamson	Coram CVS Specialty Infusion Services	Home	White	Yes
79856	Williamson	Optum Infusion Services 305, LLC	Home	White	Yes
95034	Wilson	Home Care Solutions	Home	White	Yes
	Wilson	Tennessee Quality Care Home Health (East)	Home	White	Yes
01032	Anderson	Clinch River Home Health	Home	Williamson	Yes
01072	Anderson	CNSCares	Home	Williamson	Yes
01092	Anderson	Giving Home Health Care	Home	Williamson	Yes
47499	Anderson	Harmony Wellness Home Health	Home	Williamson	Yes
	Anderson	Nuclear Care Partners, LLC	Home	Williamson	Yes
01042	Anderson	Professional Case Management of Tennessee	Home	Williamson	Yes
	Anderson	Right Choice Homecare	Home	Williamson	Yes
01112	Anderson	Trinity Homecare & Consulting Services, LLC	Home	Williamson	Yes
47498	Anderson	Truth Home Care PLLC	Home	Williamson	Yes
19754	Blount	Advanced Nursing Solutions	Home	Williamson	Yes
19714	Davidson	Adoration Home Health, LLC	Home	Williamson	Yes
	Davidson	Advanced Home Health & Hospice of Nashville, LLC	Home	Williamson	Yes
19674	Davidson	Amedisys Home Health (10 Ave)	Home	Williamson	Yes

Home Health Agencies by Licensed Counties

Health Statistics ID	Agency County	Agency Name	Type	Licensed County	Agency Infusion Only
19024	Davidson	Amedisys Home Health (Old Hickory Blvd)	Home	Williamson	Yes
19684	Davidson	Beacon Home Health	Home	Williamson	Yes
19904	Davidson	Continuum Pediatric Nursing Services	Home	Williamson	Yes
19494	Davidson	Elk Valley Health Services LLC	Home	Williamson	Yes
19084	Davidson	Gentiva Certified Health Care Corp (CenterWell)	Home	Williamson	Yes
	Davidson	Heart to Heart Holistics Healthcare Services	Home	Williamson	Yes
19614	Davidson	HomeFirst Home Healthcare	Home	Williamson	Yes
19914	Davidson	KabaFusion TN, LLC	Home	Williamson	Yes
19854	Davidson	St. Thomas Home Health dba Ascension at Home	Home	Williamson	Yes
19324	Davidson	Suncrest Home Health	Home	Williamson	Yes
19504	Davidson	TriStar Healthcare at Home	Home	Williamson	Yes
19394	Davidson	Vanderbilt Community & Home Services	Home	Williamson	Yes
19994	Davidson	Vanderbilt HC w/ Option Care IV Services	Home	Williamson	Yes
19314	Davidson	Vanderbilt Home Care Services	Home	Williamson	Yes
20045	Decatur	Tennessee Quality Homecare - Southwest	Home	Williamson	Yes
26024	Franklin	Enhabit Home Health	Home	Williamson	Yes
	Hamilton	Amerita, Inc.	Home	Williamson	Yes
19744	Hamilton	Pentec Health, Inc.	Home	Williamson	Yes
41034	Hickman	Ascension Saint Thomas at Home	Home	Williamson	Yes
	Knox	Blueberry Health Infusion Nursing	Home	Williamson	Yes
47452	Knox	Implanted Pump Management	Home	Williamson	Yes
47496	Knox	Stand Out Home Care	Home	Williamson	Yes
47493	Knox	Tola LLC	Home	Williamson	Yes
47494	Knox	Trusted Ally Home Care	Home	Williamson	Yes
19544	Maury	Home Care Solutions	Home	Williamson	Yes
60044	Maury	Maury Regional Home Services	Home	Williamson	Yes
60024	Maury	NHC Homecare	Home	Williamson	Yes
63044	Montgomery	Suncrest Home Health	Home	Williamson	Yes
	Morgan	Energy Workers Home Health	Home	Williamson	Yes
19724	Putnam	Adoration Home Health Nashville South	Home	Williamson	Yes
	Roane	Your Choice Home Care	Home	Williamson	Yes
75054	Rutherford	Amedisys Home Health	Home	Williamson	Yes
75064	Rutherford	Amedisys Home Health Care	Home	Williamson	Yes
19694	Rutherford	Aveanna Home Health	Home	Williamson	Yes
19584	Rutherford	Home Health Care of Middle Tennessee	Home	Williamson	Yes
75024	Rutherford	NHC Homecare	Home	Williamson	Yes
75084	Rutherford	TwelveStone Infusion Services	Home	Williamson	Yes
79456	Shelby	Accredo Health Group, Inc	Home	Williamson	Yes
	Shelby	AOC TN, LLC	Home	Williamson	Yes
79876	Shelby	MGA Homecare	Home	Williamson	Yes
79466	Shelby	Optum Women's and Children's Health LLC	Home	Williamson	Yes
79926	Shelby	Tristate Infusion, LLC	Home	Williamson	Yes

Home Health Agencies by Licensed Counties

Health Statistics ID	Agency County	Agency Name	Type	Licensed County	Agency Infusion Only
89064	Warren	CenterWell Home Health	Home	Williamson	Yes
94074	Williamson	AccentCare Home Health of Nashville	Home	Williamson	Yes
22014	Williamson	Bayada Home Health Care, Inc.	Home	Williamson	Yes
19734	Williamson	Coram CVS Specialty Infusion Services	Home	Williamson	Yes
94104	Williamson	Maxim Healthcare Services, Inc.	Home	Williamson	Yes
79856	Williamson	Optum Infusion Services 305, LLC	Home	Williamson	Yes
95074	Wilson	CenterWell Home Health	Home	Williamson	Yes
95034	Wilson	Home Care Solutions	Home	Williamson	Yes
	Wilson	Tennessee Quality Care Home Health (East)	Home	Williamson	Yes
01032	Anderson	Clinch River Home Health	Home	Wilson	Yes
01072	Anderson	CNSCares	Home	Wilson	Yes
01092	Anderson	Giving Home Health Care	Home	Wilson	Yes
47499	Anderson	Harmony Wellness Home Health	Home	Wilson	Yes
	Anderson	Nuclear Care Partners, LLC	Home	Wilson	Yes
01042	Anderson	Professional Case Management of Tennessee	Home	Wilson	Yes
	Anderson	Right Choice Homecare	Home	Wilson	Yes
01112	Anderson	Trinity Homecare & Consulting Services, LLC	Home	Wilson	Yes
47498	Anderson	Truth Home Care PLLC	Home	Wilson	Yes
19754	Blount	Advanced Nursing Solutions	Home	Wilson	Yes
19714	Davidson	Adoration Home Health, LLC	Home	Wilson	Yes
	Davidson	Advanced Home Health & Hospice of Nashville, LLC	Home	Wilson	Yes
19674	Davidson	Amedisys Home Health (10 Ave)	Home	Wilson	Yes
19024	Davidson	Amedisys Home Health (Old Hickory Blvd)	Home	Wilson	Yes
19684	Davidson	Beacon Home Health	Home	Wilson	Yes
19904	Davidson	Continuum Pediatric Nursing Services	Home	Wilson	Yes
19494	Davidson	Elk Valley Health Services LLC	Home	Wilson	Yes
19084	Davidson	Gentiva Certified Health Care Corp (CenterWell)	Home	Wilson	Yes
	Davidson	Heart to Heart Holistics Healthcare Services	Home	Wilson	Yes
19614	Davidson	HomeFirst Home Healthcare	Home	Wilson	Yes
19914	Davidson	KabaFusion TN, LLC	Home	Wilson	Yes
19854	Davidson	St. Thomas Home Health dba Ascension at Home	Home	Wilson	Yes
19324	Davidson	Suncrest Home Health	Home	Wilson	Yes
19504	Davidson	TriStar Healthcare at Home	Home	Wilson	Yes
19394	Davidson	Vanderbilt Community & Home Services	Home	Wilson	Yes
19994	Davidson	Vanderbilt HC w/ Option Care IV Services	Home	Wilson	Yes
19314	Davidson	Vanderbilt Home Care Services	Home	Wilson	Yes
20045	Decatur	Tennessee Quality Homecare - Southwest	Home	Wilson	Yes
21024	DeKalb	Suncrest Home Health	Home	Wilson	Yes
25034	Fentress	Quality Private Duty Care	Home	Wilson	Yes
26024	Franklin	Enhabit Home Health	Home	Wilson	Yes
	Hamilton	Amerita, Inc.	Home	Wilson	Yes
19744	Hamilton	Pentec Health, Inc.	Home	Wilson	Yes

Home Health Agencies by Licensed Counties

Health Statistics ID	Agency County	Agency Name	Type	Licensed County	Agency Infusion Only
	Knox	Blueberry Health Infusion Nursing	Home	Wilson	Yes
47452	Knox	Implanted Pump Management	Home	Wilson	Yes
47496	Knox	Stand Out Home Care	Home	Wilson	Yes
47493	Knox	Tola LLC	Home	Wilson	Yes
47494	Knox	Trusted Ally Home Care	Home	Wilson	Yes
52024	Lincoln	Deaconess Homecare	Home	Wilson	Yes
19544	Maury	Home Care Solutions	Home	Wilson	Yes
	Morgan	Energy Workers Home Health	Home	Wilson	Yes
19724	Putnam	Adoration Home Health Nashville South	Home	Wilson	Yes
71014	Putnam	Cookeville Regional Home Health	Home	Wilson	Yes
	Roane	Your Choice Home Care	Home	Wilson	Yes
74054	Robertson	NHC Homecare	Home	Wilson	Yes
75054	Rutherford	Amedisys Home Health	Home	Wilson	Yes
75064	Rutherford	Amedisys Home Health Care	Home	Wilson	Yes
19694	Rutherford	Aveanna Home Health	Home	Wilson	Yes
19584	Rutherford	Home Health Care of Middle Tennessee	Home	Wilson	Yes
75024	Rutherford	NHC Homecare	Home	Wilson	Yes
75084	Rutherford	TwelveStone Infusion Services	Home	Wilson	Yes
79456	Shelby	Accredo Health Group, Inc	Home	Wilson	Yes
	Shelby	AOC TN, LLC -	Home	Wilson	Yes
79876	Shelby	MGA Homecare	Home	Wilson	Yes
79466	Shelby	Optum Women's and Children's Health LLC	Home	Wilson	Yes
79926	Shelby	Tristate Infusion, LLC	Home	Wilson	Yes
83114	Sumner	Highpoint Homecare	Home	Wilson	Yes
94074	Williamson	AccentCare Home Health of Nashville	Home	Wilson	Yes
22014	Williamson	Bayada Home Health Care, Inc.	Home	Wilson	Yes
19734	Williamson	Coram CVS Specialty Infusion Services	Home	Wilson	Yes
94104	Williamson	Maxim Healthcare Services, Inc.	Home	Wilson	Yes

ATTACHMENT 1N-9

Summary of Infusion Therapy Providers 2025 Average Charge Per Patient, Visit & Hour

Facility Name	State ID	County	Patients	Visits	Hours	Gross Revenue	Per Patient	Per Visit	Per Hour
Amedisys Home Health	19674	Davidson	3,315	72,055	0	\$26,695,084	\$8,052.82	\$370.48	#DIV/0!
Coram CVS Specialty Infusion Services	19734	Williamson	32	560	3,422	\$127,388	\$3,980.88	\$227.48	\$37.23
Advanced Nursing Solutions	19754	Blount	144	1,172	3,878	\$189,838	\$1,318.32	\$161.98	\$48.95
KabaFusion TN LLC	19914	Davidson	11	53	268	\$15,245	\$1,385.91	\$287.64	\$56.88
Vanderbilt HC Option Care IV Services	19994	Davidson	472	6,195	5,979	\$2,112,969	\$4,476.63	\$341.08	\$353.40
Coram CVS Specialty Infusion Services	47442	Knox	32	740	5,720	\$210,920	\$6,591.25	\$285.03	\$36.87
Implanted Pump Management LLC	47452	Knox	85	360	102	\$54,300	\$638.82	\$150.83	\$532.35
Twelvestone Infusion Support	75084	Rutherford	80	674	1,534	\$136,315	\$1,703.94	\$202.25	\$88.86
Accredo Health Group, Inc.	79456	Shelby	462	1,187	2,352	\$213,895	\$462.98	\$180.20	\$90.94
Coram CVS Specialty Infusion Service	79556	Shelby	20	460	3,027	\$127,915	\$6,395.75	\$278.08	\$42.26
Hemophilia Preferred Care of Memphis, Inc.	79566	Shelby	1	3	3	\$1	\$1.00	\$0.33	\$0.33
Optum Infusion Services LLC	79856	Williamson	138	1,579	7,652	\$351,787	\$2,549.18	\$222.79	\$45.97
Tristate Infusion LLC	79926	Shelby	247	1,946	5,466	\$221,500	\$896.76	\$113.82	\$40.52
Totals			5,039	86,984	39,403	\$30,457,157	\$6,044	\$350	\$772.96

LETTER OF INTENT

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The Publication of Intent is to be published in The Bristol Herald Courier, which is a newspaper of general circulation in Johnson County; the Buffalo River Review, which is a newspaper of general circulation in Perry County; the Camden Chronicle, which is a newspaper of general circulation in Benton County; the Cannon Courier, which is a newspaper of general circulation in Cannon County; the Carthage Courier, which is a newspaper of general circulation in Smith County; the Chattanooga Times Free Press, which is a newspaper of general circulation in Bledsoe, Bradley, Grundy, Hamilton, Marion, McMinn, Meigs, Polk, Rhea, and Sequatchie Counties; the Chester County Independent, which is a newspaper of general circulation in Chester County; the Commercial Appeal, which is a newspaper of general circulation in Fayette, Hardeman, Haywood, Lauderdale, Shelby, and Tipton Counties; the Daily Herald, which is a newspaper of general circulation in Maury County; the Dale Hollow Horizon, which is a newspaper of general circulation in Clay County; the Elk Valley Times, which is a newspaper of general circulation in Lincoln County; the Fentress Courier, which is a newspaper of general circulation in Fentress County; the Greeneville Sun, which is a newspaper of general circulation in Greene County; the Hartsville Vidette, which is a newspaper of general circulation in Trousdale County; the Herald Chronicle, which is a newspaper of general circulation in Franklin County; the Herald-Citizen, which is a newspaper of general circulation in Putnam County; the Jackson County Sentinel, which is a newspaper of general circulation in Jackson County; the Jackson Sun, which is a newspaper of general circulation in Carroll, Crockett, Gibson, Henderson, Madison, McNairy, and Weakley Counties; the Johnson City Press, which is a newspaper of general circulation in Carter, Johnson, Unicoi, and Washington Counties; the Kingsport Times-News, which is a newspaper of general circulation in Hawkins and Sullivan Counties; the Knoxville News Sentinel, which is a newspaper of general circulation in Anderson, Blount, Campbell, Claiborne, Cocke, Cumberland, Grainger, Hamblen, Jefferson, Knox, Loudon, McMinn, Monroe, Morgan, Roane, Scott, Sevier, and Union Counties; the Lake County Banner, which is a newspaper of general circulation in Lake County; the Lawrence County Advocate, which is a newspaper of general circulation in Lawrence County; the Leaf Chronicle, which is a newspaper of general circulation in Houston, Montgomery, and Stewart Counties; the Lewis County Herald, which is a newspaper of general circulation in Lewis County; the Macon County Chronicle, which is a newspaper of general circulation in Macon County; the Marshall County Post, which is a newspaper of general circulation in Marshall County; the Moore County News, which is a newspaper of general circulation in Moore County; the News Leader, which is a newspaper of general circulation in Decatur County; the News-Democrat, which is a newspaper of general circulation in Humphreys County; the Overton County News, which is a newspaper of general circulation in Overton County; the Paris Post-Intelligencer, which is a newspaper of general circulation in Henry County; the Pickett County Press, which is a newspaper of general circulation in Pickett County; the Polk County News, which is a newspaper of general circulation in Polk County; the Pulaski Citizen, which is a newspaper of general circulation in Giles County; the Rogersville Review, which is a newspaper of general circulation in Hancock and Hawkins Counties; the Shelbyville Times-Gazette, which is a newspaper of general circulation in Bedford County; the

Smithville Review, which is a newspaper of general circulation in DeKalb County; the Southern Standard, which is a newspaper of general circulation in Warren County; the State Gazette, which is a newspaper of general circulation in Dyer, Lake, Lauderdale, and Obion Counties; the Tennessean, which is a newspaper of general circulation in Cheatham, Davidson, Dickson, Hickman, Robertson, Rutherford, Sumner, Williamson, and Wilson Counties; the Courier, which is a newspaper of general circulation in Hardin County; the Expositor, which is a newspaper of general circulation in Van Buren and White Counties; the Tullahoma News, which is a newspaper of general circulation in Coffee County; and the Wayne County News, which is a newspaper of general circulation in Wayne County, Tennessee, on or before 07/15/2026 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 Sunray HHA TN, LLC, a/an proposed home health agency owned by Sunray HHA TN, LLC, with an ownership type of Limited Liability Company (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 limited to home infusion services. The project will serve a proposed service area of 95 counties: Anderson, Bedford, Benton, Bledsoe, Blount, Bradley, Campbell, Cannon, Carroll, Carter, Cheatham, Chester, Claiborne, Clay, Cocke, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Dyer, Fayette, Fentress, Franklin, Gibson, Giles, Grainger, Greene, Grundy, Hamblen, Hamilton, Hancock, Hardeman, Hardin, Hawkins, Haywood, Henderson, Henry, Hickman, Houston, Humphreys, Jackson, Jefferson, Johnson, Knox, Lake, Lauderdale, Lawrence, Lewis, Lincoln, Loudon, Macon, Madison, Marion, Marshall, Maury, McMinn, McNairy, Meigs, Monroe, Montgomery, Moore, Morgan, Obion, Overton, Perry, Pickett, Polk, Putnam, Rhea, Roane, Robertson, Rutherford, Scott, Sequatchie, Sevier, Shelby, Smith, Stewart, Sullivan, Sumner, Tipton, Trousdale, Unicoi, Union, Van Buren, Warren, Washington, Wayne, Weakley, White, Williamson, and Wilson Counties. The address of the project will be 740 Cool Springs Blvd., Suite 120, Office 1, Franklin, Williamson County, Tennessee, 37067. The estimated project cost will be \$202,418.

The anticipated date of filing the application is 08/01/2026.

The contact person for this project is Mr. Michael Brent who may be reached at Bradley Arant Boult Cummings LLP- 1221 Broadway #2400, Nashville, TN 37203- Contact No. 615-252-2361.

Michael Brent

mbrent@bradley.com

Signature of Contact

Date

Contact's Email Address

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

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 Sunray HHA TN, LLC, a/an proposed home health agency owned by Sunray HHA TN, LLC, with an ownership type of Limited Liability Company (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 limited to home infusion services. The project will serve a proposed service area of 95 counties: Anderson, Bedford, Benton, Bledsoe, Blount, Bradley, Campbell, Cannon, Carroll, Carter, Cheatham, Chester, Claiborne, Clay, Cocke, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Dyer, Fayette, Fentress, Franklin, Gibson, Giles, Grainger, Greene, Grundy, Hamblen, Hamilton, Hancock, Hardeman, Hardin, Hawkins, Haywood, Henderson, Henry, Hickman, Houston, Humphreys, Jackson, Jefferson, Johnson, Knox, Lake, Lauderdale, Lawrence, Lewis, Lincoln, Loudon, Macon, Madison, Marion, Marshall, Maury, McMinn, McNairy, Meigs, Monroe, Montgomery, Moore, Morgan, Obion, Overton, Perry, Pickett, Polk, Putnam, Rhea, Roane, Robertson, Rutherford, Scott, Sequatchie, Sevier, Shelby, Smith, Stewart, Sullivan, Sumner, Tipton, Trousdale, Unicoi, Union, Van Buren, Warren, Washington, Wayne, Weakley, White, Williamson, and Wilson Counties. The address of the project will be 740 Cool Springs Blvd., Suite 120, Office 1, Franklin, Williamson County, Tennessee, 37067. The estimated project cost will be \$202,418.

The anticipated date of filing the application is 08/01/2026.

The contact person for this project is Mr. Michael Brent who may be reached at Bradley Arant Boult Cummings LLP- 1221 Broadway #2400, Nashville, TN 37203- Contact No. 615-252-2361.

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, 503 Deaderick Street, Nashville, TN 37243 or email at hsda.staff@tn.gov.

ORIGINAL **APPLICATION**



**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

CERTIFICATE OF NEED APPLICATION

1A. Name of Facility, Agency, or Institution

Sunray HHA TN, LLC

Name

740 Cool Springs Blvd., Suite 120, Office 1

Williamson County

Street or Route

County

Franklin

Tennessee

37067

City

State

Zip

<https://vitalcare.com/locations/franklintn/>

Website Address

Note: The facility's name and address **must be** the name and address of the project and **must be** consistent with the Publication of Intent.

2A. Contact Person Available for Responses to Questions

Michael Brent

Attorney

Name

Title

Bradley Arant Boult Cummings

mbrent@bradley.com

Company Name

Email Address

1221 Broadway, Suite 2400

Street or Route

Nashville

Tennessee

37203

City

State

Zip

Attorney

615-252-2361

Association with Owner

Phone Number

3A. Proof of Publication

Attach the full page of newspaper in which the notice of intent appeared with the mast and dateline intact or submit a publication affidavit from the newspaper that includes a copy of the publication as proof of the publication of the letter of intent. (Attachment 3A)

Date LOI was Submitted: 07/01/26

Date LOI was Published: 07/12/26

RESPONSE: See Attachment 3A

4A. Purpose of Review *(Check appropriate box(es) – more than one response may apply)*

- ☒ Establish New Health Care Institution
- ☐ Relocation
- ☐ Change in Bed Complement
- ☐ Addition of a Specialty to an Ambulatory Surgical Treatment Center (ASTC)
- ☐ Initiation of MRI Service
- ☐ MRI Unit Increase
- ☐ Satellite Emergency Department
- ☐ Addition of Therapeutic Catheterization
- ☐ Positron Emission Tomography (PET) Service
- ☒ Initiation of Health Care Service as Defined in §TCA 68-11-1607(3)

Initiation of HealthCare services

- ☐ Burn Unit
- ☐ Neonatal Intensive Care Unit
- ☐ Open Heart Surgery
- ☐ Organ Transplantation
- ☐ Cardiac Catheterization
- ☐ Linear Accelerator
- ☒ Home Health
- ☐ Hospice
- ☐ Opiate Addiction Treatment Provided through a Non-Residential Substitution-Based Treatment Section for Opiate Addiction

Please answer all questions on letter size, white paper, clearly typed and spaced, single sided, in order and sequentially numbered. In answering, please type the question and the response. All questions must be answered. If an item does not apply, please indicate “N/A” (not applicable). Attach appropriate documentation as an Appendix at the end of the application and reference the applicable item Number on the attachment, i.e. Attachment 1A, 2A, etc. The last page of the application should be a completed signed and notarized affidavit.

5A. Type of Institution *(Check all appropriate boxes – more than one response may apply)*

- ☐ Hospital
- ☐ Ambulatory Surgical Treatment Center (ASTC) – Multi-Specialty
- ☐ Ambulatory Surgical Treatment Center (ASTC) – Single Specialty
- ☒ Home Health
- ☐ Hospice
- ☐ Intellectual Disability Institutional Habilitation Facility (ICF/IID)
- ☐ Nursing Home
- ☐ Outpatient Diagnostic Center
- ☐ Rehabilitation Facility
- ☐ Residential Hospice
- ☐ Nonresidential Substitution Based Treatment Center of Opiate Addiction

☐ Other

Other - _____

Hospital - _____

6A. Name of Owner of the Facility, Agency, or Institution

Sunray HHA TN, LLC

Name

1012 Madison Avenue, Suite A

601-707-9226

Street or Route

Phone Number

Madison

Mississippi

39110

City

State

Zip

7A. Type of Ownership of Control (Check One)

- ☐ Sole Proprietorship
- ☐ Partnership
- ☐ Limited Partnership
- ☐ Corporation (For Profit)
- ☐ Corporation (Not-for-Profit)
- ☐ Government (State of TN or Political Subdivision)
- ☐ Joint Venture
- ☒ Limited Liability Company
- ☐ Other (Specify)

Attach a copy of the partnership agreement, or corporate charter and certificate of corporate existence. Please provide documentation of the active status of the entity from the Tennessee Secretary of State's website at <https://tnbear.tn.gov/ECommerce/FilingSearch.aspx>. If the proposed owner of the facility is government owned must attach the relevant enabling legislation that established the facility. (Attachment 7A)

Describe the existing or proposed ownership structure of the applicant, including an ownership structure organizational chart. Explain the corporate structure and the manner in which all entities of the ownership structure relate to the applicant. As applicable, identify the members of the ownership entity and each member's percentage of ownership, for those members with 5% ownership (direct or indirect) interest.

RESPONSE: The applicant is a Mississippi limited liability company, qualified to do business in Tennessee, and is an affiliate of Sunray RX NSHTN LLC, D/B/A Vital Care of Franklin, TN. Both entities are owned as "mirror image" entities, with 100% direct membership interest holding by Sunray RX LLC, as shown in the organization chart and documents attached as Attachment 7A. The organization chart shows 4 individuals with direct or indirect ownership in the various entities shown, who are Ray and Monica Harrigill (husband and wife) and their two adult children, Max Harrigill and Tori Harrigill. Note that Sunray Management Company, LLC provides accounting support to the various entities shown on the organization chart, but will not manage the operations of the applicant.

8A. Name of Management/Operating Entity (If Applicable)

Name**Street or Route****County****City****State****Zip****Website Address**

For new facilities or existing facilities without a current management agreement, attach a copy of a draft management agreement that at least includes the anticipated scope of management services to be provided, the anticipated term of the agreement, and the anticipated management fee payment schedule. For facilities with existing management agreements, attach a copy of the fully executed final contract. (Attachment 8A)

9A. Legal Interest in the Site

Check the appropriate box and submit the following documentation. (Attachment 9A)

The legal interest described below must be valid on the date of the Agency consideration of the Certificate of Need application.

- ☐ Ownership (Applicant or applicant's parent company/owner) – Attach a copy of the title/deed.
- ☐ Lease (Applicant or applicant's parent company/owner) – Attach a fully executed lease that includes the terms of the lease and the actual lease expense.
- ☐ Option to Purchase - Attach a fully executed Option that includes the anticipated purchase price.
- ☒ Option to Lease - Attach a fully executed Option that includes the anticipated terms of the Option and anticipated lease expense.
- ☐ Letter of Intent, or other document showing a commitment to lease the property - attach reference document
- ☐ Other (Specify)

RESPONSE: The applicant will sublease its office space from its affiliate, Sunray RX NSHTN LLC, which leases that space (and more space) from its lessor. A copy of the executed Memorandum of Lease between Sunray RX NSHTN LLC, and its lessor is attached as a part of Attachment 9A. Also attached as a part of Attachment 9A is the Option to Sublease between the applicant and Sunray RX NSHTN LLC.

10A. Floor Plan

If the facility has multiple floors, submit one page per floor. If more than one page is needed, label each page. (Attachment 10A)

- Patient care rooms (Private or Semi-private)
- Ancillary areas
- Other (Specify)

RESPONSE: The applicant's space of approximately 300 square feet is outlined in red on the Floor plan (bottom right corner) attached as Attachment 10A.

11A. Public Transportation Route

Describe the relationship of the site to public transportation routes, if any, and to any highway or major road developments in the area. Describe the accessibility of the proposed site to patients/clients. (Attachment 11A)

RESPONSE: While Williamson County has limited public transportation, office space for a home health agency such as the applicant is not anticipated to be visited by patients, and Attachment 11A is not required.

12A. Plot Plan

Unless relating to home care organization, briefly describe the following and attach the requested documentation on a letter size sheet of white paper, legibly labeling all requested information. It **must** include:

- Size of site (in acres);
- Location of structure on the site;
- Location of the proposed construction/renovation; and
- Names of streets, roads, or highways that cross or border the site.

(Attachment 12A)

RESPONSE: As office space for a home health agency, in a multi-tenant building, a plot plan is not required.

13A. Notification Requirements

- TCA §68-11-1607(c)(9)(B) states that “... If an application involves a healthcare facility in which a county or municipality is the lessor of the facility or real property on which it sits, then within ten (10) days of filing the application, the applicant shall notify the chief executive officer of the county or municipality of the filing, by certified mail, return receipt requested.” Failure to provide the notifications described above within the required statutory timeframe will result in the voiding of the CON application.
 - ☐ Notification Attached (Provide signed USPS green-certified mail receipt card for each official notified.)
 - ☐ Notification in process, attached at a later date
 - ☐ Notification not in process, contact HFC Staff
 - ☒ Not Applicable
- TCA §68-11-1607(c)(9)(A) states that “... Within ten (10) days of the filing of an application for a nonresidential substitution based treatment center for opiate addiction with the agency, the applicant shall send a notice to the county mayor of the county in which the facility is proposed to be located, the state representative and senator representing the house district and senate district in which the facility is proposed to be located, and to the mayor of the municipality, if the facility is proposed to be located within the corporate boundaries of the municipality, by certified mail, return receipt requested, informing such officials that an application for a nonresidential substitution based treatment center for opiate addiction has been filed with the agency by the applicant.
 - ☐ Notification Attached (Provide signed USPS green-certified mail receipt card for each official notified.)
 - ☐ Notification in process, attached at a later date
 - ☐ Notification not in process, contact HFC Staff
 - ☐ Not Applicable

EXECUTIVE SUMMARY

1E. Overview

Please provide an overview not to exceed **ONE PAGE** (for 1E only) in total explaining each item point below.

- Description: Address the establishment of a health care institution, initiation of health services, and/or bed complement changes.

RESPONSE:

The applicant seeks to establish a home care organization and initiate home health services which will be limited to only home infusion and related nursing services for pharmacy patients of its affiliate, Sunray RX NSHTN LLC, D/B/A Vital Care of Franklin, TN. Sunray RX NSHTN LLC is a Pharmacy with a license currently pending from the Tennessee Department of Health, with Kelly Ray Painter (License Number 40209) serving as the primary pharmacist. While Sunray RX NSHTN LLC has not yet received its pharmacy license from the Tennessee Department of Health, Board of Pharmacy ("BOP"), the BOP has informed the applicant that the pharmacy license should be issued by the end of July, as on July 23, 2026, BOP completed an inspection of the space leased for the pharmacy, and Sunray RX NSHTN LLC passed that inspection (see the inspection report attached as Attachment 1E), and a copy of the license will be submitted to the HFC upon receipt. As noted elsewhere in this application, the office space for Sunray HHA TN LLC will be located in space subleased from Sunray RX NSHTN LLC.

- Ownership structure

RESPONSE: The applicant is a Mississippi limited liability company, qualified to do business in Tennessee, and is an affiliate of Sunray RX NSHTN LLC, D/B/A Vital Care of Franklin, TN, noted above as the pharmacy provider for home infusion patients contemplated to be served by the applicant. Both entities are owned as "mirror image" entities, with 100% direct membership interest holding by Sunray RX LLC.

- Service Area

RESPONSE: The proposed service area consists of all 95 Tennessee counties, of which two do not require a CON because they are currently designated as economically disadvantaged counties (Lake County and Pickett County).

- Existing similar service providers

RESPONSE: To the knowledge of the applicant there are approximately 14 home health agencies either currently providing home infusion services in Tennessee, or which have recently received a Certificate of Need to provide such home infusion services, and most of those providers are subject to a similar restriction as the applicant is requesting- to only provide in-home infusion services, and to only serve patients who receive pharmaceuticals from an affiliate of that home health agency (for this applicant, Sunray RX NSHTN LLC, D/B/A Vital Care of Franklin, TN). Therefore, those other noted home health agencies are unable to treat the patient population proposed to be treated by the applicant (i.e., pharmacy patients of Sunray RX NSHTN LLC, D/B/A Vital Care of Franklin, TN).

- Project Cost

RESPONSE: \$202,418 as shown on the Project Cost Chart shown at 4E.

- Staffing

RESPONSE: The applicant anticipates having two and one-half (2.5) FTE RNs, and two (2) PRN RNs at the end of the first full year of operation, some of which may be shared with the applicant's affiliate Sunray RX NSHTN LLC, D/B/A Vital Care of Franklin, TN. The applicant also anticipates having one-half (0.5) FTE administrative personnel, which may be shared with the applicant's affiliate Sunray RX NSHTN LLC, D/B/A Vital Care of Franklin, TN.

2E. Rationale for Approval

A Certificate of Need can only be granted when a project is necessary to provide needed health care in the area to be served, will provide health care that meets appropriate quality standards, and the effects attributed to competition or duplication would be positive for consumers

Provide a brief description not to exceed ONE PAGE (for 2E only) of how the project meets the criteria necessary for granting a CON using the data and information points provided in criteria sections that follow.

- Need

RESPONSE: The applicant is proposing to establish a home health agency which will be limited to the providing of home infusion and related nursing services for pharmacy patients of the applicant's affiliate, Sunray RX NSHTN LLC D/B/A Vital Care of Franklin, TN. The existing need formula does not take into consideration specialty home health services provided for infusion therapy services. The need for the services proposed by the applicant is supported by a variety of factors beyond the primary factors set forth in need formula of the Health Facilities Commission. The applicant notes that Sunray RX NSHTN LLC will operate as a franchisee of Vital Care Infusion Services, a franchisor based in Brentwood, TN (VCIS). The experience of other Tennessee-based VCIS franchisees (as well as numerous other "home health-infusion only" providers) in providing infusion therapy services in pharmacy-based clinical "in-suite" settings, as well as in-home services provided by other VCIS franchisees with affiliated home health agencies (as well as other "home health-infusion only" providers), shows many benefits (noted more fully elsewhere in this application) of in-home infusion services with many (but not all) infusion medications.

- Quality Standards

RESPONSE: The applicant will ensure that its staff are trained to provide the highly specialized in-home infusion services. In addition, Vital Care of Franklin, TN has an application pending for ACHC (Accreditation Commission for Health Care) accreditation, and the applicant will seek ACHC accreditation as well (as is the case with all other Vital Care franchisees in Tennessee). The applicant will ensure that quality is measured and monitored and plans to adopt policies to do so, as well as performing periodic audits. Some of the policies anticipated to be adopted will address data reporting, quality improvement, and outcome and process monitoring.

- Consumer Advantage

- Choice

RESPONSE: Because there are only a limited number of home health agencies providing specialty in-home infusion services such as the applicant proposes, and because those services are limited to patients of an affiliated pharmacy such as Sunray RX NSHTN LLC, the approval of this application will enhance the provision of these specialized services to residents of Tennessee. Most traditional home health agencies are unwilling or unable to provide these services because of time constraints (many infusion medications can take two-to-four hours to administer), specialized training necessary for RNs (as to both administration and management of the infusion medications), and reimbursement challenges. The provision of these services by the applicant will mean seamless provision of these services to patients of Sunray RX NSHTN LLC who are better served by home-infusion than in-suite infusion.

- Improved access/availability to health care service(s)

RESPONSE: Some of the home health agencies previously providing in-home infusion therapy are no longer doing so in Tennessee, for a variety of reasons related to consolidations and other changes in the home health industry, making it beneficial for Tennesseans to have providers such as the applicant and Sunray RX NSHTN LLC available to provide in-home infusion services throughout all 95 counties in Tennessee. At the same time more infusion medications are being approved for home-infusion, and insurers are becoming more prone to approve home-infusion for some of the reasons noted elsewhere in this application. Overall, the approval of the applicant's CON will increase Tennessee residents' access to specialty infusion medications administered in the

home (cost-effective treatment which can have better outcomes, as well as being less challenging and disruptive, and more convenient, for patients and their families).

○ Affordability

RESPONSE: As shown elsewhere in this application the total costs are similar, and sometimes less, than other locations for infusion therapy services.

3E. **Consent Calendar Justification**

☒ Letter to Executive Director Requesting Consent Calendar (Attach Rationale that includes addressing the 3 criteria)

☐ Consent Calendar NOT Requested

If Consent Calendar is requested, please attach the rationale for an expedited review in terms of Need, Quality Standards, and Consumer Advantage as a written communication to the Agency's Executive Director at the time the application is filed.

4E. PROJECT COST CHART**A. Construction and equipment acquired by purchase:**

1. Architectural and Engineering Fees	\$0
2. Legal, Administrative (Excluding CON Filing Fee), Consultant Fees	\$60,000
3. Acquisition of Site	
4. Preparation of Site	
5. Total Construction Costs	
6. Contingency Fund	\$50,000
7. Fixed Equipment (Not included in Construction Contract)	
8. Moveable Equipment (List all equipment over \$50,000 as separate attachments)	
9. Other (Specify): _____	

B. Acquisition by gift, donation, or lease:

1. Facility (inclusive of building and land)	\$89,418
2. Building only	
3. Land only	
4. Equipment (Specify): _____	
5. Other (Specify): _____	

C. Financing Costs and Fees:

1. Interim Financing	
2. Underwriting Costs	
3. Reserve for One Year's Debt Service	
4. Other (Specify): _____	

D. Estimated Project Cost (A+B+C)	\$199,418
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E. CON Filing Fee	\$3,000
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F. Total Estimated Project Cost (D+E)	\$202,418
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TOTAL

GENERAL CRITERIA FOR CERTIFICATE OF NEED

In accordance with TCA §68-11-1609(b), “no Certificate of Need shall be granted unless the action proposed in the application for such Certificate is necessary to provide needed health care in the area to be served, will provide health care that meets appropriate quality standards, and the effect attributed to completion or duplication would be positive for consumers.” In making determinations, the Agency uses as guidelines the goals, objectives, criteria, and standards adopted to guide the agency in issuing certificates of need. Until the agency adopts its own criteria and standards by rule, those in the state health plan apply.

Additional criteria for review are prescribed in Chapter 11 of the Agency Rules, Tennessee Rules and Regulations 01730-11.

The following questions are listed according to the three criteria: (1) Need, (2) the effects attributed to competition or duplication would be positive for consumers (Consumer Advantage), and (3) Quality Standards.

NEED

The responses to this section of the application will help determine whether the project will provide needed health care facilities or services in the area to be served.

- 1N.** Provide responses as an attachment to the applicable criteria and standards for the type of institution or service requested. A word version and pdf version for each reviewable type of institution or service are located at the following website. <https://www.tn.gov/hsda/hsda-criteria-and-standards.html> (Attachment 1N)

RESPONSE:

See Attachment 1N.

- 2N.** Identify the proposed service area and provide justification for its reasonable ness. Submit a county level map for the Tennessee portion and counties boarding the state of the service area using the supplemental map, clearly marked, and shaded to reflect the service area as it relates to meeting the requirements for CON criteria and standards that may apply to the project. Please include a discussion of the inclusion of counties in the border states, if applicable. (Attachment 2N)

RESPONSE:

See Attachment 2N. The applicant is requesting the ability to provide specialty home infusion services to patients in all 95 counties in Tennessee, which is reasonable. While applicant does not know whether it will serve patients in each county in any given year, it is important for applicant to have the flexibility to do so, just as other infusion service providers do. The applicant projects 150 patients in 2027, the first full year of operation. The fourteen (14) counties in the table below projected to have three (3) or more patients each, totals 135 patients or 90% of the projected patients. The remaining counties account for 10% of the projected patient population. The applicant anticipates that for the first year of operation, the majority of the patients receiving infusion services will be from counties in Middle Tennessee. Williamson County is anticipated to have the largest number of patients at 27. or just over 18 percent.

NOTE: The applicant desires to be able to serve all 95 counties, but the chart below does not allow entry of less than a whole number, and the other counties may average less than one so they are not listed above-Moore County would be less than one, so it set at 3 to include the other (more) counties.

Complete the following utilization tables for each county in the service area, if applicable.

PROJECTED UTILIZATION

Unit Type: ☐ Procedures ☐ Cases ☒ Patients ☐ Other _____		
Service Area Counties	Projected Utilization Recent Year 1 (Year = 2027)	% of Total
Smith	1	0.67%
Bedford	5	3.33%
Giles	3	2.00%
Lincoln	2	1.33%
Hickman	2	1.33%
Maury	9	6.00%
Davidson	26	17.33%
Trousdale	1	0.67%
Wilson	9	6.00%
Marshall	6	4.00%
Macon	1	0.67%
Rutherford	17	11.33%
Sumner	8	5.33%
Lawrence	2	1.33%
Robertson	4	2.67%
Cheatham	3	2.00%
Moore	3	2.00%
Dickson	5	3.33%
Williamson	27	18.00%
Franklin	2	1.33%
Montgomery	6	4.00%
Coffee	4	2.67%
Wayne	1	0.67%
Cannon	1	0.67%
Total	148	100%

3N. A. Describe the demographics of the population to be served by the proposal.

RESPONSE:

See attachment 3NA. Given its extensive research into providing specialty infusion services and other VCIS franchisees' experience, applicant knows that a wide range of patients, including both pediatric and geriatric (i.e., patients age 65 and over) patients, require infusion services. As such, applicant has assumed that its target patient population is the entire population of the proposed service area – i.e., all patients across Tennessee's 95 counties.

As discussed in the Standards and Criteria included as Attachment 1N, 78 of the 95 counties in Tennessee classified as rural according to U.S. Census data. Therefore, applicant anticipates that the majority of its patients will reside in rural areas.

B. Provide the following data for each county in the service area:

- Using current and projected population data from the Department of Health.
(www.tn.gov/health/health-program-areas/statistics/health-data/population.html);
- the most recent enrollee data from the Division of TennCare
(<https://www.tn.gov/tenncare/information-statistics/enrollment-data.html>),
- and US Census Bureau demographic information
(<https://www.census.gov/quickfacts/fact/table/US/PST045219>).

RESPONSE:

See Attachment 3NB

- 4N. Describe the special needs of the service area population, including health disparities, the accessibility to consumers, particularly those who are uninsured or underinsured, the elderly, women, racial and ethnic minorities, TennCare or Medicaid recipients, and low income groups. Document how the business plans of the facility will take into consideration the special needs of the service area population.

RESPONSE:

Several demographic, geographic, and clinical factors demonstrate the need for expanded access to home-based specialty infusion services throughout Tennessee. The proposed 95-county service area includes patients with complex medical conditions who would significantly benefit from receiving specialized infusion therapy in their homes rather than traveling to outpatient infusion centers or hospitals. As discussed in the Standards and Criteria included as Attachment 1N, Tennessee's population characteristics, combined with the specialized nature of infusion therapy, establish a clear need for the services proposed by Sunray HHA TN, LLC.

The proposed service area is predominantly rural. Based on the most recent U.S. Census data, 78 of Tennessee's 95 counties (approximately 82 percent) are classified as rural. Residents of rural communities frequently experience significant barriers to healthcare access, including longer travel distances to healthcare providers, limited transportation options, provider shortages, higher rates of chronic disease, lower health literacy, and greater financial constraints. These barriers are especially burdensome for patients requiring ongoing infusion therapy, who often must travel several hours to receive treatment at an ambulatory infusion center or hospital.

The patients requiring specialty infusion services typically suffer from chronic, complex, and often lifelong medical conditions, including autoimmune diseases, neurological disorders, immune deficiencies, infectious diseases, inflammatory conditions, and other illnesses requiring intravenous biologic therapies, immunoglobulin therapy, antibiotics, nutrition support, or other specialty medications. These patients frequently have multiple co-morbidities, compromised immune systems, or significant physical limitations. Treatment commonly extends over months or years, and in many cases continues for the patient's lifetime. Infusion therapy often begins during an inpatient hospitalization and transitions to long-term outpatient management through a specialty pharmacy and highly trained infusion nurses.

Unlike traditional home health services, specialty home infusion nursing requires highly specialized clinical expertise. Infusion nurses must possess advanced knowledge of central venous access devices, complex medication preparation and administration protocols, extended infusion monitoring, adverse reaction management, sterile technique, and disease-specific treatment regimens. Many infusion therapies require nursing visits lasting four to seven hours per treatment day and are administered over multiple consecutive days each month. These highly specialized services generally cannot be provided by traditional home health agencies whose primary focus is intermittent skilled nursing, therapy, and personal care services.

For many patients, receiving infusion therapy in the home is both medically preferable and clinically appropriate. Home infusion eliminates the need for repeated travel to outpatient infusion centers or hospitals, reducing physical strain on medically fragile patients while minimizing disruptions to employment, school, childcare responsibilities, and other family obligations. Patients receiving lengthy infusion treatments often must arrange transportation, secure caregivers for dependents, and spend an entire day in a clinical setting despite already managing significant chronic illness. These burdens are compounded for rural residents who may travel several hours each way for treatment, resulting in substantial out-of-pocket transportation costs and lost productivity.

Home-based infusion therapy also provides important clinical advantages. Patients with compromised immune systems or autoimmune disorders face an increased risk of exposure to infectious illnesses when receiving recurring treatments in healthcare facilities. Delivering infusion therapy in the home reduces unnecessary exposure to communicable diseases while allowing patients to remain in a familiar, comfortable environment. Numerous studies have demonstrated that appropriately selected patients receiving home infusion therapy experience excellent clinical outcomes, high patient satisfaction, improved treatment adherence, fewer complications, and lower overall healthcare costs compared to facility-based infusion services.

Sunray HHA TN, LLC is specifically organized to address these unique patient needs by providing skilled home infusion nursing services throughout Tennessee. The proposed agency will focus exclusively on specialty infusion services and will employ experienced registered nurses trained in complex intravenous therapies, specialty medication administration, intricate dosing protocols, vascular access management, and extended infusion monitoring. This level of specialization distinguishes the proposed agency from traditional home health providers and fills an important gap in Tennessee's continuum of care for patients requiring long-term infusion therapy.

Sunray HHA TN, LLC intends to provide medically necessary infusion nursing services without regard to a patient's ability to pay. Although TennCare/Medicaid generally does not adequately reimburse the extended nursing time required for specialty infusion therapy, the applicant intends to seek alternative reimbursement mechanisms whenever available and has committed to providing charity care for medically indigent patients through an annual charity care allocation. Necessary pharmaceuticals furnished through participating specialty pharmacies will continue to be reimbursed through the applicable payors, including TennCare/Medicaid where appropriate. By expanding access to specialized home infusion nursing throughout Tennessee, the proposed project will improve access to medically necessary care, reduce healthcare disparities for rural and underserved populations, and allow patients with complex chronic illnesses to safely receive high-quality treatment in the comfort of their homes.

-
- 5N. Describe the existing and approved but unimplemented services of similar healthcare providers in the service area. Include utilization and/or occupancy trends for each of the most recent three years of data available for this type of project. List each provider and its utilization and/or occupancy individually. Inpatient bed projects must include the following data: Admissions or discharges, patient days. Average length of stay, and occupancy. Other projects should use the most appropriate measures, e.g. cases, procedures, visits, admissions, etc. This does not apply to projects that are solely relocating a service.

RESPONSE:

See Attachment 5N, which is a table that shows the utilization of existing home health agencies that provide infusion therapy services. The majority of these are licensed in all counties in the state. These home health agencies are limited to providing only infusion therapy services using their own related entity pharmaceuticals, just as the applicant proposes to do. Therefore, while the services they provide are similar to what the applicant proposes to do, the existing infusion home health agencies cannot provide services for the applicant's proposed patient population because of the limited nature of the services they provide, and vice versa. Traditional home health agencies are not set up and staffed with either specially trained staff or the ability to provide for the longer, more sporadic visits required to provide infusion therapy services. Traditional home health agencies provide staff for shorter, more regular visits, which generally have an end date for the services provided, rather than being provided for an extended period of time that can be for the duration of the patient's life.

-
- 6N. Provide applicable utilization and/or occupancy statistics for your institution services for each of the past three years and the project annual utilization for each of the two years following completion of the project. Additionally, provide the details regarding the methodology used to project utilization. The methodology must include detailed calculations or documentation from referral sources, and identification of all assumptions.

RESPONSE:

Because Sunray HHA TN, LLC is a newly established provider, it has no historical utilization data upon which to base its projections. Accordingly, the applicant's utilization forecasts are based on the estimated number of patients who are expected to receive specialty home infusion services once care is available in the home setting and barriers associated with traveling to outpatient infusion centers or hospitals are eliminated. The projections also include patients who currently receive infusion therapy in inpatient settings or who are unable to access existing outpatient specialty infusion

providers because of travel distance, medical limitations, or other access barriers. In developing these projections, the applicant also considered anticipated referral volume from physicians and other healthcare providers, as evidenced by the letters of support included in Attachment 6N. Collectively, these factors form the basis for the applicant's projected utilization, which is summarized below.

Year	2027	2028
Number of Patients	150	187

- 7N. Complete the chart below by entering information for each applicable outstanding CON by applicant or share common ownership; and describe the current progress and status of each applicable outstanding CON and how the project relates to the applicant, and the percentage of ownership that is shared with the applicant's owners.

RESPONSE:

Because the application will only serve patients of its related pharmacy, Sunray RX NSHTN LLC, the applicant believes this application should have no effect on those outstanding CONs, and those outstanding CONs should have no effect on this application.

CONSUMER ADVANTAGE ATTRIBUTED TO COMPETITION

The responses to this section of the application helps determine whether the effects attributed to competition or duplication would be positive for consumers within the service area.

- 1C. List all transfer agreements relevant to the proposed project.

RESPONSE: The applicant does not anticipate having any transfer agreements.

- 2C. List all commercial private insurance plans contracted or plan to be contracted by the applicant.

- ☒ Aetna Health Insurance Company
- ☒ Ambetter of Tennessee Ambetter
- ☐ Blue Cross Blue Shield of Tennessee
- ☒ Blue Cross Blue Shield of Tennessee Network S
- ☒ Blue Cross Blue Shiled of Tennessee Network P
- ☒ BlueAdvantage
- ☐ Bright HealthCare
- ☒ Cigna PPO
- ☒ Cigna Local Plus
- ☒ Cigna HMO - Nashville Network
- ☒ Cigna HMO - Tennessee Select
- ☒ Cigna HMO - Nashville HMO
- ☒ Cigna HMO - Tennessee POS
- ☒ Cigna HMO - Tennessee Network
- ☐ Golden Rule Insurance Company
- ☒ HealthSpring Life and Health Insurance Company, Inc.
- ☒ Humana Health Plan, Inc.
- ☒ Humana Insurance Company
- ☐ John Hancock Life & Health Insurance Company
- ☐ Omaha Health Insurance Company
- ☒ Omaha Supplemental Insurance Company
- ☐ State Farm Health Insurance Company
- ☒ United Healthcare UHC
- ☐ UnitedHealthcare Community Plan East Tennessee

- ☒ UnitedHealthcare Community Plan Middle Tennessee
- ☒ UnitedHealthcare Community Plan West Tennessee
- ☒ WellCare Health Insurance of Tennessee, Inc.
- ☒ Others

RESPONSE: The applicant would also note that, similar to other Viral Care franchisees, it will also be in network with Optum PBM, Express Scripts PBM and Caremark PBM (all of which are pharmacy benefits managers).

3C. Describe the effects of competition and/or duplication of the proposal on the health care system, including the impact upon consumer charges and consumer choice of services.

RESPONSE:

Specialty infusion therapy has traditionally been provided through outpatient infusion centers or hospital-based settings. While these facilities play an important role in the continuum of care, requiring patients to travel to a fixed treatment location can create significant barriers to accessing medically necessary infusion therapy, particularly for patients with chronic illnesses, mobility limitations, compromised immune systems, or those residing in rural areas. Expanding the availability of home-based specialty infusion nursing will enable many patients to receive clinically appropriate treatment in the comfort of their homes, improving access while reducing the physical, financial, and logistical burdens associated with facility-based care.

Most licensed home health agencies in Tennessee do not provide specialty home infusion services. Those that do generally furnish nursing services only in connection with medications dispensed by an affiliated pharmacy or have limited geographic coverage and clinical capabilities. Specialty home infusion requires highly trained infusion nurses with expertise in complex intravenous therapies, vascular access management, extended infusion monitoring, and disease-specific treatment protocols, services that differ substantially from the intermittent skilled nursing traditionally provided by home health agencies.

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Accordingly, approval of this application is not expected to have a material adverse competitive impact on existing home health providers. Rather than duplicating services currently available in the marketplace, Sunray HHA TN, LLC will expand access to a highly specialized service that remains limited throughout Tennessee. The proposed project will increase consumer choice by allowing eligible patients to receive specialty infusion therapy in their homes while supporting continuity of care for patients served by participating specialty pharmacies and their prescribing physicians. Approval of this application will improve access to medically necessary infusion services, particularly in underserved and rural communities, without increasing consumer charges for these services.

4C. Discuss the availability of and accessibility to human resources required by the proposal, including clinical leadership and adequate professional staff, as per the State of Tennessee licensing requirements, CMS, and/or accrediting agencies requirements, such as the Joint Commission and Commission on Accreditation of Rehabilitation Facilities.

RESPONSE:

Sunray RX NSHTN LLC, an affiliate of the applicant, will provide infusion therapy services at its infusion therapy site in Franklin. The applicant and its affiliate, Sunray RX NSHTN LLC, fully understand the unique education, training and assessment requirements for those performing home infusion services, and will have the support of Vital Care Infusion Services (VCIS) for both entities, among other things. For those reasons the applicant anticipates no issues in recruiting and training appropriate staff.

5C.

Document the category of license/certification that is applicable to the project and why. These include, without limitation, regulations concerning clinical leadership, physician supervision, quality assurance policies and programs, utilization review policies and programs, record keeping, clinical staffing requirements, and staff education.

RESPONSE:

The applicant will seek and maintain all required licenses, permits, and approvals necessary to operate as a home care organization providing specialty home infusion nursing services in Tennessee. Sunray HHA TN, LLC will obtain licensure from the Tennessee Health Facilities Commission, Board for Licensing Health Care Facilities, and will comply with all applicable state and federal laws, regulations, and standards governing home care organizations, including staffing, quality assurance, infection control, patient safety, and clinical operations.

An affiliated specialty pharmacy that will support the applicant's operations is currently in the process of obtaining accreditation from the Accreditation Commission for Health Care (ACHC) and all required Tennessee Board of Pharmacy licensure. Based on the experience of the applicant's management team and affiliated organizations in establishing and operating accredited specialty infusion providers, the applicant anticipates no difficulty in obtaining the necessary accreditation and licensure. The applicant has developed its operational plans and policies to meet ACHC accreditation standards and applicable regulatory requirements from the outset of operations.

The applicant has reviewed all applicable standards governing home care organizations and has developed staffing and operational plans designed to ensure full compliance. Registered nurses providing the proposed home infusion services will possess, or will receive prior to independently treating patients, the specialized education, clinical training, and demonstrated competencies necessary to safely administer complex infusion therapies in the home setting. Attachment VCSD includes examples of the operational resources, policies, procedures, and administrative support available through the applicant's affiliated organizations, including its franchisor, VitalCare, which will assist Sunray HHA TN, LLC in establishing and maintaining a high-quality, compliant specialty home infusion program.

PROJECTED DATA CHART

- ☒ Project Only
☐ Total Facility

Give information for the two (2) years following the completion of this proposal.

	Year 1	Year 2
	2027	2028
A. Utilization Data		
Specify Unit of Measure Patients	150	187
B. Revenue from Services to Patients		
1. Inpatient Services	\$0.00	\$0.00
2. Outpatient Services	\$93,060.00	\$116,015.00
3. Emergency Services	\$0.00	\$0.00
4. Other Operating Revenue (Specify) 0	\$0.00	\$0.00
Gross Operating Revenue	\$93,060.00	\$116,015.00
C. Deductions from Gross Operating Revenue		
1. Contractual Adjustments	\$466.00	\$580.00
2. Provision for Charity Care	\$2,792.00	\$3,480.00
3. Provisions for Bad Debt	\$2,792.00	\$3,480.00
Total Deductions	\$6,050.00	\$7,540.00
NET OPERATING REVENUE	\$87,010.00	\$108,475.00

- 7C. Please identify the project's average gross charge, average deduction from operating revenue, and average net charge using information from the Historical and Projected Data Charts of the proposed project.

Project Only Chart

	Previous Year to Most Recent Year	Most Recent Year	Year One	Year Two	% Change (Current Year to Year 2)
Gross Charge (<i>Gross Operating Revenue/Utilization Data</i>)	\$0.00	\$0.00	\$620.40	\$620.40	0.00
Deduction from Revenue (<i>Total Deductions/Utilization Data</i>)	\$0.00	\$0.00	\$40.33	\$40.32	0.00
Average Net Charge (<i>Net Operating Revenue/Utilization Data</i>)	\$0.00	\$0.00	\$580.07	\$580.08	0.00

- 8C. Provide the proposed charges for the project and discuss any adjustment to current charges that will result from the implementation of the proposal. Additionally, describe the anticipated revenue from the project and the impact on existing patient charges.

RESPONSE:

N/A. Since this is a new project, there are no existing charges to any adjustment to current charges as a result of the implementation of the proposal.

- 9C. Compare the proposed project charges to those of similar facilities/services in the service area/adjoining services areas, or to proposed charges of recently approved Certificates of Need.

If applicable, compare the proposed charges of the project to the current Medicare allowable fee schedule by common procedure terminology (CPT) code(s).

RESPONSE:

Because of some of the unique circumstance for "infusion only" applications, and requirements for working with an affiliated pharmacy, such a comparison is difficult to make, but similar to pricing charges anticipated by its affiliate Sunray RX NSHTN LLC, the applicant believes those charges will be reasonable.

- 10C.** Report the estimated gross operating revenue dollar amount and percentage of project gross operating revenue anticipated by payor classification for the first and second year of the project by completing the table below.

If applicable, compare the proposed charges of the project to the current Medicare allowable fee schedule by common procedure terminology (CPT) code(s).

**Applicant's Projected Payor Mix
Project Only Chart**

Payor Source	Year-2027		Year-2028	
	Gross Operating Revenue	% of Total	Gross Operating Revenue	% of Total
Medicare/Medicare Managed Care	\$20,938.50	22.50	\$26,103.38	22.50
TennCare/Medicaid	\$0.00	0		
Commercial/Other Managed Care	\$71,190.90	76.50	\$88,751.48	76.50
Self-Pay	\$930.60	1.00	\$1,160.14	1.00
Other(Specify)	\$0.00	0	\$0.00	0
Total	\$93,060.00	100%	\$116,015.00	100%
Charity Care	\$2,792.00		\$3,480.00	

**Needs to match Gross Operating Revenue Year One and Year Two on Projected Data Chart*

Discuss the project's participation in state and federal revenue programs, including a description of the extent to which Medicare, TennCare/Medicaid, and medically indigent patients will be served by the project.

RESPONSE: While the applicant is not currently intending to participate in traditional Medicare, due to limitations as to patients who can receive payment for home infusion, the applicant and its affiliate Sunray RX NSHTN, LLC plan to participate in Medicare Advantage; and would note that the penetration of Medicare Advantage continues to increase. Currently in Tennessee that penetration percentage varies from the mid-40s to over 80% when viewed by county, and at over 53% for the statewide average among current Medicare enrollees. The applicant is not currently intending to participate in TennCare/Medicaid due to most infusions not being covered by TennCare. Sunray RX NSHTN, LLC plans to participate in traditional Medicare (including Part B and Part D) and Medicare Advantage, and the applicant intends to participate only in Medicare Advantage (which they categorize as commercial rather than "Traditional Medicare" due to the administration by insurance companies). See Attachment 10C for more.

QUALITY STANDARDS

- 1Q.** Per PC 1043, Acts of 2016, any receiving a CON after July 1, 2016, must report annually using forms prescribed by the Agency concerning appropriate quality measures. Please attest that the applicant will submit an annual Quality Measure report when due.

☒ Yes

☐ No

- 2Q.** The proposal shall provide health care that meets appropriate quality standards. Please address each of the following questions.

- Does the applicant commit to maintaining the staffing comparable to the staffing chart presented in its CON application?

☒ Yes

☐ No

- Does the applicant commit to obtaining and maintaining all applicable state licenses in good standing?

☒ Yes

☐ No

- Does the applicant commit to obtaining and maintaining TennCare and Medicare certification(s), if participation in such programs are indicated in the application?

☒ Yes

☐ No

3Q. Please complete the chart below on accreditation, certification, and licensure plans. Note: if the applicant does not plan to participate in these type of assessments, explain why since quality healthcare must be demonstrated.

Credential	Agency	Status (Active or Will Apply)	Provider Number or Certification Type
Licensure	☒ Health Facilities Commission/Licensure Division ☐ Intellectual & Developmental Disabilities ☐ Mental Health & Substance Abuse Services	Will Apply	
Certification	☒ Medicare ☐ TennCare/Medicaid ☐ Other _____	Will Apply	
Accreditation(s)	ACHC – Accreditation Commission for Health Care	Will Apply	

4Q. If checked “TennCare/Medicaid” box, please list all Managed Care Organization’s currently or will be contracted.

- ☐ AMERIGROUP COMMUNITY CARE- East Tennessee
- ☐ AMERIGROUP COMMUNITY CARE - Middle Tennessee
- ☐ AMERIGROUP COMMUNITY CARE - West Tennessee
- ☐ BLUECARE - East Tennessee
- ☐ BLUECARE - Middle Tennessee
- ☐ BLUECARE - West Tennessee
- ☐ UnitedHealthcare Community Plan - East Tennessee
- ☐ UnitedHealthcare Community Plan - Middle Tennessee
- ☐ UnitedHealthcare Community Plan - West Tennessee
- ☐ TENNCARE SELECT HIGH - All
- ☐ TENNCARE SELECT LOW - All
- ☐ PACE
- ☐ KBB under DIDD waiver
- ☒ Others

Please Explain

RESPONSE: The applicant is not currently intending to participate in TennCare/Medicaid due to most infusions not being covered by TennCare

5Q. Do you attest that you will submit a Quality Measure Report annually to verify the license, certification, and/or accreditation status of the applicant, if approved?

- ☒ Yes
- ☐ No

6Q. For an existing healthcare institution applying for a CON:

- Has it maintained substantial compliance with applicable federal and state regulation for the three years prior to the CON application. In the event of non-compliance, the nature of non-compliance and corrective action should be discussed to include any of the following: suspension of admissions, civil monetary penalties, notice of 23-day or 90-day termination proceedings from Medicare/Medicaid/TennCare, revocation/denial of accreditation, or other similar actions and what measures the applicant has or will put into place to avoid similar findings in the future.

- ☐ Yes
☐ No
☒ N/A

- Has the entity been decertified within the prior three years? If yes, please explain in detail. (This provision shall not apply if a new, unrelated owner applies for a CON related to a previously decertified facility.)

- ☐ Yes
☐ No
☒ N/A

7Q. Respond to all of the following and for such occurrences, identify, explain, and provide documentation if occurred in last five (5) years.

Has any of the following:

- Any person(s) or entity with more than 5% ownership (direct or indirect) in the applicant (to include any entity in the chain of ownership for applicant);
- Any entity in which any person(s) or entity with more than 5% ownership (direct or indirect) in the applicant (to include any entity in the chain of ownership for applicant) has an ownership interest of more than 5%; and/or.

Been subject to any of the following:

- Final Order or Judgement in a state licensure action;
☐ Yes
☒ No
- Criminal fines in cases involving a Federal or State health care offense;
☐ Yes
☒ No
- Civil monetary penalties in cases involving a Federal or State health care offense;
☐ Yes
☒ No
- Administrative monetary penalties in cases involving a Federal or State health care offense;
☐ Yes
☒ No
- Agreement to pay civil or administrative monetary penalties to the federal government or any state in cases involving claims related to the provision of health care items and services;
☐ Yes
☒ No
- Suspension or termination of participation in Medicare or TennCare/Medicaid programs; and/or
☒ Yes
☐ No
- Is presently subject of/to an investigation, or party in any regulatory or criminal action of which you are aware.
☐ Yes

8Q. Provide the project staffing for the project in Year 1 and compare to the current staffing for the most recent 12-month period, as appropriate. This can be reported using full-time equivalent (FTEs) positions for these positions.

☐ Existing FTE not applicable (Enter year)

Position Classification	Existing FTEs(enter year)	Projected FTEs Year 1
A. Direct Patient Care Positions		
RN	0.00	4.50
Total Direct Patient Care Positions	N/A	4.5

B. Non-Patient Care Positions		
Administrative	0.00	0.50
Total Non-Patient Care Positions	N/A	0.5
Total Employees (A+B)	0	5

C. Contractual Staff		
Contractual Staff Position	0.00	0.00
Total Staff (A+B+C)	0	5

DEVELOPMENT SCHEDULE

TCA §68-11-1609(c) provides that activity authorized by a Certificate of Need is valid for a period not to exceed three (3) years (for hospital and nursing home projects) or two (2) years (for all other projects) from the date of its issuance and after such time authorization expires; provided, that the Agency may, in granting the Certificate of Need, allow longer periods of validity for Certificate of Need for good cause shown. Subsequent to granting the Certificate of Need, the Agency may extend a Certificate of Need for a period upon application and good cause shown, accompanied by a non-refundable reasonable filing fee, as prescribed by rule. A Certificate of Need authorization which has been extended shall expire at the end of the extended time period. The decision whether to grant an extension is within the sole discretion of the Commission, and is not subject to review, reconsideration, or appeal.

- Complete the Project Completion Forecast Chart below. If the project will be completed in multiple phases, please identify the anticipated completion date for each phase.
- If the CON is granted and the project cannot be completed within the standard completion time period (3 years for hospital and nursing home projects and 2 years for all others), please document why an extended period should be approved and document the “good cause” for such an extension.

PROJECT COMPLETION FORECAST CHART

Assuming the Certificate of Need (CON) approval becomes the final HFC action on the date listed in Item 1 below, indicate the number of days from the HFC decision date to each phase of the completion forecast.

Phase	Days Required	Anticipated Date (Month/Year)
1. Initial HFC Decision Date		09/23/26
2. Building Construction Commenced	1	09/23/26
3. Construction 100% Complete (Approval for Occupancy)	8	09/30/26
4. Issuance of License	70	12/01/26
5. Issuance of Service	101	01/01/27
6. Final Project Report Form Submitted (Form HR0055)	132	02/01/27

Note: If litigation occurs, the completion forecast will be adjusted at the time of the final determination to reflect the actual issue date.

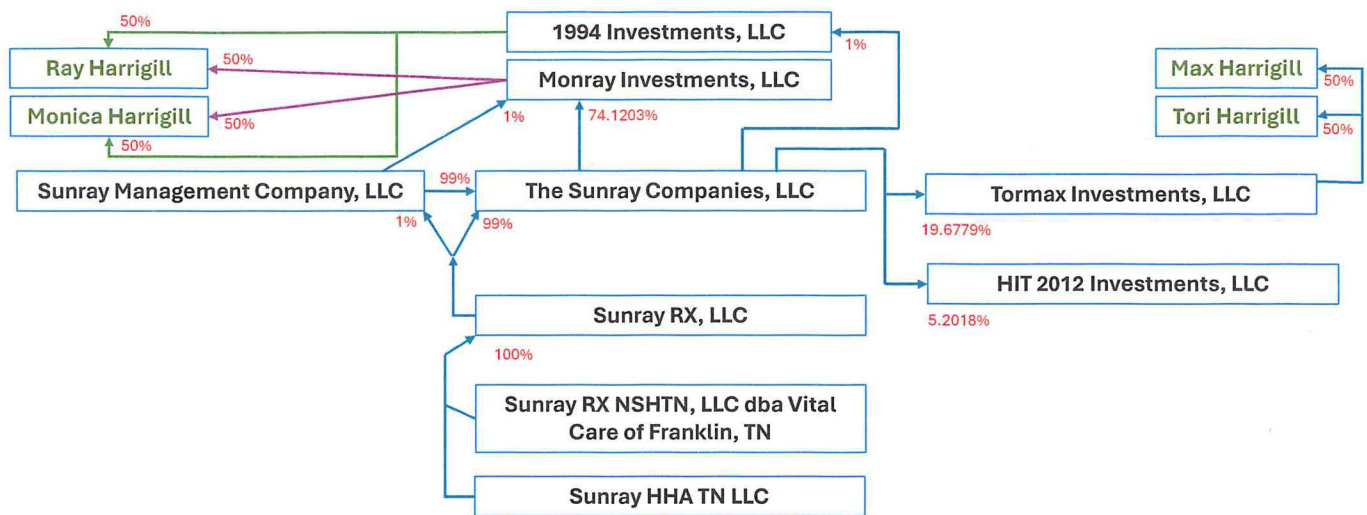
ATTACHMENT 7A

The Sunray Companies, LLC

Entity Organization Chart

Entity Holdings Structure for VitalCare Franchise

July 2026





Tre Hargett
Secretary of State

Division of Business and Charitable Organizations
Department of State
State of Tennessee
312 Rosa L. Parks Avenue, 6th Floor
Nashville, Tennessee 37243
Phone: 615-741-2286
tncab.tnsos.gov/portal/

CHANDLER C TIPTON
1012 MADISON AVENUE
MADISON, MS 39110, USA

06/17/2026

Filing Acknowledgment

Please review the filing information below and notify our office immediately of any discrepancies.

Entity Name:	SUNRAY HHA TN, LLC		
SOS Control #:	002121973	Initial Filing Date:	06/16/2026
Entity Type:	Foreign Limited Liability Company (LLC)	Formation Locale:	Mississippi
Status:	Active	Duration Term:	Perpetual
Fiscal Year Close:	December	Annual Report Due:	04/01/2027
Business County:	(No County on Record)		
Managed By:	Manager Managed		
Obligated Member Entity:	No		

Document Receipt

Receipt #: 2026-628621	Filing Fee:	\$300.00
Payment: Credit Card - 3922993961		\$300.00

Registered Agent Address:
RAY F HARRIGILL
740 COOL SPRINGS BLVD STE 120
FRANKLIN, TN 37067

Principal Office Address:
1012 MADISON AVE STE A
MADISON, MS 39110, USA

Congratulations on the successful filing of your **Application for Registration of Foreign Limited Liability Company** for **SUNRAY HHA TN, LLC** in the State of Tennessee which is effective on the date shown above. Please visit the Tennessee Department of Revenue website (www.tn.gov/revenue) to determine your online tax registration requirements. If you need to obtain a Certificate of Existence for this entity, you can request, pay for, and receive it from our website.

You must file an Annual Report with this office on or before the Annual Report Due Date noted above and maintain a Registered Office and Registered Agent. Failure to do so will subject the business to Administrative Dissolution/Revocation.

Tre Hargett
Secretary of State

Tracking Number
B2026557896

Application For Certificate Of Authority



Tre Hargett
Secretary of State

Division of Business and Charitable Organizations

Department of State

State of Tennessee

312 Rosa L. Parks Avenue, 6th Floor

Nashville, Tennessee 37243

Phone: 615-741-2286

tncab.tnsos.gov/portal/

Control #: 002121973

Filed: 06/16/2026 10:15 AM

Tre Hargett

Secretary of State

Entity Information

Entity Type: Limited Liability Company

Entity Name: SUNRAY HHA TN, LLC

Fiscal Year Ending Month: December

Additional Designation: (No Additional Designation)

Is this a Series LLC?

☐ Yes ☒ No

Principal Office Address

1012 MADISON AVE STE A
MADISON, MS 39110, USA

Mailing Address

1012 MADISON AVE STE A
MADISON, MS 39110, USA

When and Where was the Organization Established?

Date Incorporated: 6/15/2026

Country: USA

State: Mississippi

Period of Duration:

Perpetual

Did the business commence doing business in Tennessee prior to qualification?

☐ Yes ☒ No

Nature of Business (NAICS):

621610 - Home Health Care Services

The Limited Liability Company will be:

Manager Managed

Do you have six or fewer members at the date of this filing?

☒ Yes ☐ No

Will this entity be registered as an Obligated Member Entity (OME)

☐ Yes ☒ No

Do you have additional uploads you would like to attach to this filing?

☒ Yes ☐ No

Registered Agent Information

RAY F HARRIGILL
740 COOL SPRINGS BLVD STE 120
FRANKLIN, TN 37067
Williamson County, USA

Signature

☒ By entering my name in the space provided below, I certify that I am authorized to file this document on behalf of this entity, have examined the document and, to the best of my knowledge and belief, it is true, correct and complete as of this day.

☒ Pursuant to the provisions of T.C.A. § 48-249-904 of the Tennessee Revised Limited Liability Company Act, the undersigned hereby applies for a certificate of authority to transact business in the State of Tennessee.

Signed Electronically: CHANDLER C TIPTON

Date: 06/16/2026



Michael Watson
SECRETARY OF STATE

Office of the Secretary of State
Jackson, Mississippi

Certificate of Good Standing

I, MICHAEL WATSON, Secretary of State of the State of Mississippi, and as such, the legal custodian of the records as required by The Mississippi Limited Liability Company Act to be filed in my office do hereby certify:

SUNRAY HHA TN, LLC

Registered the 15th day of June, 2026

A Mississippi Limited Liability Company has filed the necessary documents in this office and has obtained a certificate of formation under the provisions of The Mississippi Limited Liability Company Act as shown by the records in this office.

That the registered office of said Limited Liability Company is located at:

1012 Madison Avenue , Suite A
Madison, MS 39110

And that the registered agent at that address is:

Ray F Harrigill

I further certify that said Limited Liability Company has paid the fees for filing the above papers required by law as shown by the records of this office, and that said Limited Liability Company is in good standing to do business in Mississippi at this time.

Given under my hand and seal of office
the 16th day of June, 2026

A handwritten signature in black ink that reads "Michael Watson".

Certificate Number: CN26244426

Verify this certificate online at <http://corp.sos.ms.gov/corpcnv/verifycertificate.aspx>



Michael Watson
SECRETARY OF STATE

Office of the Secretary of State
Jackson, Mississippi

Sunray HHA TN, LLC

Business ID: 1555483

The attached 1 pages are true and correct copies of documents filed in the Mississippi Secretary of State's Office pursuant to the Mississippi Code of 1972 Annotated.

This the 16th day of June, 2026.

Given under my hand and seal of office
the 16th day of June, 2026

A handwritten signature in cursive script, appearing to read "Nitika Hill-Mack".

Nitika Hill-Mack, Director of Business Services

Certificate Number: CN26244426

Verify this certificate online at <http://corp.sos.ms.gov/corpcnv/verifycertificate.aspx>

F0100
Fee: \$ 50



Michael Watson
SECRETARY OF STATE

2026458410

Business ID: 1555483
Filed: 06/15/2026 03:10 PM
Michael Watson
Secretary of State

P.O. BOX 136
JACKSON, MS 39205-0136
TELEPHONE: (601) 359-1633

Mississippi Limited Liability Company Certificate of Formation

Business Information

Business Type: Limited Liability Company

Business Name: Sunray HHA TN, LLC

Business Email: ray@sunrayms.com

NAICS Code/Nature of Business

621610 - Home Health Care Services

Registered Agent

Name: Ray F Harrigill

Address: 1012 Madison Avenue, Suite A
Madison, MS 39110

Signature

The undersigned certifies that:

- 1) he/she has notified the above-named registered agent of this appointment;
- 2) he/she has provided the agent an address for the company, and;
- 3) the agent has agreed to serve as registered agent for this company

By entering my name in the space provided, I certify that I am authorized to file this document on behalf of this entity, have examined the document and, to the best of my knowledge and belief, it is true, correct and complete as of this day **06/15/2026**.

Name:
Chandler C Tipton
Organizer

Address:
1012 Madison Avenue, Suite A
Madison, MS 39110



Tre Hargett
Secretary of State

Division of Business and Charitable Organizations
Department of State
State of Tennessee
312 Rosa L. Parks Avenue, 6th Floor
Nashville, Tennessee 37243
Phone: 615-741-2286
tncab.tnsos.gov/portal/

Date: 06/16/2026

Invoice: 2026-628621

Customer Information

CHANDLER C TIPTON
SUNRAY HHA TN, LLC
1012 MADISON AVENUE
MADISON, MS 39110, USA

Tracking #	Description	Amount Paid
B2026557896	Application for Registration of Foreign Limited Liability Company for SUNRAY HHA TN, LLC (LLC Filings)	\$ 300.00
Payment Details		
Fee Total:		\$ 300.00
Payment Total:		\$ 300.00
Amount Due:		\$ 0.00
Payment Method		
Payment Type: Credit Card		
Check/Confirmation Number: 3922993961		

ATTACHMENT 8A

Not Applicable

ATTACHMENT 9A

MEMORANDUM OF LEASE

This Memorandum of Lease Agreement ("Memorandum") is entered into as of July 1, 2026, by and between **HSRE-SG I, GP, a Delaware general partnership** ("Landlord"), and **SunRay RX NSHTN, LLC, a Mississippi limited liability company d/b/a Vital Care of Franklin, TN** ("Tenant").

RECITALS

- A. Landlord and Tenant entered into that certain Office Building Lease dated July 1, 2026 (the "Lease") covering approximately 3,688 rentable square feet known as Suite 120 in the building located at 740 Cool Springs Boulevard, Franklin, Tennessee 37067.
- B. The Lease contains confidential terms. The parties desire to execute this Memorandum solely to evidence Tenant's leasehold interest without disclosing the financial and other confidential provisions of the Lease.
- C. This Memorandum is not intended to amend, modify, or replace the Lease. In the event of any inconsistency, the Lease shall control.

AGREEMENTS

NOW, THEREFORE, Landlord and Tenant, in consideration of the mutual promises contained in the Lease and herein, the parties agree and acknowledge that the Lease contains, among other things, the following provisions:

1. **Name and Address of Landlord**

HSRE-SG I, GP
740 Cool Springs Boulevard, Suite 120
Franklin, Tennessee 37067

2. **Name and Address of Tenant**

SunRay RX NSHTN, LLC d/b/a Vital Care of Franklin, TN
1012 Madison Avenue, Suite A
Madison, Mississippi 39110

3. **Description of the Lease.** The Office Building Lease dated July 1, 2026, is incorporated herein by reference.
4. **Description of the Premises.** Approximately 3,688 rentable square feet known as Suite 120, located on the first floor of the building at 740 Cool Springs Boulevard, Franklin, Tennessee 37067.
5. **Term of Lease.** The initial lease term is approximately ten (10) years and ten (10) months, commencing on the Lease Commencement Date and expiring on the Lease Expiration Date as defined in the Lease, subject to all extension, early termination, and other rights contained in the Lease.
6. **Use.** In accordance with the Lease, Tenant is limited to performing the operation of a retail pharmacy, a compounding pharmacy, and an infusion pharmacy (including the provision of infusion services to patients of the retail/compounding pharmacy and the housing of the office for any home health agency related to Tenant serving infusion patients in their homes)
7. **Binding Effect; Governing Law.** This Memorandum shall be binding upon Landlord and Tenant and their respective successors and assigns. If any inconsistency exists or arises between the terms of this Memorandum and the terms of the Lease, the terms of the Lease shall prevail. This Memorandum shall be governed by the laws of the State in which the Premises is located.

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IN WITNESS WHEREOF, the Landlord has executed this Memorandum as of the date set forth above.

LANDLORD:

HSRE-SG I, GP, a Delaware general
Partnership

By: Peter Sterbenz

Name: Peter Sterbenz

Title: 7/22/2026

IN WITNESS WHEREOF, the Tenant has executed this Memorandum as of the date set forth above.

TENANT:

SUNRAY RX NSHTN, LLC, a
Mississippi

limited liability company

By: Ray Harrigill

Name: Ray Harrigill

Title: Managing Member

July 1, 2026

Ladies and Gentlemen:

We are pleased to present this option ("Option") to you for the sublease ("SubLease") of a portion of the real property and building described below, on the following terms and conditions:

Lessor: HSRE-SG I, GP

SubLessor: SUNRAY RX NSHTN, LLC

SubLessee: SUNRAY HHA TN, LLC

Premises: Approximately 300 square feet (as shown on Exhibit A attached hereto as "Office A") of the approximately 3,688 square feet within an office area known as the "Suite 120" (located at 740 Cool Springs Blvd, Franklin, TN 37067, which premises are leased from Lessor to SubLessor pursuant to that certain Lease Agreement (the "Lease") dated as of July 1, 2026.

Intended Use: Home Health Agency office (the "Agency").

Effective Date and Term: The Effective Date of the Lease shall be the first day of the month after the exercise of this Option (as determined below), and the term of the Lease shall commence on the Effective Date and shall terminate and upon termination of the Lease (currently set to expire on May 31, 2037, but with two options by SubLessor to extend first until May 31, 2042 and then July 31, 2046).

Rent: One Dollar (\$1) from the date hereof until the effective licensure date for the Agency by the Tennessee Health Facilities Commission (the "Licensure Date"), and thereafter the rent for the space identified as "Office A" shall be computed at the same "per foot" rate (for both rent and common area maintenance fees) per month, payable to SubLessor in monthly installments in advance

Other Lease Terms: Other terms of the Lease shall be established by the parties at the effective date of the Lease, in the same format and general terms and conditions as the Lease.

Lease Amenities:

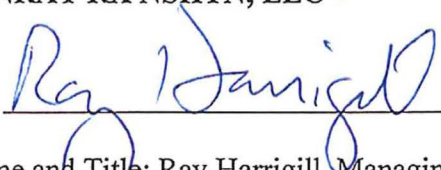
This Lease includes rental, utilities, janitorial services, use of kitchen facilities, real and common area property taxes, common area personal property, property and general liability insurance, shared parking, and similar amenities.

In consideration of \$10.00 cash in hand paid, the receipt and sufficiency of which are hereby acknowledged, Lessor grants to Lessee the option described above, which must be exercised within thirty (30) days of the final approval of the Certificate of Need application with regard to the Agency, as is currently pending before the Tennessee Health Facility ("HFC"), to allow the initiation of home health services by the Agency. Upon exercise of the option, the SubLessor and SubLessee shall in good faith negotiate the definitive terms of a lease agreement, as described above. If such option is not exercised by such date, this Option shall terminate and be of no further force and effect.

SubLessor and SubLessee acknowledge that SubLessor is a sublessee of Suite 120 pursuant to the Lease described above, and SubLessor will be subleasing exclusive use of Office A, plus the right to shared use of certain common areas of Suite 120.

Sincerely,

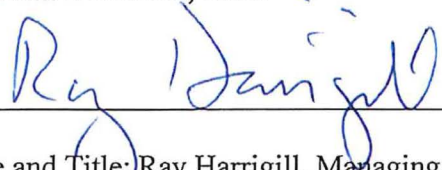
SUNRAY RX NSHTN, LLC

By: 

Name and Title: Ray Harrigill, Managing Member

Accepted:

SUNRAY HHA TN, LLC

By: 

Name and Title: Ray Harrigill, Managing Member

ATTACHMENT 10A



ATTACHMENT 11A

Not Applicable

REPLACEMENT ATTACHMENT 1E

Michael D. Brent

Partner
 mbrent@bradley.com
 615.252.2361 direct
 615.252.6361 fax



August 10, 2026
 (updated from original letter to
 reflect issuance of Pharmacy license)

Mr. Logan Grant
 Tennessee Health Facilities Commission
 Andrew Jackson Building, 9th Floor
 502 Deaderick Street
 Nashville, Tennessee 37243

Re: CON Application by Sunray HHA TN LLC, Franklin (Williamson County), TN

Dear Logan:

On behalf of my clients, Sunray RX LLC, and its two wholly owned subsidiaries, Sunray HHA TN LLC and Sunray RX NSHTN LLC, D/B/A Vital Care of Franklin, TN (collectively "Sunray") we submit this letter with the above referenced CON application by Sunray HHA TN LLC, to request that the CON application be heard on the Consent Calendar on September 23, 2026. We believe that Consent Calendar placement is justified for the reasons set forth below, as the application confirms that Need and Quality Standards regarding the project are appropriately demonstrated, and the effects attributed to competition or duplication will be positive for consumers.

As noted in the application, Sunray HHA TN LLC and Sunray RX NSHTN LLC, D/B/A Vital Care of Franklin, TN are "brother-sister" entities, each being wholly owned by Sunray RX LLC. Similar to what the HFC has reviewed, and approved, in several other recent applications with comparable structures, Sunray HHA TN LLC is proposing a home health agency with services limited to only home infusion, and only to patients of its related pharmacy, Sunray RX NSHTN LLC, D/B/A Vital Care of Franklin, TN. While Sunray RX NSHTN LLC has not yet received a "paper copy" of its pharmacy license from the Tennessee Department of Health, Board of Pharmacy ("BOP") to attach to the CON Application, on July 23, 2026, BOP completed an inspection of the space leased for the pharmacy, and Sunray RX NSHTN LLC passed that inspection and the Department website confirms the issuance of Facility License Number 00008332 for a pharmacy on July 31, 2026. The office space for Sunray HHA TN LLC will be located in space subleased from Sunray RX NSHTN LLC.

In addition to the approvals for several other similar applications in the past few years, so far in 2026 the HFC has approved three applications which proposed a home health agency with services limited to only home infusion, and two of those were limited to patients of a pharmacy with the same ownership as the applicant for the home health agency (OPTIV Infusion, LLC, CN2602-006A, for 29 counties), and River City Infusion, LLC, CN2511-042A, for 95 counties), while the third was limited to patients of pharmacies with which the applicant for the home health agency was contractually related (Naven Health, Inc., CN2604-009, for 95 counties). All of the applications noted above have been unopposed, and with one exception all have received unanimous approval by the HFC members voting on the application (the exception received eight approval votes and one vote against approval, but that was in January of 2023 and since then the specialty care area of home health limited to only home infusion has grown

Mr. Logan Grant
August 10, 2026
Page 2

considerably, for all the reasons noted in the CON application). The OPTIV Infusion, LLC application was approved for Consent Calendar status in April, 2026, and we believe there are enough similarities between Optiv and Sunray that Consent Calendar status should be granted for this application. Sunray would also note that if approved it will operate as a franchisee of Vital Care Infusion Services, a franchisor based in Brentwood, TN (VCIS), and that all the similar applications by VCIS franchisees (including River City Infusion. LLC in early 2026 and Blueberry Health Infusion Nursing, LLC, CN2505-019A, in mid-2025) were unopposed and all received unanimous approval by the HFC members voting on the application.

As you determined when you placed the OPTIV Infusion, LLC application on Consent Calendar status in April, 2026, we believe the Sunray application will meet the established criteria for granting a Certificate of Need with the limitations requested, and respectfully request that the Sunray application be allowed to follow a similar course as this application shows continuing need due to a limited number of existing traditional home health agencies that will accept referrals for home infusion services, and the structure followed by the more recently approved applications regarding the specialty care area of home health limited to only home infusion of patients served by related pharmacies, especially franchisees of VCIS. As to quality standards, the applicant intends to seek accreditation with the Accreditation Commission for Health Care (ACHC) (which its affiliate Sunray RX NSHTN LLC has already filed an application to obtain), and both Sunray HHA TN LLC and Sunray RX NSHTN LLC, D/B/A Vital Care of Franklin, TN will seek and maintain Medicare certification. Furthermore, as a franchisee of VCIS the applicant will have the considerable resources of VCIS behind it, including resources in the area of quality standards, which VCIS helps coordinate for its 166 current franchisees around the nation, collectively operating in over 240 locations. As to competition or duplication that would be positive for consumers, the applicant would further expand a growing area of home care which has been proven to be less expensive and more convenient than infusion care in locations other than the home.

Please let me know if you would like to discuss this letter, or need anything further at this time. We appreciate your assistance in this matter.

Very truly yours,

BRADLEY ARANT BOULT CUMMINGS LLP



Michael D. Brent

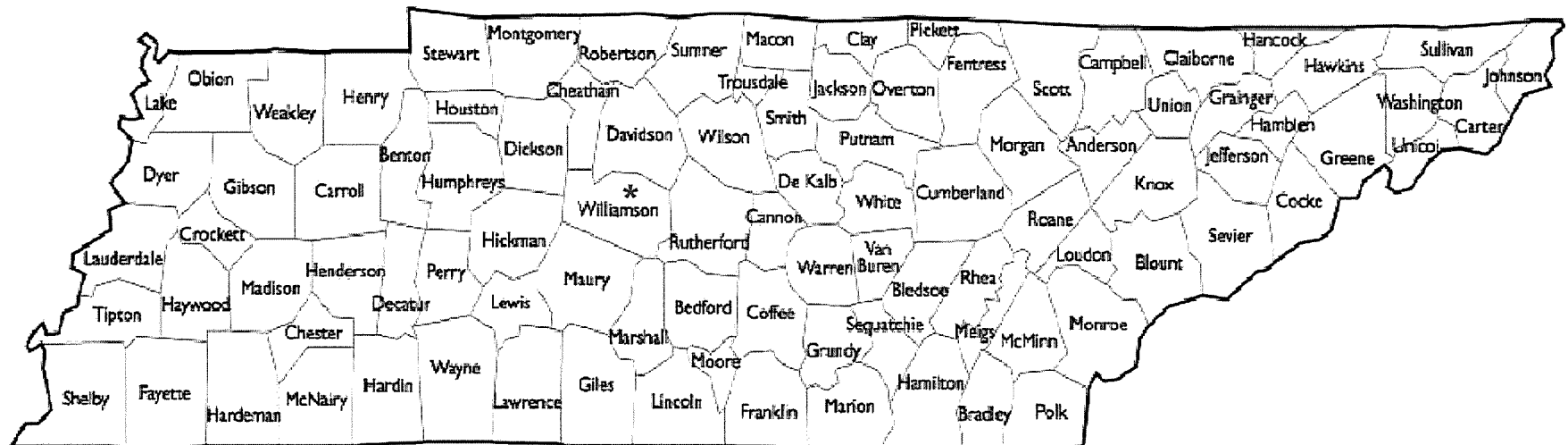
MDB/ced

CC: Mr. Jim Christoffersen
Mr. Phillip Earhart

ATTACHMENT 2N

SUNRAY HHA TN, LLC**TENNESSEE COUNTY MAP****All 95 Counties**

*Office Location



COMBINED:

ATTACHMENT 2N-SA

ATTACHMENT 5N

ATTACHMENT 10C-CCP

REPLACEMENT ATTACHMENT R3NB

ATTACHMENT 2N-SA

PROJECTED UTILIZATION BY PATIENTS FOR 2027

<u>County</u>	<u>Number</u>	<u>Percentage</u>
Williamson	27	18%
Davidson	26	17%
Rutherford	17	11%
Maury	12	8%
Wilson	9	6%
Sumner	8	5%
Marshall	6	4%
Montgomery	6	4%
Bedford	5	3.5%
Dickson	5	3%
Robertson	4	2.5%
Coffee	4	2.5%
Cheatham	3	2%
Giles	3	2%
Hickman	2	1.5%
Lawrence	2	1.5%
Lincoln	2	1%
Franklin County	2	1%
Cannon	1	.5%
Remaining 72 counties combined*	<u>10</u>	<u>7%</u>
Total	150	100%

*The remaining 76 counties are collectively estimated to account for 10 patients in 2027, but each of those counties will be, on average less than one patient per year. The applicant projects 150 total patients in 2027, the first full year of operation. The nineteen (19) counties listed by name are projected to serve one (1) or more patients each (ranging from only 1 patient in Cannon County to 27 patients in Williamson County, which is the location of the applicant's office), for a total of 140 patients, or approximately 93% of the projected patients in 2027. The remaining 76 counties account for approximately 7% of the projected patient population in 2027, but at this time the applicant is unable to project "which county for which year." The applicant anticipates that for the first year of operation, the majority of the patients receiving infusion services will be from counties in Middle Tennessee, with Williamson County anticipated to have the largest number of patients at 27, or approximately 18%.

The applicant would note that other recently approved "infusion only" applications for 95 counties similarly had the majority of first year projected patients clustered near the location of that applicant's office, but with similar anticipation of growth in future years which could extend to all counties of the state, albeit some counties in small numbers, or even zero, in certain years.

ATTACHMENT 5N

Item 5N - Service Area Historical Utilization

Home Health Agency (Service Area)*	Home County	State ID	Total Home Health Patients			Total	% Change 2023-2025	Provides Home Infusion Services as of 2025?
			2023	2024	2025			
Clinch River Home Health	Anderson	01032	404	492	477	1,373	18.1%	
Professional Case Management of Tennessee	Anderson	01042	502	588	625	1,715	24.5%	
The Home Option/Gentiva III	Anderson	01052	26	30	13	69	-50.0%	
Patriot Homecare	Anderson	01062	148	0	N/A	148	N/A	
Critical Nurse Staffing LLC	Anderson	01072	82	215	303	600	269.5%	
The Homecare Company of Tennessee, LLC	Anderson	01082	12	28	39	79	225.0%	
Giving Home Health Care	Anderson	01092	N/A	12	47	59	N/A	
Legacy Home Health, LLC	Anderson	01102	N/A	20	14	34	N/A	
Trinity Homecare and Consulting Services LLC	Anderson	01112	N/A	0	34	34	N/A	
Blount Memorial Hospital Home Health Services	Blount	05012	1,320	1,381	1,222	3,923	-7.4%	
Tennova Home Health- Cleveland	Bradley	06043	525	543	656	1,724	25.0%	
Adoration Home Health and Hospice Care East TN	Bradley	06063	2,351	2,537	2,729	7,617	16.1%	
Baptist Memorial Home Care and Hospice	Carroll	09065	502	595	661	1,758	31.7%	
Amedysys Home Health Care	Carter	10031	729	683	640	2,052	-12.2%	
Amedysys Home Health of Tennessee	Claiborne	13022	1,384	1,536	1,725	4,645	24.6%	
Smoky Mountain Home Health and Hospice, Inc.	Cocke	15032	1,376	1,180	1,085	3,641	-21.1%	
Suncrest Home Health	Coffee	16034	1,064	898	1,012	2,974	-4.9%	
Amedysys Home Health	Davidson	19021	2,128	2,213	2,103	6,444	-1.2%	
Centerwell Home Health-Nashville/Gentiva Certified Health Care	Davidson	19084	627	640	520	1,787	-17.1%	
Vanderbilt Home Care Services LLC	Davidson	19314	3,579	3,442	3,957	10,978	10.6%	
Suncrest Home Health	Davidson	19324	1,745	1,680	1,855	5,280	6.3%	
Intrepid USA Healthcare Services	Davidson	19364	1	N/A	N/A	1	N/A	
Vanderbilt Community and Home Services LLC	Davidson	19394	58	31	100	189	72.4%	
Elk Valley Health Services, LLC	Davidson	19491	255	199	230	684	-9.8%	
Tristar Healthcare at Home	Davidson	19504	511	926	761	2,198	48.9%	
Home Care Solutions	Maury	19544	2,091	2,637	2,433	7,161	16.4%	
Home Health Care of Middle Tennessee, LLC	Davidson	19584	2,211	2,033	1,825	6,069	-17.5%	
Homefirst Home Healthcare	Davidson	19614	927	1,304	1,653	3,884	78.3%	
Continuous Care Services, LLC	Davidson	19664	0	N/A	N/A	0	N/A	
Amedysys Home Health	Davidson	19674	2,808	3,039	3,391	9,238	20.8%	Yes
Amedysys Home Health Services	Davidson	19684	704	568	560	1,832	-20.5%	
Aveanna Home Health	Rutherford	19694	2,016	2,060	2,137	6,213	6.0%	
Adoration Home Health, LLC	Davidson	19714	6,565	6,802	7,189	20,556	9.5%	
Adoration Home Health Nashville South	Davidson	19724	482	559	696	1,737	44.4%	
Coram CVS Specialty Infusion Services	Williamson	19734	48	31	32	111	-33.3%	Yes
Pentec Health, Inc.	Hamilton	19744	190	197	298	685	56.8%	
Advanced Nursing Solutions	Blount	19754	204	216	144	564	-29.4%	Yes
Ascension at Home Saint Thomas	Davidson	19854	474	138	948	1,560	100.0%	
Thrive Skilled Pediatric Care	Davidson	19864	0	N/A	N/A	0	N/A	
Xodus Provider Services	Davidson	19874	0	1	N/A	1	N/A	
Paragon Infusion	Davidson	19884	N/A	6	N/A	6	N/A	
Advance Home Health and Hospice of Nashville LLC	Davidson	19894	N/A	33	182	215	N/A	
Continuum Pediatric Nursing Services	Davidson	19904	N/A	N/A	2	2	N/A	
KabaFusion TN LLC	Davidson	19914	N/A	N/A	10	10	N/A	Yes
Vanderbilt HC Option Care IV Services	Davidson	19994	333	361	564	1,258	69.4%	Yes
Tennessee Quality Care - Home Health	Decatur	20045	4,978	6,096	5,197	16,271	4.4%	
Volunteer Homecare of West Tennessee, Inc.	Decatur	20055	1,727	1,703	1,821	5,251	5.4%	
Suncrest Home Health	DeKalb	21024	1,769	1,628	1,436	4,833	-18.8%	
Inactive - Alana Home Care, LLC	Williamson	22014	N/A	0	0	0	N/A	
NHC Homecare	Shelby	24026	358	348	385	1,091	7.5%	
Where The Heart Is, Inc.	Shelby	24036	1,014	922	817	2,753	-19.4%	
Quality Private Duty Care	Fentress	25034	1,026	1,319	1,306	3,651	27.3%	
Quality Home Health	Fentress	25044	4,083	2,989	2,772	9,844	-32.1%	
Enhabit Home Health	Franklin	26024	1,912	1,907	2,021	5,840	5.7%	
Amedysys Home Care	Franklin	26054	1,389	1,328	1,499	4,216	7.9%	
NHC Homecare	Gibson	27025	151	156	248	555	64.2%	
Volunteer Home Care, Inc.	Gibson	27085	2,186	2,322	2,449	6,957	12.0%	
Adoration Home Health	Greene	30021	315	453	534	1,302	69.5%	
Ballad Health Homecare	Greene	30041	518	480	529	1,527	2.1%	
Inactive - Procure Home Health Services	Washington	30051	418	324	0	742	-100.0%	
Amedysys Home Health Care	Hamblen	32102	1,664	1,554	1,394	4,612	-16.2%	
University of TN Medical Center Home Health Services	Hamblen	32122	1,293	1,112	915	3,320	-29.2%	
Premier Support Services Inc.	Hamblen	32132	702	884	701	2,287	-0.1%	
NHC Homecare	Hamilton	33033	309	328	400	1,037	29.4%	
Accentcare Home Health of Tennessee	Hamilton	33083	2,615	2,640	2,431	7,686	-7.0%	
CenterWell Home Health-Chattanooga	Hamilton	33093	718	703	677	2,098	-5.7%	
Amedysys Home Health	Hamilton	33103	4,641	5,122	5,680	15,443	22.4%	
Erlanger Continuum Home Health	Hamilton	33213	936	1,027	953	2,916	1.8%	
CHI Memorial Health at Home	Hamilton	33253	1,780	1,989	1,955	5,724	9.8%	
Tennessee Home Health	Bradley	33303	575	744	996	2,315	73.2%	
Suncrest Home Health/Home Care Solutions	Hamilton	33363	596	534	531	1,661	-10.9%	
Suncrest Home Health/Erlanger Continuum Home Health	Hamilton	33383	33	44	55	132	66.7%	
Maxim Healthcare Services	Hamilton	33433	157	205	230	592	46.5%	
Hancock County Home Health Agency	Hancock	34011	207	0	N/A	207	N/A	
Deaconess Homecare	Hardin	36025	547	704	807	2,058	47.5%	
HMC Home Health, LLC	Hardin	36035	487	521	513	1,521	5.3%	
Adoration Home Health Brownsville	Haywood	38015	713	691	709	2,113	-0.6%	
Tennessee Healthcare Henry County Home Health/Henry County Medical Center Home	Henry	40075	471	365	462	1,298	-1.9%	
Ascension Saint Thomas at Home/Saint Thomas Home Health	Hickman	41034	267	99	176	542	-34.1%	
The Care Hive LLC	Loudon	42012	N/A	N/A	4	4	N/A	
Suncrest Home Health	Jefferson	45012	769	891	1,016	2,676	32.1%	
NHC Homecare Knoxville	Knox	47012	1,009	930	865	2,804	-14.3%	
CenterWell Home Health-Knoxville	Knox	47042	1,679	1,564	1,254	4,497	-25.3%	
Enhabit Home Health	Knox	47062	1,773	1,839	1,943	5,555	9.6%	
Tennova Healthcare Home Health	Knox	47092	1,516	1,135	1,068	3,719	-29.6%	
University of TN Medical Center Home Care Services - Home Health	Knox	47132	3,777	3,592	3,689	11,058	-2.3%	
Amedysys Home Health Care	Knox	47202	3,683	3,278	3,118	10,079	-15.3%	
East Tennessee Childrens Hospital Home Health Care	Knox	47222	467	343	291	1,101	-37.7%	
Adoration Home Health	Loudon	47232	232	484	522	1,238	125.0%	
Covenant Homecare	Knox	47402	5,947	5,016	4,922	15,885	-17.2%	
Maxim Healthcare Services Inc	Knox	47432	928	371	382	1,081	16.5%	
Coram CVS Specialty Infusion Services	Knox	47442	41	26	32	99	-22.0%	Yes
Implanted Pump Management LLC	Knox	47452	49	63	80	192	63.3%	Yes
Nuclear Care Partners, LLC	Unknown	47462	76	128	117	321	53.9%	
Brightstar Care	Knox	47472	4	4	0	8	-100.0%	
Remain At Home Senior Care	Knox	47482	5	11	59	75	1080.0%	
Paragon Infusion	Knox	47492	N/A	33	N/A	33	N/A	
Tola LLC	Knox	47493	N/A	N/A	0	0	N/A	

Trusted Ally Home Care	Knox	47494	N/A	N/A	0	0	N/A	
Atomic Workers Alliance LLC	Knox	47495	N/A	N/A	0	0	N/A	
Americas Home Health	Knox	47496	N/A	N/A	1	1	N/A	
Coal Miner Nursing Services	Knox	47497	N/A	N/A	0	0	N/A	
Truth Home Care PLLC	Knox	47498	N/A	N/A	2	2	N/A	
Harmony Wellness Home Health	Knox	47499	N/A	N/A	1	1	N/A	
Deaconess Homecare	Lincoln	52024	463	348	392	1,203	-15.3%	
Lincoln Medical Home Health and Hospice/HH Health System-Lincoln, Inc.	Lincoln	52044	337	344	353	1,034	4.7%	
NHC Homecare	McMinn	54043	192	238	261	691	35.9%	
Medical Center Home Health, LLC	Madison	57035	3,378	3,540	3,377	10,295	0.0%	
Amedysys Home Health Care	Madison	57075	2,097	1,913	1,847	5,857	-11.9%	Yes
Extendicare Home Health of West Tennessee	Dyer	57095	2,310	2,233	2,140	6,683	-7.4%	
Centerwell Home Health-Jackson/Intrepid USA Healthcare Services	Madison	57165	559	400	297	1,256	-46.9%	
NHC Homecare Columbia	Mauzy	60024	2,215	2,018	2,109	6,342	-4.8%	
Mauzy Regional Home Services	Mauzy	60044	1,266	1,313	1,384	3,963	9.3%	
Quality First Home Care	Mauzy	60084	946	910	907	2,763	-4.1%	
Centerwell Home Health-Knoxville/Intrepid USA Healthcare Services	Knox	62052	286	219	168	673	-41.3%	
Sweetwater Hospital Home Health	Monroe	62062	677	521	516	1,714	-23.8%	
Tennova Home Health- Clarksville	Montgomery	63034	2,291	2,518	2,773	7,582	21.0%	
Suncrest Home Health	Montgomery	63044	517	582	648	1,747	25.3%	
Interim Healthcare of Montgomery County	Montgomery	63054	N/A	1	7	8	N/A	
Extendicare Home Health of Western Tennessee	Obion	66035	566	582	574	1,722	1.4%	
Amedysys Home Health	Overton	67024	2,399	2,580	2,241	7,220	-6.6%	
Perry County Home Health	Perry	68001	N/A	N/A	18	18	N/A	
Cookeville Regional Home Health	Putnam	71014	840	793	852	2,485	1.4%	
Centerwell Home Health-Cookeville/Intrepid USA Healthcare Services	Putnam	71084	131	106	135	372	3.1%	
VIP Family Homecare	Roane	73012	N/A	4	14	18	N/A	
Best Homecare LLC	Roane	73022	N/A	1	0	1	N/A	
Haven Home Health Care	Roane	73032	N/A	0	33	33	N/A	
NHC Homecare Springfield	Robertson	74054	2,086	2,017	2,045	6,148	-2.0%	
Lifeline Home Health Care	Robertson	74064	616	657	616	1,889	0.0%	
NHC Homecare	Rutherford	75024	1,958	1,895	2,058	5,911	5.1%	
Amedysys Home Health	Rutherford	75054	1,196	1,251	1,330	3,777	11.2%	
Amedysys Home Health Care	Rutherford	75064	1,515	1,499	1,343	4,357	-11.4%	
Twelvestone Infusion Support	Rutherford	75084	32	148	80	260	150.0%	Yes
Energy Employee Services	Scott	76042	N/A	N/A	0	0	N/A	
Meritan INC	Shelby	79106	470	455	368	1,293	-21.7%	
Advantage Home Care/Quality Home Health Services	Shelby	79136	87	39	32	158	-63.2%	
Amedysys Home Care	Shelby	79146	935	1,011	711	2,657	-24.0%	
Centerwell Home Health-Barlett/Intrepid USA Healthcare Services	Shelby	79226	300	255	112	667	-62.7%	
Amedysys Home Health Care	Shelby	79246	715	724	678	2,117	-5.2%	
Americare Home Health Agency, Inc.	Shelby	79256	646	572	601	1,819	-7.0%	
Baptist Trinity Home Care and Hospice	Shelby	79276	2,389	2,482	2,814	7,685	17.8%	
Methodist Alliance Home Care	Shelby	79316	2,110	1,739	1,462	5,311	-30.7%	
Homechoice Health Services	Shelby	79376	572	575	492	1,639	-14.0%	
Amedysys Home Health	Shelby	79386	1,339	1,281	1,257	3,877	-6.1%	
Inactive - Baptist Trinity HomeCare-PPD	Shelby	79446	N/A	0	0	0	N/A	
Accredo Health Group, Inc.	Shelby	79456	325	381	462	1,168	42.2%	Yes
Optum Womens and Childrens Health LLC	Shelby	79466	166	117	128	411	-22.9%	
Adoration Home Health Care of West Tennessee	Shelby	79486	1,497	1,451	1,291	4,239	-13.8%	
Functional Independence Home Care, Inc.	Shelby	79496	3,030	2,627	2,380	8,037	-21.5%	
No Place Like Home, Inc.	Shelby	79506	55	42	35	132	-36.4%	
Still Waters Home Health Agency	Shelby	79526	988	787	733	2,508	-25.8%	
Maxim Healthcare Services Inc.	Shelby	79536	220	215	247	682	12.3%	
Best Nurses, Inc.	Shelby	79546	93	88	106	289	11.6%	
Coram CVS Specialty Infusion Service	Shelby	79556	28	18	20	66	-28.6%	Yes
Hemophilia Preferred Care of Memphis, Inc.	Shelby	79566	1	1	1	3	0.0%	
Optum Infusion Services LLC	Williamson	79856	219	124	138	481	-37.0%	Yes
St Jude Childrens Research Hospital Homecare LLC	Shelby	79866	90	128	153	371	70.0%	
MGA Homecare	Shelby	79876	8	36	77	121	862.5%	
AccentCare Home Health of West Tennessee	Shelby	79886	13	61	360	434	2669.2%	
MALC, LLC	Shelby	79896	0	12	9	22	800.0%	
Residential Solutions LLC	Shelby	79906	1	1	0	1	N/A	
What About Us in Home Healthcare	Shelby	79916	N/A	0	1	1	N/A	
Tristate Infusion LLC	Shelby	79926	N/A	132	247	379	N/A	Yes
Nine Zero One Home Health Care	Shelby	79936	N/A	16	350	366	N/A	
The Good Care Helpers LLC	Shelby	79946	N/A	N/A	0	0	N/A	
Adoration Home Health	Sullivan	82051	464	504	671	1,639	44.6%	
CenterWell Home Health-Kingsport	Sullivan	82061	1,379	1,451	1,345	4,175	-2.5%	
Highpoint Homecare	Sumner	83114	664	614	754	2,032	13.6%	
Centerwell Home Health-McMinnville/Intrepid USA Healthcare Services	Warren	89064	626	575	516	1,717	-17.6%	
Adoration Home Health McMinnville	Warren	89074	710	517	500	1,727	-29.6%	
Homefirst Home Healthcare	Warren	89084	300	550	715	1,565	138.3%	
Ballad Health Homecare	Washington	90081	3,865	3,952	3,957	11,774	2.4%	
Amedysys Home Health	Washington	90121	3,448	3,694	4,113	11,255	19.3%	
NHC Homecare	Washington	90131	467	615	550	1,632	17.8%	
Maxim Healthcare Services, Inc.	Washington	90141	84	102	130	316	54.8%	
Adoration Home Health Martin	Weakley	92025	1,131	1,060	1,014	3,205	-10.3%	
Accentcare Home Health Of Nashville	Williamson	94074	2,045	2,295	2,091	6,431	2.2%	
Maxim Healthcare Services Inc.	Williamson	94104	345	383	391	1,119	13.3%	
Medysyl Home Healthcare Services, LLC	Williamson	94114	N/A	0	0	0	N/A	
Deaconess Homecare	Wilson	95034	1,294	1,617	1,910	4,821	47.6%	
CenterWell Home Health-Lebanon	Wilson	95074	925	1,055	889	2,869	-3.9%	
HomeCare Excellence, LLC	Wilson	95084	0	N/A	N/A	0	N/A	
Magnolia Regional Health Center Home Health and Hospice Agency	Alcorn	96010	777	832	892	2,501	14.8%	
Professional Home Health Care Agency, Inc.	Alcorn	96030	1,002	1,061	1,081	3,144	7.9%	
Total			164,990	165,681	168,139	498,810	1.9%	

Source: Tennessee Department of Health, Joint Annual Reports (JARs), 2025-2023, accessed at <https://apps.health.tn.gov/publicjars/default.aspx>.

Note: Includes home health utilization for Grundy and Lake counties. As noted by the Tennessee HFC, Grundy County and Lake County are the two economically distressed counties that does not require a CON in fiscal year 2026.

Note: "N/A" indicates that the listed HHA did not report utilization for that year.

* All agency names are listed as they appear in the 2025 JARs, which may be different than the name(s) displayed for the corresponding State ID for 2024 and/or 2023.

Service Area Historical Utilization - Infusion Visits and Hours

Home Health Agency (Service Area)*	Home County	State ID	2025 Infusion Visits - Pain Management	2025 Infusion Hours - Pain Management	2025 Infusion Visits - Other	2025 Infusion Hours - Other
Amedisys Home Health	Davidson	19674	0	0	7	0
Coram CVS Specialty Infusion Services	Williamson	19734	560	3,422	0	0
Advanced Nursing Solutions	Blount	19754	752	3,402	420	476
KabaFusion TN LLC	Davidson	19914	36	251	17	17
Vanderbilt HC Option Care IV Services	Davidson	19994	4,679	4,340	1,121	1,076
Coram CVS Specialty Infusion Services	Knox	47442	738	5,717	2	3
Implanted Pump Management LLC	Knox	47452	0	0	360	102
Twelvestone Infusion Support	Rutherford	75084	207	898	467	636
Accredo Health Group, Inc.	Shelby	79456	385	1,480	802	872
Coram CVS Specialty Infusion Service	Shelby	79556	441	2,998	19	29
Hemophilia Preferred Care of Memphis, Inc.	Shelby	79566	0	0	3	3
Optum Infusion Services LLC	Williamson	79856	1,463	7,467	116	185
Tristate Infusion LLC	Shelby	79926	973	4,263	973	1,203
Total			10,234	34,238	4,300	4,602

Source: Tennessee Department of Health, Joint Annual Reports (JARs), 2025-2023, accessed at <https://apps.health.tn.gov/publicjars/default.aspx>.

Note: "N/A" indicates that the listed HHA did not report utilization for that year.

* All agency names are listed as they appear in the 2025 JARs, which may be different than the name(s) displayed for the corresponding State ID for 2024 and/or 2023.

Attachment 10C-CCP Charity Care Policy

Patient Financial Assistance/Hardship Policy Attestation

NOTE: If you complete this attestation electronically, you do not need to complete and submit the printed version included in the policy set.

Please complete all sections below to confirm your understanding and compliance with the Patient Financial Assistance/Hardship Policy. Your responses will be used to verify adherence and maintain program integrity.

1. Please enter your four-digit franchise location number(s). If you own multiple franchises, list all location numbers. *

0503

2. Please enter your franchise location name(s). If you own multiple franchises, list all location names. *

Franklin, TN

3. Part I

The franchised location ("Franchisee") requests that Vital Care Infusion Services, LLC as Manager to Franchisor ("VCIS"), acting in its role as third-party billing administrator pursuant to a Special Power of Attorney granted by Franchisee, administer certain reductions in patient financial obligations on Franchisee's behalf pursuant to Franchisee's Financial Assistance Policy. The Franchisee understands and acknowledges that it is solely responsible for the establishment and maintenance of its financial assistance to patients. The Franchisee shall be solely responsible for the determination of whether a patient qualifies for assistance and the extent of such assistance. The Franchisee shall be solely responsible for the maintenance of all documentation related to the patient's financial need eligibility determination.

In addition to any other indemnification obligations of Franchisee, Franchisee agrees to indemnify and hold harmless VCIS, and its subsidiaries, affiliates, members, directors, officers, employees, and representatives, for any claims, liabilities, losses, suits, causes of action, damages, costs, and expenses (including reasonable attorneys' fees) to the extent arising out of Franchisee's Financial Assistance Policy or VCIS's administration thereof.

Franchisee may request that VCIS administer patient financial obligation reductions pursuant to its Financial Assistance Policy by inputting patient information and approved reductions in the Financial Assistance Policy Patient List. Franchisee represents and warrants that it shall only include patients who meet all criteria for assistance under the Franchisee's policy, that the Franchisee has documentation to support such determination (including income evidence), and that the Franchisee has no reason to believe patients are not entitled to assistance. Franchisee shall immediately remove patients from the Financial Assistance Policy Patient List if any of the foregoing cease to be accurate.

*

By typing my name below, I attest that the above statements are true and accurate to the best of my knowledge. I understand that my typed name shall serve as my electronic signature and is legally binding in the same manner as a handwritten signature.

Sita Victoria Harrigill

4. Part II

Franchisee represents and warrants that:

1. Its Financial Assistance Policy complies with all applicable laws, including the Anti-Kickback Statute (42 U.S.C. § 1320a-7b(b)) and the Beneficiary Inducement CMP law, and satisfies the waiver elements described in 42 C.F.R. § 1001.952(k) and 42 U.S.C. § 1320a-7a(i)(6)(A), together with associated OIG guidance.
2. Its financial assistance policy is in written form, implemented according to its written terms, and reviewed at least annually by Franchisee.
3. It makes a good faith determination of financial need based on patient-provided documentation of income for each patient granted assistance.
4. It has adopted and maintains objective criteria for determining financial need.
5. It requires each patient granted assistance to attest to the truth and completeness of the application and to promptly notify of any changes.
6. It does not advertise its Financial Assistance Policy, and employees/contractors are trained on the prohibition of advertising the

financial assistance program.

7. It maintains documentation of the patient's application and supporting determination of financial need for no less than six (6) years from when the patient last receives assistance under the program.
8. Franchisees are further expected to comply with applicable state laws governing charitable assistance, consumer protection, and debt collection practices, and to align with payer contract terms.

The Franchisee will immediately notify VCIS if any representations in this Attestation become untrue or if it fails to meet obligations under this Attestation. Franchisee will immediately remove patients from the Financial Assistance Policy Patient List if the patient is no longer entitled to assistance under the Franchisee's program.

*

By typing my name below, I attest that the above statements are true and accurate to the best of my knowledge. I understand that my typed name shall serve as my electronic signature and is legally binding in the same manner as a handwritten signature.

Sita Victoria Harrigill

5. Date of attestation *

6/17/2026



 Microsoft 365

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State and Federal laws, as well as Vital Care's contracts with PBMs and insurance companies, require franchised locations to bill patients for their cost-sharing amounts. Franchised locations may waive all or a portion of these payments only if the patient meets established eligibility criteria.

Exhibit B - Sample Policy Template for Franchisee Use

Patient Financial Assistance/Hardship Policy

Scope

This policy applies uniformly to all patients served by Vital Care of Franklin, TN ("Vital Care").

This policy outlines guidelines for financial assistance for patients who incur significant out-of-pocket obligations for medications, supplies, and services. Employees may not induce patients or referrals based on waiving out-of-pocket costs, and this policy or the availability of financial assistance may not be advertised to patients or referral sources (e.g., prescribers).

Policy

1. Definitions

- 1.1. **"Eligibility Guidelines"** means the federal poverty guidelines updated annually by the United States Department of Health and Human Services in the Federal Register.
- 1.2. **"Family Size"** means the number of individuals living in the patient's household operating under combined resources or in the case of a minor patient, the patient and the number of individuals living in the Responsible Party's home or individuals for whom the patient or Responsible Party is otherwise financially responsible. Examples of individuals making up a Family Size include: 1) the patient and, if married, his/her spouse; 2) any natural, or adopted minor child of the patient, or spouse who has not been emancipated by a court and who is not, or has never been, married; 3) any person designated as "dependent" on the patient's latest tax return; 4) any adult child who is a student and who is dependent on the patient's income for over 50 percent of his or her living expenses; and 5) any other person within the patient or Responsible Party's household who is dependent on the patient's family income for over 50 percent of his or her living expenses.
- 1.3. **"Financial Application to Waive or Reduce Copay"** means the form used to determine eligibility (Exhibit C).
- 1.4. **"Pending Application"** means an application fully completed, received by a qualified employee appointed by the location's manager, and under review.
- 1.5. **"Responsible Party"** means the patient (if an adult) or, in a minor, the financially responsible parent.

2. Income Eligibility

- 2.1. A patient is eligible for financial assistance consideration if they meet the income eligibility criteria set forth herein, based on the Eligibility Guidelines and other criteria in this policy.
- 2.2. Vital Care uses current annual gross income and Family Size in determining eligibility.

State and Federal laws, as well as Vital Care's contracts with PBMs and insurance companies, require franchised locations to bill patients for their cost-sharing amounts. Franchised locations may waive all or a portion of these payments only if the patient meets established eligibility criteria.

- 2.3. Reference the current Federal Poverty Guidelines using the table below or at:
ASPE – Office for the Assistant Secretary for Planning and Evaluation

2026 FEDERAL POVERTY GUIDELINES (FPG) FOR THE 48 CONTIGUOUS STATES AND THE DISTRICT OF COLUMBIA					
Household Size	FPG	200% of FPG	300% of FPG	400% of FPG	500% of FPG
1	\$15,960	\$31,920	\$47,880	\$63,840	\$79,800
2	\$21,640	\$43,280	\$64,920	\$86,560	\$108,200
3	\$27,320	\$54,640	\$81,960	\$109,280	\$136,600
4	\$33,000	\$66,000	\$99,000	\$132,000	\$165,000
5	\$38,680	\$77,360	\$116,040	\$154,720	\$193,400
6	\$44,360	\$88,720	\$133,080	\$177,440	\$221,800
7	\$50,040	\$100,080	\$150,120	\$200,160	\$250,200
8	\$55,720	\$111,440	\$167,160	\$222,880	\$278,600
For families/households with more than 8 persons, add \$5,680 for each additional person					

- 2.4. Evaluate patient income against the approved thresholds in the chart below to determine whether a full or partial discount is appropriate, consistent with this policy.

2.4.1. To establish percentage thresholds that reflect local standards, our location considers how hospitals within our community structure their financial assistance programs. An internet search using our city and state followed by the phrase "hospital financial assistance policy" (e.g., "*Meridian, MS hospital financial assistance policy*") can provide insight into the ranges commonly applied by nearby hospitals. This information helps ensure our hardship criteria are aligned with local practices.

2.4.2. When reviewing external hospital policies, our location identifies percentage ranges that are consistent with or more conservative than those used by local health systems. This approach supports defensible, needs-based determination and promotes alignment with established industry practice.

ADJUSTED INCOME AS PERCENTAGE OF FEDERAL POVERTY GUIDELINES (FPG)	PERCENTAGE DISCOUNT OF OUT-OF-POCKET COSTS
Less than or equal to <u>200%</u> of the FPG	100% Discount
Greater than <u>200%</u> but less than <u>300%</u> of the FPG	<u>50%</u> Discount

3. The Application Process

- 3.1. **Patient Intake** - A patient who indicates an inability to pay out-of-pocket expenses for medically necessary services may be evaluated for assistance per this policy. Employees may not initiate this discussion absent patient indication of need. Upon such statement, the Manager may initiate a conversation relating to Vital Care's financial assistance program and agree to provide an Application to Waive or Reduce Copay.

State and Federal laws, as well as Vital Care's contracts with PBMs and insurance companies, require franchised locations to bill patients for their cost-sharing amounts. Franchised locations may waive all or a portion of these payments only if the patient meets established eligibility criteria.

3.2. Verification of Financial Status - Each requesting patient must complete the current Application to Waive or Reduce Copay and provide income verification (e.g., pay stubs, tax returns, Social Security benefits, child support). The patient or Responsible Party must sign the application attesting to truthfulness.

3.3. Evaluation of Application - Upon receipt of a completed application, the Manager or designee performs initial review. If preliminary eligible, the Manager or designee grants final approval/denial or requests additional information.

3.4. Turnaround Time - A determination on a Pending Application is typically completed within five (5) days of receipt. Written notification is provided to the applicant.

3.5. Limitations - Financial assistance under this policy is intended only for patients with a documented inability to pay for medically necessary care and is considered a last resort. Assistance is not available for services that are not approved or authorized by an insurance carrier (if applicable).

Before granting financial assistance, all other funding options must be evaluated and exhausted, including government programs, insurance coverage, manufacturer assistance programs, and other third-party resources. Patients must fully cooperate by providing requested information to determine eligibility for these alternatives. Failure to provide such information may result in disqualification from the hardship program.

3.6. Denial of Financial Assistance - All denials include written reasons. If denial is due to missing information, the applicant may submit the specified information for reconsideration. Denied applications may be escalated for further review by the Manager, who may grant assistance as a documented exception (exceptions should be rare).

3.7. Appeal Process - Upon request, a patient may appeal a denial. At least two individuals appointed by the Manager and not involved in the initial denial will review the appeal. If the Manager did not deny the original application, the Manager may solely decide the appeal.

3.8. Renewal of Application - Annual renewal is required. Patients receiving assistance must submit an updated application annually. Patients will be notified at least thirty (30) days in advance of the renewal deadline. Patients should submit earlier if financial circumstances change.

4. Responsibilities and Exchange with VCIS

4.1. Annually and upon policy revision, the Franchisee will email a copy of the executed Attestation (unless completed electronically) and Financial Assistance Policy to compliance@vitalcare.com.

4.1.1. As the Federal Poverty Guidelines are updated each January, it is recommended to review and update this policy in February to ensure all eligibility thresholds reflect the most current guidelines.

4.2. The Franchisee will upload approved Applications in Vital Systems to "Hardship Documents". Franchisees may contact spt@vitalcare.com with questions related to the execution of approved applications.

4.3. VCIS (RCM) will create and maintain a Financial Assistance Policy Patient List per franchisee.

State and Federal laws, as well as Vital Care's contracts with PBMs and insurance companies, require franchised locations to bill patients for their cost-sharing amounts. Franchised locations may waive all or a portion of these payments only if the patient meets established eligibility criteria.

4.4. VCIS (RCM) will maintain patient accounts for those granted assistance.

4.5. Annual renewal of previously approved Applications is recommended, ensuring alignment with the current Financial Assistance Policy.

5. Compliance Monitoring and Audit

5.1. Ongoing auditing and monitoring of adherence to the Franchisee's Financial Assistance Policy will occur for listed patients.

5.2. Annually, the Compliance Officer is recommended to audit hardship program utilization to determine whether the 10% threshold has been exceeded.

5.2.1. Calculate the percentage of hardship program patients relative to the total active patient population and document the findings in the annual compliance report. The audit should include:

- Total number of active patients served during the year
- Total number of patients approved for the hardship program during the same period

5.2.2. If the percentage exceeds 10%, the franchised location is recommended to review program controls to avoid unnecessary waivers. The Compliance Officer is further recommended to propose corrective actions or enhanced monitoring to ensure compliance with federal and state regulations and payer contract requirements.

6. Collection Efforts

Patients remain responsible for out-of-pocket expenses or other fees until a complete Application and all required documentation are received and approved by Vital Care. If the patient is deemed eligible, VCIS (RCM) applies the discount to eligible expenses incurred from the date a complete Application and required documentation were received. Assistance is not retroactively applied to sums incurred before receipt of a complete Application. Vital Care collects all sums due from patients receiving assistance per its collection policies and standard business practices and in accordance with applicable state debt collection laws.

7. Accounting Treatment of Financial Assistance

Amounts formally waived under an approved Financial Assistance Policy are not recognized as patient service revenue and will be treated as a bad debt adjustment. Accounting treatment follows applicable Generally Accepted Accounting Principles (GAAP) and internal accounting policies.

State and Federal laws, as well as Vital Care's contracts with PBMs and insurance companies, require franchised locations to bill patients for their cost-sharing amounts. Franchised locations may waive all or a portion of these payments only if the patient meets established eligibility criteria.

Exhibit C - Sample Application Template for Franchisee Use

Application to Waive or Reduce Copay with Staff Instructions

Purpose: These instructions guide staff through the proper handling of patient requests for financial assistance in accordance with the Franchisee's Financial Assistance Policy and applicable federal and state laws. Staff may print these instructions for onsite use.

Step 1: Provide Application Only Upon Patient Request

- Do not initiate discussion of financial assistance unless the patient (or responsible party) indicates an inability to pay out-of-pocket costs.
- Once the patient expresses financial hardship, provide the Application.

Step 2: Ensure Completion of Application

- The patient must complete the Application and sign it, attesting to the truthfulness of the information.
- Collect supporting documentation of income and hardship. Acceptable documentation includes:
 - W-2 withholding statements
 - Pay stubs
 - Income tax return
 - Forms from Medicaid or other state-funded medical assistance
 - Employer or welfare agency forms
 - Other hardship documentation (e.g., bankruptcy settlement, catastrophic events such as death, disability, divorce)

Step 3: Verify Eligibility

- Annualize income from the date of request based on documentation and verbal information provided by the patient, considering seasonal employment and temporary income changes.
- Reference Federal Poverty Guidelines (FPG) table below. Compare annual income against approved threshold in the Financial Assistance Policy:

2026 FEDERAL POVERTY GUIDELINES (FPG) FOR THE 48 CONTIGUOUS STATES AND THE DISTRICT OF COLUMBIA					
Household Size	FPG	200% of FPG	300% of FPG	400% of FPG	500% of FPG
1	\$15,960	\$31,920	\$47,880	\$63,840	\$79,800
2	\$21,640	\$43,280	\$64,920	\$86,560	\$108,200
3	\$27,320	\$54,640	\$81,960	\$109,280	\$136,600
4	\$33,000	\$66,000	\$99,000	\$132,000	\$165,000
5	\$38,680	\$77,360	\$116,040	\$154,720	\$193,400
6	\$44,360	\$88,720	\$133,080	\$177,440	\$221,800
7	\$50,040	\$100,080	\$150,120	\$200,160	\$250,200
8	\$55,720	\$111,440	\$167,160	\$222,880	\$278,600
For families/households with more than 8 persons, add \$5,680 for each additional person					

ADJUSTED INCOME AS PERCENTAGE OF FEDERAL POVERTY GUIDELINES (FPG)	PERCENTAGE DISCOUNT OF OUT-OF-POCKET COSTS
Less than or equal to <u>200</u> % of the FPG	100% Discount
Greater than <u>200</u> % but less than <u>300</u> % of the FPG	50% Discount

State and Federal laws, as well as Vital Care's contracts with PBMs and insurance companies, require franchised locations to bill patients for their cost-sharing amounts. Franchised locations may waive all or a portion of these payments only if the patient meets established eligibility criteria.

- Confirm assistance is only for medically necessary care and after evaluating alternative funding sources (e.g., government programs, manufacturer assistance).

Step 4: Submit for Review

- Forward the completed application and documentation to the Manager or designated reviewer for eligibility determination.
- The Manager or designee performs initial review and grants approval, denial, or requests additional information.
- Exceptions may be granted by the Manager with documented justification (should be rare).

Step 5: Notify Patient

- Provide written notification of the determination within five (5) business days where possible.
- If denied, include reasons and instructions for reconsideration. Inform patients of their right to appeal and follow the appeal process outlined in the Financial Assistance Policy.

Step 6: Renewal

- Approved applications must be renewed annually.
- Notify patients at least thirty (30) days before renewal deadlines.
- Patients should submit a new application earlier if financial circumstances change.

Step 7: Documentation and Confidentiality

- Upload approved applications to Vital Systems → Hardship Documents
- Maintain all documentation for at least six (6) years.
- Ensure all information is kept confidential and handled in compliance with HIPAA and applicable privacy laws.

Important Compliance Notes

- Do not advertise or promote the availability of financial assistance.
- Assistance is a last resort after exhausting other fundings sources.
- Routine waivers are prohibited; each case must meet documented eligibility criteria.
- Completion of an application does not guarantee approval or relieve the patient of financial responsibility.
- Follow all applicable state laws, federal regulations, and payer contract requirements.

State and Federal laws, as well as Vital Care's contracts with PBMs and insurance companies, require franchised locations to bill patients for their cost-sharing amounts. Franchised locations may waive all or a portion of these payments only if the patient meets established eligibility criteria.

APPLICATION TO WAIVE OR REDUCE COPAY

DEMOGRAPHIC INFORMATION				
Patient Name				
Street Address				
City		State		Zip
Telephone #		Email Address		
Name of Responsible Party		Relationship		
Spouse Name				
Number of Persons in Household				
EMPLOYMENT INFORMATION				
Patient Employer				
Employer Address				
If Patient Unemployed, How Long?				
Spouse Employer				
Employer Address				
If Spouse Unemployed, How Long?				
Other Household Member Employer(s) (include name and employer's name and address)				
MONTHLY FAMILY/HOUSEHOLD INCOME				
Note - You must submit evidence of income with this application. Acceptable documentation includes pay stubs, W-2 forms, tax returns, Social Security benefit statements, or other proof of income.				
Income Source(s)	Patient	Spouse	Responsible Party	Working Children
Monthly Gross Income, Employment				
Public Assistance Benefits				
Unemployment Benefits				
Social Security Benefits				
Workers' Compensation				
Other (child support, alimony, etc.)				
TOTAL INCOME				

I HEREBY ACKNOWLEDGE THAT THE INFORMATION GIVEN HEREIN IS TRUE AND CORRECT. I AUTHORIZE VITAL CARE TO VERIFY ANY INFORMATION CONTAINED IN THIS DOCUMENT FOR THE SOLE PURPOSE OF ASSESSING FINANCIAL NEED. I ACKNOWLEDGE AND AGREE THAT THIS TYPED SIGNATURE IS EQUIVALENT TO A HANDWRITTEN SIGNATURE AND SERVES AS AN ELECTRONIC REPRESENTATION OF THE SIGNATORY'S INTENT TO BE LEGALLY BOUND BY THE CONTENTS HEREIN.

Signature of Patient/ Responsible Party		Date	
Signature of Spouse/Other		Date	

OFFICE USE ONLY – Application Status: ☐ Approved ☐ Partially Approved for ____% Waiver ☐ Denied	
Reviewed by:	Date:

Replacement Attachment
R3NB (08.13.2026; 2:30PM)

Demographic Variable/Geographic Area	Department of Health/Health Statistics							Census Bureau				TennCare	
	Total Population- Current Year (2025)	Total Population- Projected Year (2028)	Total Population-% Change	*Target Population- Current Year (2025)	Target Population- Project Year (2028)	Target Population-% Change	Target Population Projected Year as % of Total	Median Age	Median Household Income	Person Below Poverty Level*	Person Below Poverty Level as % of Total	TennCare Enrollees	TennCare Enrollees as % of Total
Anderson	80,627	81,949	1.6%	80,627	81,949	1.6%	1.11%	41.6	\$66,183	11,370	11.5	15,221	18.9%
Bedford	54,010	56,016	3.7%	54,010	56,016	3.7%	0.76%	37.6	\$55,273	6,862	12.2	12,073	22.4%
Benton	15,837	15,619	-1.4%	15,837	15,619	-1.4%	0.21%	47.5	\$67,225	2,920	17	3,993	25.2%
Bledsoe	15,248	15,596	2.3%	15,248	15,596	2.3%	0.21%	44.9	\$54,720	3,427	19.4	2,949	19.3%
Blount	144,400	148,094	2.6%	144,400	148,094	2.6%	2.00%	43.8	\$77,365	12,046	9.2	19,950	13.8%
Bradley	113,913	116,791	2.5%	113,913	116,791	2.5%	1.58%	38.0	\$66,552	13,994	11.6	22,118	19.4%
Campbell	39,385	39,040	-0.9%	39,385	39,040	-0.9%	0.53%	44.2	\$51,557	7,447	18.9	10,995	27.9%
Cannon	15,075	15,283	1.4%	15,075	15,283	1.4%	0.21%	40.8	\$59,442	2,397	14.1	2,861	19.0%
Carroll	28,559	28,564	0.0%	28,559	28,564	0.0%	0.39%	41.6	\$51,787	4,508	16.5	6,880	24.1%
Carter	55,741	54,921	-1.5%	55,741	54,921	-1.5%	0.74%	45.8	\$50,135	9,851	16.1	11,281	20.2%
Cheatham	42,603	43,156	1.3%	42,603	43,156	1.3%	0.58%	41.4	\$89,852	3,330	8.4	5,942	13.9%
Chester	17,741	17,797	0.3%	17,741	17,797	0.3%	0.24%	37.8	\$59,341	2,517	12.5	3,381	19.1%
Claiborne	32,413	32,276	-0.4%	32,413	32,276	-0.4%	0.44%	42.5	\$49,379	5,599	16.4	8,338	25.7%
Clay	7,499	7,370	-1.7%	7,499	7,370	-1.7%	0.10%	48.8	\$39,972	1,639	19.7	1,780	23.7%
Cocke	37,242	37,372	0.3%	37,242	37,372	0.3%	0.50%	45.4	\$48,016	7,275	20.9	10,857	29.2%
Coffee	61,896	63,886	3.2%	61,896	63,886	3.2%	0.86%	39.2	\$61,505	9,391	15.5	13,445	21.7%
Crockett	13,818	13,727	-0.7%	13,818	13,727	-0.7%	0.19%	40.2	\$62,165	2,028	14	3,331	24.1%
Cumberland	65,861	67,514	2.5%	65,861	67,514	2.5%	0.91%	53.0	\$60,375	8,307	13.2	11,978	18.2%
Davidson	728,443	748,344	2.7%	728,443	748,344	2.7%	10.10%	34.8	\$77,853	95,838	12.2	127,178	17.5%
Decatur	11,549	11,494	-0.5%	11,549	11,494	-0.5%	0.16%	45.9	\$45,375	2,442	15	2,635	22.8%
DeKalb	21,727	22,316	2.7%	21,727	22,316	2.7%	0.30%	42.2	\$53,153	4,323	13.9	4,940	22.7%
Dickson	57,739	59,394	2.9%	57,739	59,394	2.9%	0.80%	39.0	\$75,003	5,375	10.1	10,657	18.5%
Dyer	36,105	35,690	-1.1%	36,105	35,690	-1.1%	0.48%	40.0	\$58,154	6,454	14.3	9,624	26.7%
Fayette	44,948	45,972	2.3%	44,948	45,972	2.3%	0.62%	47.2	\$88,456	4,564	9.3	6,128	13.6%
Fentress	19,687	19,880	1.0%	19,687	19,880	1.0%	0.27%	47.0	\$51,149	3,873	19	5,499	27.9%
Franklin	44,787	45,420	1.4%	44,787	45,420	1.4%	0.61%	42.7	\$63,494	5,230	12	7,549	16.9%
Gibson	51,352	51,761	0.8%	51,352	51,761	0.8%	0.70%	39.8	\$62,755	6,644	14.4	11,595	22.6%
Giles	30,757	30,899	0.5%	30,757	30,899	0.5%	0.42%	43.6	\$62,307	4,232	13.3	5,915	19.2%
Grainger	24,579	24,753	0.7%	24,579	24,753	0.7%	0.33%	45.7	\$50,538	3,884	14.2	5,627	22.9%
Greene	72,656	73,351	1.0%	72,656	73,351	1.0%	0.99%	44.9	\$56,194	10,458	16.3	15,192	20.9%
Grundy	13,743	13,664	-0.6%	13,743	13,664	-0.6%	0.18%	42.9	\$47,593	2,569	20.2	3,943	28.7%
Hamblen	66,340	67,301	1.4%	66,340	67,301	1.4%	0.91%	40.1	\$55,454	10,970	14.8	15,907	24.0%

Hamilton	385,843	395,600	2.5%	385,843	395,600	2.5%	5.34%	40.2	\$76,183	45,380	14.5	63,335	16.4%
Hancock	6,810	6,740	-1.0%	6,810	6,740	-1.0%	0.09%	41.9	\$34,960	2,078	26.1	2,110	31.0%
Hardeman	25,028	24,488	-2.2%	25,028	24,488	-2.2%	0.33%	40.4	\$46,069	3,789	21.5	6,410	25.6%
Hardin	27,405	27,580	0.6%	27,405	27,580	0.6%	0.37%	45.4	\$49,956	5,508	18	6,553	23.9%
Hawkins	58,537	58,654	0.2%	58,537	58,654	0.2%	0.79%	45.9	\$56,936	9,725	13.6	12,807	21.9%
Haywood	17,222	16,856	-2.1%	17,222	16,856	-2.1%	0.23%	43.1	\$50,472	3,968	19.8	4,635	26.9%
Henderson	27,958	27,882	-0.3%	27,958	27,882	-0.3%	0.38%	40.3	\$55,136	4,616	14.4	6,816	24.4%
Henry	32,439	32,368	-0.2%	32,439	32,368	-0.2%	0.44%	45.8	\$50,613	5,824	17.1	7,305	22.5%
Hickman	25,688	25,781	0.4%	25,688	25,781	0.4%	0.35%	41.7	\$68,247	3,330	13.2	5,165	20.1%
Houston	8,181	8,131	-0.6%	8,181	8,131	-0.6%	0.11%	44.2	\$59,576	1,106	15.6	1,837	22.5%
Humphreys	19,372	19,525	0.8%	19,372	19,525	0.8%	0.26%	43.7	\$60,616	2,548	12.2	4,048	20.9%
Jackson	12,180	12,277	0.8%	12,180	12,277	0.8%	0.17%	48.0	\$47,951	2,412	16.3	2,733	22.4%
Jefferson	58,783	60,245	2.5%	58,783	60,245	2.5%	0.81%	44.1	\$66,114	6,229	12.1	12,339	21.0%
Johnson	18,008	17,844	-0.9%	18,008	17,844	-0.9%	0.24%	46.4	\$53,129	3,583	20.9	3,955	22.0%
Knox	508,654	521,808	2.6%	508,654	521,808	2.6%	7.04%	37.5	\$74,222	58,146	12.8	74,174	14.6%
Lake	6,376	6,178	-3.1%	6,376	6,178	-3.1%	0.08%	41.6	\$28,814	1,453	31.2	1,769	27.7%
Lauderdale	24,139	23,432	-2.9%	24,139	23,432	-2.9%	0.32%	39.4	\$49,879	4,252	20.7	6,678	27.7%
Lawrence	46,311	47,052	1.6%	46,311	47,052	1.6%	0.63%	39.0	\$54,706	6,748	13.9	9,913	21.4%
Lewis	13,172	13,334	1.2%	13,172	13,334	1.2%	0.18%	42.2	\$56,285	1,986	14.1	2,973	22.6%
Lincoln	36,570	37,055	1.3%	36,570	37,055	1.3%	0.50%	43.0	\$64,667	4,359	12.1	7,101	19.4%
Loudon	61,596	64,471	4.7%	61,596	64,471	4.7%	0.87%	48.7	\$84,185	7,159	9	9,344	15.2%
McMinn	55,752	56,485	1.3%	55,752	56,485	1.3%	0.76%	42.5	\$61,470	3,871	13.7	6,568	11.8%
McNairy	26,089	26,078	0.0%	26,089	26,078	0.0%	0.35%	43.1	\$53,473	17,648	16.7	23,979	91.9%
Macon	27,378	28,444	3.9%	27,378	28,444	3.9%	0.38%	38.3	\$59,177	4,854	16	6,244	22.8%
Madison	99,089	98,555	-0.5%	99,089	98,555	-0.5%	1.33%	39.0	\$60,042	4,943	17.5	6,651	6.7%
Marion	29,265	29,303	0.1%	29,265	29,303	0.1%	0.40%	43.7	\$61,824	10,294	13.8	19,165	65.5%
Marshall	37,788	39,397	4.3%	37,788	39,397	4.3%	0.53%	39.6	\$71,049	7,011	9	12,733	33.7%
Mauzy	116,119	123,660	6.5%	116,119	123,660	6.5%	1.67%	37.9	\$76,130	4,114	8.7	6,308	5.4%
Meigs	13,769	14,149	2.8%	13,769	14,149	2.8%	0.19%	45.5	\$61,375	1,853	14.5	3,184	23.1%
Monroe	48,951	49,711	1.6%	48,951	49,711	1.6%	0.67%	44.8	\$56,895	7,366	12.6	11,122	22.7%
Montgomery	251,815	268,290	6.5%	251,815	268,290	6.5%	3.62%	32.5	\$75,613	25,939	10.2	43,573	17.3%
Moore	6,795	6,840	0.7%	6,795	6,840	0.7%	0.09%	46.2	\$66,496	732	8.9	827	12.2%
Morgan	21,091	20,806	-1.4%	21,091	20,806	-1.4%	0.28%	42.5	\$65,954	3,544	16.6	4,072	19.3%
Obion	30,207	29,907	-1.0%	30,207	29,907	-1.0%	0.40%	41.9	\$54,613	5,121	15.6	7,088	23.5%
Overton	23,336	23,525	0.8%	23,336	23,525	0.8%	0.32%	43.1	\$48,959	4,048	13.5	4,727	20.3%
Perry	8,952	9,153	2.2%	8,952	9,153	2.2%	0.12%	41.6	\$55,972	1,483	15.9	1,931	21.6%
Pickett	5,048	4,989	-1.2%	5,048	4,989	-1.2%	0.07%	51.7	\$49,030	1292	15.8	1,086	21.5%
Polk	18,244	18,500	1.4%	18,244	18,500	1.4%	0.25%	46.2	\$62,522	2,314	14.6	3,771	20.7%
Putnam	85,418	87,978	3.0%	85,418	87,978	3.0%	1.19%	36.5	\$58,912	13,172	18.4	17,759	20.8%

Rhea	33,948	34,085	0.4%	33,948	34,085	0.4%	0.46%	41.0	\$55,033	4,998	14	8,149	24.0%
Roane	55,607	55,778	0.3%	55,607	55,778	0.3%	0.75%	47.4	\$71,885	6,854	12.1	10,819	19.5%
Robertson	77,700	79,710	2.6%	77,700	79,710	2.6%	1.08%	38.9	\$83,047	7,503	9.2	12,927	16.6%
Rutherford	388,909	415,694	6.9%	388,909	415,694	6.9%	5.61%	34.6	\$85,470	31,796	10	60,450	15.5%
Scott	21,975	21,863	-0.5%	21,975	21,863	-0.5%	0.30%	40.7	\$44,711	5,338	17.7	6,962	31.7%
Sequatchie	17,603	18,204	3.4%	17,603	18,204	3.4%	0.25%	44.7	\$58,750	3,812	15.4	3,704	21.0%
Sevier	101,026	102,966	1.9%	101,026	102,966	1.9%	1.39%	43.4	\$62,581	13,285	13.2	18,599	18.4%
Shelby	911,049	904,554	-0.7%	911,049	904,554	-0.7%	12.21%	36.0	\$63,767	158,883	19	231,095	25.4%
Smith	20,715	20,871	0.8%	20,715	20,871	0.8%	0.28%	40.7	\$66,293	2,656	11.6	4,016	19.4%
Stewart	14,231	14,369	1.0%	14,231	14,369	1.0%	0.19%	44.6	\$63,114	1,648	17.1	2,789	19.6%
Sullivan	164,002	166,122	1.3%	164,002	166,122	1.3%	2.24%	45.4	\$58,807	23,495	15.7	30,258	18.4%
Sumner	215,234	226,250	5.1%	215,234	226,250	5.1%	3.05%	39.4	\$90,301	17,768	8.3	28,805	13.4%
Tipton	62,044	62,080	0.1%	62,044	62,080	0.1%	0.84%	38.7	\$74,127	7,004	13.6	11,513	18.6%
Trousdale	12,512	12,825	2.5%	12,512	12,825	2.5%	0.17%	34.6	\$72,747	953	14.5	2,047	16.4%
Unicoi	17,613	17,472	-0.8%	17,613	17,472	-0.8%	0.24%	47.4	\$52,218	2,461	14.4	3,524	20.0%
Union	20,745	20,926	0.9%	20,745	20,926	0.9%	0.28%	42.4	\$62,727	2,773	17.4	5,016	24.2%
Van Buren	6,604	6,748	2.2%	6,604	6,748	2.2%	0.09%	47.2	\$54,931	843	14.9	1,262	19.1%
Warren	42,888	43,540	1.5%	42,888	43,540	1.5%	0.59%	40.0	\$55,487	6,286	15.2	10,834	25.3%
Washington	140,553	143,951	2.4%	140,553	143,951	2.4%	1.94%	41.4	\$62,809	20,590	13	22,751	16.2%
Wayne	16,112	15,869	-1.5%	16,112	15,869	-1.5%	0.21%	44.3	\$52,294	2,669	18.8	2,898	18.0%
Weakley	32,535	31,915	-1.9%	32,535	31,915	-1.9%	0.43%	37.9	\$51,880	5,945	17.3	6,799	20.9%
White	28,569	28,977	1.4%	28,569	28,977	1.4%	0.39%	43.3	\$52,188	4,038	11.6	6,874	24.1%
Williamson	277,193	293,501	5.9%	277,193	293,501	5.9%	3.96%	40.8	\$135,594	11,423	4.5	13,402	4.8%
Wilson	171,708	183,713	7.0%	171,708	183,713	7.0%	2.48%	40.3	\$95,839	11,509	7.3	21,568	12.6%
Service Area Total	7,242,733	7,410,264	2.3%	7,242,733	7,410,264	2.3%	100.00%	39.1	\$69,595	940,092	14.7	1,361,893	18.8%
State of TN Total	7,242,733	7,410,264	2.3%	7,242,733	7,410,264	2.3%	100.00%	39.1	\$69,595	940,092	14.7	1,361,893	18.7%

Provide the following data for each county in the service area: Using current and projected population data from the Department of Health. (www.tn.gov/health/health-program-areas/statistics/health-data/population.html); the most recent enrollee data from the Division of TennCare (<https://www.tn.gov/tenncare/information-statistics/enrollment-data.html>), and US Census Bureau demographic information (<https://www.census.gov/quickfacts/fact/table/US/PST045219>).

ATTACHMENT 5N

CERTIFICATE OF NEED INFORMATION FOR OTHER SERVICE AREA FACILITIES

In the past five (5) years the applicant is unaware of any denied applications for other entities proposing this type of home health “infusion only” service.

Currently Pending Applications for Home Health “Infusion Only” Service

None

Recently Approved Applications for Home Health “Infusion Only” Service which are not yet licensed (see the following page)

OPTIV Infusion, LLC, CN2602-006A
April 22, 2026

The establishment of home care organization and the initiation of home health services located at 1600 Breda Drive, Floor B, Knoxville (Knox County), TN 37918. The proposed home health agency will be limited to home infusion and related nursing services for pharmacy patients of OPTIVRX, LLC. The proposed service area will represent a 29-County service area that includes Anderson, Bledsoe, Blount, Campbell, Carter, Claiborne, Cocke, Cumberland, Fentress, Grainger, Greene, Hamblen, Hancock, Hawkins, Jefferson, Johnson, Knox, Loudon, McMinn, Meigs, Monroe, Rhea, Roane, Scott, Sevier, Sullivan, Unicoi, Union, and Washington Counties. The applicant is owned by OPTIVRX Infusion, LLC.

River City Infusion, LLC, CN2511-042A
February 25, 2026

The establishment of a home care organization and the initiation of home health services limited to home infusion and related nursing services for pharmacy patients of RCIV, LLC d/b/a Vital Care of Chattanooga. The project will serve a proposed service area of 95 counties. The address of the project will be 1200 Mountain Creek Road, Suite 440, Chattanooga, (Hamilton County), Tennessee 37405. The applicant is owned by River City Infusion, LLC.

Naven Health, Inc., CN2604-009
June 24, 2026

The establishment of a home care organization and the initiation of home health services, limited to home infusion services, with a proposed service area of 95 counties, located at 9041 Executive Park Dr., Suite 250, Room 6, Knoxville (Knox County), Tennessee 37923. The applicant is owned by SPNN Holdings, LLC which is ultimately owned by Option Care Enterprises, Inc.

ATTACHMENT SM

Sample Medications Data

Medication sourcing protocol - Requirements to use a participating specialty pharmacy for certain medications

UnitedHealthcare commercial plans

To support the provider/patient relationship, participating outpatient providers are required to obtain certain drugs from indicated specialty pharmacies unless otherwise authorized by UnitedHealthcare. The tables below include drugs that require sourcing for all outpatient places of service and/or drugs only requiring sourcing when administered in the outpatient hospital setting.

When one of these medications is appropriately obtained through the indicated specialty pharmacy, the specialty pharmacy will bill UnitedHealthcare directly for the drug under the member's medical benefit. Outpatient providers may only seek reimbursement for administering the medication. Outpatient providers may not bill the member for the medication.

Outpatient providers can contact their Network Contractor with any questions regarding the various contracts/fee schedules for each drug listed below.

This protocol works in conjunction with all UnitedHealthcare policies and protocols and does not replace or supersede them.

Please note: The specialty pharmacy protocol is subject to applicable state laws and regulations and does not apply to UnitedHealthcare West, UMR, Student Resources, UnitedHealthOne and Sierra plan members.

Medication sourcing protocol – all outpatient providers

Places of service: Outpatient hospital, physician office, home, ambulatory infusion

The protocol for the drugs listed in the table below does not apply to providers in Maryland. The protocol is subject to applicable state laws, which may exclude certain plans from the requirements.

Disclaimer: Inclusion in this list does not indicate a drug is covered by a particular plan. Any drug may be subject to other requirements, including but not limited to Review at Launch and/or Medical Benefit Therapeutic Equivalent Medications – Drug Exclusion.

Medication	Therapeutic class	Code(s)	Specialty pharmacy
Beqvez™	Gene therapy	J1414	Please contact Provider Services at the number on the back of the member ID card for available options.
Brineura®	Enzyme replacement therapy	J0567	Orsini Pharmaceutical Services Phone: 800-240-9572 Fax: 847-427-7976

Medication	Therapeutic class	Code(s)	Specialty pharmacy
Elevidys®	Gene therapy	J1413	Accredo Health Group Phone: 877-222-7336 Fax: 866-579-4655 Optum® Frontier Therapies Phone: 855-768-9727 Fax: 866-991-9929
Gamifant®	Immune modulator	J9210	Biologics, Inc. Phone: 800-850-4306 Fax: 800-823-4506
Hemgenix™	Gene therapy	J1411	Please contact Provider Services at the number on the back of the member ID card for available options.
Luxturna®	Gene therapy	J3398	Accredo Health Group Phone: 877-222-7336 Fax: 866-579-4655
Roctavian™	Gene therapy	J1412	Please contact Provider Services at the number on the back of the member ID card for available options.
Spinraza®	Spinal muscular atrophy	J2326	Accredo Health Group Phone: 877-222-7336 Fax: 866-579-4655
Vyjuvek™	Gene therapy	J3401	Option Care Health Phone: 833-730-HOPD (4673) Fax: 888-979-8904
Zolgensma®	Gene therapy	J3399	Accredo Health Group Customer Service phone: 877-787-8704 Clinician phone: 800-987-5254 Fax: 877-327-8413 Orsini Pharmaceutical Services, LLC Phone: 800-697-5048 Fax: 877-471-5704

Medication sourcing protocol – outpatient hospital only

The national ancillary network infusion provider column in the table below includes some, but not all, home and/or ambulatory infusion providers that may be used for alternate site of care treatment locations, if appropriate. Providers may use national and regional UnitedHealthcare contracted infusion providers not included in the provided list.

The specialty pharmacy list does not apply to providers in Kentucky, Maryland or Rhode Island. The protocol is subject to applicable state laws, which may exclude certain plans from the requirements.

Medication name	Therapeutic class	Code(s)	Specialty pharmacy	National ancillary network infusion provider(s)
Actemra®	Inflammatory conditions	J3262	Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Optum Specialty Pharmacy	Amerita CarePoint Infusion Center Metro Infusion Center
Adakveo®	Sickle cell disease	J0791	Amber Specialty Pharmacy Caremark (CVS Specialty) Optum Specialty Pharmacy	AleraCare FloMed Infusion Services Metro Infusion Center
Adzynma™	Enzyme replacement therapy	J7171	Orsini Pharmaceutical Services	Option Care Health
Aldurazyme®	Enzyme replacement therapy	J1931	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Optum Specialty Pharmacy Orsini Pharmaceutical Services	Metro Infusion Center AleraCare Amerita
Alyglo™	Immune globulin	J1552	Accredo Health Group	Option Care Health Vital Care Infusion Services Soleo Health
Amondys-45	CNS agents	J1426	Option Care Health Orsini Pharmaceutical Services	Option Care Health
Amvuttra™	CNS agents	J0225	Orsini Pharmaceutical Services PANTHERx Rare Pharmacy	Option Care Health Metro Infusion Center AleraCare
Aralast NP®	Alpha1-proteinase inhibitors	J0256	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Vital Care Infusion Services	AleraCare Amerita FloMed Infusion Services

Medication name	Therapeutic class	Code(s)	Specialty pharmacy	National ancillary network infusion provider(s)
Asceniv™	Immune globulin	J1554	Accredo Health Group Amber Specialty Pharmacy	CarePoint Infusion Center Option Care Health Soleo Health
Avsola™	Inflammatory conditions	Q5121	Amber Specialty Pharmacy	Metro Infusion Center IVX Health Option Care Health
Benlysta	Monoclonal antibody miscellaneous	J0490	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Optum Specialty Pharmacy	CarePoint Infusion Center FloMed Infusion Services Amerita
Beovu®	VEGF	J0179	Accredo Health Group Amber Specialty Pharmacy Optum Specialty Pharmacy	
Bivigam™	Immune globulin	J1556	Amber Specialty Pharmacy Optum Infusion	AleraCare Amerita CarePoint Infusion Center
Briumvi™	Multiple sclerosis	J2329	Option Care Health Optum Specialty Pharmacy	AleraCare FloMed Infusion Services Metro Infusion Center
Byooviz™	VEGF	Q5124	Accredo Health Group	Option Care Health
Cerezyme™	Enzyme deficiency (Gaucher disease)	J1786	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Optum Specialty Pharmacy Orsini Pharmaceutical Services	AleraCare FloMed Infusion Services Metro Infusion Center
Cimzia®	Inflammatory conditions	J0717	Accredo Health Group Amber Specialty Pharmacy Optum Specialty Pharmacy	FloMed Infusion Services Metro Infusion Center Palmetto Infusion Services

Medication name	Therapeutic class	Code(s)	Specialty pharmacy	National ancillary network infusion provider(s)
Cinqair®	Asthma	J2786	Amber Specialty Pharmacy Caremark (CVS Specialty) Optum Specialty Pharmacy	Amerita CarePoint Infusion Center FloMed Infusion Services
Cosentyx® IV	Inflammatory conditions	J3247	Caremark (CVS Specialty)	Option Care Health FloMed Infusion Services
Crysvita®	Endocrine	J0584	Accredo Health Group Amber Specialty Pharmacy Caremark (CVS Specialty) Orsini Pharmaceutical Services PANTHERx Rare Pharmacy	PromptCare Home Infusion Vital Care Infusion Services AleraCare
Cutaquig®	Immune globulin	J1551	Accredo Health Group Amber Specialty Pharmacy Optum Infusion	Option Care Health PromptCare Home Infusion Soleo Health
Cuvitru™	Immune globulin	J1555	Accredo Health Group Optum Infusion	AleraCare FloMed Infusion Services Metro Infusion Center
Elaprase®	Enzyme replacement therapy	J1743	Accredo Health Group Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Optum Specialty Pharmacy Orsini Pharmaceutical Services	AleraCare Amerita FloMed Infusion Services
Elelyso®	Enzyme deficiency (Gaucher disease)	J3060	Accredo Health Group Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Orsini Pharmaceutical Services	AleraCare FloMed Infusion Services Metro Infusion Center
Elfabrio®	Enzyme replacement therapy	J2508	Eversana	Option Care Health
Encelto™	Gene therapy	J3403	Orsini Pharmaceutical Services	
Enjaymo™	Blood-modifying agents	J1302	Caremark (CVS Specialty)	Option Care Health

Medication name	Therapeutic class	Code(s)	Specialty pharmacy	National ancillary network infusion provider(s)
Entyvio®	Inflammatory conditions	J3380	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Optum Specialty Pharmacy Vital Care Infusion Services	Metro Infusion Center FloMed Infusion Services CarePoint Infusion Center
Evkeeza™	Rare conditions	J1305	Orsini Pharmaceutical Services	Option Care Health Metro Infusion Center Palmetto Infusion Services
Exondys 51®	CNS agents	J1428	Amber Specialty Pharmacy Option Care Health Orsini Pharmaceutical Services	Metro Infusion Center Amerita PromptCare Home Infusion
Fabrazyme®	Enzyme replacement therapy	J0180	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Optum Specialty Pharmacy Orsini Pharmaceutical Services	PromptCare Home Infusion AleraCare FloMed Infusion Services
Fasenra®	Asthma	J0517	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Caremark (CVS Specialty) Optum Specialty Pharmacy	FloMed Infusion Services AleraCare PromptCare Home Infusion
Gammagard Liquid®	Immune globulin	J1569	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Caremark (CVS Specialty) Optum Infusion	FloMed Infusion Services CarePoint Infusion Center Palmetto Infusion Services
Gammagard S/D	Immune globulin	J1566	Accredo Health Group AllianceRx Walgreens Pharmacy Optum Infusion	IVX Health Metro Infusion Services PromptCare Home Infusion

Medication name	Therapeutic class	Code(s)	Specialty pharmacy	National ancillary network infusion provider(s)
Gammaked®	Immune globulin	J1561	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Optum Infusion Vital Care Infusion Services	AleraCare FloMed Infusion Services Option Care Health
Gammaplex®	0.125 in	J1557	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Optum Infusion Vital Care Infusion Services	AleraCare FloMed Infusion Services Amerita
Gamunex-C®	Immune globulin	J1561	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Caremark (CVS Specialty) Optum Infusion Vital Care Infusion Services	FloMed Infusion Services CarePoint Infusion Center Palmetto Infusion Services
Givlaari®	Blood-modifying agents	J0223	Accredo Health Group PANTHERx Rare Pharmacy	Metro Infusion Center Palmetto Infusion Services Amerita
Glassia®	Alpha1-proteinase inhibitors	J0257	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Vital Care Infusion Services	FloMed Infusion Services AleraCare Amerita
Hizentra®	Immune globulin	J1559	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Optum Infusion	AleraCare FloMed Infusion Services Metro Infusion Center
HyQvia®	Immune globulin	J1575	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Optum Infusion	AleraCare Amerita CarePoint Infusion Center

Medication name	Therapeutic class	Code(s)	Specialty pharmacy	National ancillary network infusion provider(s)
Ilaris®	Immune modulator	J0638	Accredo Health Group Caremark (CVS Specialty)	AleraCare FloMed Infusion Services CarePoint Infusion Center
Ilumya™	Inflammatory conditions	J3245	Accredo Health Group Amber Specialty Pharmacy Caremark (CVS Specialty) Optum Specialty Pharmacy	IVX Health AleraCare FloMed Infusion Services
Inflectra	Inflammatory conditions	Q5103	Accredo Health Group Amber Specialty Pharmacy Optum Specialty Pharmacy Vital Care Infusion Services	Option Care Health FloMed Infusion Services Metro Infusion Center
Izervay™	Complement inhibitor – ophthalmologic use	J2782	Amber Specialty Pharmacy	Option Care Health
Kanuma®	Enzyme replacement therapy	J2840	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Optum Specialty Pharmacy Orsini Pharmaceutical Services	Palmetto Infusion Services AleraCare Amerita
Kisunla™	CNS agents	J0175	Accredo Health Group	Option Care Health FloMed Infusion Services AleraCare
Krystexxa®	Anti-gout agents	J2507	Accredo Health Group Caremark (CVS Specialty) Optum Specialty Pharmacy	AleraCare CarePoint Infusion Center Palmetto Infusion Services
Lamzed®	Enzyme replacement therapy	J0217	Eversana	Option Care Health
Lemtrada®	Multiple sclerosis	J0202	Accredo Health Group Caremark (CVS Specialty) Optum Specialty Pharmacy	AleraCare FloMed Infusion Services Metro Infusion Center

Medication name	Therapeutic class	Code(s)	Specialty pharmacy	National ancillary network infusion provider(s)
Leqembi®	CNS agents	J0174	CareMed	Option Care Health AleraCare FloMed Infusion Services
Leqvio®	Cardiology	J1306	Amber Specialty Pharmacy Orsini Pharmaceutical Services Vital Care Infusion Services	Palmetto Infusion Services Vital Care Infusion Services
Lumizyme®	Enzyme replacement therapy	J0221	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Optum Specialty Pharmacy Orsini Pharmaceutical Services	AleraCare FloMed Infusion Services Amerita
Mepsevii™	Enzyme replacement therapy	J3397	Accredo Health Group	Metro Infusion Center
Naglazyme®	Enzyme replacement therapy	J1458	Accredo Health Group AllianceRx Walgreens Pharmacy Caremark (CVS Specialty) Option Care Health Optum Specialty Pharmacy Orsini Pharmaceutical Services	Metro Infusion Center Option Care Health Soleo Health
Nexviazyme™	Enzyme replacement therapy	J0219	Accredo Health Group Amber Specialty Pharmacy Option Care Health Orsini Pharmaceutical Services	Option Care Health Vital Care Infusion Services IVX Health
Niktimvo™	Hematologic	J9038	Caremark (CVS Specialty)	
Nucala®	Asthma	J2182	Accredo Health Group Amber Specialty Pharmacy Optum Specialty Pharmacy Vital Care Infusion Services	Vivo Infusion AleraCare FloMed Infusion Services
Nulibry®	Enzyme replacement therapy	J1809	Biologics, Inc.	

Medication name	Therapeutic class	Code(s)	Specialty pharmacy	National ancillary network infusion provider(s)
Ocrevus®	Multiple sclerosis	J2350	Accredo Health Group Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Optum Specialty Pharmacy	AleraCare Amerita FloMed Infusion Services
Ocrevus Zunovo™	Multiple sclerosis	J2351	Accredo Health Group Optum Specialty Pharmacy	
Octagam™	Immune globulin	J1568	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Optum Infusion Vital Care Infusion Services	AleraCare FloMed Infusion Services Palmetto Infusion Services
OmvoH™ IV	Inflammatory conditions	J2267	Amber Specialty Pharmacy	Flomed Infusion Services IVX Health
Onpattro®	CNS agents	J0222	Caremark (CVS Specialty) Orsini Pharmaceutical Services	AleraCare Amerita FloMed Infusion Services
Orencia IV®	Inflammatory conditions	J0129	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Optum Specialty Pharmacy	AleraCare CarePoint Infusion Center FloMed Infusion Services
Otulfi™	Inflammatory conditions	Q9999	Amber Specialty Pharmacy Optum Specialty Pharmacy	
Oxlumo®	Endocrine	J0224	Orsini Pharmaceutical Services PANTHERx Rare Pharmacy	Metro Infusion Center Soleo Health IVX Health
Panzyga®	Immune globulin	J1576	Accredo Health Group Amber Specialty Pharmacy Optum Infusion Vital Care Infusion Services	AleraCare FloMed Infusion Services Amerita
PiaSky™	Blood modifying agents	J1307	Accredo Health Group	Option Care Health
Pombiliti™	Enzyme replacement therapy	J1203	Orsini Pharmaceutical Services	Option Care Health

Medication name	Therapeutic class	Code(s)	Specialty pharmacy	National ancillary network infusion provider(s)
Privigen™	Immune globulin	J1459	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Caremark (CVS Specialty) Optum Infusion Vital Care Infusion Services	Palmetto Infusion Services IVX Health Option Care Health
Prolastin-C®	Alpha1-proteinase inhibitors	J0256	Accredo Health Group	FloMed Infusion Palmetto infusion services Metro Infusion Center
Pyzchiva™ SC	Inflammatory conditions	Q9996	Amber Specialty Pharmacy	
Pyzchiva™ IV	Inflammatory conditions	Q9997	Amber Specialty Pharmacy	
Qalsody™	CNS agents	J1304	Optum Frontier Therapies	Option Care Health
Radicava®	CNS agents	J1301	AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Option Care Health	AleraCare CarePoint Infusion Center Palmetto Infusion Services
Reblozyl®	Anemia	J0896	Amber Specialty Pharmacy Caremark (CVS Specialty) Optum Specialty Pharmacy	Metro Infusion Center Soleo Health
Remicade®	Inflammatory conditions	J1745	Amber Specialty Pharmacy Option Care Health Vital Care Infusion Services	FloMed Infusion Services AleraCare Amerita
Renflexis®	Inflammatory conditions	Q5104	Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Optum Specialty Pharmacy Vital Care Infusion Services	Option Care Health FloMed Infusion Services Metro Infusion Center
Revcovi®	Enzyme replacement therapy	J3590 C9399	AllianceRx Walgreens Pharmacy Eversana	
Rivfloza™	Endocrine	J3490 J3590 C9399	Caremark (CVS Specialty)	
Ryplazim®	Rare conditions	J2998	Nufactor, Inc.	Soleo Health

Medication name	Therapeutic class	Code(s)	Specialty pharmacy	National ancillary network infusion provider(s)
Rystiggo™	CNS agents	J9333	PANTHERx Rare Pharmacy	AleraCare FloMed Infusion Services Metro Infusion Center
Saphnelo®	Immune modulator	J0491	Amber Specialty Pharmacy Caremark (CVS Specialty)	Option Care Health AleraCare FloMed Infusion Services
Selarsdi™	Inflammatory conditions	Q9998	Amber Specialty Pharmacy	
Simponi Aria®	Inflammatory conditions	J1602	Amber Specialty Pharmacy Option Care Health	AleraCare FloMed Infusion Services Option Care Health
Skyrizi®	Inflammatory conditions	J2327	Option Care Health Vital Care Infusion Services	AleraCare FloMed Infusion Services Metro Infusion Center
Soliris®	Blood-modifying agents	J1299	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Optum Specialty Pharmacy	Metro Infusion Services CarePoint Infusion Center AleraCare
Spevigo™	Inflammatory conditions	J1747	Accredo Health Group	Option Care Health Amerita FloMed Infusion Services
Stelara®	Inflammatory conditions	J3358	Amber Specialty Pharmacy Option Care Health Vital Care Infusion Services	AleraCare CarePoint Infusion Center FloMed Infusion Services
Steqeyma™	Inflammatory conditions	Q5099	Accredo Health Group Caremark (CVS Specialty)	Amerita Optum Infusion Vivo Infusion
Syfovre™	Complement inhibitor – ophthalmologic use	J2781	Optum Specialty Pharmacy	Option Care Health

Medication name	Therapeutic class	Code(s)	Specialty pharmacy	National ancillary network infusion provider(s)
Synagis®	RSV prevention	90378	AllianceRx Walgreens Pharmacy Option Care Health Optum Specialty Pharmacy	PromptCare Home Infusion Option Care Health
Tepezza®	Endocrine	J3241	Accredo Health Group Amber Specialty Pharmacy Option Care Health Vital Care Infusion Services	Metro Infusion Center Palmetto Infusion Services AleraCare
Tezspire™	Asthma	J2356	Accredo Health Group Amber Specialty Pharmacy Caremark (CVS Specialty) Optum Specialty Pharmacy	Option Care Health AleraCare Metro Infusion Center
Tofidence™	Inflammatory conditions	Q5133	Amber Specialty Pharmacy	Vital Care Infusion Services Option Care Health
Tremfya™ IV	Inflammatory conditions	J1628	Accredo Health Group Caremark (CVS Specialty)	FloMed Infusion Services Metro Infusion Center
Tyenne™	Inflammatory conditions	Q5135	Amber Specialty Pharmacy	Option Care Health
Tysabri™	Multiple sclerosis	J2323	AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Option Care Health Optum Specialty Pharmacy	AleraCare FloMed Infusion Services Metro Infusion Center
Tzield™	Immune modulator	J9381	Orsini Pharmaceutical Services	Option Care Health Amerita
Ultomiris®	Blood-modifying agents	J1303	Accredo Health Group Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Optum Specialty Pharmacy	Amerita CarePoint Infusion Center
Uplizna®	Immune modulator	J1823	Accredo Health Group PANTHERx Rare Pharmacy Vital Care Infusion Services	AleraCare Amerita FloMed Infusion Services
Veopoz™	Blood-modifying agents	J9376	Orsini Pharmaceutical Services	Option Care Health

Medication name	Therapeutic class	Code(s)	Specialty pharmacy	National ancillary network infusion provider(s)
Viltepso®	CNS agents	J1427	Amber Specialty Pharmacy Option Care Health Orsini Pharmaceutical Services	Soleo Health Option Care Health
Vimizim®	Enzyme replacement therapy	J1322	Accredo Health Group AllianceRx Walgreens Pharmacy Caremark (CVS Specialty) Option Care Health Orsini Pharmaceutical Services	AleraCare FloMed Infusion Services Option Care Health
VPRIV®	Enzyme deficiency (Gaucher disease)	J3385	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Amber Specialty Pharmacy Option Care Health Optum Specialty Pharmacy Orsini Pharmaceutical Services	PromptCare Home Infusion AleraCare Amerita
Vyepti™	CNS agents	J3032	AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Option Care Health Orsini Pharmaceutical Services Vital Care Infusion Services	AleraCare Metro Infusion Center Palmetto Infusion Services
Vyondys-53®	CNS agents	J1429	Amber Specialty Pharmacy Option Care Health Orsini Pharmaceutical Services	Metro Infusion Center Amerita PromptCare Home Infusion
Vyvgart®	CNS agents	J9332	Accredo Health Group Caremark (CVS Pharmacy)	Vivo Infusion Palmetto Infusion Services
Vyvgart® Hytrulo®	CNS agent	J9334	Accredo Health Group Amber Specialty Pharmacy	FloMed Infusion Services PromptCare Home Infusion
Wezlana™ SC	Inflammatory conditions	Q5137	Optum Specialty Pharmacy	
Wezlana™ IV	Inflammatory conditions	Q5138	Optum Specialty Pharmacy	

Medication name	Therapeutic class	Code(s)	Specialty pharmacy	National ancillary network infusion provider(s)
Xembify®	Immune globulin	J1558	Accredo Health Group Amber Specialty Pharmacy Optum Infusion	Amerita Option Care Health Palmetto Infusion Services
Xenpozine®	Enzyme replacement therapy	J0218	Caremark (CVS Specialty) Option Care Health	Option Care Health
Xiaflex®	Peyronie's disease, Dupuytren's contracture	J0775	Caremark (CVS Specialty) Optum Specialty Pharmacy	
Xolair®	Asthma	J2357	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Optum Specialty Pharmacy	IVX Health AleraCare FloMed Infusion Services
Yesintek™	Inflammatory conditions	Q5100	Accredo Health Group Caremark (CVS Specialty) Optum Specialty Pharmacy	Amerita Optum Infusion Vivo Infusion
Zemaira®	Alpha1-proteinase inhibitors	J0256	Accredo Health Group Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health	AleraCare Amerita FloMed Infusion Services



Specialty pharmacy contacts

Accredo Health Group

- Specialty drugs

Phone: **877-222-7336**

Fax: 866-579-4655

Enrollment form

AllianceRx Walgreens Pharmacy

Phone: **888-282-5166**

Fax: 888-570-4700

Enrollment form

Amber Specialty Pharmacy

Phone: **888-370-1724**

Fax: 402-896-3774

Enrollment form

Biologics, Inc.

Phone: **800-850-4306**

Fax: 800-823-4506

Caremark (CVS Specialty)

Phone: **800-237-2767**

Fax: 800-323-2445

Enrollment form

CareMed

Phone: **877-227-3405**

Fax: 877-542-2731

Enrollment form

Eversana

Phone: **866-849-4481**

Fax: 877-473-3172

Nufactor, Inc

Phone: **800-323-6832**

Fax: 855-270-7347

Enrollment form

Option Care Health

Phone: **833-730-HOPD (4673)**

Fax: 888-979-8904

Enrollment form

Optum Frontier Therapies

Phone: **855-768-9727**

Fax: 866-991-9929

Enrollment form

Optum Infusion Pharmacy

Phone: **877-342-9352**

Fax: 877-542-9352

Enrollment form

Optum Specialty Pharmacy

Phone: **855-427-4682**

Fax: 877-342-4596

Enrollment form

Orsini Pharmaceutical Services

Phone: **800-697-5048**

Fax: 877-471-5704

Enrollment form

PANTHERx Rare Pharmacy

Phone: **855-726-8479, x1115**

Fax: 888-550-7441

Vital Care Infusion Services

Phone: **877-488-4825**

Fax: 877-229-1725

Enrollment form



National ancillary network provider contacts

AleraCare

Phone: **888-209-8874**

Fax: 833-329-4738

Amerita

Phone: **972-815-0460**

Fax: 972-915-3841

CarePoint Infusion Center

Phone: **216-755-4044**

Fax: 330-967-0571

FloMed Infusion Services

Phone: **561-559-9800**

Fax: 561-559-9801

IVX Health

Phone: **614-347-0215**

Fax: 844-627-2675

Metro Infusion Center

Phone: **877-448-3627**

Fax: 866-507-1164

Option Care Health

Phone: **833-730-HOPD (4673)**

Fax: 888-979-8904

Optum Infusion

Phone: **877-342-9352**

Fax: 877-542-9352

Palmetto Infusion Services

Phone: **800-809-1265**

Fax: 866-872-8920

PromptCare Home Infusion

Phone: **866-776-6782**

Fax: 800-815-6808

Soleo Health

Phone: **844-483-4600**

Fax: 844-483-2800

Vital Care Infusion Services

Phone: **877-488-4825**

Fax: 877-229-1725

Vivo Infusion

Phone: **855-478-1528**

Fax: 972-598-0019

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ATTACHMENT 6N

SAUMYA AUJLA, MDINTERVENTIONAL PAIN MEDICINE

July 19, 2026

To Whom It May Concern:

I am writing in support of the Certificate of Need application for Sunray HHA TN LLC. As a physician specializing in pain management, I care for patients across Tennessee who suffer from chronic, debilitating conditions that require complex infusion therapies, including intravenous (IV) medications, biologic therapies, hydration, and other specialty infusion treatments that are essential to managing pain, improving function, and enhancing quality of life.

For many of these patients, particularly those living in rural communities, those with significant mobility limitations, or those with limited financial resources, traveling to infusion centers on a recurring basis presents a substantial burden. Frequent travel can exacerbate pain, interfere with treatment adherence, and create unnecessary financial and logistical challenges for both patients and their caregivers.

In my practice, I regularly encounter patients for whom access to infusion services is challenging. Sunray HHA TN LLC proposes to provide specialized infusion nursing services that would complement existing care options for patients receiving these treatments. I believe expanding access to home-based infusion services has the potential to improve treatment adherence and reduce barriers to care.

Based on my clinical experience caring for patients who require infusion therapy, I believe approval of this Certificate of Need would expand access to an important care option for appropriate patients across Tennessee.

I have no financial interest in Sunray HHA TN LLC. My support is based solely on my clinical experience.

Sincerely,

Saumya Aujla, MD

Interventional Pain Medicine

Nashville, TN

July 25, 2026

Certificate of Need Review Committee:

I am pleased to support Sunray HHA TN LLC's application to provide specialized infusion nursing services in the home. In radiation oncology, successful treatment often depends on patients receiving timely supportive care alongside their primary therapy.

Cancer treatment can cause fatigue, weakness, nausea, dehydration, pain, and reduced immunity. These effects can turn an additional trip for an infusion or nursing visit into a meaningful obstacle. Missed or delayed supportive care can disrupt the broader treatment schedule and, in some cases, contribute to avoidable escalation of care.

Home-based infusion would not replace hospital or outpatient services. It would provide an additional physician-directed option for appropriately selected patients, particularly those who live far from treatment centers, rely on others for transportation, or would benefit from avoiding unnecessary exposure in busy clinical settings. Expanding access to trained infusion nurses in the home could help patients remain on schedule, support continuity of care, and preserve facility-based resources for those who require them.

For these reasons, I believe Sunray HHA TN LLC would provide a useful addition to Tennessee's continuum of care.

Respectfully,

Khush Aujla, MD

Radiation Oncology

I have no ownership, financial relationship, or other economic interest in Sunray HHA TN LLC.

July 15, 2026

To whom it may concern,

I am writing this letter in strong support of the Certificate of Need application for Sunray HHA TN LLC. As a pediatrician, I care for children and families from a broad geographic area across Tennessee. While currently none of my patients require specialized intravenous (IV) infusion therapies, I recognize that children with complex medical conditions, who do need these services, often face significant barriers to accessing timely, high-quality care. Many families must travel long distances to infusion centers, requiring parents to miss work, children to miss school, and caregivers to navigate substantial financial and logistical challenges. These burdens can be particularly difficult for families living in rural communities or those with limited resources. Expanding access to specialized home infusion services would provide an important benefit to these children and their families by allowing medically necessary therapies to be administered safely and effectively in their home.

Sunray HHA TN LLC will be uniquely qualified to provide skilled infusion nursing services with expertise in specialty IV therapies, complex dosing protocols, patient monitoring, and extended infusions, services that are often difficult to replicate under the general protocols of traditional home health agencies. Increasing access to this specialized level of in-home care has the potential to improve treatment adherence, reduce unnecessary hospital and emergency department utilization, lessen the burden on families, and improve the overall quality of care for pediatric patients requiring infusion therapy throughout Tennessee. Although I do not personally care for a large volume of pediatric infusion patients, I recognize the important role these services play in ensuring access to appropriate care for medically complex children across our state. For these reasons, I respectfully urge approval of the Certificate of Need for Sunray HHA TN LLC to expand access to high-quality, skilled infusion nursing services in the home.

Sincerely,



Deepak Mehrotra

Deepak Mehrotra, MD
325 Old Pleasant Grove Road
Mt. Juliet, TN 37122
Phone: 629-255-2032

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ATTACHMENT 9C

Service Area Historical Charges - Infusion Visits and Hours

Home Health Agency (Service Area)*	Home County	State ID	2025 Infusion Therapy - Pain Management Charge per Visit	2025 Infusion Therapy - Other Charge per Visit
Amedisys Home Health	Davidson	19674	N/A	N/A
Coram CVS Speciality Infusion Services	Williamson	19734	N/A	\$200
Advanced Nursing Solutions	Blount	19754	N/A	N/A
KabaFusion TN LLC	Davidson	19914	N/A	N/A
Vanderbilt HC Option Care IV Services	Davidson	19994	N/A	N/A
Coram CVS Specialty Infusion Services	Knox	47442	N/A	\$200
Implanted Pump Management LLC	Knox	47452	\$150	\$150
Twelvestone Infusion Support	Rutherford	75084	N/A	N/A
Meritan INC**	Shelby	79106	\$200	\$200
Methodist Alliance Home Care**	Shelby	79316	\$300	\$300
Accredo Health Group, Inc.	Shelby	79456	N/A	N/A
Coram CVS Speciality Infusion Service	Shelby	79556	N/A	N/A
Hemophilia Preferred Care of Memphis, Inc.	Shelby	79566	N/A	\$200
Optum Infusion Services LLC	Williamson	79856	N/A	N/A
Tristate Infusion LLC	Shelby	79926	N/A	N/A

Source: Tennessee Department of Health, Joint Annual Reports (JARs), 2025 accessed at <https://apps.health.tn.gov/publicjars/default.aspx>.

* All agency names are listed as they appear in the 2025 JARs, which may be different than the name(s) displayed for the corresponding State ID for 2024 and/or 2023.

** While agency reported infusion charges, no infusion volume is reported for agency in the 2025 JARs.

Attachment VCSD

VitalCare Sample Documents

Performance Improvement (PI): Adverse Drug Reactions (CareTend)

This performance measure has been selected because the organization provides compounded infusion medications that may be associated with potentially high risk adverse effects.

The measure full name is “The incidence of reported adverse drug reactions per 1000 active patient care days”.

Performance Measure Elements

Description	The incidence of reported adverse drug reactions entered into the patient’s record in CareTend, and calculated as a rate based ratio measured with a denominator of 1000 active patient care days.
Frequency	Monthly
Designation	Designated as the person to oversee entry of patient outcomes data within CareTend:
Designation	Designated as the person to obtain the monthly incidence from the Vital Outcomes database:
Method of Data Collection	Data is collected via a regularly scheduled follow up form which inquires as to the incidence of specific events including adverse drug reactions; Data is collected via regular communication with the patient, caregiver, and home care agency or other healthcare provider. Data is entered into the patient’s record in CareTend upon occurrence, or at regular intervals for long term patients.
Acceptable Limits	The acceptable limit is 3 standard deviations from the mean. To determine the benchmark average and acceptable limit refer to the Outcomes Tracking Table on The Central Line. The Outcomes Tracking Table limits and averages are updated, at minimum, every three (3) months based on Vital Outcomes aggregate data. (The Outcomes Tracking Table can be found under the discuss board on The Central Line.)
Receipt of Reports	The reports on the ADR rate are presented at the quarterly PI meeting to the pharmacy owner/manager by:

Adverse Drug Reactions

Re-Evaluation Plans	Failure to meet the threshold will result in the following re-evaluation and actions: • Identify if there is a pattern to types of adverse events, medications involved, or diagnosis group involved; • Determine if value is high due to small population size • Determine if patient pre-screening and monitoring is being completed appropriately • Communicate findings with the home care agency and/or physician • Discuss with or retrain staff on adverse event screening • Consult with prescriber(s) on formulary issues and possible causes • Re-measure the following quarter
---------------------	--

ANNUAL PI PLAN REVIEW (CareTend)

This form must be completed by pharmacy ownership/management annually to comply with accreditation standards. Supplement this form with the Annual PI Plan Review for a complete review of the pharmacy's services. Please check all rows in which the statement is true. Describe any challenges at the end of each section.

Pharmacy Name:	Franchise No. (4 Digit):
Date of this Review:	For which year is this PI Plan Review?

Meetings

☐	The pharmacy met at the frequency listed on the PI Plan.
☐	The pharmacy PI meetings were attended by all members and at least one manager or owner.
☐	Minutes of meetings were maintained.
If any of the rows above are not checked, please describe or elaborate:	

Outcome Data

☐	The pharmacy staff consistently submitted patient information to the CareTend outcome tracking system throughout the year.
☐	Reports were generated by the pharmacy from the Vital Outcomes system and were reviewed at least quarterly.
☐	Data was converted to charts by the pharmacy staff using Excel or other method.
☐	Charts are reviewed when received.
☐	Patient perception surveys are consistently given to patients, and a return rate of (minimum) 25% is achieved throughout the year.
☐	Unusual trends or variances are addressed on a PDSA form.
If any of the rows above are not checked, please describe or elaborate:	

Financial Performance Measures

- | | |
|--------------------------|--|
| ☐ | The pharmacy consistently collected data on billing and claim denials throughout the year. |
| ☐ | The data was converted to charts by either the pharmacy staff using Excel or other method. |
| ☐ | Charts were reviewed when received. |

If any of the rows above are not checked, please describe or elaborate:

Internal Pharmacy Audits

- | | |
|--------------------------|--|
| ☐ | The pharmacy consistently collected data on the selected pharmacy process throughout the year. |
| ☐ | The data was converted to charts by either the pharmacy staff using Excel or other method. |
| ☐ | Charts were reviewed when received. |

If any of the rows above are not checked, please describe or elaborate:

High Risk Focus Area

- | | |
|--------------------------|--|
| ☐ | The pharmacy has a written QC/QA program for the selected high risk focus area. |
| ☐ | Pages that require completion by the manager were completed (tabbed pages). |
| ☐ | Data collection described in the QC/QA program was consistently collected and reviewed at PI meetings. |

If any of the rows above are not checked, please describe or elaborate:

Annual Performance Improvement Report and Data Collection Tool

Specialty Pharmacy Services

If accredited for specialty pharmacy services, this report must be completed and reviewed annually by the performance improvement committee to comply with specialty related accreditation standards. It should be retained in the pharmacy records and attached to the meeting minutes form in which review of the report has been documented.

Reporting Period:
Number of specialty patients receiving prescriptions during reporting period:
What is the overall patient satisfaction survey rate specific to specialty pharmacy services as a percentage of specialty patients served?
Number of complaints received during reporting period and average resolution time:
Were any trends or a high incidence rate in a particular area of service identified? ☐ Yes ☐ No If yes, explain:

Complete the chart below based on reporting period data:

Payer Name	Number Prescriptions Dispensed	Number Prescriptions Dispensed Incorrectly*	Average Delivery Time	Average Medication Possession Ratio (MPR)**
Total All Payers				

*Wrong patient, wrong drug, wrong address, or wrong quantity

**The medication possession ratio (MPR) is a formula used to determine compliance that is measured from the first to the last prescription. The denominator is the duration from the start period to the completion of the last prescription, and the numerator is the days supplied over that period from first to last prescription. MPR is the sum of the days' supply for all fills of a given drug in a particular time period, divided by the number of days in the time period.

Call center metrics based on reporting period data supplied by IVR or answering service vendor (attach data report):

What is the average length of time patients were on hold?

What is the average call abandonment rate?

What is the average dropped call rate?

Were any trends or a high incidence rate identified?

☐ Yes ☐ No If yes, explain:

Review of contracted services data for reporting period:

Was a review of all contracted specialty pharmacy services performed in conjunction with this report? ☐ Yes ☐ No ☐ N/A

If yes, were any contracted services identified that require more extensive review to minimize costs? ☐ Yes ☐ No

If yes, which ones?

Miscellaneous:

Signatures:

PI Committee Chair:	Date:
PI Committee Secretary:	Date:
Report Preparer:	Date:

Improvement Studies (PDSA)☐

The pharmacy used the PDSA cycle and documentation form to document improvement activities.

☐

PDSA forms were completed correctly and demonstrate the "before and after picture" of the improvement cycle.

If any of the rows above are not checked, please describe or elaborate:

Risk and Sentinel Events☐

The pharmacy staff used risk report forms and reviewed them at PI meetings.

☐

The pharmacy did not have any occurrences of sentinel events.

If the row above is not checked, please describe or elaborate:

Projected Changes or Improvements

Based on the information presented in previous sections, describe changes suggested for the PI committee or PI plan in the next year.

1.

2.

3.

4.

5.

6.

Signature of Owner or Governing Body

Owner Name

Owner Signature

Date

Performance Improvement (PI): Catheter Complication Requiring Removal (CareTend)

This performance measure has been selected because the organization provides compounded infusion medications and infusion clinical services to patients with complex medical needs via implanted venous access devices.

The measure full name is "The incidence of reported catheter related complications requiring removal per 1000 active patient catheter days."

Performance Measure Elements

Description	The incidence (rate based ratio with a denominator of 1000) of catheter complication requiring removal documented in the patient's record in CareTend per 1000 active patient catheter days.
Frequency	Monthly
Designation	Designated as the person to oversee entry of patient outcomes data within patient records on CareTend:
Designation	Designated as the person to obtain the monthly percentage rating from the Vital Outcomes database:
Method of Data Collection	Data is collected via a regularly scheduled follow up form which inquires as to the incidence of specific events including incidents with catheters; Data is collected via regular communication with the patient, caregiver, and home care agency or other healthcare provider. Data is entered into the patient's record in CareTend upon occurrence, or at regular intervals for long term patients.
Acceptable Limits	The acceptable limit is 3 standard deviations from the mean. To determine the benchmark average and acceptable limit refer to the Outcomes Tracking Table on The Central Line. The Outcomes Tracking Table limits and averages are updated, at minimum, every three (3) months based on Vital Outcomes aggregate data. (The Outcomes Tracking Table can be found under the discuss board on The Central Line.)
Receipt of Reports	The reports on the catheter complications requiring removal are presented at the quarterly PI meeting to the pharmacy owner/manager by:

Catheter Complication Requiring Removal

Re-Evaluation Plans	Failure to meet the threshold will result in the following re-evaluation and actions: • Identify if the value is out of range due to a small patient population; • Review recent on call and risk reports and identify trends in incidence; • Discuss with staff if incidents are related to a particular catheter type, therapy type, or patient population; • Discuss, if applicable, with the home care agency or prescriber; • Develop a corrective action plan based on above findings to decrease grievances; • Re-measure in three months
---------------------	---

Search policy sections

- [Reference Home](#)
- [Business and Operations Manual](#)
- [General Organizational Structure and Authority](#)
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Manual Policy Set Policy Policy Section Tag Linked Log

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Development of the PI Program

Content Tags

accreditation outcomes measurement performance improvement pi plan quality assurance

Description

- The franchised pharmacy will maintain a performance improvement process that identifies potential areas of improvement improvement strategies taken, and evaluates the effectiveness of the improvements over time.
- The franchised pharmacy will monitor performance measures that indicate the effectiveness of the pharmacy.
- The owner and manager are responsible to assure that the performance improvement program is functioning and are present and active in the program.
- The organization leader will be present at PI meetings.
- The PI meetings will be held at regular predetermined intervals.
- The program will include the following components:
 - A review of current outcome and patient perception data and discussion of results
 - A review of any sentinel events that occurred since the previous meeting
 - A review of infection trends as noted on the infection control logs
 - A review of all serious adverse drug reactions (defined as a reaction that required cessation of the drug or hospitalization)
 - A review of all medication errors identified after a drug was dispensed to the patient/caregiver or health care provider
 - A review of patient/customer grievances filed since the previous meeting
 - Patient perception/satisfaction data (ongoing)
 - Referral source and physician satisfaction data (annual survey results)
 - AIC customer satisfaction (ongoing; locations providing AIC services)
 - Nursing services satisfaction (ongoing; locations providing home skilled nursing)
 - A review of [Risk Reports](#) completed since the previous meeting
 - An opportunity for staff members to recommend areas of performance improvement (brainstorming)
 - (Annual) Staff [self-assessments](#) to identify employee learning needs
- [Records \(minutes\)](#) of all PI meetings and activities will be maintained in an organized manner. These records will be accessible to all staff members and accreditation staff only.
- Any review or data elements that fall outside of the acceptable parameters should be responded to by a corrective action [PDSA Form](#).
- Duplicating and dispensing copies of any of the PI records is not permitted. All copies must be approved by the organization leader and/or legal counsel/representative.
- All PI forms are available in the Apollo Forms Manual, keyword search "quality", or "performance". These include a template for the franchised pharmacy's PI program, the Risk Report, the [Root Cause Analysis](#) tool, the staff self-assessment form, a PDSA documentation form, and a meeting minutes template.
- The franchised pharmacy will include a pediatric performance improvement indicator in its Performance Improvement Program. The indicator will be based on the percentage of pediatric infusion therapy comprises more than 25% of its clinical program.

- Patient satisfaction information will be obtained from the parents if the child is unable to respond due to his/her developmental or cognitive impairment.
- The owner and manager will prepare an [annual review](#) of the pharmacy's PI program that lists:
 - The members of the PI committee, and how many meetings were held
 - The areas that were monitored by the committee by data collection
 - Areas identified by the committee that warranted investigation and/or improvement
 - The results of the improvement strategies
 - Any changes to the program for the following year

Procedure

1. Enroll your organization in an outcome-tracking program. (Note: franchised pharmacies seeking accreditation must be enrolled in an outcome tracking program in order to be accredited. Vital Care Infusion Services, LLC offers Vital Outcomes as an outcome reporting option to franchised pharmacies)
2. Open and view the form [PI Plan](#).
3. Review Performance Improvement Overview module on The Central Line.
4. Complete the Performance Improvement Tools and Resources sections 1-17.
5. Hold your first PI meeting, using the resources on The Central Line.
6. Hold your first meeting, following the [Meeting Minutes Form](#) as a guide. (Note: this is a guide only. Your team can add to, re-arrange, or alter this guide. You can create an entirely different meeting design.)

Applies To Your Logs

[Performance Improvement \(QA\) Activities \(Jan Cycle\)](#)

[Performance Improvement \(QA\) Activities \(July Cycle\)](#)

This policy section was last modified 7/10/2025 3:34:54 PM.

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DRUG/THERAPY FOLLOW UP (GENERIC)

This form may be completed by any staff member to compile information about the progress of a patient receiving any infusion therapy. Once completed, results of this follow up should be forwarded to a clinician (nurse or pharmacist) for review. (See page 2).

FOR MEDICARE PATIENTS: A "Medicare Request for Refill" form must be completed. You might be asked to submit that form to your Patient Account Representative.

Patient Information			
Name (Last, First, Middle): _____, _____			
Patient ID No: _____	DOB: _____	Phone: _____	
Date of Follow-up: _____	Check One: ☐ In Home ☐ Phone ☐ Email/Other		
Catheter Type: _____	Specific Drug Therapy: _____		
Prescriber: _____	Home Care Agency: _____		
Name of Person Providing Information Below: ☐ Patient ☐ Other: _____			
Universal Questions	Yes	No	N/A
Have you had any redness, pain, swelling, or tenderness at your IV catheter exit site?	☐	☐	☐
Have you had any difficulty flushing or using your IV catheter?	☐	☐	☐
Has your catheter dressing become wet, dirty, or loosened?	☐	☐	☐
Have there been any changes to your list of medications since the last time we spoke?	☐	☐	☐
Have you needed to waste or throw away any supplies?	☐	☐	☐
Have you had any difficulties with your pump?	☐	☐	☐
Does your therapy infuse faster or slower than the correct amount of time? (_____/____hr/min)	☐	☐	☐
How many doses of medication do you have left?	When is your next doctor's appointment?		
Approximately how many heparin flushes do you have left?	When is your next nurse visit?		
Approximately how many saline flushes do you have left?	When were your lab tests last drawn?		
When was your dressing last changed?			
Therapy Specific Questions (Specific side effects or adverse reactions for the therapy.)	Yes	No	N/A
	☐	☐	☐
	☐	☐	☐
	☐	☐	☐
Patient Specific Questions	Yes	No	N/A
Has there been any change in your _____? (illness requiring therapy)	☐	☐	☐
Has the <i>type of catheter</i> used for your therapy changed since our last follow-up?	☐	☐	☐
	☐	☐	☐
Care Plan requires update based on results of therapy follow up			
☐ Yes ☐ No			
Additional Comments Pertaining To Follow-Up Monitoring			
Signatures			
Signature of staff member performing the follow-up: _____			Date: _____
Signature of clinician reviewing the follow-up: _____			Date: _____

Patient Information		
Patient Name:	Date of Review:	

Clinician Evaluation/Comments: (For Nurse or Pharmacist use only, provide explanations for "yes" responses in comments section below.)		
Based on the information obtained, does the patient need (or possibly need) any of the following:	Yes	No
A change in the typical supplies or equipment provided?	☐	☐
A change in the delivery schedule?	☐	☐
An additional clinical or home assessment by a nurse (via telephone or in person)?	☐	☐
An additional clinical pharmacist consultation?	☐	☐
Additional patient training?	☐	☐
A modification of training or services based on cultural diversity, literacy, language barriers or limited English proficiency?	☐	☐
An update sent to the prescriber, home care agency, or other health care provider?	☐	☐
Other actions:		
Comments		
Next follow-up scheduled for (date):		
Signatures		
Signature of staff member completing follow up:	Date:	
Signature (Nurse Reviewer):	Date:	
Signature (Pharmacist Reviewer):	Date:	

[Type pharmacy name]

[Type the pharmacy address]

[Type the pharmacy city, state and zip]

Phone: [Type the sender phone number]

Monday, June 02, 2025

[Customer Name]

[Customer Address]

[Customer City, State and Zip]

Dear Valued Pharmacy Customer,

The staff of _____ is proud to have serviced your home infusion pharmacy needs. We realize you and your prescriber have a choice of infusion pharmacies, and we appreciate that you selected ours.

We constantly strive to improve the services we provide to our customers, and to meet all of the quality requirements of Medicare and other payers. To do so we must gather customer satisfaction information from every patient.

We would appreciate it if you would spend a few moments answering the questions on the attached satisfaction survey. Additional comments regarding our services are always welcome. If you'd like to speak to our pharmacy manager about any aspect of our services, please indicate that on the survey. The survey should be mailed back to us using the prepaid envelope enclosed for your convenience. If you prefer to answer the survey online, please go to vitalcare.com/ptsurvey. Be sure to enter the information found at the top of the attached survey form, so your feedback will be attributed to our location.

If you have any questions about the survey, please don't hesitate to call us at the number at the top of this letter.

Best Regards,

[Sender Name]

[Type the sender title]



quality improvement

Q

- Reference Home
- Business and Operations Manual
- General Organizational Structure and Authority
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Development of the PI Program

Content Tags

accreditation

outcomes measurement

performance improvement

pi plan

quality assurance

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Applies To Your Logs

[Performance Improvement \(QA\) Activities \(Jan Cycle\)](#)

[Performance Improvement \(QA\) Activities \(July Cycle\)](#)

This policy section was last modified 3/28/2025 12:52:36 PM.

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GENERIC INFUSION RECORD

Patient Name (Last, First): _____							
Patient ID Number: _____				Visit Start Time: _____ Infusion Time (in minutes): _____		Visit End Time: _____	
Premedication: _____ _____ _____ _____				Medication/Dose: _____			
				Expiration Date: _____			
				Lot#: _____			
				(write or affix labels below):			
Vascular Access Device: ____ PIV ____ Midline ____ PICC ____ Tunneled Catheter ____ SubQ Port ____ Other (Please explain _____) Vascular Access Device Location: _____ Gauge: _____ Length: _____ Site: _____ Attempts: _____ Saline: _____ Heparin: _____ D/C Upon Completing Infusion? _____							
Pump (If Applicable): Type: _____ _____				Procedures: Dressing Changed: _____ Tubing Changed: _____			
Duration for rate	TIME	B/P	TEMP	PULSE	RESP	INF RATE	PATIENT RESPONSE
Baseline Vital Signs							<i>document additional details in progress note</i>
RN Name: _____				Date: _____			
RN Signature: _____				Next Infusion Due: _____			

Patient Prescreening: IgG (Intravenous)

Used by specialty drug pharmacies to screen for appropriateness of therapy (IVIG, IgG IV); completed by Vital Care nurse or pharmacist. Findings in gray boxes may be used for care plan development or focused assessments.

Patient Name:	ID #:			
Indicate whether or not the patient has any of the following:	No	Yes	Not Known	N/A
History of or the presence of: renal failure	☐	☐	☐	☐
Current dehydration/volume depletion	☐	☐	☐	☐
Prior ADR or hypersensitivity to immunoglobulin or any of its components	☐	☐	☐	☐
History of hypersensitivity to other medications	☐	☐	☐	☐
Sensitivity to sorbitol or fructose; Sensitivity to corn	☐	☐	☐	☐
Selective IgA deficiency	☐	☐	☐	☐
Current use of diuretics or medications that can cause renal failure	☐	☐	☐	☐
History of cardiac risk factors, atherosclerosis	☐	☐	☐	☐
Use of live vaccines during the course of treatment (i.e. measles, mumps, rubella)	☐	☐	☐	☐
Currently using blood sugar measurement equipment for insulin maintenance	☐	☐	☐	☐
<i>Absence of a diagnosis for an FDA approved indication for the <i>specific</i> IgG product. (Indications vary per formulation/manufacturer. Refer to the drug protocol on Apollo.)</i>	☐	☐	☐	☐
Currently pregnant or breastfeeding	☐	☐	☐	☐
Does not have reimbursement method for IgG patient portion.	☐	☐	☐	☐

Signature/Designation:	Date:
RN Signature/Designation:	Date:
Pharmacist Signature/Designation:	Date:

Initial Pharmacy Assessment: IgG (Intravenous)

- Refer to the Initial Nurse Assessment for the following: medical history, multi-system assessment, equipment needs, current diet, labs ordered
- Refer to the Medication Profile for listing of concurrent medications. Refer to the Pre-Screening Form for potential contraindications.
- Findings in gray boxes may be used for care plan development or focused assessments.

Patient Name:		ID #:	
IgG Product Name:		Dose/Frequency:	
Route: ☐ IV	Dosage Form:		
Diagnosis:	Allergies:		
Medication History		Current	Past
Indicate which of the following are currently in use, or have been used in the past:			
Diuretics	☐	☐	☐
Medications that may cause renal impairment	☐	☐	☐
Administration of live vaccines	☐	☐	☐
	☐	☐	☐
	☐	☐	☐
	☐	☐	☐
Drug Problem List (Check all that apply.)			
☐	Area of concern noted on pre-screening		
☐	Potential drug interaction/contraindication found on medication profile		
☐	Insufficient caregiver or family support reported		
☐	Lack of drug storage or preparation area reported		
☐	High potential for renal complications		
☐	High potential for hepatic complications		
☐	High potential for cardiac or pulmonary complications		
☐	High potential for falls		
☐	High potential allergy based on prior history		
☐	Challenge to teaching/learning reported		
☐	Nutritional risk screening indicates need for further evaluation		
☐	Initial pain screening indicates need for further evaluation		
☐	Lack of Reimbursement: Refer to the patient assistance program for reimbursement support		
☐	Other:		
Signature			
Pharmacist Signature/Designation:			Date:

Patient Teaching Checklist: IgG (Intravenous)

Patient Name:	ID #:
General Information	Date Initials
Pharmacist services, contact information, delivery schedule, and grievance policies	
Pt Rights, Advance Directives, Supplier Standards, privacy practices, and consent forms	
Estimate of patient/guarantor "out of pocket" payment for therapy	
Available patient assistance program, if needed	
Emergency preparedness written instructions (Vital Care patient education module)	
Treatment/Medication	
Indication for treatment, disease state and progression	
Description of treatment, assessments, lab monitoring, other necessary procedures	
Plan of treatment (care plan development input from patient/caregiver)	
Follow up and delivery schedule; expected questions	
Dose, route, frequency	
Drug information (drug information sheet); offer of drug counseling by pharmacist/staff	
Patient education information in Apollo	
Manufacturer web site:	
Inform health care team if pregnancy or lactation status changes	
Report medication changes	
Drug Handling	
Store at 36-77° F; do not freeze; discard after expiration date	
Aseptic diluents transfer (if applicable)	
Do not shake vial; do not allow foaming	
Begin infusion within 6 hours of vial opening; complete within 12 hours of vial opening	
Side Effects/Complications	
Review side effects in the Patient Medication Guide	
Signs of renal impairment (decreased urination, sudden weight gain, blood in urine)	
Infusion allergic or sensitivity reactions (fever, chills, muscle cramps, nausea, wheezing)	
Signs of aseptic meningitis (headache, blurred vision, neck rigidity, light sensitivity, drowsiness, fever, painful eye movements)	
Signature and Acknowledgment of Training	
I have received the above listed training, indicated by the initials of the clinician.	
Patient:	Date:
Clinician:	Date:

Nursing Assessment: Immune Deficiency

- Refer to the Initial Pharmacy Assessment for the following: drug order information, drug problem list based on medication profile, past and concurrent immune deficiency therapies
- Refer to the Medication Profile for listing of concurrent medications.
- Refer to the Pre-Screening Form for potential contraindications. Refer to Referral Intake Form for prescriptions.
- Findings in gray boxes may be used for care plan development or focused assessments.

Patient Name:			ID #:		
Labs ordered:					
Medical History:					
Year of Onset:		Date and Type of Transplant (if applicable):			
Describe current need for IVIG product:					
Describe availability and condition of IV sites or condition of long term vascular catheter:					
Disease Symptoms Checklist					
(ADULT PATIENT) Does the patient exhibit or report any of the following:		N	Y	(PEDIATRIC) Does the patient exhibit or report any of the following:	
Ear or sinus infection without allergy		☐	☐	Recurrent ear infections	
Pneumonia		☐	☐	Recurrent sinus infections	
Chronic diarrhea with weight loss		☐	☐	Pneumonia or bronchitis	
Recurrent viral infections (colds, herpes, warts)		☐	☐	Prior history of oral antibiotics with minimal effect	
Oral thrush; fungal infection elsewhere		☐	☐	Failure to gain weight or grow normally	
Fever, chills		☐	☐	Recurrent skin or organ abscesses	
Signs of volume depletion/dehydration		☐	☐	Oral thrush or final infection on the skin	
		☐	☐	Fever, chills	
		☐	☐	Signs of volume depletion/dehydration	
		☐	☐		
		☐	☐		
Signature					
LPN Signature/Designation:				Date:	
RN Signature/Designation:				Date:	

Nursing Assessment: CIDP

(Chronic Inflammatory Demyelinating Polyneuropathy)

- Refer to the Initial Pharmacy Assessment for the following: drug order information, drug problem list based on medication profile, past and concurrent immune deficiency therapies
- Refer to the Medication Profile for listing of concurrent medications.
- Refer to the Pre-Screening Form for potential contraindications. Refer to Referral Intake Form for prescriptions.
- Findings in gray boxes may be used for care plan development or focused assessments.

Patient Name:				ID #:	
Labs ordered:					
Medical History:					
Year of Onset:		Date and Type of Transplant (if applicable):			
Describe current need for IVIG product:					
Describe availability and condition of IV sites or condition of long term vascular catheter:					
Disease Symptoms Checklist					
	N	Y		N	Y
Burning on soles of feet	☐	☐	Poor balance, falling, tripping	☐	☐
Numbness/tingling on soles of feet	☐	☐		☐	☐
Weakness of lower extremities	☐	☐		☐	☐
Weakness of upper extremities	☐	☐		☐	☐
Inability to empty bladder	☐	☐		☐	☐
Nausea, vomiting	☐	☐	Vital Signs		
Abdominal fullness, bloating	☐	☐	Blood Pressure:		
Diarrhea	☐	☐	Pulse:		
Constipation	☐	☐	Respirations:		
Hypotension	☐	☐	Temperature:		
Erectile Dysfunction	☐	☐	Current Weight:		As of:
Signature					
LPN Signature/Designation:				Date:	
RN Signature/Designation:				Date:	

Follow Up Screen: IgG (Intravenous)

- Use this form to screen for progress and possible complications; refer to a clinician for follow-up action.
- Refer to the Pharmacy Assessment and Nursing Assessment for baseline clinical information.
- Refer to the Medication Profile for listing of concurrent medications.
- Refer to the Care Plan for monitoring, assessment, and intervention plans.
- Findings in gray boxes may be used for care plan development or focused assessments.

Patient Name:		ID #:	
IVIIG Product Name:		Dose:	
Route: ☐ IV	Diagnosis:		
Name of Person Providing Information: ☐ Patient ☐ Other:			
General Questions		No	Yes
Has there been any change in your list of medications since the last time we spoke?		☐	☐
Have you had a change in your pregnancy status or lactation status?		☐	☐
Have you had signs or symptoms of infection?		☐	☐
Have you had signs or symptoms related to your treating diagnosis/disease state?		☐	☐
Side Effects Screening: Have you had any of the following?			
Signs of renal impairment (decreased urination, sudden weight gain, blood in urine, dark urine)		☐	☐
Infusion allergic or sensitivity reactions (fever, chills, muscle cramps, nausea, wheezing, localized reactions, swelling/pain/rash at infusion site(s))		☐	☐
Signs of aseptic meningitis (headache, blurred vision, neck rigidity, light sensitivity, drowsiness, fever, painful eye movements)		☐	☐
Sore throat/fever, yellowing eyes/skin		☐	☐
Allergic reaction during or after recent doses		☐	☐
Symptoms of dehydration (thirst, dry mouth, dry itchy skin, headache, decreased urination)		☐	☐
How many doses of IgG IV remain in the home?			
When is your next MD appointment?			
When is your next nurse visit?			
When were your lab tests drawn last?			
Additional Follow-Up/Disease Management/Therapy Management Notes:			
Care Plan requires update based on results of therapy follow up:		☐ Yes	☐ No
Staff Signature:		Date:	
Clinician Review Signature:		Date:	

Follow Up Screen: IgG (Intravenous)

Patient Name:	ID #:	
Clinician Evaluation of Follow-Up Information		
<i>Based on the information obtained, does the patient need (or possibly need) any of the following:</i>		
	No	Yes
A change in the typical supplies or equipment provided?	☐	☐
A change in the delivery/visit schedule?	☐	☐
An additional clinical assessment by a nurse (via phone or in person)?	☐	☐
An additional clinical pharmacist consultation?	☐	☐
Additional patient and/or caregiver training or education?	☐	☐
A modification of training or services based on cultural group, literacy, language barrier, or limited English proficiency?	☐	☐
An update sent to the prescriber, home care agency, or other health care provider?	☐	☐
Other:	☐	☐
Other:	☐	☐
Comments and Other Clinical Notes		
LPN Signature/Designation:	Date:	
RN Supervisor Signature/Designation:	Date:	
Pharmacist Signature/Designation:	Date:	

IVIG INFUSION RECORD

Patient Name (Last, First): _____							
Patient ID Number: _____				Visit Start Time: _____		Visit End Time: _____	
Premedication: _____ _____ _____ _____				Product Name: _____ Dose/Gms: _____ Exp. Date: _____ IVIG Lot#: _____ (write or affix labels below):			
Initials _____ Reviewed Vital Care drug protocol _____ Reviewed Vital Care administration policy _____ Immunoglobulin Infusion Competency				IV Access: _____ PIV _____ PORT Gauge: _____ Length: _____ Site: _____ Attempts: _____ Saline: _____ Heparin: _____ D/C Upon Completing Infusion? _____			
IVIG _____ Assess hydration _____ IV Site Initiation _____ Pre-Infusion Site Assessment _____ Pre-Infusion Blood Return				SQIG _____ Assess hydration _____ SubQ Site Initiation _____ #Sites _____ Pre-Infusion Site Assessment _____ Pre-Infusion Absent Blood Return			
	TIME	B/P	TEMP	PULSE	RESP	INF RATE	PATIENT RESPONSE
Baseline							<i>circle below / document details in progress note</i>
@ 15 mins							☐ VS ☐ Site ☐ Infusion ☐ Other
@ 30 mins							☐ VS ☐ Site ☐ Infusion ☐ Other
@ 45 mins							☐ VS ☐ Site ☐ Infusion ☐ Other
@ 60 mins							☐ VS ☐ Site ☐ Infusion ☐ Other
@ 2 hours							☐ VS ☐ Site ☐ Infusion ☐ Other
@ 3 hours							☐ VS ☐ Site ☐ Infusion ☐ Other
@ 4 hours							☐ VS ☐ Site ☐ Infusion ☐ Other
@ 5 hours							☐ VS ☐ Site ☐ Infusion ☐ Other
@ 6 hours							☐ VS ☐ Site ☐ Infusion ☐ Other
RN Name: _____ Date: _____ RN Signature: _____ Next Infusion Due: _____							

IVIG INFUSION RECORD

Patient Name (Last, First): _____							
Patient ID Number: _____				Visit Start Time: _____		Visit End Time: _____	
				Total Infusion Time (in Minutes): _____			
Premedication: _____ _____ _____ _____				Product Name: _____ Dose/Grams: _____ Exp. Date: _____ IVIG Lot#: _____ (write or affix labels below):			
Checklist Reviewed Vital Care Drug Protocol ☐ Yes ☐ No Reviewed Vital Care Administration Policy ☐ Yes ☐ No Immunoglobulin Infusion Competency ☐ Yes ☐ No Assessed Hydration ☐ Yes ☐ No IV Site Initiation ☐ Yes ☐ No Pre-Infusion Site Assessment ☐ Yes ☐ No Pre-Infusion Blood Return ☐ Yes ☐ No				Vascular Access Devices: ☐ PIV ☐ SubQ Port ☐ Midline ☐ Tunneled ☐ PICC ☐ Other (describe) _____ Gauge: _____ Length: _____ Location: _____ Site: _____ Attempts: _____ Saline: _____ Heparin: _____ D/C Upon Completing Infusion? ☐ Yes ☐ No			
Duration for rate	TIME	B/P	TEMP	PULSE	RESP	INF RATE	PATIENT RESPONSE
Baseline Vital Signs							<i>document additional details in progress note</i>
RN Name: _____				Date: _____			
RN Signature: _____				Next Infusion Due: _____			

NURSING VISIT/ASSESSMENT (GENERAL)

Use this form when visiting a patient to perform clinical assessment and/or clinical procedures.

Name:									
Last		First		Middle		DOB		Patient ID Number	
Therapy:			NDC:		Lot#:		Clinician:		
Visit Date:			Visit Start Time:			Visit End Time:			
Site of Care: ☐ Home ☐ AIS, Pharmacy-Based Suite ☐ PBIC, Provider-Based Clinic ☐ LTC/SNF ☐ Other:									
AIS/Clinic Location (City/State):									
Visit Type: (Check All that Apply) ☐ Admit ☐ Teach ☐ Assess ☐ Med Admin ☐ Deliver ☐ Other:									
Vital Signs		T:		P:		R:		BP:	
								Ht:	
								Wt:	
Allergies:				Caregiver/Support:					
History & Diagnosis:									
Primary presenting symptoms:									
Infusion orders:									
Advance Directives: ☐ Living Will ☐ Surrogate/Power of Attorney ☐ Patient is "DNR"									
☐ Update: No changes from last interview									

CARDIOVASCULAR	PULMONARY	NEUROMUSCULAR
Pulses ☐ All pulses palpable ☐ Regular/Strong ☐ Irregular ☐ Weak ☐ Jugular Vein Distention Edema ☐ Not present ☐ Present Location of Edema: _____ Daily Intake: _____ Daily Output: _____ Heart Sounds ☐ S ₁ S ₂ audible ☐ Regular ☐ Irregular ☐ Murmur ☐ Other:	Check all that apply: ☐ Room air ☐ Oxygen in use _____ LPM _____ Pulse Ox ☐ Productive cough ☐ Unproductive cough Breath Sounds Bilaterally ☐ Equal ☐ Unequal ☐ Clear bilaterally ☐ No Distress ☐ Unequal ☐ SOB ☐ Labored ☐ Other:	Level of Consciousness ☐ Alert ☐ Oriented x 3 ☐ Confused ☐ Report of Headaches ☐ Lethargic ☐ Vision WNL/baseline ☐ Vision changes ☐ Pupils equal and reactive Hearing: ☐ WNL ☐ Impaired ☐ Tinnitus Peripheral ☐ Reports peripheral numbness/tingling ☐ Tremors reported or observed Speech ☐ Clear ☐ Slurred ☐ Aphasic Gait ☐ Steady ☐ Unsteady ☐ Assistive Device: _____ ☐ Muscle weakness/fatigue ☐ See Fall Risk Assessment
GASTROINTESTINAL	SKIN/INTEGUMENT	NUTRITION/DIET
Abdomen ☐ Soft/Non-tender ☐ Firm or bloated ☐ Tender on palpation ☐ Reports of pain ☐ Nausea/Vomiting ☐ Ostomy present ☐ Fistula drainage Bowel Sounds ☐ Present ☐ Absent Bowel Elimination ☐ Regular: _____ per day ☐ Continent ☐ Incontinent ☐ Firm stool ☐ Loose/Diarrhea ☐ Constipation Oral/Swallowing ☐ No impairment reported ☐ Chewing impairment reported ☐ Swallowing impairment reported Appetite ☐ Good ☐ Fair ☐ Poor	Skin Condition ☐ Warm ☐ Cool ☐ Dry ☐ Moist/Normal ☐ Diaphoretic ☐ Intact ☐ Not Intact (describe on p 2) Skin turgor ☐ WNL ☐ not WNL Mucous membranes ☐ WNL ☐ not WNL ☐ Rash, hives ☐ Petechiae REPRODUCTIVE/GENITOURINARY Bladder ☐ Regular: _____ per day ☐ Continent ☐ Incontinent ☐ Clear/Yellow ☐ Other: _____ ☐ Itching/Discharge ☐ Pregnant ☐ Lactating/breastfeeding	Diet Information ☐ NPO ☐ Regular ☐ Diabetic ☐ Low Sodium ☐ Pt is compliant with prescribed diet ☐ Pt non-compliant with prescribed diet ☐ Meets criteria for nutrition screening Enteral Orders ☐ NG tube ☐ G-tube/PEG/button ☐ J tube Formula: _____ Prescription: _____ _____ Goal Weight: _____ ☐ Enteral catheter function/site WNL ☐ Change in catheter function/site ☐ Glucose monitoring WNL ☐ Glucose monitoring out of range

Clinician Signature/Designation:	Date:
----------------------------------	-------

Patient ID/Name:		Visit Date:	
------------------	--	-------------	--

PAIN ASSESSMENT ☐ No pain reported ☐ Pain reported; see below 1 2 3 4 5 6 7 8 9 10 Onset: _____ Description: _____ ☐ Meets criteria for full pain assessment	PSYCHOSOCIAL/COGNITIVE/LANGUAGE Emotional ☐ Eye contact ☐ Flat affect ☐ Cooperative ☐ Uncooperative ☐ Reports sadness/depression ☐ Reports or observed anxiety/irritability ☐ Reports being afraid Cognitive ☐ Able to follow simple commands ☐ Unable to follow simple commands Language ☐ Observed English proficiency ☐ Observed Limited English proficiency Substance Abuse (Hx/Current) ETOH ☐ Current ☐ History Smoking ☐ Current ☐ History Drug Abuse ☐ Current ☐ History	LABORATORY SPECIMENS DRAWN ☐ BMP ☐ CBC ☐ diff ☐ CMP ☐ CPK ☐ CRP ☐ ESR ☐ Pre-albumin ☐ PT/PTT ☐ Other Labs: _____ ☐ Trough Level Drug Time ☐ Peak Level Drug Time ☐ Drawn from catheter (Lumen: _____) ☐ Drawn by venipuncture: _____ Site or Lumen: _____ ☐ Post-draw flush: _____																				
CULTURAL List any ethnic or cultural considerations: ☐ None ☐ No changes since last assessment	IV ACCESS ASSESSMENT ☐ None ☐ Port ☐ Peripheral ☐ CVC ☐ PICC ☐ Spinal ☐ Midline ☐ Other Lumens: _____ Catheter Assessment ☐ Patent ☐ Occluded ☐ Intact ☐ Not intact/leak/broken ☐ Secured ☐ Unsecured/migrated Placement Date: _____ Inserted By: _____	PROCEDURES PERFORMED Catheter Care ☐ Removal per VC Policy ☐ Length/tip intact upon removal ☐ Insertion per VC Policy ☐ SubQ Port Access Length: _____ Gauge: _____ Location: _____ Number of attempts: _____ Site Care Dressing change ☐ Sterile ☐ Nonsterile ☐ Catheter declotting ☐ LAV/needle-free device change ☐ Hep/saline flush per Rx (maintenance) Medication Administration ☐ None given at this visit ☐ Medication prepared per Pharmacy labeling. Detail as needed in Notes section. ☐ Dose/Volume given: Start time: _____ Rate: _____ Pump: _____ End time: _____ ☐ Hep/saline flush per Rx (pre post med) Patient Education ☐ Medication administration ☐ Storage/handling ☐ Side effects ☐ Other: _____																				
SAFETY & ENVIRONMENT <i>See Initial Home Safety Evaluation</i> ☐ No changes ☐ Change in caregiver/support ☐ Change in physical location ☐ Change in drug storage capabilities ☐ Change in hand hygiene/aseptic ability ☐ Change in pump or equipment safety ☐ Change in risk of falls ☐ Change in screening for abuse/neglect ☐ Staff safety concern	ADHERENCE/COMPLIANCE ☐ No signs of compliance issues ☐ Incorrect doses remaining ☐ Incorrect supplies remaining ☐ Symptoms indicate noncompliance ☐ Interview indicates noncompliance	MEDICATION PROFILE ☐ No review of medication profile ☐ Admission review performed ☐ Update review performed ☐ Med profile reviewed; no changes ☐ Changes made to medication profile																				
ADMINISTRATIVE IV Access Assessment Travel start time: _____ Travel end time: _____ Mileage: _____		Additional Vital Signs <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <th style="width: 25%;">Time</th> <th style="width: 15%;">BP</th> <th style="width: 15%;">P</th> <th style="width: 15%;">R</th> </tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </table>	Time	BP	P	R																
Time	BP	P	R																			
Notes: (Please describe any assessments, teaching needs or care plan considerations based on the assessments and procedures above.) 																						

Overseeing provider for PBIC visits only:

Date:

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Outcome Monitoring and Reporting

Content Tags

accreditation customer satisfaction rating outcome monitoring Performance Improvement PI Vital Outcomes

Description

In order to assess and improve the quality of services provided to customers, as well as the internal performance of staff, the pharmacy should collect outcome data.

Outcome data that is most valid is clinical outcome data (measures or describes the clinical outcomes of the care provided), and perception data (measures or describes the satisfaction and thoughts patients have about the care received).

There are several commercially available database services available in the infusion industry. Vital Care Infusion Services, LLC to franchised pharmacies its proprietary database system Vital Outcomes which has collected and reported individual and aggregate Vital Care network since 1995.

Vital Outcomes, the currently available program on Vital Books, provides reporting on the measures listed in this document.

- The manager or owner will supervise the collection of data to assure that outcome data is collected, reviewed, and used in improvement of the franchised pharmacy.
- The franchised pharmacy will use a database to collect and report data that allows for benchmarking against aggregate data.
- The collection of clinical and/or perception outcome data is required with a minimum of three measures to trend and review recommended number of measures is four.
- The collection of financial or operational data is required by the DMEPOS standards. The franchised pharmacy will collect display data regarding DMEPOS related billing auditing and claims denials. Billing and coding errors for durable medical equipment supplies, as well as nutritional and parenteral nutrient will be reviewed as part of the performance improvement program.
- The collection of patient satisfaction and dissatisfaction data is required by the DMEPOS standards. The franchised pharmacy will aggregate, and display this data.
- The outcome data will be reviewed at each PI committee meeting.
- The data will be used to evaluate the franchised pharmacy's performance and plan improvement activities.
- Staff members responsible for the data entry into and use of the outcome program will receive orientation training and corroboration assessment to assure data reliability.

This policy section was last modified 2/24/2025 11:18:25 AM.

Performance Improvement (PI): Patient Overall Satisfaction Rating (CareTend)

This performance measure has been selected because the organization provides clinical infusion services with a high customer contact service model. The pharmacy is accredited as a provider of DMEPOS Part B supplies/equipment.

The measure full name is "The average (mean) rating by customers of their overall satisfaction with the pharmacy's services".

Performance Measure Elements

Description	The statistical average (mean) rating of patients who completed a satisfaction survey when asked if they agreed that they were satisfied overall with the services provided by the pharmacy. A 1-5 Likert Scale on the survey was used with 1= Strongly disagree and 5=Strongly agree.
Frequency	Monthly
Designation	Designated as the person to enter Vital Outcomes data: Data is entered electronically from the survey link or the QR code on the patient satisfaction survey postcard the patient or caregiver.
Designation	Designated as the person to obtain the monthly incidence from the Vital Outcomes database:
Method of Data Collection	Data is collected via a patient satisfaction survey given to the patient upon discharge from services, or every 6 months for active patients. Data is entered into the Vital Outcomes outcome tracking database upon the discharge of the patient, or every 6 months for active patients.
Acceptable Limits	The acceptable limit is 3 standard deviations from the mean. To determine the benchmark average and acceptable limit refer to the Outcomes Tracking Table on The Central Line. The Outcomes Tracking Table limits and averages are updated, at minimum, every three months based on Vital Outcomes aggregate data. (The Outcomes Tracking Table can be found under the discuss board on The Central Line.)
Receipt of Reports	The reports on the satisfaction rating are presented at the quarterly PI meeting to the pharmacy owner/manager by:

Patient Overall Satisfaction Rating

Re-Evaluation Plans	Failure to meet the threshold will result in the following re-evaluation and actions: • Identify specific grievances, incidents, or complaints received from patients within the last time frame that could impact satisfaction; • Identify changes in services or service model, delivery methods, etc. that could impact satisfaction; • Interview patients who have returned negative ratings for feedback and suggestions for improvement; • Implement improvements; • Re-measure after three months.
---------------------	--

Performance Improvement (PI): Pump Malfunctions (CareTend)

This performance measure has been selected because the organization provides compounded infusion medications and infusion clinical services to patients with complex medical needs and utilizing durable medical equipment such as infusion pumps. The pharmacy is accredited as a provider of DMEPOS equipment and supplies reimbursed by Medicare Part B and uses this measure for compliance with the quality standards.

The measure full name is "The incidence of reported pump malfunctions per 1000 active patient pump therapy days".

Performance Measure Elements

Description	The incidence (rate based ratio with a denominator of 1000) of pump malfunctions documented in the patient's record in CareTend per 1000 active patient pump therapy days.
Frequency	Monthly
Designation	Designated as the person to oversee entry of patient outcomes data into the patient's record in CareTend:
Designation	Designated as the person to obtain the monthly percentage rating from the Vital Outcomes database:
Method of Data Collection	Data is collected via a regularly scheduled follow up form which inquires as to the incidence of specific events including incidents with pumps; Data is collected via regular communication with the patient, caregiver, and home care agency or other healthcare provider. Data is entered into the patient's record in CareTend upon occurrence, or at regular intervals for long term patients.
Acceptable Limits	The acceptable limit is 3 standard deviations from the mean. To determine the benchmark average and acceptable limit refer to the Outcomes Tracking Table on The Central Line. The Outcomes Tracking Table limits and averages are updated, at minimum, every three months based on Vital Outcomes aggregate data. (The Outcomes Tracking Table can be found under the discuss board on The Central Line.)
Receipt of Reports	The reports on the pump malfunctions are presented at the quarterly PI meeting to the pharmacy owner/manager by:

Pump Malfunctions

Re-Evaluation Plans	Failure to meet the threshold will result in the following re-evaluation and actions: • Identify if the value is out of range due to a small patient population; • Review recent on call and risk reports and identify trends in incidence; • Discuss with staff if incidents are related to a particular pump type, therapy type, or patient population; • Discuss, if applicable, with the home care agency or prescriber; • Develop a corrective action plan based on above findings to decrease grievances; • Re-measure in three months
---------------------	---

Pump Programming Log

This form is used by specialty drug pharmacies to log pump programming; completed by Vital Care nurse or pharmacist.

Patient Name:		DOB:
Medical Record Number:		Pump Type:
Mode:	Delay: ☐ Yes ☐ No	
Titrate: ☐ Yes ☐ No		
	Rate 1:	
	Rate 2:	
	Rate 3:	
	Rate 4:	
	Rate 5:	
	Additional Rates:	
	Bag Volume:	
Amount To Be Infused:		
Infusion Rate:		
Infusion Time:		
KVO Rate:		
Bolus Details:		
Lock Level:		
Other details:		
Signatures		
Programmed By:		Date:
2 nd Check By:		Date:

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Risk Reporting

Content Tags

[incident](#) [risk report](#)

Description

In order to improve the quality of services and the safety of customers and staff members, a system should exist to easily report may represent risk. [Risk Reports](#) are valuable tools for the franchised pharmacy's quality assurance committee to evaluate policies, and seek ways to improve safety, and minimize legal exposure.

Risk Reports should not be used as a basis for employee evaluation or as a punitive tool.

Staff members should be encouraged to complete a Risk Report in all appropriate situations whether or not any injury has result potential for injury can be a reportable event. Examples are provided below.

- The franchised pharmacy shall maintain a supply of [Risk Report forms](#) in an accessible file or folder in the office area. The form is available on the Forms Manual, keyword search "risk", or "incident".
- Employees will be instructed on the use of a Risk Report during orientation. The owner and manager will inform employee procedure to report a risk event during non-working hours. The procedure will be explained during initial orientation and on annual risk reporting review meeting. Training will be completed on The Central Line, and documentation of completion will be under The Central Line Transcript and Merits Area.
- Incidents must be reported to a supervisor immediately. When the incident involves USP<797>, it must also be reported to person/trainer.
- The risk will be treated as a confidential internal quality tool. The original will be forwarded directly to the PI records. A copy will be provided to the owner/manager.
- If deemed appropriate by the owner, one copy will be forwarded to legal counsel.
- All Risk Reports will be reviewed at a PI or quality assurance meeting unless it violates employee health information confidentiality or HIPAA regulations.
- The following occurrences should generate a Risk Report:
 - allergic or anaphylactic responses to a dispensed medication
 - adverse and toxic drug reactions (including transfusion reactions)
 - missed doses
 - administration or other medication error
 - incorrectly dispensed medications
 - when sterile compounding sterile preparations have been exposed to, but not limited to the following:
 - prepared with incorrect medication and/or base
 - prepared with incorrect volume of medication and/or base
 - prepared with unfiltered medication that has filter requirements
 - prepared with filtered medication but using wrong size/lot
 - prepared to incorrect final strength or concentration
 - has precipitated
 - contains coring or foreign objects
 - is cloudy or discolored (against normal state per manufacturer)

[Live Chat](#)

- when room tempo stability reached temperatures below room temperature. (review USP <797> and manu guidelines)
 - when refrigerated stability reached temperatures above and/or below refrigeration temperatures (review U manufacturer guidelines).
 - when sterility has been compromised
 - inability of a patient to reach on-call staff
 - malfunctioning equipment resulting in injury or potential injury
 - report by patient of damaged or possible theft of medications/supplies
 - customer allegation of theft of personal property by an employee at a patient home
 - patient endangerment
 - acts of violence
 - adverse patient care/service outcomes
 - motor vehicle accident with staff member
 - suspected abuse by a care partner or other
 - unexpected patient death, including suicide or attempted suicide (See also [Sentinel Events policy](#))
 - patient's debilitation and inability to provide self-care and inadequate support from others
 - unsafe home environment
 - staff endangerment
 - refusal of treatment or procedure by a patient against advice of professional staff
 - patient injuries, both witnessed/un-witnessed, including falls (See also [Sentinel Events policy](#))
 - any exposure or injury to a staff member during the course of work including but not limited to needle stick injury, cytotoxic or hazardous drugs, unprotected exposure to TB or other contagious or infectious diseases by patient care
 - references to legal action by patient, patient caregiver, physician, or attorney; and/or
 - any other undesirable outcome as defined by the organization.
- Clinical incidents involving the patient must be reported to the physician by the end of the next business day and should be soon as feasible.
 - The franchised pharmacy will investigate any incident or injury in which equipment provided may have contributed to the incident. If the incident results in the patient's hospitalization or death, the incident or injury will be investigated within 24 hours after pharmacy becomes aware. For all other incidents, the investigation will begin within 72 hours of the franchised pharmacy becoming aware. The investigation must include all necessary information, conclusions about what happened, and a determination of whether system, equipment, or processes is needed.

This policy section was last modified 3/28/2025 12:19:12 PM.

Performance Improvement (PI): Patient Meeting Therapy Goals (CareTend)

This performance measure has been selected because the organization provides compounded infusion medications and infusion clinical services with ongoing patient monitoring for therapy effectiveness.

The measure full name is "The percentage of patients completing therapy that met their therapy goals."

Performance Measure Elements

Description	The percentage (rate based proportion) of patients who, at the completion of their therapy, it was determined that the therapy course resulted in the patient meeting the intended goal of the therapy.
Frequency	Monthly
Designation	Designated as the person to oversee entry of patient outcomes data into the patient's record in CareTend: The decision of whether the goal was met or not is determined by the clinical staff at the pharmacy:
Designation	Designated as the person to obtain the monthly percentage rating from the Vital Outcomes database:
Method of Data Collection	Data is collected by a review of the patient's clinical record at the completion of therapy by a designated clinician who compares the original treatment goal with the patient's clinical outcome of care.
Acceptable Limits	The acceptable limit is 3 standard deviations from the mean. To determine the benchmark average and acceptable limit refer to the Outcomes Tracking Table on The Central Line. The Outcomes Tracking Table limits and averages are updated, at minimum, every three months based on Vital Outcomes aggregate data. (The Outcomes Tracking Table can be found under the discuss board on The Central Line.)
Receipt of Reports	The reports on the satisfaction rating are presented at the quarterly PI meeting to the pharmacy owner/manager by:

Patient Meeting Therapy Goals

Re-Evaluation Plans	Failure to meet the threshold will result in the following re-evaluation and actions: - Identify specific therapy types that might be contributing factors to the failure to meet goals - Identify specific diagnosis groups that might be contributing factors to the failure to meet goals - Identify if equipment or supply issues might be contributing factors to the failure to meet goals - Identify if adverse events, rehospitalizations, or other emergencies are contributing factors to the failure to meet goals - Discuss, if applicable, with the home care agency or prescriber. - Develop a corrective action plan based on above findings to increase the therapeutic effectiveness.
---------------------	---

ATTACHMENT SM

Sample Medications Data

Medication sourcing protocol - Requirements to use a participating specialty pharmacy for certain medications

UnitedHealthcare commercial plans

To support the provider/patient relationship, participating outpatient providers are required to obtain certain drugs from indicated specialty pharmacies unless otherwise authorized by UnitedHealthcare. The tables below include drugs that require sourcing for all outpatient places of service and/or drugs only requiring sourcing when administered in the outpatient hospital setting.

When one of these medications is appropriately obtained through the indicated specialty pharmacy, the specialty pharmacy will bill UnitedHealthcare directly for the drug under the member's medical benefit. Outpatient providers may only seek reimbursement for administering the medication. Outpatient providers may not bill the member for the medication.

Outpatient providers can contact their Network Contractor with any questions regarding the various contracts/fee schedules for each drug listed below.

This protocol works in conjunction with all UnitedHealthcare policies and protocols and does not replace or supersede them.

Please note: The specialty pharmacy protocol is subject to applicable state laws and regulations and does not apply to UnitedHealthcare West, UMR, Student Resources, UnitedHealthOne and Sierra plan members.

Medication sourcing protocol – all outpatient providers

Places of service: Outpatient hospital, physician office, home, ambulatory infusion
The protocol for the drugs listed in the table below does not apply to providers in Maryland. The protocol is subject to applicable state laws, which may exclude certain plans from the requirements.

Disclaimer: Inclusion in this list does not indicate a drug is covered by a particular plan. Any drug may be subject to other requirements, including but not limited to Review at Launch and/or Medical Benefit Therapeutic Equivalent Medications – Drug Exclusion.

Medication	Therapeutic class	Code(s)	Specialty pharmacy
Bequez™	Gene therapy	J1414	Please contact Provider Services at the number on the back of the member ID card for available options.
Brineura®	Enzyme replacement therapy	J0567	Orsini Pharmaceutical Services Phone: 800-240-9572 Fax: 847-427-7976

Medication	Therapeutic class	Code(s)	Specialty pharmacy
Elevidys®	Gene therapy	J1413	Accredo Health Group Phone: 877-222-7336 Fax: 866-579-4655 Optum® Frontier Therapies Phone: 855-768-9727 Fax: 866-991-9929
Gamifant®	Immune modulator	J9210	Biologics, Inc. Phone: 800-850-4306 Fax: 800-823-4506
Hemgenix™	Gene therapy	J1411	Please contact Provider Services at the number on the back of the member ID card for available options.
Luxturna®	Gene therapy	J3398	Accredo Health Group Phone: 877-222-7336 Fax: 866-579-4655
Roctavian™	Gene therapy	J1412	Please contact Provider Services at the number on the back of the member ID card for available options.
Spinraza®	Spinal muscular atrophy	J2326	Accredo Health Group Phone: 877-222-7336 Fax: 866-579-4655
Vyjuvek™	Gene therapy	J3401	Option Care Health Phone: 833-730-HOPD (4673) Fax: 888-979-8904
Zolgensma®	Gene therapy	J3399	Accredo Health Group Customer Service phone: 877-787-8704 Clinician phone: 800-987-5254 Fax: 877-327-8413 Orsini Pharmaceutical Services, LLC Phone: 800-697-5048 Fax: 877-471-5704

Medication sourcing protocol – outpatient hospital only

The national ancillary network infusion provider column in the table below includes some, but not all, home and/or ambulatory infusion providers that may be used for alternate site of care treatment locations, if appropriate. Providers may use national and regional UnitedHealthcare contracted infusion providers not included in the provided list.

The specialty pharmacy list does not apply to providers in Kentucky, Maryland or Rhode Island. The protocol is subject to applicable state laws, which may exclude certain plans from the requirements.

Medication name	Therapeutic class	Code(s)	Specialty pharmacy	National ancillary network infusion provider(s)
Actemra®	Inflammatory conditions	J3262	Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Optum Specialty Pharmacy	Amerita CarePoint Infusion Center Metro Infusion Center
Adakveo®	Sickle cell disease	J0791	Amber Specialty Pharmacy Caremark (CVS Specialty) Optum Specialty Pharmacy	AleraCare FloMed Infusion Services Metro Infusion Center
Adzynma™	Enzyme replacement therapy	J7171	Orsini Pharmaceutical Services	Option Care Health
Aldurazyme®	Enzyme replacement therapy	J1931	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Optum Specialty Pharmacy Orsini Pharmaceutical Services	Metro Infusion Center AleraCare Amerita
Alyglo™	Immune globulin	J1552	Accredo Health Group	Option Care Health Vital Care Infusion Services Soleo Health
Amondys-45	CNS agents	J1426	Option Care Health Orsini Pharmaceutical Services	Option Care Health
Amvuttra™	CNS agents	J0225	Orsini Pharmaceutical Services PANTHERx Rare Pharmacy	Option Care Health Metro Infusion Center AleraCare
Aralast NP®	Alpha1-proteinase inhibitors	J0256	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Vital Care Infusion Services	AleraCare Amerita FloMed Infusion Services

Medication name	Therapeutic class	Code(s)	Specialty pharmacy	National ancillary network infusion provider(s)
Asceniv™	Immune globulin	J1554	Accredo Health Group Amber Specialty Pharmacy	CarePoint Infusion Center Option Care Health Soleo Health
Avsola™	Inflammatory conditions	Q5121	Amber Specialty Pharmacy	Metro Infusion Center IVX Health Option Care Health
Benlysta	Monoclonal antibody miscellaneous	J0490	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Optum Specialty Pharmacy	CarePoint Infusion Center FloMed Infusion Services Amerita
Beovu®	VEGF	J0179	Accredo Health Group Amber Specialty Pharmacy Optum Specialty Pharmacy	
Bivigam™	Immune globulin	J1556	Amber Specialty Pharmacy Optum Infusion	AleraCare Amerita CarePoint Infusion Center
Briumvi™	Multiple sclerosis	J2329	Option Care Health Optum Specialty Pharmacy	AleraCare FloMed Infusion Services Metro Infusion Center
Byooviz™	VEGF	Q5124	Accredo Health Group	Option Care Health
Cerezyme™	Enzyme deficiency (Gaucher disease)	J1786	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Optum Specialty Pharmacy Orsini Pharmaceutical Services	AleraCare FloMed Infusion Services Metro Infusion Center
Cimzia®	Inflammatory conditions	J0717	Accredo Health Group Amber Specialty Pharmacy Optum Specialty Pharmacy	FloMed Infusion Services Metro Infusion Center Palmetto Infusion Services

Medication name	Therapeutic class	Code(s)	Specialty pharmacy	National ancillary network infusion provider(s)
Cinqair®	Asthma	J2786	Amber Specialty Pharmacy Caremark (CVS Specialty) Optum Specialty Pharmacy	Amerita CarePoint Infusion Center FloMed Infusion Services
Cosentyx® IV	Inflammatory conditions	J3247	Caremark (CVS Specialty)	Option Care Health FloMed Infusion Services
Crysvita®	Endocrine	J0584	Accredo Health Group Amber Specialty Pharmacy Caremark (CVS Specialty) Orsini Pharmaceutical Services PANTHERx Rare Pharmacy	PromptCare Home Infusion Vital Care Infusion Services AleraCare
Cutaquig®	Immune globulin	J1551	Accredo Health Group Amber Specialty Pharmacy Optum Infusion	Option Care Health PromptCare Home Infusion Soleo Health
Cuvitru™	Immune globulin	J1555	Accredo Health Group Optum Infusion	AleraCare FloMed Infusion Services Metro Infusion Center
Elaprase®	Enzyme replacement therapy	J1743	Accredo Health Group Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Optum Specialty Pharmacy Orsini Pharmaceutical Services	AleraCare Amerita FloMed Infusion Services
Elelyso®	Enzyme deficiency (Gaucher disease)	J3060	Accredo Health Group Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Orsini Pharmaceutical Services	AleraCare FloMed Infusion Services Metro Infusion Center
Elfabrio®	Enzyme replacement therapy	J2508	Eversana	Option Care Health
Encelto™	Gene therapy	J3403	Orsini Pharmaceutical Services	
Enjaymo™	Blood-modifying agents	J1302	Caremark (CVS Specialty)	Option Care Health

Medication name	Therapeutic class	Code(s)	Specialty pharmacy	National ancillary network infusion provider(s)
Entyvio®	Inflammatory conditions	J3380	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Optum Specialty Pharmacy Vital Care Infusion Services	Metro Infusion Center FloMed Infusion Services CarePoint Infusion Center
Evkeeza™	Rare conditions	J1305	Orsini Pharmaceutical Services	Option Care Health Metro Infusion Center Palmetto Infusion Services
Exondys 51®	CNS agents	J1428	Amber Specialty Pharmacy Option Care Health Orsini Pharmaceutical Services	Metro Infusion Center Amerita PromptCare Home Infusion
Fabrazyme®	Enzyme replacement therapy	J0180	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Optum Specialty Pharmacy Orsini Pharmaceutical Services	PromptCare Home Infusion AleraCare FloMed Infusion Services
Fasenra®	Asthma	J0517	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Caremark (CVS Specialty) Optum Specialty Pharmacy	FloMed Infusion Services AleraCare PromptCare Home Infusion
Gammagard Liquid®	Immune globulin	J1569	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Caremark (CVS Specialty) Optum Infusion	FloMed Infusion Services CarePoint Infusion Center Palmetto Infusion Services
Gammagard S/D	Immune globulin	J1566	Accredo Health Group AllianceRx Walgreens Pharmacy Optum Infusion	IVX Health Metro Infusion Services PromptCare Home Infusion

Medication name	Therapeutic class	Code(s)	Specialty pharmacy	National ancillary network infusion provider(s)
Gammaked®	Immune globulin	J1561	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Optum Infusion Vital Care Infusion Services	AleraCare FloMed Infusion Services Option Care Health
Gammaplex®	0.125 in	J1557	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Optum Infusion Vital Care Infusion Services	AleraCare FloMed Infusion Services Amerita
Gamunex-C®	Immune globulin	J1561	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Caremark (CVS Specialty) Optum Infusion Vital Care Infusion Services	FloMed Infusion Services CarePoint Infusion Center Palmetto Infusion Services
Givlaari®	Blood-modifying agents	J0223	Accredo Health Group PANTHERx Rare Pharmacy	Metro Infusion Center Palmetto Infusion Services Amerita
Glassia®	Alpha1-proteinase inhibitors	J0257	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Vital Care Infusion Services	FloMed Infusion Services AleraCare Amerita
Hizentra®	Immune globulin	J1559	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Optum Infusion	AleraCare FloMed Infusion Services Metro Infusion Center
HyQvia®	Immune globulin	J1575	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Optum Infusion	AleraCare Amerita CarePoint Infusion Center

Medication name	Therapeutic class	Code(s)	Specialty pharmacy	National ancillary network infusion provider(s)
Ilaris®	Immune modulator	J0638	Accredo Health Group Caremark (CVS Specialty)	AleraCare FloMed Infusion Services CarePoint Infusion Center
Ilumya™	Inflammatory conditions	J3245	Accredo Health Group Amber Specialty Pharmacy Caremark (CVS Specialty) Optum Specialty Pharmacy	IVX Health AleraCare FloMed Infusion Services
Inflectra	Inflammatory conditions	Q5103	Accredo Health Group Amber Specialty Pharmacy Optum Specialty Pharmacy Vital Care Infusion Services	Option Care Health FloMed Infusion Services Metro Infusion Center
Izervay™	Complement inhibitor – ophthalmologic use	J2782	Amber Specialty Pharmacy	Option Care Health
Kanuma®	Enzyme replacement therapy	J2840	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Optum Specialty Pharmacy Orsini Pharmaceutical Services	Palmetto Infusion Services AleraCare Amerita
Kisunla™	CNS agents	J0175	Accredo Health Group	Option Care Health FloMed Infusion Services AleraCare
Krystexxa®	Anti-gout agents	J2507	Accredo Health Group Caremark (CVS Specialty) Optum Specialty Pharmacy	AleraCare CarePoint Infusion Center Palmetto Infusion Services
Lamzedo®	Enzyme replacement therapy	J0217	Eversana	Option Care Health
Lemtrada®	Multiple sclerosis	J0202	Accredo Health Group Caremark (CVS Specialty) Optum Specialty Pharmacy	AleraCare FloMed Infusion Services Metro Infusion Center

Medication name	Therapeutic class	Code(s)	Specialty pharmacy	National ancillary network infusion provider(s)
Leqembi®	CNS agents	J0174	CareMed	Option Care Health AleraCare FloMed Infusion Services
Leqvio®	Cardiology	J1306	Amber Specialty Pharmacy Orsini Pharmaceutical Services Vital Care Infusion Services	Palmetto Infusion Services Vital Care Infusion Services
Lumizyme®	Enzyme replacement therapy	J0221	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Optum Specialty Pharmacy Orsini Pharmaceutical Services	AleraCare FloMed Infusion Services Amerita
Mepsevii™	Enzyme replacement therapy	J3397	Accredo Health Group	Metro Infusion Center
Naglazyme®	Enzyme replacement therapy	J1458	Accredo Health Group AllianceRx Walgreens Pharmacy Caremark (CVS Specialty) Option Care Health Optum Specialty Pharmacy Orsini Pharmaceutical Services	Metro Infusion Center Option Care Health Soleo Health
Nexviazyme™	Enzyme replacement therapy	J0219	Accredo Health Group Amber Specialty Pharmacy Option Care Health Orsini Pharmaceutical Services	Option Care Health Vital Care Infusion Services IVX Health
Niktimvo™	Hematologic	J9038	Caremark (CVS Specialty)	
Nucala®	Asthma	J2182	Accredo Health Group Amber Specialty Pharmacy Optum Specialty Pharmacy Vital Care Infusion Services	Vivo Infusion AleraCare FloMed Infusion Services
Nulibry®	Enzyme replacement therapy	J1809	Biologics, Inc.	

Medication name	Therapeutic class	Code(s)	Specialty pharmacy	National ancillary network infusion provider(s)
Ocrevus®	Multiple sclerosis	J2350	Accredo Health Group Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Optum Specialty Pharmacy	AleraCare Amerita FloMed Infusion Services
Ocrevus Zunovo™	Multiple sclerosis	J2351	Accredo Health Group Optum Specialty Pharmacy	
Octagam™	Immune globulin	J1568	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Optum Infusion Vital Care Infusion Services	AleraCare FloMed Infusion Services Palmetto Infusion Services
OmvoH™ IV	Inflammatory conditions	J2267	Amber Specialty Pharmacy	Flomed Infusion Services IVX Health
Onpattro®	CNS agents	J0222	Caremark (CVS Specialty) Orsini Pharmaceutical Services	AleraCare Amerita FloMed Infusion Services
Orencia IV®	Inflammatory conditions	J0129	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Optum Specialty Pharmacy	AleraCare CarePoint Infusion Center FloMed Infusion Services
Otulfii™	Inflammatory conditions	Q9999	Amber Specialty Pharmacy Optum Specialty Pharmacy	
Oxlumo®	Endocrine	J0224	Orsini Pharmaceutical Services PANTHERx Rare Pharmacy	Metro Infusion Center Soleo Health IVX Health
Panzyga®	Immune globulin	J1576	Accredo Health Group Amber Specialty Pharmacy Optum Infusion Vital Care Infusion Services	AleraCare FloMed Infusion Services Amerita
PiaSky™	Blood modifying agents	J1307	Accredo Health Group	Option Care Health
Pombiliti™	Enzyme replacement therapy	J1203	Orsini Pharmaceutical Services	Option Care Health

Medication name	Therapeutic class	Code(s)	Specialty pharmacy	National ancillary network infusion provider(s)
Privigen™	Immune globulin	J1459	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Caremark (CVS Specialty) Optum Infusion Vital Care Infusion Services	Palmetto Infusion Services IVX Health Option Care Health
Prolastin-C®	Alpha1-proteinase inhibitors	J0256	Accredo Health Group	FloMed Infusion Palmetto infusion services Metro Infusion Center
Pyzchiva™ SC	Inflammatory conditions	Q9996	Amber Specialty Pharmacy	
Pyzchiva™ IV	Inflammatory conditions	Q9997	Amber Specialty Pharmacy	
Qalsody™	CNS agents	J1304	Optum Frontier Therapies	Option Care Health
Radicava®	CNS agents	J1301	AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Option Care Health	AleraCare CarePoint Infusion Center Palmetto Infusion Services
Reblozyl®	Anemia	J0896	Amber Specialty Pharmacy Caremark (CVS Specialty) Optum Specialty Pharmacy	Metro Infusion Center Soleo Health
Remicade®	Inflammatory conditions	J1745	Amber Specialty Pharmacy Option Care Health Vital Care Infusion Services	FloMed Infusion Services AleraCare Amerita
Renflexis®	Inflammatory conditions	Q5104	Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Optum Specialty Pharmacy Vital Care Infusion Services	Option Care Health FloMed Infusion Services Metro Infusion Center
Revcovi®	Enzyme replacement therapy	J3590 C9399	AllianceRx Walgreens Pharmacy Eversana	
Rivfloza™	Endocrine	J3490 J3590 C9399	Caremark (CVS Specialty)	
Ryplazim®	Rare conditions	J2998	Nufactor, Inc.	Soleo Health

Medication name	Therapeutic class	Code(s)	Specialty pharmacy	National ancillary network infusion provider(s)
Rystiggo™	CNS agents	J9333	PANTHERx Rare Pharmacy	AleraCare FloMed Infusion Services Metro Infusion Center
Saphnelo®	Immune modulator	J0491	Amber Specialty Pharmacy Caremark (CVS Specialty)	Option Care Health AleraCare FloMed Infusion Services
Selarsdi™	Inflammatory conditions	Q9998	Amber Specialty Pharmacy	
Simponi Aria®	Inflammatory conditions	J1602	Amber Specialty Pharmacy Option Care Health	AleraCare FloMed Infusion Services Option Care Health
Skyrizi®	Inflammatory conditions	J2327	Option Care Health Vital Care Infusion Services	AleraCare FloMed Infusion Services Metro Infusion Center
Soliris®	Blood-modifying agents	J1299	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Optum Specialty Pharmacy	Metro Infusion Services CarePoint Infusion Center AleraCare
Spevigo™	Inflammatory conditions	J1747	Accredo Health Group	Option Care Health Amerita FloMed Infusion Services
Stelara®	Inflammatory conditions	J3358	Amber Specialty Pharmacy Option Care Health Vital Care Infusion Services	AleraCare CarePoint Infusion Center FloMed Infusion Services
Steqeyma™	Inflammatory conditions	Q5099	Accredo Health Group Caremark (CVS Specialty)	Amerita Optum Infusion Vivo Infusion
Syfovre™	Complement inhibitor – ophthalmologic use	J2781	Optum Specialty Pharmacy	Option Care Health

Medication name	Therapeutic class	Code(s)	Specialty pharmacy	National ancillary network infusion provider(s)
Synagis®	RSV prevention	90378	AllianceRx Walgreens Pharmacy Option Care Health Optum Specialty Pharmacy	PromptCare Home Infusion Option Care Health
Tepezza®	Endocrine	J3241	Accredo Health Group Amber Specialty Pharmacy Option Care Health Vital Care Infusion Services	Metro Infusion Center Palmetto Infusion Services AleraCare
Tezspire™	Asthma	J2356	Accredo Health Group Amber Specialty Pharmacy Caremark (CVS Specialty) Optum Specialty Pharmacy	Option Care Health AleraCare Metro Infusion Center
Tofidence™	Inflammatory conditions	Q5133	Amber Specialty Pharmacy	Vital Care Infusion Services Option Care Health
Tremfya™ IV	Inflammatory conditions	J1628	Accredo Health Group Caremark (CVS Specialty)	FloMed Infusion Services Metro Infusion Center
Tyenne™	Inflammatory conditions	Q5135	Amber Specialty Pharmacy	Option Care Health
Tysabri™	Multiple sclerosis	J2323	AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Option Care Health Optum Specialty Pharmacy	AleraCare FloMed Infusion Services Metro Infusion Center
Tzield™	Immune modulator	J9381	Orsini Pharmaceutical Services	Option Care Health Amerita
Ultomiris®	Blood-modifying agents	J1303	Accredo Health Group Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health Optum Specialty Pharmacy	Amerita CarePoint Infusion Center
Uplizna®	Immune modulator	J1823	Accredo Health Group PANTHERx Rare Pharmacy Vital Care Infusion Services	AleraCare Amerita FloMed Infusion Services
Veopoz™	Blood-modifying agents	J9376	Orsini Pharmaceutical Services	Option Care Health

Medication name	Therapeutic class	Code(s)	Specialty pharmacy	National ancillary network infusion provider(s)
Viltepso®	CNS agents	J1427	Amber Specialty Pharmacy Option Care Health Orsini Pharmaceutical Services	Soleo Health Option Care Health
Vimizim®	Enzyme replacement therapy	J1322	Accredo Health Group AllianceRx Walgreens Pharmacy Caremark (CVS Specialty) Option Care Health Orsini Pharmaceutical Services	AleraCare FloMed Infusion Services Option Care Health
VPRIV®	Enzyme deficiency (Gaucher disease)	J3385	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Amber Specialty Pharmacy Option Care Health Optum Specialty Pharmacy Orsini Pharmaceutical Services	PromptCare Home Infusion AleraCare Amerita
Vyepti™	CNS agents	J3032	AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Option Care Health Orsini Pharmaceutical Services Vital Care Infusion Services	AleraCare Metro Infusion Center Palmetto Infusion Services
Vyondys-53®	CNS agents	J1429	Amber Specialty Pharmacy Option Care Health Orsini Pharmaceutical Services	Metro Infusion Center Amerita PromptCare Home Infusion
Vyvgart®	CNS agents	J9332	Accredo Health Group Caremark (CVS Pharmacy)	Vivo Infusion Palmetto Infusion Services
Vyvgart® Hytrulo®	CNS agent	J9334	Accredo Health Group Amber Specialty Pharmacy	FloMed Infusion Services PromptCare Home Infusion
Wezlana™ SC	Inflammatory conditions	Q5137	Optum Specialty Pharmacy	
Wezlana™ IV	Inflammatory conditions	Q5138	Optum Specialty Pharmacy	

Medication name	Therapeutic class	Code(s)	Specialty pharmacy	National ancillary network infusion provider(s)
Xembify®	Immune globulin	J1558	Accredo Health Group Amber Specialty Pharmacy Optum Infusion	Amerita Option Care Health Palmetto Infusion Services
Xenpozone®	Enzyme replacement therapy	J0218	Caremark (CVS Specialty) Option Care Health	Option Care Health
Xiaflex®	Peyronie's disease, Dupuytren's contracture	J0775	Caremark (CVS Specialty) Optum Specialty Pharmacy	
Xolair®	Asthma	J2357	Accredo Health Group AllianceRx Walgreens Pharmacy Amber Specialty Pharmacy Optum Specialty Pharmacy	IVX Health AleraCare FloMed Infusion Services
Yesintek™	Inflammatory conditions	Q5100	Accredo Health Group Caremark (CVS Specialty) Optum Specialty Pharmacy	Amerita Optum Infusion Vivo Infusion
Zemaira®	Alpha1-proteinase inhibitors	J0256	Accredo Health Group Amber Specialty Pharmacy Caremark (CVS Specialty) Option Care Health	AleraCare Amerita FloMed Infusion Services



Specialty pharmacy contacts

Accredo Health Group – Specialty drugs

Phone: **877-222-7336**

Fax: 866-579-4655

Enrollment form

AllianceRx Walgreens Pharmacy

Phone: **888-282-5166**

Fax: 888-570-4700

Enrollment form

Amber Specialty Pharmacy

Phone: **888-370-1724**

Fax: 402-896-3774

Enrollment form

Biologics, Inc.

Phone: **800-850-4306**

Fax: 800-823-4506

Caremark (CVS Specialty)

Phone: **800-237-2767**

Fax: 800-323-2445

Enrollment form

CareMed

Phone: **877-227-3405**

Fax: 877-542-2731

Enrollment form

Eversana

Phone: **866-849-4481**

Fax: 877-473-3172

Nufactor, Inc

Phone: **800-323-6832**

Fax: 855-270-7347

Enrollment form

Option Care Health

Phone: **833-730-HOPD (4673)**

Fax: 888-979-8904

Enrollment form

Optum Frontier Therapies

Phone: **855-768-9727**

Fax: 866-991-9929

Enrollment form

Optum Infusion Pharmacy

Phone: **877-342-9352**

Fax: 877-542-9352

Enrollment form

Optum Specialty Pharmacy

Phone: **855-427-4682**

Fax: 877-342-4596

Enrollment form

Orsini Pharmaceutical Services

Phone: **800-697-5048**

Fax: 877-471-5704

Enrollment form

PANTHERx Rare Pharmacy

Phone: **855-726-8479, x1115**

Fax: 888-550-7441

Vital Care Infusion Services

Phone: **877-488-4825**

Fax: 877-229-1725

Enrollment form



National ancillary network provider contacts

AleraCare

Phone: **888-209-8874**

Fax: 833-329-4738

Amerita

Phone: **972-815-0460**

Fax: 972-915-3841

CarePoint Infusion Center

Phone: **216-755-4044**

Fax: 330-967-0571

FloMed Infusion Services

Phone: **561-559-9800**

Fax: 561-559-9801

IVX Health

Phone: **614-347-0215**

Fax: 844-627-2675

Metro Infusion Center

Phone: **877-448-3627**

Fax: 866-507-1164

Option Care Health

Phone: **833-730-HOPD (4673)**

Fax: 888-979-8904

Optum Infusion

Phone: **877-342-9352**

Fax: 877-542-9352

Palmetto Infusion Services

Phone: **800-809-1265**

Fax: 866-872-8920

PromptCare Home Infusion

Phone: **866-776-6782**

Fax: 800-815-6808

Soleo Health

Phone: **844-483-4600**

Fax: 844-483-2800

Vital Care Infusion Services

Phone: **877-488-4825**

Fax: 877-229-1725

Vivo Infusion

Phone: **855-478-1528**

Fax: 972-598-0019

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Attachment SC1

Sunrise Companies Additional Information

Question 1: Historical or affiliate quality measures

Although Sunray HHA TN, LLC is a new home health applicant and does not yet have historical patient outcome data, the applicant's common ownership group has a 30-year record of operating geographically dispersed, service-intensive organizations. The Sunray Companies currently supports approximately 700 team members across 43 locations. Affiliate quality measures include multi-year customer NPS, employee eNPS, employee turnover, franchise and brand performance recognition, and recurring executive performance review. As detailed below, from 2021-2025 these metrics have only continued to improve. These measures demonstrate an established culture of measurement, accountability and continuous improvement. They are presented as evidence of enterprise operating capability and are not characterized as clinical outcomes.

Question 2: Staffing and clinical oversight of a comparable geographic area

The applicant's affiliates have substantial experience recruiting, training and supervising a large workforce across multiple markets in Mississippi and Louisiana. The organization uses centralized finance, human resources, leadership development and executive oversight to support local managers and dispersed operations in multiple subsidiaries. The applicant has not previously operated or clinically overseen another Home Health Agency and does not rely on its non-clinical affiliates as a substitute for specialty experience. Sunray HHA TN, LLC and its affiliates will provide clinical oversight through appropriately licensed pharmacy and nursing leaders, Vital Care clinical standards, documented competencies, quality and compliance review, and all applicable Tennessee and federal requirements. Sunray's role is to provide the organizational infrastructure, resources, executive accountability and multi-site operating discipline necessary to support that qualified clinical team.

Details on Metrics/Source Data

Sunray HHA TN, LLC is a new home health applicant and therefore does not yet have historical patient outcome data from its own operations. The applicant nevertheless benefits from common ownership with The Sunray Companies, a mature multi-unit operating organization founded in 1996. Sunray has built and managed geographically dispersed service-intensive businesses for 30 years and currently supports approximately 700 team members across 43 locations. Its portfolio has expanded across multiple service sectors and includes Palm Beach Tan, Massage Envy, Hampton Inn & Suites, Holiday Inn Express & Suites, Home2 Suites, My Salon Suite, and Storage Nutz.

This information addresses the Health Facilities Commission's supplemental questions by separating two concepts: (1) demonstrated organizational quality and operating discipline within affiliated entities, and (2) clinical governance that will be supplied through qualified pharmacy and nursing leadership, applicable licensure, Vital Care standards, and Tennessee-specific oversight. This information does not represent that non-clinical affiliates are substitutes for licensed clinical expertise, but hiring clinical expertise for a home health agency is not dissimilar from hiring other necessary expertise in other business lines of Sunray.

While the ownership group is new to infusion pharmacy operations, it is not new to recruiting large workforces, managing multi-site operations, measuring customer and employee outcomes, maintaining brand and regulatory standards, and sustaining accountable executive oversight.

Sunray's affiliated operations use a common management infrastructure designed to create consistent execution across locations. While the specific regulatory requirements vary by brand and service line, the organization applies recurring disciplines that are directly relevant to the successful launch and oversight of Vital Care of Nashville. These include:

Quality discipline	How it supports reliable operations
Executive accountability	Division leaders and corporate officers review performance, workforce, financial and customer metrics.
Standard operating procedures	Locations operate through documented brand standards, local procedures and recurring management routines.
Training and development	Formal onboarding, manager development and leadership programs support competency and succession.
Performance dashboards	NPS, eNPS, turnover and operating KPIs are tracked over time and reviewed for corrective action.
Quality assurance	Franchise inspections, brand service measures and operating reviews establish external and internal accountability.
Continuous improvement	Leaders identify performance gaps, assign ownership, test corrective actions and monitor results.
Escalation and communication	Corporate leaders support local management when an issue exceeds location-level authority or resources.

Sunray uses Net Promoter Score (NPS) to evaluate whether guests and members would recommend its services. Multi-year data demonstrate sustained measurement and material improvement in several divisions. The measure is not presented as a clinical outcome; it is evidence of a mature feedback system and executive focus on service quality. For the Sunray's largest divisions (Hotels, Massage Envy, and Palm Beach Tan), all three measured divisions ended 2025 above their 2021 levels, with the highest being above 90%. Sunray RX NSHTN, LLC and Sunray HHA TN LLC will utilize NPS in a similar fashion with home health patients and their families, as well as other metrics and tools noted in the application.

Employee Net Promoter Score (eNPS) provides a recurring measure of whether team members would recommend Sunray as a place to work. A strong workforce culture is especially relevant to a clinical start-up because recruitment, retention, communication and escalation practices affect continuity and reliability of service. Sunray's overall eNPS has consistently improved from 2017 to now and is currently at an all-time

high. This nine-year trend provides evidence of sustained employee listening, leadership follow-through and measurable improvement in workforce advocacy.

Employee turnover rate (ETR) is monitored across divisions because high turnover affects service continuity, training costs and management capacity. Sunray's overall turnover has declined by more than 50% since 2021. This trend reflects organizational experience in recruiting, onboarding, developing and retaining teams across numerous locations.

Sunray currently operates a dispersed portfolio across Mississippi and Louisiana, including urban, suburban and smaller community markets. The operating model requires centralized support with accountable local leadership, recruiting across multiple labor markets, remote performance monitoring, travel between locations, and escalation of location-specific issues to division and corporate leadership.

Capability	Relevant affiliate experience	Application to Vital Care
Multi-market staffing	Approximately 700 team members across 43 locations.	Demonstrates workforce planning, recruiting infrastructure, payroll/HR support and management span.
Local leadership	Each location or market operates with designated managers supported by division leaders.	Supports clear accountability for pharmacy operations, nursing services and referral development.
Centralized support	Finance, people development, marketing, operations and executive functions serve multiple divisions.	Provides infrastructure for compliance administration, budgeting, recruiting, reporting and quality review.
Geographic oversight	Executive and division leaders oversee sites across two states and varied market sizes.	Demonstrates ability to monitor dispersed performance and deploy support where needed.
Professional workforce	Massage Envy and My Salon Suite operations involve licensed professionals and credential-dependent services.	Relevant to credential tracking and professional workforce management, while not equivalent to infusion clinical oversight.

External Recognition and Awards

Awards are supporting evidence of sustained quality and leadership. They should be presented as corroboration of the measured outcomes in this report, not as a substitute for quantitative performance data.

Division / organization	Recognition
The Sunray Companies	2025 Multi-Unit Franchise Magazine Spirit of Franchising Award MVPs - Monica and Ray Harrigill.
Palm Beach Tan	2025 Comp Store of the Year - Youngsville, Louisiana.

Palm Beach Tan	Highest NPS Award, 15-24 stores, 2021-2025.
Palm Beach Tan	Highest Franchise PRA, 15-24 stores, 2021-2025.
Palm Beach Tan	Highest Franchise SPRA, 15-24 stores, 2022-2025.
Massage Envy	2021 Pioneer Award; 2016 Franchisee of the Year; 2016 Momentum Award; 2014 Multi-Unit Franchisee of the Year.
My Salon Suite	2022 Beauty in Giving (BIG) Award.
Hotels	2022 Q4 Hampton Brand Service Impact Challenge Winner - Hampton Inn Hammond.
Hotels	2022 Q1 Hampton Brand Most Improved Overall Service Awards - Hampton Inn & Suites Thibodaux and Grenada.

ATTACHMENT 1N CRITERIA AND STANDARDS

STATE OF TENNESSEE
STATE HEALTH PLAN
CERTIFICATE OF NEED STANDARDS AND CRITERIA
FOR
HOME HEALTH SERVICES

1. Determination of Need: In a given county, 1.5 percent of the total population will be considered as the need estimate for home health services in that county. This 1.5 percent formula will be applied as a general guideline, as a means of comparison within the proposed Service Area.

Response: Please see Table 1N-2R below, which uses the 1.5 percent formula for 2025 (the latest available year of JAR data) and projects need for three years to 2028. The Applicant notes that the underlying rationale stated for this standard is conservative, which has been acknowledged by the Agency in multiple prior applications.

Further, the Applicant believes that the home health services determination of need formula is not applicable to the services it proposes to develop home health services limited to delivering home infusion therapies. As such, the need for the proposed project is supported by qualitative factors beyond the quantitative determination of need formula defined above. These factors are discussed in detail in the response to #4 below.

It should also be noted that in recent years, the Health Facilities Commission ("HFC") has consistently approved CON applications proposing to establish home care organizations limited to home infusion services, despite the 1.5 percent formula. Most recently, the HFC approved an application from Naven Health, LLC to develop a home care organization limited to home infusion and related nursing services Naven Health, LLC. The HFC has also recently approved CON applications from OPTIVRX, LLC (CN2602-006A), River City Infusion, LLC (CN2511-042A), Blueberry Health Infusion Nursing, LLC (CN2505-019), Amerita, Inc. (CN2503-008A), and KabaFusion TN (CN2405-012A and CN2408-021A), among others, that proposed to provide home infusion services. As with these past projects, the HFC should not rely solely on the need formula above to evaluate project.

For a detailed discussion of the need for the applicant's proposed project, see the response to #4 of the Standards and Criteria below.

2. The need for home health services should be projected three years from the latest available year of final JAR data.

Response: Please see Table 1N-2R below for the current and future estimated need in each of the 95 proposed service area counties, using the 1.5 percent formula.

<i>County</i>	<i>Population</i>		<i>Estimated Need (at 1.5%)</i>	
	<i>2025</i>	<i>2028</i>	<i>2025</i>	<i>2028</i>
Anderson	80,627	81,949	1,209	1,229
Bedford	54,010	56,016	810	840

County	Population		Estimated Need (at 1.5%)	
	2025	2028	2025	2028
Benton	15,837	15,619	238	234
Bledsoe	15,248	15,596	229	234
Blount	144,400	148,094	2,166	2,221
Bradley	113,913	116,791	1,709	1,752
Campbell	39,385	39,040	591	586
Cannon	15,075	15,283	226	229
Carroll	28,559	28,564	428	428
Carter	55,741	54,921	836	824
Cheatham	42,603	43,156	639	647
Chester	17,741	17,797	266	267
Claiborne	32,413	32,276	486	484
Clay	7,499	7,370	112	111
Cocke	37,242	37,372	559	561
Coffee	61,896	63,886	928	958
Crockett	13,818	13,727	207	206
Cumberland	65,861	67,514	988	1,013
Davidson	728,443	748,344	10,927	11,225
Decatur	11,549	11,494	173	172
DeKalb	21,727	22,316	326	335
Dickson	57,739	59,394	866	891
Dyer	36,105	35,690	542	535
Fayette	44,948	45,972	674	690
Fentress	19,687	19,880	295	298
Franklin	44,787	45,420	672	681
Gibson	51,352	51,761	770	776
Giles	30,757	30,899	461	463
Grainger	24,579	24,753	369	371
Greene	72,656	73,351	1,090	1,100
Grundy	13,743	13,664	206	205
Hamblen	66,340	67,301	995	1,010
Hamilton	385,843	395,600	5,788	5,934
Hancock	6,810	6,740	102	101
Hardeman	25,028	24,488	375	367
Hardin	27,405	27,580	411	414
Hawkins	58,537	58,654	878	880
Haywood	17,222	16,856	258	253
Henderson	27,958	27,882	419	418

<i>County</i>	<i>Population</i>		<i>Estimated Need (at 1.5%)</i>	
	<i>2025</i>	<i>2028</i>	<i>2025</i>	<i>2028</i>
Henry	32,439	32,368	487	486
Hickman	25,688	25,781	385	387
Houston	8,181	8,131	123	122
Humphreys	19,372	19,525	291	293
Jackson	12,180	12,277	183	184
Jefferson	58,783	60,245	882	904
Johnson	18,008	17,844	270	268
Knox	508,654	521,808	7,630	7,827
Lauderdale	24,139	23,432	362	351
Lawrence	46,311	47,052	695	706
Lake	6,376	6,178	96	93
Lewis	13,172	13,334	198	200
Lincoln	36,570	37,055	549	556
Loudon	61,596	64,471	924	967
Macon	27,378	28,444	411	427
Madison	99,089	98,555	1,486	1,478
Marion	29,265	29,303	439	440
Marshall	37,788	39,397	567	591
Maury	116,119	123,660	1,742	1,855
McMinn	55,752	56,485	836	847
McNairy	26,089	26,078	391	391
Meigs	13,769	14,149	207	212
Monroe	48,951	49,711	734	746
Montgomery	251,815	268,290	3,777	4,024
Moore	6,795	6,840	102	103
Morgan	21,091	20,806	316	312
Obion	30,207	29,907	453	449
Overton	23,336	23,525	350	353
Perry	8,952	9,153	134	137
Pickett	5,048	4,989	76	75
Polk	18,244	18,500	274	278
Putnam	85,418	87,978	1,281	1,320
Rhea	33,948	34,085	509	511
Roane	55,607	55,778	834	837
Robertson	77,700	79,710	1,166	1,196
Rutherford	388,909	415,694	5,834	6,235
Scott	21,975	21,863	330	328

<i>County</i>	<i>Population</i>		<i>Estimated Need (at 1.5%)</i>	
	<i>2025</i>	<i>2028</i>	<i>2025</i>	<i>2028</i>
Sequatchie	17,603	18,204	264	273
Sevier	101,026	102,966	1,515	1,544
Shelby	911,049	904,554	13,666	13,568
Smith	20,715	20,871	311	313
Stewart	14,231	14,369	213	216
Sullivan	164,002	166,122	2,460	2,492
Sumner	215,234	226,250	3,229	3,394
Tipton	62,044	62,080	931	931
Trousdale	12,512	12,825	188	192
Unicoi	17,613	17,472	264	262
Union	20,745	20,926	311	314
Van Buren	6,604	6,748	99	101
Warren	42,888	43,540	643	653
Washington	140,553	143,951	2,108	2,159
Wayne	16,112	15,869	242	238
Weakley	32,535	31,915	488	479
White	28,569	28,977	429	435
Williamson	277,193	293,501	4,158	4,403
Wilson	171,708	183,713	2,576	2,756
Grand Total	7,242,733	7,410,264	108,641	111,154

3. The use rate of existing home health agencies in each county of the Service Area will be determined by examining the latest utilization rate as calculated from the JARs of existing home health agencies in the Service Area. Based on the number of patients served by home health agencies in the Service Area, an estimation will be made as to how many patients could be served in the future.

Response: Please see Table 1N-3R below for the home health patient utilization rate by county for 2025, as well as the use rate per 1,000 patients.

<i>County</i>	<i>Population (2025)</i>	<i>Home Health Patients (2025)</i>	<i>Use Rate (2025)</i>
Anderson	30,757	734	0.0238644861
Bedford	24,579	639	0.0259978030
Benton	72,656	1,859	0.0255863246
Bledsoe	66,340	1,708	0.0257461562
Blount	385,843	9,720	0.0251915935
Bradley	6,810	125	0.0183553598
Campbell	25,028	820	0.0327633051
Cannon	27,405	910	0.0332056194
Carroll	58,537	1,244	0.0212515161
Carter	17,222	420	0.0243874115
Cheatham	27,958	908	0.0324772874
Chester	32,439	1,033	0.0318443848
Claiborne	25,688	704	0.0274057926
Clay	8,181	262	0.0320254248
Cocke	19,372	688	0.0355151765
Coffee	12,180	352	0.0288998358
Crockett	58,783	1,060	0.0180324243
Cumberland	18,008	466	0.0258773878
Davidson	508,654	8,947	0.0175895599
Decatur	24,139	753	0.0311943328
DeKalb	46,311	1,340	0.0289348103
Dickson	13,172	394	0.0299119344
Dyer	36,570	1,145	0.0313098168
Fayette	61,596	1,950	0.0316578999
Fentress	27,378	657	0.0239973702
Franklin	99,089	2,709	0.0273390588
Gibson	29,265	663	0.0226550487
Giles	37,788	747	0.0197681804
Grainger	116,119	2,463	0.0212109991
Greene	55,752	1,624	0.0291289999
Grundy	13,743	469	0.0341264644
Hamblen	26,089	990	0.0379470275
Hamilton	13,769	494	0.0358776963
Hancock	48,951	1,445	0.0295193152
Hardeman	251,815	4,223	0.0167702480

<i>County</i>	<i>Population (2025)</i>	<i>Home Health Patients (2025)</i>	<i>Use Rate (2025)</i>
Hardin	6,795	106	0.0155997057
Hawkins	21,091	590	0.0279740174
Haywood	30,207	1,074	0.0355546728
Henderson	23,336	739	0.0316678094
Henry	8,952	258	0.0288203753
Hickman	5,048	176	0.0348652932
Houston	18,244	474	0.0259811445
Humphreys	85,418	2,288	0.0267859233
Jackson	33,948	938	0.0276304937
Jefferson	55,607	1,837	0.0330354092
Johnson	77,700	1,628	0.0209523810
Knox	388,909	6,095	0.0156720467
Lake	6,376	257	0.0403074028
Lauderdale	21,975	683	0.0310807736
Lawrence	17,603	348	0.0197693575
Lewis	101,026	2,029	0.0200839388
Lincoln	911,049	16,171	0.0177498686
Loudon	20,715	670	0.0323437123
Macon	14,231	469	0.0329562223
Madison	164,002	5,456	0.0332678870
Marion	215,234	4,527	0.0210329223
Marshall	62,044	1,443	0.0232576881
Maury	12,512	261	0.0208599744
McMinn	17,613	753	0.0427525123
McNairy	20,745	447	0.0215473608
Meigs	6,604	122	0.0184736523
Monroe	42,888	1,479	0.0344851707
Montgomery	140,553	4,117	0.0292914417
Moore	16,112	677	0.0420183714
Morgan	32,535	1,035	0.0318118949
Obion	28,569	706	0.0247121005
Overton	277,193	4,264	0.0153827838
Perry	171,708	4,089	0.0238136837
Pickett	7,222,614	165501	0.0229142801
Polk	30,757	734	0.0238644861
Putnam	24,579	639	0.0259978030

<i>County</i>	<i>Population (2025)</i>	<i>Home Health Patients (2025)</i>	<i>Use Rate (2025)</i>
Rhea	72,656	1,859	0.0255863246
Roane	66,340	1,708	0.0257461562
Robertson	385,843	9,720	0.0251915935
Rutherford	6,810	125	0.0183553598
Scott	25,028	820	0.0327633051
Sequatchie	27,405	910	0.0332056194
Sevier	58,537	1,244	0.0212515161
Shelby	17,222	420	0.0243874115
Smith	27,958	908	0.0324772874
Stewart	32,439	1,033	0.0318443848
Sullivan	25,688	704	0.0274057926
Sumner	8,181	262	0.0320254248
Tipton	19,372	688	0.0355151765
Trousdale	12,180	352	0.0288998358
Unicoi	58,783	1,060	0.0180324243
Union	18,008	466	0.0258773878
Van Buren	508,654	8,947	0.0175895599
Warren	24,139	753	0.0311943328
Washington	46,311	1,340	0.0289348103
Wayne	13,172	394	0.0299119344
Weakley	36,570	1,145	0.0313098168
White	61,596	1,950	0.0316578999
Williamson	27,378	657	0.0239973702
Wilson	99,089	2,709	0.0273390588
Grand Total	7,242,733	166,227	0.0229508668

4. County Need Standard: The applicant should demonstrate that there is a need for home health services in each county in the proposed Service Area by providing documentation (e.g., letters) where: a) health care providers had difficulty or were unable successfully to refer a patient to a home care organization and/or were dissatisfied with the quality of services provided by existing home care organizations based on Medicare's system Home Health Compare and/or similar data; b) potential patients or providers in the proposed Service Area attempted to find appropriate home health services but were not able to secure such services; c) providers supply an estimate of the potential number of patients that they might refer to the applicant.

Response: As previously noted above, Attachment 1N-3R does not capture the specific need for home infusion therapy services, as very few HHAs in Tennessee offer such services. In fact, as shown in Attachment 5N, of the 175 Tennessee HHAs reported in the 2025 JARs for Home Health Agencies, only 13, or seven percent, provided home infusion therapy services. Additionally, many of the HHAs that provide home infusion therapy services can only serve patients of their own specialty pharmacies. For example, TwelveStone Infusion Support (CN2205-025A) is limited to serving “pharmacy patients of pharmacies which are subsidiaries of TwelveStone Holdings, Inc.” Similarly, KabaFusion TN (CN2405-012A and CN2408-021A) was approved to serve “pharmacy patients of pharmacies which are subsidiaries of KabaFusion Holding LLC.” The utilization of these two existing HHAs in the 2025 JAR for Home Health Agencies 80 unduplicated patients for TwelveStone Infusion Support and 10 unduplicated patients for KabaFusion TN supports this exclusivity. The applicant intends to only serve patients of its affiliated pharmacy, and would also note that two other recently approved CON applications for “infusion only” Home Health Agencies (River City Infusion, LLC (CN2511-042A) and Blueberry Health Infusion Nursing, LLC (CN2505-019) showed similar intentions to only serve patients of an affiliated pharmacy, and both were for other franchises of Vital Care, quite similar to this application. Approval of this application by the HFC would provide for a Vital Care franchisee to operate from pharmacy and in-suite infusion locations in all four of Tennessee’s major metropolitan areas, as the HFC first approved a CON in 2022 for the Vital Care franchisee in Memphis, then a CON in 2025 for the Vital Care franchisee in Knoxville, then a CON in early 2026 for the Vital Care franchisee in Chattanooga, and now the applicant seeks this CON for the greater Nashville area, which is the largest of the metropolitan areas in Tennessee (a population in excess of 2,000,000, as noted elsewhere in this application).

Because of this “patients of related pharmacy only” structure for most existing or approved home infusion providers, these home infusion providers do not have the ability to provide home infusion care to other patients requiring such care, and the applicant believes this is a segment of the home health industry which is clearly distinct from the traditional home health model, and which the HFC has previously acknowledged by approving the other CON applications noted above.

The applicant is a franchisee of VitaCare, as noted elsewhere in this application, with a network of providers which specializes in delivering infusion care to patients with chronic conditions, including:

- Alpha 1 Therapy
- Antibiotics
- Hemophilia Therapy
- Steroids
- Enzyme Replacement
- Immunotherapies
- Biologics
- Inotropes
- HIV Therapy
- First-Dosing

Specialty Pharmacy Partners Need for Home Health Providers

As mentioned throughout the application, very few existing HHAs in Tennessee provide home infusion services. This is largely due to the specialization needed to provide this type of care. Home infusion care, which involves administering specialty drugs, is typically delivered frequently, often several times a week over a period of multiple weeks. This requires complex coordination of care and nursing staff who are familiar with infusion medications and administration methods. Traditional HHAs generally do not have the professional expertise or capacity to deliver this type of care. As such, home infusion requires a specialized provider with appropriately trained staff and the staffing necessary to support infusion medication administration.

Accessibility and Care Benefits of Home Infusion Services

Based on the latest available U.S. Census data, 79 of the 95 counties in Tennessee are rural (82 percent) (see Tennessee County Geographic Classifier Reference File, Tennessee State Data Center, Boyd Center for Business and Economic Research, The University of Tennessee at Knoxville, at <https://tnsdc.utk.edu/2023/09/28/2023-tennessee-county-geographic-classifier-reference-file/>)

Rural patient populations have more difficulty accessing healthcare services and an overall greater need for healthcare services. Compared to patients in urban areas, rural patients are more likely to suffer from chronic diseases and worse health outcomes, which leads to elevated rates of morbidity and excess mortality. Residents in these areas also face multiple barriers to accessing vital medical care, including longer travel distances to healthcare providers, higher uninsured rates, and poorer health literacy. Importantly for this project, research also shows that rural areas are far less likely than urban areas to have adequate access to home health services. Findings from the Rural & Minority Health Research Center indicated that 10.3 percent of rural ZIP Code Tabulation Areas (ZCTAs) lack any home health services, compared to only 2.2 percent of urban ZCTAs. (see Current Epidemiology Reports, 2023, 10(1), pp. 1-16. Published online November 9, 2022, at <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9644394/>, Rural Health Information Hub. Last updated November 9, 2023, at <https://www.ruralhealthinfo.org/topics/healthcare-access#barriers>, Zip Code data published by the United States Census Bureau, last revised August 10, 2023, at <https://www.census.gov/programs-surveys/geography/guidance/geo-areas/zctas.html>, and "Rural Home Health Services" Rural Health Information Hub. Last updated February 9, 2026, at <https://www.ruralhealthinfo.org/topics/home-health>).

Given that patients receiving specialty infusion medications are likely sicker and may have greater difficulties travelling to a specific location for care, it is important that these chronically ill patients have readily accessible healthcare options, including the opportunity to receive infusion care in their homes. Further, the advantages of home-based infusion extend well beyond the improvement of patient choice. For patients managing chronic or complex conditions the ability to receive infusion therapy in the home setting represents a meaningful clinical and quality-of-life benefit that cannot be replicated in an ambulatory infusion center. In the home setting, patients can receive their prescribed therapies on a schedule that accommodates their daily lives, reducing the disruptions to work, family obligations, and routine that are an unavoidable consequence of repeated visits to an outpatient facility. This flexibility supports patient adherence to prescribed

treatment regimens - a critical factor in achieving outcomes for patients managing conditions requiring long-term infusion therapy.

Home infusion also facilitates a more personalized and continuous care relationship between the patient and the clinical team. Skilled nurses who deliver home infusion services develop an intimate familiarity with the patient's living environment, support systems, and day-to-day health status insights that are difficult to develop through periodic visits to an outpatient facility. This continuity of care enables clinicians to identify changes in a patient's condition more quickly, intervene proactively, and communicate more effectively with the broader care team, all of which contribute to better health outcomes and reduced rates of preventable hospitalization.

More generally, given the relatively small number of home infusion providers in Tennessee, adding another Vital Care franchisee capable of serving patients in all 95 service area counties promotes care that is cost-effective. If patients cannot receive their medications at home, they must instead travel to receive these medications in an outpatient setting. This results in unnecessary travel for the patient or a expenses for travel. For rural patients, this is especially significant. Worse, in some cases, patients who do not receive their medications in a timely manner may have to be admitted to an acute care facility and receive their medications on an inpatient basis. This is a much more costly means of receiving care and may result in undue stress for that patient and their loved ones. Administering these infusions in the home setting is more cost-effective than other settings, especially for patients receiving multiple infusion treatments for an extended period of time.

5. Current Service Area Utilization: The applicant should document by county: a) all existing providers of home health services within the proposed Service Area; and b) the number of patients served during the most recent 12-month period for which data are available. To characterize existing providers located within Tennessee, the applicant should use final data provided by the JARs maintained by the Tennessee Department of Health. In each county of the proposed Service Area, the applicant should identify home health agencies that have reported serving 5 or fewer patients for each of the last three years based on final and available JAR data. If an agency in the proposed Service Area who serves few or no patients is opposing the application, that opponent agency should provide evidence as to why it does not serve a larger number of patients.

Response: The applicant believes the existing relationships of the lead pharmacist of the applicants related pharmacy with numerous providers, plus outreach intended by the applicant to the provider community, will be beneficial for the referral of home infusion patients for the applicant to serve. As previously cited by other recent home infusion only applicants, the Tennessee Joint Annual Reports, have shown in previous years, and continue to show, that despite the number of licensed home health agencies in Tennessee, very few seek to provide, or provide, home infusion in Tennessee.

6. Adequate Staffing: Using TDH Licensure data, the applicant should document a plan demonstrating the intent and ability to recruit, hire, train, assess competencies of, supervise, and retain the appropriate numbers of qualified personnel to provide the services described in the application and document that such personnel are available to work in the proposed Service

Area. The applicant should state the percentage of qualified personnel directly employed or employed through a third party staffing agency.

Response: The applicant will employ trained RNs to provide the home infusions, with one of the RNs providing administrative duties as a nurse manager. The nurse manager will report to the pharmacist, who oversees the administration of all pharmaceuticals, including intravenous administration of the therapy. The applicant will have qualified nursing staff available to patients to provide on-call coverage 24/7. In addition, please see Attachment SC1 to the applicant's supplemental answers for more information as to the substantial experience of various affiliates of the applicant as to recruiting, hiring, training and supervising (and assessing the competencies of) a large workforce across multiple service businesses in various markets in Mississippi and Louisiana, which the applicant believes will be helpful in staffing and operating a home health agency in Tennessee. That attachment also provides information as to how the centralized finance, human resources, leadership development and executive oversight with the Sunray Companies support local managers and dispersed operations in multiple subsidiaries.

7. Community Linkage Plan: The applicant should provide a community linkage plan that demonstrates factors such as, but not limited to, referral arrangements with appropriate health care system providers/services (that comply with CMS patient choice protections) and working agreements with other related community services assuring continuity of care focusing on coordinated, integrated systems. A new provider may submit a proposed community linkage plan.

Response: The applicant believes the existing relationships of the lead pharmacist of the applicants related pharmacy with numerous providers, plus outreach intended by the applicant to the provider community, will be beneficial for the referral of home infusion patients for the applicant to serve, and referral arrangements with appropriate health care system providers/services as well as working agreements with other related community services assuring continuity of care.

8. TennCare Managed Care Organizations (MCOs) and Financial Viability: Given the time frame required to obtain Medicare certification, an applicant proposing to contract with the Bureau of TennCare's MCOs should provide evidence of financial viability during the time period necessary to receive such certification. Applicants should be aware that MCOs are under no obligation to contract with home care organizations, even if Medicare certification is obtained, and that Private Duty Services are not Medicare certifiable services. Applicants who believe there is a need to serve TennCare patients should contact the TennCare MC_Qs in the region of the proposed Service Area and inquire whether their panels are open for home health services, as advised in the notice posted on the HSDA website, to determine whether at any given point there is a need for a provider in a particular area of the state; letters from the TennCare MCOs should be provided to document such need. See Note 2 for additional information. Applicants should also provide information on projected revenue sources, including non-TennCare revenue sources.

Response: Sunray RX NSHTN, LLC will participate in traditional Medicare (including Part B and Part D) and Medicare Advantage, and the applicant intends to participate in Medicare Advantage, and Medicare Advantage Plans cover home infusion nursing services. Like other Vital Care franchisees, Sunray RX NSHTN, LLC also intends to be a supplier of infusion related DME for in-home use. The applicant anticipates that 100% of the home infusion therapy visits would be

ligible for coverage under the Medicare Home Infusion Therapy Benefit. Sunray RX NSHTN, LLC 's anticipated credentialing and participation with Medicare (which credentialing and participation is not subject to any current CMS moratorium) will be for the eligible therapies under the benefits for which they are eligible, with most therapies being billed under the pharmacy benefit, or Part D, especially for Medicare Advantage patients. Other pharmaceuticals covered by the Medicare Part B benefit are required to be administered in a hospital outpatient center or ambulatory infusion clinic under medical director supervision. Anti-infectives administered under Medicare Part B are typically not covered by this benefit and would be covered under a home health visit instead for dressing changes and line management.

9. Proposed Charges: The applicant's proposed charges should be reasonable in comparison with those of other similar agencies in the Service Area or in adjoining service areas. The applicant should list:

- a. The average charge per visit and/or episode of care by service category, if available in the JAR data.
- b. The average charge per patient based upon the projected number of visits and/or episodes of care and/or hours per patient, if available in the JAR data.

Response: The applicant believes its proposed charges are reasonable in comparison with those of other similar specialty agencies in the state, including other Vital Care franchisees. As noted in the application the number of visits and the length of those visits will vary based on the medication and other circumstances, being infuse (these services can be nursing hour intensive, at times exceeding 4 or more hours, depending on the variables noted).

10. Access: In concert with the factors set forth in HSDA Rule 0720-11-.01(1) (which lists those factors concerning need on which an application may be evaluated), the HSDA may choose to give special consideration to an applicant that is able to show that there is limited access in the proposed Service Area for groups with special medical needs such as, but not limited to, medically fragile children, newborns and their mothers, and HIV/ AIDS patients. Pediatrics is a special medical needs population, and therefore any provider applying to provide these services should demonstrate documentation of adequately trained staff specific to this population's needs with a plan to provide ongoing best practice education. For purposes of this Standard, an applicant should document need using population, service, special needs, and/or disease incidence rates. If granted, the Certificate of Need should be restricted on condition, and thus in its licensure, to serving the special group or groups identified in the application. The restricting language should be as follows: CONDITION: Home health agency services are limited to (identified specialty service group); the expansion of service beyond (identified specialty service group) will require the filing of a new Certificate of Need application. Please see Note 3 regarding federal law prohibitions on discrimination in the provision of health care services.

Response: As noted in the application home infusion has been shown to generally be available at a lower cost than infusions in other settings, and payors are sometimes requiring home infusions as the better alternative. Home infusion is more convenient for patients, especially those with long term chronic conditions requiring ongoing infusions.

11. Quality Control and Monitoring: The applicant should identify and document its existing or proposed plan for data reporting (including data on patient re-admission to hospitals), quality improvement, and an outcome and process monitoring system (including continuum of care and transitions of care from acute care facilities). If applicable, the applicant should provide documentation that it is, or that it intends to be, fully accredited by the Joint Commission, the Community Health Accreditation Program, Inc., the Accreditation Commission for Health Care, and/or other accrediting body with deeming authority for home health services from CMS.

Response: The applicant believes Sunray RX NSHTN, LLC will receive its ACHC accreditation before the applicant, and the applicant intends to obtain the appropriate category by ACHC following licensure as a home health agency.

12. Data Requirements: Applicants should agree to provide the Department of Health and/or the Health Services and Development Agency with all reasonably requested information and statistical data related to the operation and provision of services and to report that data in the time and format requested. As a standard of practice, existing data reporting streams will be relied upon and adapted over time to collect all needed information.

Response: The applicant agrees to provide the Health Facilities Commission and any other required agencies with all reasonably requested information and statistical data related to its operations and the provision of services, and to timely report such data and information.

Replacement Attachment
R3NB (08.13.2026; 2:30PM)

Demographic Variable/Geographic Area	Department of Health/Health Statistics							Census Bureau				TennCare	
	Total Population- Current Year (2025)	Total Population- Projected Year (2028)	Total Population-% Change	*Target Population- Current Year (2025)	Target Population- Project Year (2028)	Target Population-% Change	Target Population Projected Year as % of Total	Median Age	Median Household Income	Person Below Poverty Level*	Person Below Poverty Level as % of Total	TennCare Enrollees	TennCare Enrollees as % of Total
Anderson	80,627	81,949	1.6%	80,627	81,949	1.6%	1.11%	41.6	\$66,183	11,370	11.5	15,221	18.9%
Bedford	54,010	56,016	3.7%	54,010	56,016	3.7%	0.76%	37.6	\$55,273	6,862	12.2	12,073	22.4%
Benton	15,837	15,619	-1.4%	15,837	15,619	-1.4%	0.21%	47.5	\$67,225	2,920	17	3,993	25.2%
Bledsoe	15,248	15,596	2.3%	15,248	15,596	2.3%	0.21%	44.9	\$54,720	3,427	19.4	2,949	19.3%
Blount	144,400	148,094	2.6%	144,400	148,094	2.6%	2.00%	43.8	\$77,365	12,046	9.2	19,950	13.8%
Bradley	113,913	116,791	2.5%	113,913	116,791	2.5%	1.58%	38.0	\$66,552	13,994	11.6	22,118	19.4%
Campbell	39,385	39,040	-0.9%	39,385	39,040	-0.9%	0.53%	44.2	\$51,557	7,447	18.9	10,995	27.9%
Cannon	15,075	15,283	1.4%	15,075	15,283	1.4%	0.21%	40.8	\$59,442	2,397	14.1	2,861	19.0%
Carroll	28,559	28,564	0.0%	28,559	28,564	0.0%	0.39%	41.6	\$51,787	4,508	16.5	6,880	24.1%
Carter	55,741	54,921	-1.5%	55,741	54,921	-1.5%	0.74%	45.8	\$50,135	9,851	16.1	11,281	20.2%
Cheatham	42,603	43,156	1.3%	42,603	43,156	1.3%	0.58%	41.4	\$89,852	3,330	8.4	5,942	13.9%
Chester	17,741	17,797	0.3%	17,741	17,797	0.3%	0.24%	37.8	\$59,341	2,517	12.5	3,381	19.1%
Claiborne	32,413	32,276	-0.4%	32,413	32,276	-0.4%	0.44%	42.5	\$49,379	5,599	16.4	8,338	25.7%
Clay	7,499	7,370	-1.7%	7,499	7,370	-1.7%	0.10%	48.8	\$39,972	1,639	19.7	1,780	23.7%
Cocke	37,242	37,372	0.3%	37,242	37,372	0.3%	0.50%	45.4	\$48,016	7,275	20.9	10,857	29.2%
Coffee	61,896	63,886	3.2%	61,896	63,886	3.2%	0.86%	39.2	\$61,505	9,391	15.5	13,445	21.7%
Crockett	13,818	13,727	-0.7%	13,818	13,727	-0.7%	0.19%	40.2	\$62,165	2,028	14	3,331	24.1%
Cumberland	65,861	67,514	2.5%	65,861	67,514	2.5%	0.91%	53.0	\$60,375	8,307	13.2	11,978	18.2%
Davidson	728,443	748,344	2.7%	728,443	748,344	2.7%	10.10%	34.8	\$77,853	95,838	12.2	127,178	17.5%
Decatur	11,549	11,494	-0.5%	11,549	11,494	-0.5%	0.16%	45.9	\$45,375	2,442	15	2,635	22.8%
DeKalb	21,727	22,316	2.7%	21,727	22,316	2.7%	0.30%	42.2	\$53,153	4,323	13.9	4,940	22.7%
Dickson	57,739	59,394	2.9%	57,739	59,394	2.9%	0.80%	39.0	\$75,003	5,375	10.1	10,657	18.5%
Dyer	36,105	35,690	-1.1%	36,105	35,690	-1.1%	0.48%	40.0	\$58,154	6,454	14.3	9,624	26.7%
Fayette	44,948	45,972	2.3%	44,948	45,972	2.3%	0.62%	47.2	\$88,456	4,564	9.3	6,128	13.6%
Fentress	19,687	19,880	1.0%	19,687	19,880	1.0%	0.27%	47.0	\$51,149	3,873	19	5,499	27.9%
Franklin	44,787	45,420	1.4%	44,787	45,420	1.4%	0.61%	42.7	\$63,494	5,230	12	7,549	16.9%
Gibson	51,352	51,761	0.8%	51,352	51,761	0.8%	0.70%	39.8	\$62,755	6,644	14.4	11,595	22.6%
Giles	30,757	30,899	0.5%	30,757	30,899	0.5%	0.42%	43.6	\$62,307	4,232	13.3	5,915	19.2%
Grainger	24,579	24,753	0.7%	24,579	24,753	0.7%	0.33%	45.7	\$50,538	3,884	14.2	5,627	22.9%
Greene	72,656	73,351	1.0%	72,656	73,351	1.0%	0.99%	44.9	\$56,194	10,458	16.3	15,192	20.9%
Grundy	13,743	13,664	-0.6%	13,743	13,664	-0.6%	0.18%	42.9	\$47,593	2,569	20.2	3,943	28.7%
Hamblen	66,340	67,301	1.4%	66,340	67,301	1.4%	0.91%	40.1	\$55,454	10,970	14.8	15,907	24.0%

Hamilton	385,843	395,600	2.5%	385,843	395,600	2.5%	5.34%	40.2	\$76,183	45,380	14.5	63,335	16.4%
Hancock	6,810	6,740	-1.0%	6,810	6,740	-1.0%	0.09%	41.9	\$34,960	2,078	26.1	2,110	31.0%
Hardeman	25,028	24,488	-2.2%	25,028	24,488	-2.2%	0.33%	40.4	\$46,069	3,789	21.5	6,410	25.6%
Hardin	27,405	27,580	0.6%	27,405	27,580	0.6%	0.37%	45.4	\$49,956	5,508	18	6,553	23.9%
Hawkins	58,537	58,654	0.2%	58,537	58,654	0.2%	0.79%	45.9	\$56,936	9,725	13.6	12,807	21.9%
Haywood	17,222	16,856	-2.1%	17,222	16,856	-2.1%	0.23%	43.1	\$50,472	3,968	19.8	4,635	26.9%
Henderson	27,958	27,882	-0.3%	27,958	27,882	-0.3%	0.38%	40.3	\$55,136	4,616	14.4	6,816	24.4%
Henry	32,439	32,368	-0.2%	32,439	32,368	-0.2%	0.44%	45.8	\$50,613	5,824	17.1	7,305	22.5%
Hickman	25,688	25,781	0.4%	25,688	25,781	0.4%	0.35%	41.7	\$68,247	3,330	13.2	5,165	20.1%
Houston	8,181	8,131	-0.6%	8,181	8,131	-0.6%	0.11%	44.2	\$59,576	1,106	15.6	1,837	22.5%
Humphreys	19,372	19,525	0.8%	19,372	19,525	0.8%	0.26%	43.7	\$60,616	2,548	12.2	4,048	20.9%
Jackson	12,180	12,277	0.8%	12,180	12,277	0.8%	0.17%	48.0	\$47,951	2,412	16.3	2,733	22.4%
Jefferson	58,783	60,245	2.5%	58,783	60,245	2.5%	0.81%	44.1	\$66,114	6,229	12.1	12,339	21.0%
Johnson	18,008	17,844	-0.9%	18,008	17,844	-0.9%	0.24%	46.4	\$53,129	3,583	20.9	3,955	22.0%
Knox	508,654	521,808	2.6%	508,654	521,808	2.6%	7.04%	37.5	\$74,222	58,146	12.8	74,174	14.6%
Lake	6,376	6,178	-3.1%	6,376	6,178	-3.1%	0.08%	41.6	\$28,814	1,453	31.2	1,769	27.7%
Lauderdale	24,139	23,432	-2.9%	24,139	23,432	-2.9%	0.32%	39.4	\$49,879	4,252	20.7	6,678	27.7%
Lawrence	46,311	47,052	1.6%	46,311	47,052	1.6%	0.63%	39.0	\$54,706	6,748	13.9	9,913	21.4%
Lewis	13,172	13,334	1.2%	13,172	13,334	1.2%	0.18%	42.2	\$56,285	1,986	14.1	2,973	22.6%
Lincoln	36,570	37,055	1.3%	36,570	37,055	1.3%	0.50%	43.0	\$64,667	4,359	12.1	7,101	19.4%
Loudon	61,596	64,471	4.7%	61,596	64,471	4.7%	0.87%	48.7	\$84,185	7,159	9	9,344	15.2%
McMinn	55,752	56,485	1.3%	55,752	56,485	1.3%	0.76%	42.5	\$61,470	3,871	13.7	6,568	11.8%
McNairy	26,089	26,078	0.0%	26,089	26,078	0.0%	0.35%	43.1	\$53,473	17,648	16.7	23,979	91.9%
Macon	27,378	28,444	3.9%	27,378	28,444	3.9%	0.38%	38.3	\$59,177	4,854	16	6,244	22.8%
Madison	99,089	98,555	-0.5%	99,089	98,555	-0.5%	1.33%	39.0	\$60,042	4,943	17.5	6,651	6.7%
Marion	29,265	29,303	0.1%	29,265	29,303	0.1%	0.40%	43.7	\$61,824	10,294	13.8	19,165	65.5%
Marshall	37,788	39,397	4.3%	37,788	39,397	4.3%	0.53%	39.6	\$71,049	7,011	9	12,733	33.7%
Mauzy	116,119	123,660	6.5%	116,119	123,660	6.5%	1.67%	37.9	\$76,130	4,114	8.7	6,308	5.4%
Meigs	13,769	14,149	2.8%	13,769	14,149	2.8%	0.19%	45.5	\$61,375	1,853	14.5	3,184	23.1%
Monroe	48,951	49,711	1.6%	48,951	49,711	1.6%	0.67%	44.8	\$56,895	7,366	12.6	11,122	22.7%
Montgomery	251,815	268,290	6.5%	251,815	268,290	6.5%	3.62%	32.5	\$75,613	25,939	10.2	43,573	17.3%
Moore	6,795	6,840	0.7%	6,795	6,840	0.7%	0.09%	46.2	\$66,496	732	8.9	827	12.2%
Morgan	21,091	20,806	-1.4%	21,091	20,806	-1.4%	0.28%	42.5	\$65,954	3,544	16.6	4,072	19.3%
Obion	30,207	29,907	-1.0%	30,207	29,907	-1.0%	0.40%	41.9	\$54,613	5,121	15.6	7,088	23.5%
Overton	23,336	23,525	0.8%	23,336	23,525	0.8%	0.32%	43.1	\$48,959	4,048	13.5	4,727	20.3%
Perry	8,952	9,153	2.2%	8,952	9,153	2.2%	0.12%	41.6	\$55,972	1,483	15.9	1,931	21.6%
Pickett	5,048	4,989	-1.2%	5,048	4,989	-1.2%	0.07%	51.7	\$49,030	1292	15.8	1,086	21.5%
Polk	18,244	18,500	1.4%	18,244	18,500	1.4%	0.25%	46.2	\$62,522	2,314	14.6	3,771	20.7%
Putnam	85,418	87,978	3.0%	85,418	87,978	3.0%	1.19%	36.5	\$58,912	13,172	18.4	17,759	20.8%

Rhea	33,948	34,085	0.4%	33,948	34,085	0.4%	0.46%	41.0	\$55,033	4,998	14	8,149	24.0%
Roane	55,607	55,778	0.3%	55,607	55,778	0.3%	0.75%	47.4	\$71,885	6,854	12.1	10,819	19.5%
Robertson	77,700	79,710	2.6%	77,700	79,710	2.6%	1.08%	38.9	\$83,047	7,503	9.2	12,927	16.6%
Rutherford	388,909	415,694	6.9%	388,909	415,694	6.9%	5.61%	34.6	\$85,470	31,796	10	60,450	15.5%
Scott	21,975	21,863	-0.5%	21,975	21,863	-0.5%	0.30%	40.7	\$44,711	5,338	17.7	6,962	31.7%
Sequatchie	17,603	18,204	3.4%	17,603	18,204	3.4%	0.25%	44.7	\$58,750	3,812	15.4	3,704	21.0%
Sevier	101,026	102,966	1.9%	101,026	102,966	1.9%	1.39%	43.4	\$62,581	13,285	13.2	18,599	18.4%
Shelby	911,049	904,554	-0.7%	911,049	904,554	-0.7%	12.21%	36.0	\$63,767	158,883	19	231,095	25.4%
Smith	20,715	20,871	0.8%	20,715	20,871	0.8%	0.28%	40.7	\$66,293	2,656	11.6	4,016	19.4%
Stewart	14,231	14,369	1.0%	14,231	14,369	1.0%	0.19%	44.6	\$63,114	1,648	17.1	2,789	19.6%
Sullivan	164,002	166,122	1.3%	164,002	166,122	1.3%	2.24%	45.4	\$58,807	23,495	15.7	30,258	18.4%
Sumner	215,234	226,250	5.1%	215,234	226,250	5.1%	3.05%	39.4	\$90,301	17,768	8.3	28,805	13.4%
Tipton	62,044	62,080	0.1%	62,044	62,080	0.1%	0.84%	38.7	\$74,127	7,004	13.6	11,513	18.6%
Trousdale	12,512	12,825	2.5%	12,512	12,825	2.5%	0.17%	34.6	\$72,747	953	14.5	2,047	16.4%
Unicoi	17,613	17,472	-0.8%	17,613	17,472	-0.8%	0.24%	47.4	\$52,218	2,461	14.4	3,524	20.0%
Union	20,745	20,926	0.9%	20,745	20,926	0.9%	0.28%	42.4	\$62,727	2,773	17.4	5,016	24.2%
Van Buren	6,604	6,748	2.2%	6,604	6,748	2.2%	0.09%	47.2	\$54,931	843	14.9	1,262	19.1%
Warren	42,888	43,540	1.5%	42,888	43,540	1.5%	0.59%	40.0	\$55,487	6,286	15.2	10,834	25.3%
Washington	140,553	143,951	2.4%	140,553	143,951	2.4%	1.94%	41.4	\$62,809	20,590	13	22,751	16.2%
Wayne	16,112	15,869	-1.5%	16,112	15,869	-1.5%	0.21%	44.3	\$52,294	2,669	18.8	2,898	18.0%
Weakley	32,535	31,915	-1.9%	32,535	31,915	-1.9%	0.43%	37.9	\$51,880	5,945	17.3	6,799	20.9%
White	28,569	28,977	1.4%	28,569	28,977	1.4%	0.39%	43.3	\$52,188	4,038	11.6	6,874	24.1%
Williamson	277,193	293,501	5.9%	277,193	293,501	5.9%	3.96%	40.8	\$135,594	11,423	4.5	13,402	4.8%
Wilson	171,708	183,713	7.0%	171,708	183,713	7.0%	2.48%	40.3	\$95,839	11,509	7.3	21,568	12.6%
Service Area Total	7,242,733	7,410,264	2.3%	7,242,733	7,410,264	2.3%	100.00%	39.1	\$69,595	940,092	14.7	1,361,893	18.8%
State of TN Total	7,242,733	7,410,264	2.3%	7,242,733	7,410,264	2.3%	100.00%	39.1	\$69,595	940,092	14.7	1,361,893	18.7%

Provide the following data for each county in the service area: Using current and projected population data from the Department of Health. (www.tn.gov/health/health-program-areas/statistics/health-data/population.html); the most recent enrollee data from the Division of TennCare (<https://www.tn.gov/tenncare/information-statistics/enrollment-data.html>), and US Census Bureau demographic information (<https://www.census.gov/quickfacts/fact/table/US/PST045219>).

ATTACHMENT 3A



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Nashville, TN 37203

This is to certify that the placement for **Notification of Intent to Apply for a Certificate of Need – Sunray HHA TN, LLC** appeared in the following newspapers on the dates listed here and on the enclosed invoice D26.7845.

Benton – Polk County News
07/09/2026 - Polk County

Bristol – Bristol Herald Courier
07/09/2026 – Johnson County

Byrdstown – Pickett County Press
07/09/2026 - Pickett County

Camden – The Camden Chronicle
07/09/2026 – Benton County

Carthage – Carthage Courier
07/09/2026 – Smith County

Celina – Dale Hollow Horizon
07/08/2026 – Clay County

Chattanooga – Chattanooga Times Free Press
07/12/2026 – Bledsoe, Bradley, Grundy, Hamilton, Marion, McMinn, Meigs, Polk, Rhea, and Sequatchie counties

Clarksville - The Leaf-Chronicle
07/08/2026 – Houston, Montgomery, and Stewart counties

Columbia – The Daily Herald
07/08/2026 – Maury County

Cookeville – Herald-Citizen
07/08/2026 – Putnam County

Dyersburg – State Gazette

07/09/2026 – Dyer, Lake, Lauderdale, and Obion counties

Fayetteville – The Elk Valley Times

07/08/2026 – Lincoln County

Gainesboro – Jackson County Sentinel

07/07/2026 – Jackson County

Greeneville – Greeneville Sun

07/08/2026 – Greene County

Hartsville – The Hartsville Vidette

07/11/2026 – Trousdale County

Henderson – Chester County Independent

07/09/2026 – Chester County

Hohenwald – Lewis County Herald

07/09/2026 – Lewis County

Jackson - The Jackson Sun

07/08/2026 - Carroll, Crockett, Gibson, Henderson, Madison, McNairy, and Weakley counties

Jamestown – Fentress Courier Today

07/08/2026 – Fentress County

Johnson City – Johnson City Press

07/08/2026 - Carter, Johnson, Unicoi, and Washington counties

Kingsport – The Kingsport Times-News

07/08/2026 – Hawkins and Sullivan county

Knoxville - Knoxville News Sentinel

07/08/2026 - Anderson, Blount, Campbell, Claiborne, Cocke, Cumberland, Grainger, Hamblen, Jefferson, Knox, Loudon, McMinn, Monroe, Morgan, Roane, Scott, Sevier, and Union counties

Lafayette – Macon County Chronicle

07/07/2026 – Macon County

Lawrenceburg – Lawrence County Advocate

07/08/2026 – Lawrence County

Lewisburg – The Marshall County Post

07/09/2026 – Marshall County

Linden - Buffalo River Review

07/08/2026 – Perry County

Livingston – Overton County News
07/07/2026 – Overton County

Lynchburg – The Moore County News
07/09/2026 – Moore County

McMinnville – Southern Standard
07/08/2026 – Warren County

Memphis - The Commercial Appeal
07/08/2026 - Fayette, Hardeman, Haywood, Lauderdale, Shelby, and Tipton counties

Nashville - The Tennessean
07/08/2026 - Cheatham, Davidson, Dickson, Hickman, Robertson, Rutherford, Sumner, Williamson, and Wilson counties

Paris – The Paris Post-Intelligencer
07/09/2026 – Henry County

Parsons – The News Leader
07/08/2026 – Decatur County

Pulaski – Pulaski Citizen
07/08/2026 – Giles County

Rogersville – The Rogersville Review
07/08/2026 – Hancock and Hawkins counties

Savannah – The Courier
07/09/2026 – Hardin County

Shelbyville – The Bedford County Post
07/09/2026 – Bedford County

Smithville – Smithville Review
07/08/2026 – DeKalb County

Sparta – The Expositor
07/07/2026 – Van Buren and White counties

Tiptonville – The Lake County Banner
07/08/2026 – Lake County

Tullahoma – Tullahoma News
07/08/2026 – Coffee County

Waverly – The News-Democrat
07/08/2026 – Humphreys County

Waynesboro – The Wayne County News
07/08/2026 – Wayne County

Winchester – The Herald Chronicle
07/09/2026 – Franklin County

Woodbury – Cannon Courier
07/07/2026 – Cannon County

This Thirteenth day of July, 2026

Alisa Subhakul

Alisa Subhakul, Junior Media Buyer

Sworn before me this 13th day of July, 2026

Earl Goodman

Earl Goodman, Notary Public

My commission expires July 1, 2028



July 2026 Publications for Sunray HHA TN LLC

County	Newspaper	Date of Ad	Affidavit of Publication
Anderson	Knoxville News-Sentinel	07.08.26	ATTACHED
Bedford	Shelbyville Times Gazette	07.09.26	ATTACHED
Benton	Camden Chronicle	07.09.26	ATTACHED
Bledsoe	Chattanooga Times Free Press	07.12.26	ATTACHED
Blount	Knoxville News-Sentinel	07.08.26	ATTACHED
Bradley	Chattanooga Times Free Press	07.12.26	ATTACHED
Campbell	Knoxville News-Sentinel	07.08.26	ATTACHED
Cannon	Cannon Courier	07.07.26	ATTACHED
Carroll	Jackson Sun	07.08.26	ATTACHED
Carter	Johnson City Press	07.08.26	ATTACHED
Cheatham	Tennessean	07.08.26	ATTACHED
Chester	Chester County Independent	07.09.26	ATTACHED
Claiborne	Knoxville News-Sentinel	07.08.26	ATTACHED
Clay	Dale Hollow Horizon	07.08.26	ATTACHED
Cocke	Knoxville News-Sentinel	07.08.26	ATTACHED
Coffee	Tullahoma News	07.08.26	ATTACHED
Crockett	Jackson Sun	07.08.26	ATTACHED
Cumberland	Knoxville News-Sentinel	07.08.26	ATTACHED
Davidson	Tennessean	07.08.26	ATTACHED
Decatur	The News Leader	07.08.26	ATTACHED
DeKalb	Smithville Review	07.08.26	ATTACHED
Dickson	Tennessean	07.08.26	ATTACHED
Dyer	State Gazette	07.09.26	ATTACHED
Fayette	Commercial Appeal	07.08.26	ATTACHED
Fentress	Fentress Courier	07.08.26	ATTACHED
Franklin	The Herald Chronicle	07.09.26	ATTACHED
Gibson	Jackson Sun	07.08.26	ATTACHED
Giles	Pulaski Citizen	07.08.26	ATTACHED
Grainger	Knoxville News-Sentinel	07.08.26	ATTACHED
Greene	Greeneville Sun	07.08.26	ATTACHED
Grundy	Chattanooga Times Free Press	07.12.26	ATTACHED
Hamblen	Knoxville News-Sentinel	07.08.26	ATTACHED
Hamilton	Chattanooga Times Free Press	07.12.26	ATTACHED
Hancock	Rogersville Review	07.08.26	ATTACHED
Hardeman	Commercial Appeal	07.08.26	ATTACHED
Hardin	The Courier	07.09.26	ATTACHED
Hawkins	Rogersville Review	07.08.26	ATTACHED
Haywood	Commercial Appeal	07.08.26	ATTACHED
Henderson	Jackson Sun	07.08.26	ATTACHED
Henry	Paris Post Intelligencer	07.09.26	ATTACHED
Hickman	Tennessean	07.08.26	ATTACHED
Houston	Leaf Chronicle	07.08.26	ATTACHED
Humphreys	The News-Democrat	07.08.26	ATTACHED
Jackson	Jackson County Sentinel	07.07.26	ATTACHED
Jefferson	Knoxville News-Sentinel	07.08.26	ATTACHED
Johnson	Bristol Herald Citizen	07.09.26	ATTACHED
Knox	Knoxville News-Sentinel	07.08.26	ATTACHED
Lake	Lake County Banner	07.08.26	ATTACHED

County	Newspaper	Date of Ad	Affidavit of Publication
Lauderdale	State Gazette	07.09.26	ATTACHED
Lawrence	Lawrence County Advocate	07.08.26	ATTACHED
Lewis	Lewis County Herald	07.09.26	ATTACHED
Lincoln	Elk Valley Times	07.08.26	ATTACHED
Loudon	Knoxville News-Sentinel	07.08.26	ATTACHED
Macon	Macon County Chronicle	07.07.26	ATTACHED
Madison	Jackson Sun	07.08.26	ATTACHED
Marion	Chattanooga Times Free Press	07.12.26	ATTACHED
Marshall	Marshall County Post	07.09.26	ATTACHED
Maury	Daily Herald	07.08.26	ATTACHED
McMinn	Chattanooga Times Free Press	07.12.26	ATTACHED
McNairy	Jackson Sun	07.08.26	ATTACHED
Meigs	Chattanooga Times Free Press	07.12.26	ATTACHED
Monroe	Knoxville News-Sentinel	07.08.26	ATTACHED
Montgomery	Leaf Chronicle	07.08.26	ATTACHED
Moore	Moore County News	07.09.26	ATTACHED
Morgan	Knoxville News-Sentinel	07.08.26	ATTACHED
Obion	State Gazette	07.09.26	ATTACHED
Overton	Overton County News	07.07.26	ATTACHED
Perry	Buffalo River Review	07.08.26	ATTACHED
Pickett	Pickett County Press	07.09.26	ATTACHED
Polk	Polk County News	07.09.26	ATTACHED
Putnam	Herald-Citizen	07.08.26	ATTACHED
Rhea	Chattanooga Times Free Press	07.12.26	ATTACHED
Roane	Knoxville News-Sentinel	07.08.26	ATTACHED
Robertson	Tennessean	07.08.26	ATTACHED
Rutherford	Tennessean	07.08.26	ATTACHED
Scott	Knoxville News-Sentinel	07.08.26	ATTACHED
Sequatchie	Chattanooga Times Free Press	07.12.26	ATTACHED
Sevier	Knoxville News-Sentinel	07.08.26	ATTACHED
Shelby	Commercial Appeal	07.08.26	ATTACHED
Smith	Carthage Courier	07.09.26	ATTACHED
Stewart	Leaf Chronicle	07.08.26	ATTACHED
Sullivan	Bristol Herald Courier	07.09.26	ATTACHED
Sumner	Tennessean	07.08.26	ATTACHED
Tipton	Commercial Appeal	07.08.26	ATTACHED
Trousdale	Hartsville Vidette	07.11.26	ATTACHED
Unicoi	Johnson City Press	07.08.26	ATTACHED
Union	Knoxville News-Sentinel	07.08.26	ATTACHED
Van Buren	Expositor	07.07.26	ATTACHED
Warren	Southern Standard	07.08.26	ATTACHED
Washington	Johnson City Press	07.08.26	ATTACHED
Wayne	Wayne County News	07.08.26	ATTACHED
Weakley	Jackson Sun	07.08.26	ATTACHED
White	Expositor	07.07.26	ATTACHED
Williamson	Tennessean	07.08.26	ATTACHED
Wilson	Tennessean	07.08.26	ATTACHED

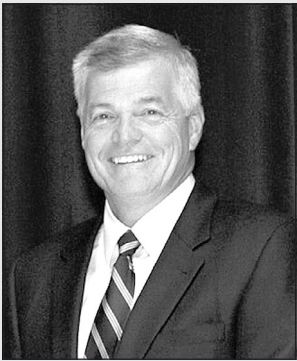
James Dolan Tracy

James Dolan Tracy, age 69, of Murfreesboro, Tennessee, passed from this life on July 3, 2026, at Alive Hospice in Murfreesboro.

Jim was born on October 9, 1956, to the late James and Betty Tracy in Jackson, Tennessee.

Jim was raised in Hardin County and graduated from Savannah Central High School, Class of 1974. He was a standout two-sport athlete for the Tigers in both football and baseball throughout high school, leading to a stellar baseball career as a starting pitcher for both Freed-Hardeman College and the University of Tennessee at Martin. He earned his degree in Agriculture Education from UT-Martin.

Soon after, he began his six-year career as a high school coach and a teacher. "Coach Tracy" is still fondly remembered by his players at South-



east Whitfield in Dalton, Georgia, Mobile Christian in Mobile, Alabama, and Columbia Academy in Columbia, Tennessee.

Jim then settled in as a highly successful insurance agent, eventually owning and operating his own insurance company for Nationwide Insurance in Shelbyville, Tennessee. For more than 20 years, he sold all lines of insurance and made strong connections with people from all over the middle Tennessee area. Meanwhile, he stayed busy in his free time pursuing his passion of officiating high school bas-

ketball, traveling all over the midstate and thoroughly enjoying his interactions with coaches and players. He went on to officiate junior college and Division I basketball all across the southeast.

Jim continually served and stayed involved in the Shelbyville community. He served as a Bedford County Board of Education member and chairman, President of the Shelbyville-Bedford County Chamber of Commerce, founding member of the Bedford County Economic Development and Tourism committee, and Chairman of the Tennessee Leadership Council of the National Federation of Independent Business.

In November 2004, Jim made his historical entry into Tennessee state politics, winning the State Senate election in the 16th district. He would go on to serve eight years as State Senator for

the 16th district, representing Rutherford, Bedford, and Moore County, and five years as State Senator for the 14th district, representing Rutherford, Bedford, Moore, Lincoln, and Marshall County. He served as Assistant Floor Leader of the Senate Republican Caucus, the Chair of the Senate Transportation Committee, and a member of the Senate Education Committee and the Senate State and Local Government Committee. He also served as Speaker Pro Tempore under Lt. Governor and Speaker of the Senate Randy McNally. Additionally, he was a very popular U.S. Congressional candidate in both the 2010 and 2014 Republican primaries. He later was honored to serve under President Donald J. Trump as the Tennessee State Director of USDA Rural Development.

In his free time, Jim

also enjoyed golfing, running/walking, attending local events, quail hunting, spending time with his family and especially his grandkids, and University of Tennessee and Middle Tennessee State University athletics. He loved being outdoors and always enjoyed meeting all the great people across the state. His relationships span all 95 of Tennessee's counties and his public service will forever be legendary.

Jim was a lifelong faithful Christian, a loving husband, a devoted family man, a proud father and grandfather, and a treasured friend to many.

He is survived by his loving wife of nearly 50 years, Trena Ludke Tracy; his sons, Chad (Heather) Tracy of Auburn, Alabama, Craig Tracy of Shelbyville, and Connor (Gracie) Tracy of Knoxville, Tennessee; and three grandchildren:

Will, Mitch, and Ryn. He is also survived by his brother Steve of Lebanon, Tennessee.

Funeral services will be held 1 p.m. Tuesday, July 7, 2026, at the North Boulevard Church of Christ in Murfreesboro (1112 N. Rutherford Blvd, Murfreesboro, TN 37130) with Brother Tony Holt officiating. Burial will follow at Rosebank Cemetery in Flat Creek, Tennessee with Russ Countess Officiating.

Visitation with the family will be held prior to funeral services beginning at 10 a.m. on Tuesday at North Boulevard Church of Christ. Memorial donations may be made to Shelbyville Firefighter Foundation (111 Lane Parkway, Shelbyville, TN 37160), or to Special Kids Inc (2132 E Main St Murfreesboro, TN 37130).

Doak Funeral Home is serving the family. www.doakfh.com

Chearldean "Mama Shirley" Biggers

Chearldean "Mama Shirley" Biggers was born on September 12, 1946, in Cleveland, Ohio, to the late John Albert Taylor and Bessie Lee Taylor. On July 4, 2026, after a brief illness, Chearldean peacefully completed a life filled with love, faith, service, and devotion to her family and community.

Chearldean was educated in the Cleveland, Ohio Public School System and built a strong work legacy through her years as a line technician with several manufacturing companies in Shelbyville, including Fly, Eaton, and Calsonic. Known for her steady hands, dependable spirit, and commitment to excellence, she carried pride and purpose into everything she did.

Beyond her work,



Chearldean was a devoted wife, mother, grandmother, sister, and friend who created a warm and beautiful home for her family. She found joy in baking, sewing, gardening, and caring for those she loved. Her Red Velvet cakes became a cherished favorite throughout the community and beyond, a sweet reflection of the love she poured into every gift she shared.

More than 45 years ago, Chearldean became a member of the King-

dom Hall of Jehovah's Witnesses, where she faithfully lived out her beliefs through service and compassion. She was especially dedicated to the Jail Ministry, believing deeply in meeting people where they are and in the hope of redemption for all. Chearldean's kindness was shown not only in words, but in action—whether by transporting others to service, doctors' appointments, or the pharmacy, she made herself available to help whenever she was needed. Her life was a testimony of generosity, faith, and love in motion.

Chearldean was preceded in death by her beloved husband of 54 years, Robert Biggers, Sr.; her parents, John and Bessie Lee Taylor; her siblings, Rosie Wiley, Ira Taylor, and Darlene Taylor; her sisters-in-law,

Katherine Biggers, Sammie Frazier, Dorothy Jean Brown, Annie Ruth Harrison, and Joanne Bryant; and her brother-in-law, John Brown. She leaves to cherish her memory and celebrate her beautiful life: her devoted son, Robert (Carolyn) Biggers, Jr.; her devoted daughters, Carman Biggers and Carla (John) Kennerly; devoted nephew, Kim (Brian) Taylor; her loving grandchildren, Ryan Biggers, Camille Biggers, Jared Bell, Erica Kennerly, and JaVon Kennerly; a host of great-grandchildren; her brothers-in-law, Willie Biggers, Jr., Harold Bryant, Harold Biggers Sr., Larry (Naomi) Biggers, and Doyle (Cynthia) Biggers; her sisters-in-laws, Gail (Skip) Johnson and Vera Taylor; and a host of other relatives and friends who were blessed by her warmth, wisdom,

and loving presence.

ACKNOWLEDGEMENTS

The family of Chearldean "Mama Shirley" Biggers extends our deepest and most heartfelt appreciation to everyone who has shown us love during this time of loss. Your prayers, comforting words, thoughtful gestures, visits, calls, and acts of kindness have strengthened us and reminded us that we are not alone. Each expression of sympathy has been a blessing, and we are truly grateful for the support, compassion, and love you have shared with our family.

We offer special appreciation to the caring staff at Ascension St. Thomas Rutherford and Vanderbilt Tullahoma-Harton Hospital for the kindness and care shown to our loved one. We are also sincerely grateful to the

brothers and sisters of the Jehovah's Witnesses Kingdom Hall and to Bird Street Church of Christ in Shelbyville, Tennessee, for their continued prayers, encouragement, and support.

We are truly grateful to the staff at Feldhaus-Gowen-Smith Chapel for the comprehensive funeral services and the care shown to our family during our time of bereavement. May each of you know how deeply your love has touched our hearts.

Pallbearers

- Family and Friends Flower Bearers
- Family and Friends Interment
- Ray Corner Cemetery, 218 Buzzard Roost Rd., Chapel Hill, TN 37034
- Repass
- Bird Street Church of Christ, 428 Bird Street, Shelbyville, TN 37160

Susan Elizabeth Pastorial

Susan Elizabeth Pastorial, surrounded by her family, passed away peacefully at home in Shelbyville, TN, on June 28, 2026.

Susan was born April 14, 1952, to Roy and Murl Bice, as well as three older brothers (Dick, Jerry, and Ken) in Bridgeport, WV. She attended Bridgeport High School during which she met her future husband, John Roger Pastorial (Shinnston, WV). Despite attending rival high schools, they were married on February 10, 1973, and remained steadfastly loyal to each other while raising their three children - Jeffrey, Bethany, and Whitney - and cherishing their grandson, Aaron.

Susan graduated from Fairmont University in 1972 with an associate's degree in nursing and spent her 30 year career caring for patients in the ICU, CCU, NICU, ED, and outpatient surgery. She enjoyed many years of traveling with her husband, swimming in Florida winters, and studying scripture, but she was most notably a dedicated pianist. She ministered through music as the church pianist for many congregations in TN, IN, WV, and FL.

Susan was a dedicated mother and grandmother, loving wife, compassionate nurse, and devout Christian.

Susan is survived by



her loving husband John; her children Jeffrey (Beth) Pastorial, Bethany (Jason) Pastorial, and Whitney Pastorial; grandson Aaron Pastorial; and brother Kenneth Bice. She is preceded in death but happily reunited with her parents Roy and Murl Bice, brother Richard "Dick" Bice, brother Gerald "Jerry" Bice, son Johnathan, and daughter Krista Jill.

A Celebration of Life will occur at Edgemont Baptist Church in Shelbyville, TN, on August 14, 2026. Visitation will occur from 3-5 pm, memorial service from 5-6 pm, and a small reception will follow. Edgemont Baptist Church is located at 150 Fairfield Pike, Shelbyville, TN, 37160.

In lieu of flowers, the family requests donations be made to the American Cancer Society or Edgemont Baptist Church (Shelbyville, TN) in Susan's name.

Donations will also be collected at Susan's Celebration of Life.

Feldhaus-Gowen-Smith Chapel is honored to be serving the family of Susan Elizabeth Pastorial.

Nellie Marie Cook Mearse

Nellie Marie Cook Mearse, 85, of Shelbyville, died July 3, 2026. Funeral Services will be held 12:00 P.M., Tuesday, July 7th, at Hillcrest Funeral Home Pastor Ron Smith officiating. Burial will follow at Hillcrest Memorial Gardens. Visitation will begin at 10:00 A.M.

She was a native of Shelbyville; retired employee of General Electric Manufacturing Co. of Murfreesboro and a member of the Methodist Church.

Nellie was preceded in death by her parents, Theodore Roosevelt Cook and Lillie White Crowell Cook; her husband, Thomas Ray Mearse; and two brothers,



ers, Elbert "Bud" Cook and Willie "Buck" Cook.

She is survived by her son, Timothy K. Maupin (Glenda) of Woodbury, TN.; a sister, Betty (Donald) Rogers of Shelbyville; 1 grandchild; 2 step grandchildren; 7 great-grandchildren; several nieces, nephews, cousins and her caregiver, Angela Haskins.

Hillcrest Funeral Home is serving the family.

Obituaries continue on 6A...

Death Notices

- Jerry Dale Manley**, age 74, of Lewisburg Died Tuesday, July 7, 2026 at NHC Lewisburg. Lawrence Funeral Home in Chapel Hill
- Priscilla "Cilla" F. Gaulden**, age 74, of Shelbyville Born on October 3, 1951 - July 3, 2026 Doak Funeral Home is serving the family.
- James Glendon Westmoreland**, age 76, of Shelbyville February 13, 1950 - July 2, 2026 Doak Funeral Home is serving the family.
- Janice Robitaille Smith**, age 83, of Shelbyville March 15, 1943 - July 6, 2026 Doak Funeral Home is serving the family.
- Sherri Mullins**, age 67, of Shelbyville July 11, 1958, - July 4, 2026 Doak Funeral Home is serving the family.
- J. C. Elliott**, age 86, of Shelbyville July 22, 1939 - July 5, 2026 Doak Funeral Home is serving the family.

PUBLIC NOTICE

The City of Shelbyville Employees' Benefits Review Committee will meet on Thursday, July 16, 2026 at 9:30 AM in Council Chambers, Building, Codes and Planning Department, 100 N. Cannon Blvd. Shelbyville, TN to discuss various benefits of the Employees of the City of Shelbyville.

A full Agenda with specific subject matter will be posted at least 48 hours prior to the meetings.

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NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED

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 Sunray HHA TN, LLC, a/an proposed home health agency owned by Sunray HHA TN, LLC, with an ownership type of Limited Liability Company (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 limited to home infusion services. The project will serve a proposed service area of 95 counties: Anderson, Bedford, Benton, Bledsoe, Blount, Bradley, Campbell, Cannon, Carroll, Carter, Cheatham, Chester, Claiborne, Clay, Cooke, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Dyer, Fayette, Fentress, Franklin, Gibson, Giles, Grainger, Greene, Grundy, Henderson, Hamilton, Hancock, Hardeman, Hardin, Hawkins, Haywood, Hamblen, Henry, Hickman, Houston, Humphreys, Jackson, Jefferson, Johnson, Knox, Lake, Lauderdale, Lawrence, Lewis, Lincoln, Loudon, Macon, Madison, Marion, Marshall, Maury, McMinn, McNairy, Meigs, Monroe, Montgomery, Moore, Morgan, Obion, Overton, Perry, Pickett, Polk, Putnam, Rhea, Roane, Robertson, Rutherford, Scott, Sequatchie, Sevier, Shelby, Smith, Stewart, Sullivan, Sumner, Tipton, Trousdale, Unicoi, Union, Van Buren, Warren, Washington, Wayne, Weakley, White, Williamson, and Wilson Counties. The address of the project will be 740 Cool Springs Blvd., Suite 120, Office 1, Franklin, Williamson County, Tennessee, 37067. The estimated project cost will be \$202,418. The anticipated date of filing the application is 08/01/2026. The contact person for this project is Mr. Michael Brent who may be reached at Bradley Arant Boult Cummings LLP- 1221 Broadway #2400, Nashville, TN 37203- Contact No. 615-252-2361. 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, 503 Deaderick Street, Nashville, TN 37243 or email at hsda.staff@tn.gov.

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MISCELLANEOUS

NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED

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2026, 12:00 noon, contents will be
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#110 Alden Lucio

Hibdon's Storage
615-563-4285

MOBILE HOMES

Start out the **NEW YEAR** with
a **NEW HOME** from Meadows
Homes of McMinnville. New single-
wides starting at \$57,900 and new
doublewides starting at \$89,900
including set up and delivery! 4651
Manchester Hwy. 931-668-7300.

LAND AND HOME PACKAGES
AVAILABLE including septic,
electric, water, and home all
in one payment. Come see the
friendly folks at Meadows Homes
of McMinnville. 4651 Manchester
Hwy. 931-668-7300.

MANAGER SPECIAL! 2026
NEW BIG 4 BEDROOM
doublewide set-up and delivered
on your land for only \$109,900.
READY FOR IMMEDIATED
DELIVERY! Meadows Homes
of McMinnville. 4651 Manchester
Hwy. 931-668-7300.

PUZZLE ANSWERS

H	E	A	L	E	D	P	S	A	L	M	S			
H	A	U	L	A	G	E	A	E	R	A	T	E	D	
A	B	E	C	O	N	O	M	I	C	S	M	O		
G	I	M	P	Y	T	A	P	H	E	D	I	N		
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E	S	C	T	I	L	R	I	B	B	G	O	T		
A	M	A	S			R	E	D	O	N	E	S		
C	O	R	A	L				R	U	N	E	S		
A	V	O	C	E	T			P	A	N	T			
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A	L	M	A	N	A	C		L	E	G	U	M	E	S
L	I	L	A	C	S			S	T	A	S	E	S	

4	6	5	7	3	9	8	2	1
2	3	1	8	6	4	5	7	9
8	9	7	1	2	5	3	4	6
7	5	6	3	4	1	9	8	2
3	2	4	9	7	8	6	1	5
9	1	8	2	5	6	7	3	4
6	7	3	5	1	2	4	9	8
1	4	9	6	8	3	2	5	7
5	8	2	4	9	7	1	6	3

YARD SALE

80 YEARS OF JUNK!!!

Rain or Shine

10am - 4pm

Friday and Saturday
Through Christmas!

More items every week.

42-CTW Lane
Higgins Hollow Road

*(From Woodbury 2.5 miles-
Highway 53-N)*

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GET THE WORD
OUT about your next
auction! Save Time &
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other TN newspapers. For
more info, contact this
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dept. or call 931-624-
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emax included. Choice
package \$84.99/mo.
Some restrictions apply.
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details! 1-844-278-8285
www.dental50plus.com/
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Generac Home Standby
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warranty with qualifying
purchase. Call 1-888-869-
5542 today to schedule
a free quote. It's not just
a generator. It's a power
move. (TnScan)

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repair. Crawl space recov-

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proofing. Water man-
agement and more. Free
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up to \$250 off foundation
repair. Call Olshan 1-866-
265-5932 (TnScan)

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We Buy Houses for
Cash AS IS! No repairs.
No fuss. Any condition.
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Call, get cash offer and
get paid. Get your fair
cash offer today by
calling Liz Buys Houses:
1-877-551-1426 (Tn-
Scan)

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ADVERTISING Solu-
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word ad will appear in
104 Tennessee newspa-
pers for \$275/wk or 46
Middle TN newspapers
for \$120/wk. Call this
newspaper's classified
advertising dept. or go to
www.tnpress.com/news-
paper-networks (TnScan)

STATEWIDE CLASSIFIEDS

PUBLIC NOTICES

State of Tennessee
Benton County Probate
Division
NOTICE TO
CREDITORS
As Required by
TCA §30-2-306
Case Number 5415

Estate of JAMES TERRELL WATERS, Deceased

Notice is hereby given that on 17th day of June, 2026, letters testamentary in respect (or of administration as the case may be) in respect of the estate of James Terrell Waters, who died January 25, 2026, were issued to the undersigned by the Clerk and Master of Benton County, Tennessee. All persons, resident and non-resident, having claims, matured or unmatured, against the estate are required to file the same with the Clerk of the above-named Court on or before the earlier of the dates prescribed in (1) or (2) otherwise their claims will be forever barred:

- (1) (A) Four (4) months from the date of the first publication (or posting, as the case may be) of this notice if the creditor received an actual copy of this Notice to Creditors at least sixty (60) days before date that is four (4) months from the date of the first publication (or posting); or
- (B) Sixty (60) days from the date the creditor received an actual copy of the Notice to Creditors, if the creditor received the copy of the notice less than sixty (60) days prior to the date that is four (4) months from the date of the first publication (or posting) as described in (1) (A); or
- (2) Twelve (12) months from the decedent's date of death.

All persons indebted to the above Estate must come forward and make proper settlement with the undersigned at once.

Tiffany McCormick
Administrator
06/15/2026
John W. Whitworth
Attorney
06/15/2026
Carly Bayless
Clerk and Master
06/75/2026

07/02, 09

State of Tennessee
Benton County Probate
Division
NOTICE TO
CREDITORS
As Required by
TCA §30-2-306
Case Number 5416

Estate of JOYCE NELL RHODES, Deceased

Notice is hereby given that on 22nd day of June, 2026, letters testamentary in respect (or of administration as the case may be) in respect of the estate of Joyce Nell Rhodes, who died May 26, 2026, were issued to the undersigned by the Clerk and Master of Benton County, Tennessee. All persons, resident and non-resident, having claims, matured or unmatured, against the estate are required to file the same with the Clerk of the above-named Court on or before the earlier of the dates prescribed in (1) or (2) otherwise their claims will be forever barred:

- (1) (A) Four (4) months from the date of the first publication (or posting, as the case may be) of this notice if the creditor received an actual copy of this Notice to Creditors at least sixty (60) days before date that is four (4) months from the date of the first publication (or posting); or
- (B) Sixty (60) days from the date the creditor received an actual copy of the Notice to Creditors, if the creditor received the copy of the

notice less than sixty (60) days prior to the date that is four (4) months from the date of the first publication (or posting) as described in (1) (A); or

(2) Twelve (12) months from the decedent's date of death.

All persons indebted to the above Estate must come forward and make proper settlement with the undersigned at once.

Laura Kay Albritton
Executor
06/16/2026
John W. Whitworth
Attorney
06/12/2026
Carly Bayless
Clerk and Master
06/22/2026

07/02, 09

State of Tennessee
Benton County Probate
Division
NOTICE TO
CREDITORS
As Required by
TCA §30-2-306
Case Number 5417

Estate of MARY E. BALLARD, Deceased

Notice is hereby given that on 23rd day of June, 2026, letters testamentary in respect (or of administration as the case may be) in respect of the estate of Mary E. Ballard, who died April 30, 2026, were issued to the undersigned by the Clerk and Master of Benton County, Tennessee. All persons, resident and non-resident, having claims, matured or unmatured, against the estate are required to file the same with the Clerk of the above-named Court on or before the earlier of the dates prescribed in (1) or (2) otherwise their claims will be forever barred:

- (1) (A) Four (4) months from the date of the first publication (or posting, as the case may be) of this notice if the creditor received an actual copy of this Notice to Creditors at least sixty (60) days before date that is four (4) months from the date of the first publication (or posting); or
- (B) Sixty (60) days from the date the creditor received an actual copy of the Notice to Creditors, if the creditor received the copy of the notice less than sixty (60) days prior to the date that is four (4) months from the date of the first publication (or posting) as described in (1) (A); or
- (2) Twelve (12) months from the decedent's date of death.

All persons indebted to the above Estate must come forward and make proper settlement with the undersigned at once.

Donna Ballard Lumpkin
Executor
06/19/2026
John W. Whitworth
Attorney
06/19/2026
Carly Bayless
Clerk and Master
06/23/2026

07/02, 09

NOTICE OF
SUBSTITUTE
TRUSTEE'S SALE

WHEREAS, default has occurred in the performance of the covenants, terms, and conditions of a Deed of Trust dated May 7, 2010, executed by TERRY H. HODGE AND TERESA M. HODGE, HUSBAND AND WIFE, to Donald K. Holsinger, Jr., as Trustee for MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC., AS BENEFICIARY, AS NOMINEE FOR FIRST BANK, its successors and assigns, recorded on May 13, 2010 in Book 197, Page 293, in Instrument Number: 69752, in the Register of Deeds Office for Benton County, Tennessee, as modified

by the Loan Modification Agreement recorded on March 31, 2010 at Book 332, Page 41, and Instrument Number: 101128, in said Register's Office; and WHEREAS, U.S. BANK TRUST NATIONAL ASSOCIATION NOT IN ITS INDIVIDUAL CAPACITY BUT SOLELY AS OWNER TRUSTEE FOR RCF 2 ACQUISITION TRUST, hereinafter "Creditor", the party entitled to enforce said security interest, having appointed Robertson, Anschutz, Schneid, Crane & Partners, PLLC, as Substitute Trustee.

NOW, THEREFORE, notice is hereby given that the entire indebtedness has been declared due and payable, and that Robertson, Anschutz, Schneid, Crane & Partners, PLLC, as Substitute Trustee, or its agent, by virtue of the power, duty, and authority vested in and imposed upon said Substitute Trustee, will, on August 13, 2026, at 10:00 AM local time, at the main entrance to the Benton County Courthouse, 1 East Court Square, Camden, TN 38320, in Benton County, Tennessee, offer for sale certain property hereinafter described to the highest bidder for cash or certified funds paid at the conclusion of the sale, or credit bid from a bank or other lending entity pre-approved by the Substitute Trustee. The property to be sold is described as follows:

KNOWN AS ASSESSOR'S MAP 88, GROUP -, PARCEL 47.13, IN THE FOURTH (FORMER 2nd)) CIVIL DISTRICT OF BENTON COUNTY, TENNESSEE.

BEGINNING AT IRON PIN ON NORTH SIDE OF NATCHEZ TRACE - CAMDEN ROAD, (25 FEET FROM CENTER OF ROAD) THIS POINT BEING THE SOUTHWEST CORNER OF LUTHER HIGDON'S 4.0 ACRE TRACT, MORE OR LESS, AND THE SOUTHEAST CORNER OF THIS TRACT; THENCE RUNS WITH R.O.W. OF NATCHEZ TRACE - CAMDEN ROAD NORTH 75 DEG. WEST 200 FEET TO IRON PIN IN R.O.W., THE SOUTHWEST CORNER OF THIS TRACT; THENCE NORTH 17 DEG. 30' EAST 527 FEET TO IRON PIN IN FENCE IN J.C. HARGROVE'S SOUTH LINE; THENCE WITH FENCE AND HARGROVE'S LINE NORTH 89 DEG. EAST 220 FEET TO IRON PIN IN FENCE, THE NORTHEAST CORNER OF THIS TRACT AND THE NORTHWEST CORNER OF LUTHER HIGDON'S 1.2 ACRE, MORE OR LESS TRACT RECENTLY BOUGHT FROM HEDGE; THENCE WITH HIG-

DON'S LINE SOUTH 16 DEG. 30' WEST TO POINT IN DITCH, THE SOUTHWEST CORNER OF HIGDON'S 1.2 ACRE, MORE OR LESS TRACT AND THE NORTHWEST CORNER OF HIGDON'S 4.0, MORE OR LESS TRACT; THENCE WITH HIGDON'S WEST LINE SOUTH 18 DEG. 30' WEST 304 FEET TO THE POINT OF BEGINNING, CONTAINING 2.6 ACRES, MORE OR LESS, ALL BEARINGS ARE MAG-

NETIC. THIS BEING THE SAME REAL ESTATE CONVEYED TO TERRY H. HODGE AND WIFE, TERESA M. HODGE, BY DEED OF MITCHELL RAYBURN AND WIFE, BETTY RAYBURN, DATED MARCH 23, 1999 AND OF RECORD IN RECORD BOOK 9, PAGES 424-426, IN THE REGISTER'S OFFICE OF BENTON COUNTY, TENNESSEE.

Please see NOTICES, page 7A

NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED

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 Sunray HHA TN, LLC, a/an proposed home health agency owned by Sunray HHA TN, LLC, with an ownership type of Limited Liability Company (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 limited to home infusion services. The project will serve a proposed service area of 95 counties: Anderson, Bedford, Benton, Bledsoe, Blount, Bradley, Campbell, Cannon, Carroll, Carter, Cheatham, Chester, Claiborne, Clay, Cocke, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Dyer, Fayette, Fentress, Franklin, Gibson, Giles, Grainger, Greene, Grundy, Hamblen, Hamilton, Hancock, Hardeman, Hardin, Hawkins, Haywood, Henderson, Henry, Hickman, Houston, Humphreys, Jackson, Jefferson, Johnson, Knox, Lake, Lauderdale, Lawrence, Lewis, Lincoln, Loudon, Macon, Madison, Marion, Marshall, Maury, McMinn, McNairy, Meigs, Monroe, Montgomery, Moore, Morgan, Obion, Overton, Perry, Pickett, Polk, Putnam, Rhea, Roane, Robertson, Rutherford, Scott, Sequatchie, Sevier, Shelby, Smith, Stewart, Sullivan, Sumner, Tipton, Trousdale, Unicoi, Union, Van Buren, Warren, Washington, Wayne, Weakley, White, Williamson, and Wilson Counties. The address of the project will be 740 Cool Springs Blvd., Suite 120, Office 1, Franklin, Williamson County, Tennessee, 37067. The estimated project cost will be \$202,418. The anticipated date of filing the application is 08/01/2026. The contact person for this project is Mr. Michael Brent who may be reached at Bradley Arant Boult Cummings LLP- 1221 Broadway #2400, Nashville, TN 37203- Contact No. 615-252-2361. 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, 503 Deaderick Street, Nashville, TN 37243 or email at hsda.staff@tn.gov.

Benton County, Tennessee
PROPOSED BUDGET FOR THE YEAR ENDING JUNE 30, 2027

Benton County, Tennessee hereby provides certain financial information for the Fiscal Year 2027 Budget in accordance with the requirements of Tennessee Private Acts of 1939, Chapter 541 and as amended in Tennessee Private Acts of 1999, Chapter 32. **There will be a public hearing concerning the budget at the Courthouse of Benton County on July 15, 2026 at 5:00 p.m.** All citizens are welcome to participate. The budget and all supporting data are a public record and are available for public inspection by anyone at the office of the County Mayor.

GENERAL FUND			
	AUDIT 2025	ESTIMATED 2026	PROPOSED 2027
ESTIMATED REVENUES & OTHER SOURCES			
LOCAL TAXES	\$ 6,547,818	\$ 6,460,838	\$ 6,719,901
STATE OF TENNESSEE	2,880,703	2,956,999	2,776,662
FEDERAL GOVERNMENT	87,294	15,500	-
OTHER SOURCES	5,207,814	4,288,433	3,953,565
TOTAL ESTIMATED REVENUES	\$ 14,723,629	\$ 13,721,770	\$ 13,450,128
ESTIMATED EXPENDITURES & OTHER USES			
SALARIES	\$ 6,141,295	\$ 7,242,372	\$ 7,089,543
OTHER COSTS	7,980,029	5,890,288	6,264,088
TOTAL ESTIMATED EXPENDITURES	\$ 14,121,324	\$ 13,132,660	\$ 13,353,631
ESTIMATED BEGINNING BALANCE, JULY 1	\$ 15,018,712	\$ 15,621,018	\$ 16,210,127
ESTIMATED ENDING BALANCE, JUNE 30	\$ 15,621,018	\$ 16,210,127	\$ 16,306,624

HIGHWAY/PUBLIC WORKS FUND			
	AUDIT 2025	ESTIMATED 2026	PROPOSED 2027
ESTIMATED REVENUES & OTHER SOURCES			
LOCAL TAXES	\$ 423,816	\$ 486,648	\$ 501,317
STATE OF TENNESSEE	3,518,437	2,397,986	2,922,584
FEDERAL GOVERNMENT	42,697	-	-
OTHER SOURCES	71,790	376,443	65,500
TOTAL ESTIMATED REVENUES	\$ 4,056,740	\$ 3,261,077	\$ 3,489,401
ESTIMATED EXPENDITURES & OTHER USES			
SALARIES	\$ 1,245,423	\$ 1,208,574	\$ 1,412,848
OTHER COSTS	2,622,451	1,276,237	2,262,857
TOTAL ESTIMATED EXPENDITURES	\$ 3,867,874	\$ 2,484,811	\$ 3,675,705
ESTIMATED BEGINNING BALANCE, JULY 1	\$ 1,012,115	\$ 1,200,981	\$ 1,977,247
ESTIMATED ENDING BALANCE, JUNE 30	\$ 1,200,981	\$ 1,977,247	\$ 1,790,944

GENERAL PURPOSE SCHOOL FUND			
	AUDIT 2025	ESTIMATED 2026	PROPOSED 2027
ESTIMATED REVENUES & OTHER SOURCES			
LOCAL TAXES	\$ 7,115,843	\$ 7,193,006	\$ 6,487,907
STATE OF TENNESSEE	19,012,300	18,622,599	18,112,469
FEDERAL GOVERNMENT	419,211	96,486	112,000
OTHER SOURCES	285,640	185,725	93,200
TOTAL ESTIMATED REVENUES	\$ 26,832,994	\$ 26,097,816	\$ 24,805,576
ESTIMATED EXPENDITURES & OTHER USES			
SALARIES	\$ 13,301,187	\$ 13,895,359	\$ 15,967,540
OTHER COSTS	12,981,768	11,035,284	12,756,622
TOTAL ESTIMATED EXPENDITURES	\$ 26,282,955	\$ 24,930,643	\$ 28,724,162
ESTIMATED BEGINNING BALANCE, JULY 1	\$ 14,483,028	\$ 15,033,067	\$ 16,200,240
ESTIMATED ENDING BALANCE, JUNE 30	\$ 15,033,067	\$ 16,200,240	\$ 12,281,655

DEBT SERVICE FUND			
	AUDIT 2025	ESTIMATED 2026	PROPOSED 2027
ESTIMATED REVENUES & OTHER SOURCES			
LOCAL TAXES	\$ 757,747	\$ 748,335	\$ 1,349,232
STATE OF TENNESSEE	-	-	-
FEDERAL GOVERNMENT	-	-	-
OTHER SOURCES	1,708,891	1,342,031	377,978
TOTAL ESTIMATED REVENUES	\$ 2,466,638	\$ 2,090,366	\$ 1,727,209
ESTIMATED EXPENDITURES & OTHER USES			
SALARIES	\$ -	\$ -	\$ -
OTHER COSTS	1,380,404	1,782,240	2,696,870
TOTAL ESTIMATED EXPENDITURES	\$ 1,380,404	\$ 1,782,240	\$ 2,696,870
ESTIMATED BEGINNING BALANCE, JULY 1	\$ 2,859,989	\$ 3,946,223	\$ 4,254,349
ESTIMATED ENDING BALANCE, JUNE 30	\$ 3,946,223	\$ 4,254,349	\$ 3,284,689

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CLASSIFIEDS



FOR SALE

FOR SALE – Spray washer. Room divider. Tools. Exercise bike. Glider rocker and more. Call 731-879-2908. (12P)

MISCELLANEOUS

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DIRECTV- All your entertainment. Nothing on your roof! Sign up for Direct and get your first free months of Max, Paramount+, Showtime, Starz, MGM+

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Olshan Foundation Solutions. Your trusted foundation repair experts since 1933. Foundation repair. Crawl space recovery. Basement waterproofing. Water management and more. Free evaluation. Limited time up to \$250 off foundation repair. Call

Olshan 1-866-265-5932 (TnScan)

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We Buy Houses for Cash AS IS! No repairs. No fuss. Any condition. Easy three step process: Call, get cash offer and get paid. Get your fair cash offer today by calling Liz Buys Houses: 1-877-551-1426 (TnScan) YOUR LOW COST ADVERTISING Solution!

One call & your 25 word ad will appear in 104 Tennessee newspapers for \$275/wk or 28 West TN newspapers for \$100/wk. Call this newspaper's classified advertising dept. or go to www.tnpress.com/newspaper-networks (TnScan)

HEALTH

Attention: VIAGRA and CIALIS USERS! A cheaper alternative to high drugstore prices! 50 Pill Special - Only \$99! 100% guaranteed. CALL NOW: 1-877-691-6412. (TnScan)

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stay in the home you love. Feel safe on every level. \$750 off plus FREE installation. Made in the U.S.A. Call today for a free quote. 1-866-432-3409 (TnScan)

DENTAL INSURANCE from Physicians Mutual Insurance Company. Coverage for 400 plus procedures. Real dental insurance - NOT just a discount plan. Do not wait! Call now! Get your FREE Dental Information Kit with all the details! 1-844-278-8285 [#6258](http://www.dental50plus.com/tnpress) (TnScan)

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CHESTER COUNTY Independent

Publishers Notice

All real estate advertising herein is subject to the Federal Fair Housing Act, which makes it illegal to advertise "any preference, limitation, or discrimination because of race, color, religion, sex, handicap, familial status, or national origin, or intention to make any such preference, limitation, or discrimination." We will not knowingly accept any advertising for real estate which is in violation of the law. All persons are hereby informed that all dwellings advertised are available on an equal opportunity basis.

REQUEST FOR PROPOSAL (RFP)
CHESTER COUNTY SCHOOL NUTRITION:
PIZZA SUPPLIES

PLEASE CONTACT STEPHANIE LOLLAR
@ 731-989-8140 OR
EMAIL:
STEPHANIE.LOLLAR@CHESTERCOUNTYSCHOOLS.ORG
FOR MORE INFORMATION.

POSITION AVAILABLE
POLICE OFFICER

The City of Henderson Police Department will be accepting applications for the position of Police Officer until the position is filled. Applicants must be 18 years of age. The applicant shall reside within a fifteen (15) mile radius of City Hall or within Chester County within one year from the date of employment and maintain residence within this area during their employment. certification. Applications and Job Descriptions may be picked up at Henderson City Hall at 121 Crook Ave., requested by phone at (731)983-5003, or on the city website at www.hendersontn.gov. Completed applications should be returned to Henderson City Hall or may be returned by email to hr@hendersontn.gov

The City of Henderson is an Equal Opportunity Employer. It is the policy of the City of Henderson not to discriminate on the basis of race, color, national origin, age, sex, or disability in its practices, programs, services, or activities.



PUBLIC NOTICE

The City of Henderson, Tennessee, Utility Department will be accepting applications for the following positions:

UTILITY WORKER I

Applications will be accepted until the position is filled. Residence within 15 miles of Henderson City Hall is required within one year after employment begins. Applications and Job Descriptions may be picked up at the Henderson Utility Department inside City Hall, located at 121 Crook Ave., or requested by phone at (731) 989-3503. They can also be found on the city website at www.hendersontn.gov.

Completed applications should be returned to HR at City Hall or may be returned via email to hr@hendersontn.gov

The City of Henderson is an Equal Opportunity Employer. It is the policy of the City of Henderson not to discriminate on the basis of race, color, national origin, age, sex, or disability in its practices, programs, services, or activities.



Huge Inside Sale
12625 St. Rt. Hwy. 100 E
July 9, 10 & 11
8 a.m.-6 p.m.

Over 800 books, over 200 magazines (25 cents each), 14 racks of clothes on hangers (newborn to 3X in men's and women's), denim jackets in all sizes (\$5 each), large rack of denim shorts, large box of new women's shoes. Newborn clothes 25 cents, children's 50 cents and adults' \$1. Fill a 13-gallon trash bag for \$5! Call Sharon at 608-3074 for more information.

"Our family taking care of your family" **Eddie's**
Auto Repair

EDDIE'S AUTO REPAIR
114 N. CHURCH ST., HENDERSON, TN 38340

THE FOLLOWING VEHICLE WILL BE SOLD AT SILENT AUCTION TO THE HIGHEST BIDDER, BEGINNING
JULY 2, 2026
WITH WINNING BID BEING CONTACTED ON
JULY 13, 2026
PLEASE SEND BIDS TO ADDRESS ABOVE AND INCLUDE NAME, NUMBER AND BID.

2012 CHEVY EQUINOX
VIN# 2GNALPEKYC6351676

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YOU CAN
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CLASSIFIEDS FOR
AS LITTLE AS
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CALL 731-989-4624
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IT'S TIME TO STOCK
YOUR POND!
Delivery will be:
Tuesday, July 21

Jackson 10:45-11:30 @
R & J Feed Supply
Bolivar 12:45-1:30 @
Stockdale's
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"LIKE" us on Facebook!
To Place an Order, Call
FISH WAGON
1-800-643-8439
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NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED

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 Sunray HHA TN, LLC, a/an proposed home health agency owned by Sunray HHA TN, LLC, with an ownership type of Limited Liability Company (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 limited to home infusion services. The project will serve a proposed service area of 95 counties: Anderson, Bedford, Benton, Bledsoe, Blount, Bradley, Campbell, Cannon, Carroll, Carter, Cheatham, Chester, Claiborne, Clay, Cocke, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Dyer, Fayette, Fentress, Franklin, Gibson, Giles, Grainger, Greene, Grundy, Hamblen, Hamilton, Hancock, Hardeman, Hardin, Hawkins, Haywood, Henderson, Henry, Hickman, Houston, Humphreys, Jackson, Jefferson, Johnson, Knox, Lake, Lauderdale, Lawrence, Lewis, Lincoln, Loudon, Macon, Madison, Marion, Marshall, Maury, McMinn, McNairy, Meigs, Monroe, Montgomery, Moore, Morgan, Obion, Overton, Perry, Pickett, Polk, Putnam, Rhea, Roane, Robertson, Rutherford, Scott, Sequatchie, Sevier, Shelby, Smith, Stewart, Sullivan, Sumner, Tipton, Trousdale, Unicoi, Union, Van Buren, Warren, Washington, Wayne, Weakley, White, Williamson, and Wilson Counties. The address of the project will be 740 Cool Springs Blvd., Suite 120, Office 1, Franklin, Williamson County, Tennessee, 37067. The estimated project cost will be \$202,418. The anticipated date of filing the application is 08/01/2026. The contact person for this project is Mr. Michael Brent who may be reached at Bradley Arant Boulton Cummings LLP, 1221 Broadway #2400, Nashville, TN 37203. Contact No. 615-252-2361. 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, 503 Deaderick Street, Nashville, TN 37243 or email at hsda.staff@tn.gov.

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www.chestercountyindependent.com

Bulletin

Continued from PAGE 4

welcome. For more information, call 931-510-1544.

CELINA-Canton Lodge #481 regular meetings are the 3rd Saturday of the month. Meetings start at 7:00 pm.

CELINA-The Clay

County Government Planning Meeting is held the last Monday of each month unless changed due to a holiday.

CELINA-Alco-holics Anonymous (AA) meets every Tuesday & Saturday evening from 8 p.m. to 9 p.m. at 115 Guffey St. Celina (in the basement of the health dept.) Call 931-243-3794 for

more information.

CELINA-The Clay County School Board meets the second Thursday of each month at the Clay County Schools Central office at 6 p.m.

CELINA-The Celina Municipal Planning Commission meets the fourth Tuesday of every month at 2:00 p.m. at City Hall.

HERMITAGE SPRINGS-The Hermitage Springs Park Committee will meet the third Tuesday of each month at 6:30 p.m. in the Hermitage Springs Bank commu-nity room. Everyone is invited to attend.

MOSS-The Clay County Gun and Knife Club will meet here the second Tuesday of each month at 6 p.m.

The meetings will be held in the white building on the right past Wood River market on Highway 51 (Tompkinsville Hwy.) here. Memberships are \$10 per year. For

more information, call 258-4030.

CELINA-The Clay County Park and Fair Board normally meets the fourth Thursday of each month at 6:30 p.m. at the Women's Building in the Clay County Recreation Complex.

CELINA-The Clay County Commission sanitation meeting is held the first Monday of each month at 5 p.m. at the sanitation building.

CELINA-The Clay County Commission meets the first Monday of each month at the commu-nity center here at 6:30 p.m.

CELINA-The Clay County Health Council meets the second Monday of each month at the Clay County School Board Central Office meeting room at 12 noon.

CELINA-Clay County Arts Alliance meets every third Tuesday at the Clay County Chamber of Commerce, 5:30 p.m.



BROWNING

Livestock Market, LLC

Lafayette, TN 37083 • Stockyard: 615-666-2184

Sales 1st, 3rd & 5th Wednesdays of each month
Video Sale - 1st Wednesday of each month



Rich's

HEATING & COOLING

1042 Mitchell St. • Celina, TN

931-243-2778

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Wanted

LOOKING TO BUY - Looking to buy old Tennessee license plates and cast iron cookware. Call 931-261-1605. (tfn) Auctions

Statewide Classified

U.S.A. Call today for a free quote. 1-866-432-3409 (TnScan)

DENTAL INSURANCE from Physicians Mutual Insurance Company. Coverage for 400 plus procedures. Real dental insurance - NOT just a discount plan. Do not wait! Call now! Get your FREE Dental Information Kit with all the details! 1-844-278-8285 www.dental50plus.com/tnpress #6258 (TnScan)

Home Improvement

Prepare for power outages today with a Generac Home Standby Generator. Act now to receive a FREE 5-Year warranty with qualifying purchase. Call 1-888-869-5542 today to schedule a free quote. It's not just a generator. It's a power move. (TnScan)

Olshan Foundation Solutions. Your trusted foundation repair experts since 1933. Foundation repair. Crawl space recovery. Basement waterproofing. Water management and more. Free evaluation. Limited time up to \$250 off foundation repair. Call Olshan 1-866-265-5932 (TnScan)

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Wanted – To Buy

We Buy Houses for Cash AS IS! No repairs. No fuss. Any condition. Easy three step process: Call, get cash offer and get paid. Get your fair cash offer today by calling Liz Buys Houses: 1-877-551-1426 (TnScan)

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Advertise Throughout TN

YOUR LOW COST ADVERTISING Solution! One call & your 25 word ad will appear in 104 Tennessee newspapers for \$275/wk or 46 Middle TN newspapers for \$120/wk. Call this newspaper's classified advertising dept. or go to www.tnpress.com/news-paper-networks (TnScan)

IN THE CHANCERY COURT FOR CLAY COUNTY, TENNESSEE

NOTICE TO CREDITORS

ESTATE OF RICHARD ERNEST BRAUN, Deceased - Case No. 2026-PR-16

Notice is hereby given that on the 10th day of June, 2026, Letters of Administration in respect of the estate of Richard Ernest Braun, who died on December 3, 2024, were issued to the undersigned by the Chancery Court of Clay County, Tennessee.

All persons, residents and non-residents, having claims matured or unmatured against the Estate are required to file same with the Clerk of the above-named court on or before the earlier of the dates prescribed in (1) or (2), otherwise their claims will be forever barred.

(1) (a) Four (4) months from the date of the first publication (or posting, as the case may be) of this notice if the creditor received an actual copy of this notice to creditors at least sixty (60) days before the date that is four (4) months from the date of the first publication (or posting);

(b) Sixty (60) days from the date the creditor received an actual copy of this notice to creditors if the creditor received the copy of the notice less than sixty (60) days prior to the date that is four (4) months from the date of first publication (or posting) as described in (1)(a); or

(2) Twelve (12) months from the decedents date of death.

This 10th day of June, 2026.

Donald Braun, Personal Representative

Michael Savage, Attorney for Estate
101 E Court Sq • Livingston, TN 38570 • 931-823-3690

L. Rene' Davis, Clerk and Master
145 Cordell Hull Drive • PO Box 332 • Celina, TN 38551 • 931-243-3145

NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED

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 Sunray HHA TN, LLC, a/an proposed home health agency owned by Sunray HHA TN, LLC, with an ownership type of Limited Liability Company (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 limited to home infusion services. The project will serve a proposed service area of 95 counties: Anderson, Bedford, Benton, Bledsoe, Blount, Bradley, Campbell, Cannon, Carroll, Carter, Cheatham, Chester, Claiborne, Clay, Cocke, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Dyer, Fayette, Fentress, Franklin, Gibson, Giles, Grainger, Greene, Grundy, Hamblen, Hamilton, Hancock, Hardeman, Hardin, Hawkins, Haywood, Henderson, Henry, Hickman, Houston, Humphreys, Jackson, Jefferson, Johnson, Knox, Lake, Lauderdale, Lawrence, Lewis, Lincoln, Loudon, Macon, Madison, Marion, Marshall, Maury, McMinn, McNairy, Meigs, Monroe, Montgomery, Moore, Morgan, Obion, Overton, Perry, Pickett, Polk, Putnam, Rhea, Roane, Robertson, Rutherford, Scott, Sequatchie, Sevier, Shelby, Smith, Stewart, Sullivan, Sumner, Tipton, Trousdale, Unicoi, Union, Van Buren, Warren, Washington, Wayne, Weakley, White, Williamson, and Wilson Counties. The address of the project will be 740 Cool Springs Blvd., Suite 120, Office 1, Franklin, Williamson County, Tennessee, 37067. The estimated project cost will be \$202,418. The anticipated date of filing the application is 08/01/2026. The contact person for this project is Mr. Michael Brent who may be reached at Bradley Arant Boulton Cummings LLP- 1221 Broadway #2400, Nashville, TN 37203- Contact No. 615-252-2361. 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, 503 Deaderick Street, Nashville, TN 37243 or email at hsda.staff@tn.gov.

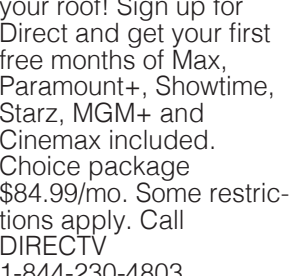
RE-ELECT

DALE

REAGAN

PD FOR BY CANDIDATE

CLAY COUNTY MAYOR



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JULY
10TH
9 A.M. CST

SATURDAY
JULY
11TH
9 A.M. CST

MONDAY
JULY
13TH

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105

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All residential real estate advertised herein is subject to the Federal Fair Housing Act and applicable state and local laws. The Fair Housing Act makes it illegal to advertise "any preference, limitation, discrimination because of race, color, religion, sex, handicap, familial status, or national origin, or intention to make any such preference, limitation or discrimination."

We will not knowingly accept any advertising for residential real estate that appears to or violate federal and/or state and local law.

For Your Convenience We Accept

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105

ANNOUNCEMENTS

CLASSIFIED ERROR RESPONSIBILITY

We take great care to avoid typographical errors. However, in the event of an error, we are responsible only for the first incorrect insertion of an ad. We do not assume any responsibility, for any reason, for an error in an ad beyond the cost of the ad itself. Management reserves the right to reject, revise & properly classify all advertisements. Ad position has no bearing on the results you receive and cannot be guaranteed.

200

RENTALS

Office Space for Rent
1,300 square ft.
901 Madison St.
Shelbyville, Tn
\$1,600 a month.
Call or text
931-703-9455.

220

HOUSES FOR RENT

For Rent
Manchester, Tn - 7 min from Normandy Lake.
2 bedroom
2 baths
\$1200.00 per month/
\$1200.00 deposit
Call Tonya for appointment 931-212-6459

220

HOUSES FOR RENT

RENT TO OWN HOMES

LOW DOWN PAYMENT

FindMyHomeTN.com
(931) 563-7844

490

GARAGE & RUMMAGE SALES

Big 3 family yard sale
Fri, Sat & Sun.
24865 Morrow Rd.
Ardmore, TN behind Country Club next to Dog Day Flea Market.
Glassware, Jewelry, Cast Iron, Tools, Yard Tools, Hand Tools, Cookware, Pots and Pans, Fishing Stuff, Lures,Rod & Reels, Old Tools, Old Glassware, Knives, Sports Stuff, Toys, Antiques, Old Iron Wheels, Signs, Hardware, Goats, and Lots of Neat Stuff!

530

MISCELLANEOUS FOR SALE

For Sale

Equal-i-zer Sway Control Hitch
14k Hitch \$325

RV Cover Fits 31 ft Class C Motor Home \$125

Call/Text 315-200-5637

605

SALES

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We also buy running vehicles. Will remove vehicles from your yard!
(931) 993-4007

720

WANTED TO BUY- AUTOS

WE BUY ALL VEHICLES!

All Kinds & Types, running or not! We can also remove your junk cars.
(931) 993-4007

NOTICE TO FURNISHERS OF LABOR AND MATERIALS TO:

Bell & Associates Constr., LP
PROJECT NO.: 16004-3208-94
CONTRACT NO.: CNX309
COUNTY: Coffee

The Tennessee Department of Transportation is about to make final settlement with the contractor for construction of the above numbered project. All persons wishing to file claims pursuant to Section 54-5-122, T.C.A. must file same with the Director of Construction, Tennessee Department of Transportation, Suite 700 James K. Polk Bldg., Nashville, Tennessee 37243-0326, on or before 8/21/2026.

900

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One Call For All. Your ad can appear in this newspaper + 103 other TN newspapers. For more info, contact this newspaper's

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8. Doesn't smell good

9. Mental health issue

10. Millisecond

11. Hairstyle

12. Edible starch

14. Middle Eastern military title

15. Protein-rich liquids

18. Indian musical pattern

20. Cancer and Capricorn

24. Country along the Arabian peninsula

26. A bend

28. Fishes of the her-ring family

30. Antelopes

32. Chaos

34. Popular music app

35. Cooking material

37. Musical instrument

38. San Diego ball-players

40. Small amounts

42. Poured

43. Fabric

45. Food option

47. Finger millet

49. The U. of Miami mascot is one

50. Alberta, Canada river

51. Canadian flyers

55. Dry white wine drink

CLUES ACROSS

1. Tall, upright post on a boat

5. Basics

9. Used to refer to cited works

11. Folds

13. Former UK PM

15. Cold region of Russia

16. Standard operating procedure

17. Separating

19. Particles

21. A way to map out

22. Referee declares

23. Beginner

25. Water (Spanish)

26. Gov't lawyers

27. Non-reproductive parts of an organism

29. Spanish friends

31. A type of tree

33. Walk heavily

34. About a wood

36. Free-swimming marine invertebrate

38. Political action committee

39. SB19 hit song

41. Scorch the surface of

43. Moved quickly on foot

44. Sacred state for a Muslim

46. Growl

48. Pearl Jam front-man

52. Irritating person

53. Something requiring a solution

54. Firing

CLUES DOWN

1. One who rides an elephant

2. Absence of bacteria

3. Soviet Socialist Republic

4. Men's fashion accessories

5. "Honey" actress

6. Round red root vegetable

7. Latin term for "charity"

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LAST WEEK'S ANSWER

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S N I P E S

H I P P O N E

A D A P T E D

H O L L A

L E A D

C L E A R

Q U A R A N T I N E

S U S P E N S I O N

P I A S

A N N E

S E S S

W T V

A N A

R U M

T I M P

E R R E D

S E L M A

C H I L E A N

H A P L E S S

C I A

H A P

E L I

S A R A N

R I S E

Legals

*** EARLY VOTING NOTICE***

STATE REPUBLICAN AND DEMOCRATIC PRIMARY AND STATE AND COUNTY GENERAL ELECTION

Thursday, August 6, 2026

Pursuant to T.C.A. Section 2-6-103, the Coffee County Election Commission is hereby publishing notice of the early voting period for the Thursday, August 6, 2026, Election to be opened and held in all voting precincts within Coffee County.

Offices for State Primary: Governor, U.S. Senate, U.S House of Representatives District 4, Tennessee House of Representatives District 47, State Executive Committeeman and Committeewoman

Offices for County General: County Mayor, County Commissioner—All Districts, County Trustee, Sheriff, Circuit Court Clerk, County Clerk, Register of Deeds, Road Superintendent, Road Commissioner-All Seats, Constable-All Seats, County School Board Seats, Tullahoma City Alderman, City Judge, School Board Seats, Manchester City Alderman, School Board Seats, Judicial Retention Questions

Any registered voter may early vote by personal appearance. **Voters must present a valid Federal or Tennessee State Government issued photo I.D. when voting early or at the polls on election day. Voters who do not bring photo IDs to the polls may vote with provisional ballots that may be counted once they show IDs at their local election commission office by two business days after the election.** Persons who registered on by-mail forms **must vote in person** during early voting or at the polls for the first election after registering to vote. **If a voter has not updated their registration to their current address, you may have to vote by fail-safe affidavit and may experience a delay in voting or being transferred to another voting location on election day. The last day to update your voter registration in the Coffee County Election Commission office is Saturday, August 1, 2026** Listed below are the early voting dates and times.

EARLY VOTING DATES

BEGINS: Friday, July 17, 2026

ENDS: Saturday, August 1, 2026

EARLY VOTING LOCATIONS AND TIMES

ELECTION COMMISSION OFFICE

1329 McArthur Street, Suite 6

Coffee County Administrative Plaza, Manchester

Monday – Friday 8:00-4:30 PM

Saturday 8:30-12:00 PM

C.D. STAMPS RECREATION CENTER

810 South Jackson Street

Tullahoma, Tennessee

Monday – Friday 9:00-4:30 PM

Saturday 9:00-12:00 PM

ANY ELIGIBLE VOTER DESIRING TO VOTE BEFORE ELECTION DAY MAY VOTE BY PERSONAL APPEARANCE DURING THIS TIME. NO REASON IS NECESSARY.

The last day for eligible voters to request a by-mail absentee ballot is Monday, July 27, 2026.

FOR FURTHER INFORMATION concerning EARLY VOTING BY PERSONAL APPEARANCE, BY-MAIL OR EMERGENCY VOTING PROCEDURES, please contact the Election Commission office, Coffee County Administrative Plaza, 1329 McArthur St., Suite 6, Manchester, Tn. or visit our website at www.coffeecountyttn.gov/electioncommission. Office hours are 8-4:30 Monday – Friday. Phone (931)723-5103.

COFFEE COUNTY ELECTION COMMISSION

William Bates, Chairman, Barbara Arp, Secretary

Carol Berthay, Member, Larry McIntosh, Member,

Emily Thoma, Member

Attest: Andy Farrar, Administrator of Elections

July 8, 2026.

SUDOKU

		7			1	3		9
		6	9			1		4
			7	3				
	1						5	8
	4				6			
			2	3	5	8		
	2				3			
9			2					
		5		8				

Answers From Last Week

9	6	4	7	2	5	3	8	1
3	8	2	4	9	1	7	6	5
7	1	5	3	8	6	2	9	4
8	7	6	5	1	3	4	2	9
2	3	9	8	6	4	1	5	7
5	4	1	2	7	9	6	3	8
6	5	8	1	4	2	9	7	3
1	2	3	9	5	7	8	4	6
4	9	7	6	3	8	5	1	2

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■ Public Notices/Legals email: Publicnotice@tnmedia.com

■ Business & Services email: Servicedirectory@tennessean.com

■ To post job openings, visit: Tennessean.com/jobs



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All classified ads are subject to the applicable rate card, copies of which are available from our Advertising Dept. All ads are subject to approval before publication. The Nashville Tennessean reserves the right to edit, refuse, reject, classify or cancel any ad at any time. Errors must be reported in the first day of publication. The Nashville Tennessean shall not be liable for any loss or expense that results from an error in or omission of an advertisement. No refunds for early cancellation of order.

ANNOUNCE

Announcements

Choose EarthLink Fiber Internet for speeds up to 5 Gigs, no data caps, no throttling. Prices starting at \$54.95. Plus, a \$100 gift card when you make the switch. Call 1-855-481-3340 (TnScan)

Olshan Foundation Solutions. Your trusted foundation repair experts since 1933. Foundation repair. Crawl space recovery. Basement waterproofing. Water management and more. Free evaluation. Limited time up to \$250 off foundation repair. Call Olshan 1-866-265-5932 (TnScan)

PETS

Domestic Pets

cane corso cane corso puppies akc all colors 1500 and up call for info 662-594-7211 662-594-7211



Ragdoll TICA registered Ragdoll kitten. Dream-Catcher Ragdolls Spring litter. Such a wonderful kitten and ready for his new home. Jessica 904-864-7331 call or text Instagram at dreamcatcher.ragdolls

STUFF

Antiques & Collectibles

Elegant & Depression Glass Annual Show & Sale in GALLATIN at the Gallatin Civic Center, 210 E. Albert Gallatin Ave.; Sat-July 18, 10-5; Sun-July 19, 11-3. \$8 per person, good for both days. (615)856-4259; or fostoriatnglass@gmail.com

Business Opportunity

FATTEN YOUR BANK ACCOUNT!!! Free 24-hr rec messages. 1-800-530-3147

Wanted to Buy

INSTANT CASH PAID for sports cards, sports memorabilia, autographs, comic books, toys, trains, gold, silver, coins, diamonds, jewelry, watches, antiques, advertising, military, autographs, entire estates **Call Scott 513-295-5634**

Homes



Wanted to Buy

WE PAY TOP DOLLAR FOR OLD BOOZE!



We are in search of Bourbon, Rum, Scotch, Gin, Tequila, Cognac, Liqueur etc. Please reach us at contact@revivalky.com or call/text us at 859-479-2676 with what you have.

BUSINESS & SERVICES

Lawn & Garden Care



Tree Removal • Trimming • Firewood • Pruning • Dead Wooding
24 Hr Emergency Services
Licensed & Insured
Residential & Commercial
615-394-3498

Tree Services



Paco's Tree Service
Bonded & Insured
615-946-3427
Removal, Topping, Trimming, Stump, Pruning, Lots/Fence Cleaning. 15 Yrs. Experience

REAL ESTATE

Waterfront Homes



Buchanan Paris Landing Kentucky Lake Area! **REDUCED \$1,450,000** LAKEFRONT HOME with DOCK
3943 Sq Ft 4 Bedrooms 4 Baths
Huge Multilevel DECK
MLS #3175057 Moody Realty Company, Inc.
Teri Edwards, Realtor
731-642-5093
731-336-9100
tedwards@moodyrealty.com

RENTALS

PUBLISHER'S NOTICE

All real estate advertised herein is subject to the Federal Fair Housing Act, which makes it illegal to advertise any preference, limitation, or discrimination because of race, color, religion, sex, handicap, familial status, or national origin, or intention to make any such preference, limitation, or discrimination. We will not knowingly accept any advertising for real estate which is in violation of the law. All persons are hereby informed that all dwellings advertised are available on an equal opportunity basis.



Apartments

KNIGHTS INN
Studio apts. Fully furn. Free local calls, Wifi, & cable TV. Utilities incl. Weekly rates \$300 per wk & up! Monthly call for details!
615-678-6526

EAST - Furnished Apt Fully Renovated 1BR, 1BA with New Flooring, Appls. Utills Included. Section 8 Welcomed \$1250/mo. 615-838-6252

Single Family Rentals



MILLION DOLLAR PROPERTY LEASE Hendersonville - Choice Views and amazing sunsets in a rare home with unique 1980s charm on 3 wooded acres. This unusual 3-bedroom, 2½-bath home offers approximately 2,700 sq. ft. of living space, a spacious den, and panoramic decks overlooking a beautiful valley. **Also rare** 2-bedroom guest, in-law, or maid apartment with screened porch, bonus room on lower level. Located in an exclusive rolling-hills neighborhood featuring million-dollar homes and horse properties, yet only minutes from N.Nashville amenities.
Lease Terms:
- Home/Apartment: \$2,995/month
- Upper home only: \$2,195/month
- Lower apartment: \$1,195/month
- 1-3 year lease preferred for whole house w/ good references required.
- Deposit First/Last month
For details, call 615-431-0663 or text 731-393-9496

PUBLIC NOTICES

PROPOSED SUBSTANTIAL AMENDMENT TO THE STATE OF TENNESSEE'S FY 2026-27 ANNUAL ACTION PLAN AND HOME-ARP ALLOCATION PLAN

The State of Tennessee plans to make several substantial amendments to its FY 2026-27 Annual Action Plan (AAP) and HOME-ARP Allocation Plan. The AAP details how the State of Tennessee plans to use federal funding for its Consolidated Planning programs. The U.S. Department of Housing and Urban Development (HUD) has already reviewed and approved the State's FY 2026-27 AAP. The amendment to the FY 2026-27 AAP would allow HOME Rental Development funding to be awarded to subgrantees in the form of a low-interest loan to support the construction of rental units for projects that also have received Low-Income Housing Tax Credit (LIHTC) funding. (This amendment does not prevent organizations from applying for HOME Rental Development funding as a grant, so long as the HOME grant is not combined with LIHTC funding.) The HOME-ARP Program was created to assist people experiencing homelessness, those at risk of experiencing it, and several other qualifying populations with the impacts of the COVID-19 pandemic. The first amendment to the HOME-ARP Allocation Plan would reallocate a total of \$12,450,512.45 from Non-Profit Operating, Non-Profit Capacity Building, Rental Development, and Administration and Planning activities to Supportive Services activities. The second substantial amendment would allow organizations awarded HOME-ARP funding to "prefer" (or use funding preferentially for) Qualifying Population 3 (QP3), people who are fleeing, or attempting to flee domestic violence, dating violence, sexual assault, stalking, or human trafficking. (The second amendment does not prevent organizations serving other QPs from applying for or being awarded funding.) Tennesseans are encouraged to review and make comments on these proposed amendments beginning on July 8, 2026. Links to review the proposed amendments to the FY 2026-27 Annual Action Plan and HOME-ARP Allocation Plan, summaries of the proposed amendments in English and Spanish, and a form to submit comments will be available at <https://thda.org/research-planning/public-notices-and-comment/> from July 8 through August 7, 2026, along with details for an in-person and virtual public hearing about the amendments. For questions and accommodation requests (e.g., requests for assistance due to a disability and/or limited English language proficiency), please email research@thda.org.

PUBLIC NOTICES

NOTICE TO FURNISHERS OF LABOR AND MATERIALS TO:

Stansell Electric Company, Inc.

PROJECT NO.:

R3IMSC-F3-002

CONTRACT NO.: CNW388

COUNTY: Davidson

The Tennessee Department of Transportation is about to make final settlement with the contractor for construction of the above numbered project. All persons wishing to file claims pursuant to Section 54-5-122, T.C.A. must file same with the Director of Construction, Tennessee Department of Transportation, Suite 700 James K. Polk Bldg., Nashville, Tennessee 37243-0326, on or before 8/21/2026.

Public Notices

12442086

LEGAL NOTICE

Pursuant to the Environmental Protection Agency's 40 CFR 403.6 (f) (viii) requirement of publication, the Metropolitan Government of Nashville and Davidson County, Department of Water and Sewerage Services, is listing the following industries as having been in Significant Non-Compliance for the period of April 1, 2025, to March 31, 2026.

1. AAA Plating, Inc.
2. August Bioservices, LLC.
3. Crown Bakeries
4. Leonard Plating Co.
5. Magnera Corporation
6. Music City Environmental
7. Onsite Environmental
8. Precision Metalworks, Inc.
9. Quality Plating, Inc.
10. S&H Chrome Plating, Inc.
11. Thompson Machinery
12. Tradebe Treatment and Recycling of Nashville
13. U.S. Smokeless Tobacco Co., Inc.

Questions or comments may be addressed to Metro Water Services, Environmental Compliance Section, 1450 Lebanon Pike Bldg C, Nashville, TN 37210, phone (615) 862-4590.



Looking to Buy a Car?

Check the classified listings everyday.

PUBLIC NOTICES

PUBLIC NOTICES

PUBLIC NOTICES

NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED

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 Sunray HHA TN, LLC, a/an proposed home health agency owned by Sunray HHA TN, LLC, with an ownership type of Limited Liability Company (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 limited to home infusion services. The project will serve a proposed service area of 95 counties: Anderson, Bedford, Benton, Bledsoe, Blount, Bradley, Campbell, Cannon, Carroll, Carter, Cheatham, Chester, Claiborne, Clay, Cocke, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Dyer, Fayette, Fentress, Franklin, Gibson, Giles, Grainger, Greene, Grundy, Hamblen, Hamilton, Hancock, Hardeman, Hardin, Hawkins, Haywood, Henderson, Henry, Hickman, Houston, Humphreys, Jackson, Jefferson, Johnson, Knox, Lake, Lauderdale, Lawrence, Lewis, Lincoln, Loudon, Macon, Madison, Marion, Marshall, Maury, McMinn, McNairy, Meigs, Monroe, Montgomery, Moore, Morgan, Obion, Overton, Perry, Pickett, Polk, Putnam, Rhea, Roane, Robertson, Rutherford, Scott, Sequatchie, Sevier, Shelby, Smith, Stewart, Sullivan, Sumner, Tipton, Trousdale, Unicoi, Union, Van Buren, Warren, Washington, Wayne, Weakley, White, Williamson, and Wilson Counties. The address of the project will be 740 Cool Springs Blvd., Suite 120, Office 1, Franklin, Williamson County, Tennessee, 37067. The estimated project cost will be \$202,418. The anticipated date of filing the application is 08/01/2026. The contact person for this project is Mr. Michael Brent who may be reached at Bradley Arant Boult Cummings LLP- 1221 Broadway #2400, Nashville, TN 37203- Contact No. 615-252-2361. 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, 503 Deaderick Street, Nashville, TN 37243 or email at hdsa.staff@tn.gov.

Public Notices

Public Notices

12456480

WCS LEGAL NOTICE REQUEST FOR BIDS

RFB #1416 ASPHALT CONTINUOUS MATERIALS & REPAIR UNIT PRICE AGREEMENT

Williamson County Schools is currently accepting sealed bids from qualified Asphalt Paving Contractors interested in bidding on a Unit Price Maintenance and Repairs Contract. Interested bidders should mail or hand deliver sealed RFB envelopes to the WCS Central Office, located at 1320 West Main Street, Suite 202, Franklin, Tennessee 37064, Attn: Skip Decker. Sealed bids will be received until **10:30 a.m. on Tuesday, July 28, 2026 at which time they will be read aloud.** Any bids received after the deadline will **not** be accepted. Faxed or emailed bids will **not** be accepted. Once the sealed envelope is received the WCS Purchasing Dept. will stamp the face of the envelope to authenticate the actual date and time it was received.

A **pre-bid meeting** will be held on Tuesday, July 14, 2026 at 10:30 am located at the WCS Maintenance Office, 1761 West main Street, Franklin, TN 37064. This advertisement will be posted on the WCS website www.wcs.edu by clicking on the Purchasing Department link. Nothing contained in the commissioned engineers or architects RFB document or amendments thereto shall eliminate or reduce the requirements contained in the legal advertisement.

12462455

WCS LEGAL NOTICE – REQUEST FOR BID

RFB #1415 DOMESTIC HOT WATER / BOILER REPLACEMENTS AT CCES & NES

Williamson County Schools (WCS) is currently accepting sealed bids from licensed and qualified bidders interested in bidding on Domestic Hot Water /Boiler Replacements at Clovercroft and Nolensville Elementary Schools. Sealed bids must be mailed, or hand delivered to WCS Central Office, Purchasing Department, 1320 West Main Street, Suite 202, Franklin, TN 37064, Attn: Amanda Waycaster. **Sealed envelopes will be received until Tuesday, July 28, 2026, at 2:30 p.m.** at which time they will be publicly opened. Bids received after the specified opening time will not be accepted. In the event WCS must reschedule a bid opening date or time, the specifications obtained from the WCS Purchasing Department shall reflect the actual date and time. Once the sealed bid envelope is submitted to WCS, the Purchasing Department will stamp the face of the envelope to authenticate the actual date and time received.

A **pre-bid meeting** will be conducted on **Friday, July 10, 2026 at 8:30 a.m. at Clovercroft Elementary School, 9336 Clovercroft Road, Franklin, TN 37067.** Although the pre-bid meeting is not mandatory, it is highly encouraged as valuable information concerning the bid project will be discussed.

This legal advertisement is extended and continued in full and appropriate detail in the WCS RFB #1415 Invitation to Bid Document which will be posted in the public domain, on the WCS website www.wcs.edu by clicking on the Resources link, then the Budget & Finance link to Open Projects. Nothing contained in the commissioned architect's RFB documents or amendments thereto shall eliminate or reduce the requirement contained in the extended legal advertisement.



Find your new best friend.

Check the classified listings everyday.

THE WORLD'S LIGHTEST WHEELCHAIR

Meet the World's Lightest Wheelchair. The Featherweight Wheelchair.

If walking has become harder for you or someone you love, there's a **new wheelchair** that could make **life easier**. The **Featherweight Wheelchair** weighs just **13.5 pounds**—less than **half the weight of most wheelchairs**. That means it's **easy to lift into a car**, take on trips, or use around the house.

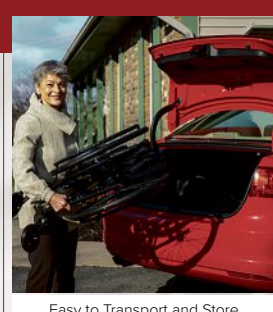
It's not just light—it's **strong, easy to push, and looks great too**.

With a sleek design and color choices, it's a chair you'll feel proud to use every day.

Stay active. Stay independent. **Try the Featherweight Wheelchair and feel the difference.**



Only 13.5 lbs!



Easy to Transport and Store

855-520-6122

*13.5 lbs. with the rear wheels removed. Overall weight, with rear wheels, is 19 lbs.

Why take our word for it?

CALL NOW, and receive \$50 OFF when you purchase a **Matte Black Featherweight Wheelchair Only \$599!**

Mention **CODE 50FEATHER** to start your journey towards effortless mobility.

Jennifer F. us
Verified Buyer

★★★★★ **Lightweight Wheelchair**

01/09/25

It's so light weight that it's no problem to lift in and out of the back of my car. It's also easy to set up and collapse down. It is very compact and the wheels come off for compact packing alongside luggage or groceries etc. My Mom finds it very comfortable to ride in as well and enjoys the look. We both love it.



Scan Me

1800 WHEELCHAIR.COM
Since 1997

Sandlin Announces Candidacy for Republican State Executive Committee

Greg Sandlin of Coffee County has announced his candidacy for the State Executive Committee (SEC) District 16 position, which will be on the August 6 Republican primary ballot. Mr. Sandlin is a Christian, husband, father, and conservative Republican.



Greg Sandlin

"Our family moved to Coffee County in 2001, where I started an engineering job at AEDC. We dug into the community, built a wonderful life here, and raised our two daughters. Upon moving to Tennessee, I immediately got involved in

local politics, supporting Republican candidates in a county that leaned Democrat. County Republicans elected me twice as Chairman of the county party — first in 2007, then again in 2023 — with the goal of growing the party and recruiting conservative candidates to run for local and regional positions. It was a privilege to do my part in promoting conservative Tennessee values through the years and helping the good people of Coffee County realize that their value system aligns more

directly with the values of the Republican Party. In 2009, I was elected and served one term as a Tullahoma Alderman and served on the Planning Commission.

Regarding community engagement, I serve in leadership roles in the Arnold Community Council and Tullahoma Rotary Club and am a member of the Tullahoma & Manchester Chambers of Commerce. My family attends Covenant Presbyterian Church (PCA).

Professionally, I am a licensed Professional Engineer, project manager at AEDC, and small business owner.

The State Executive

Committeeman position represents the Republicans of State Senate D16 (Coffee, DeKalb, Franklin, Grundy, Lincoln, and Warren counties) at the Tennessee Republican Party. My mission will be to advance our conservative values, grow the party, support the six county parties, recruit and train future leaders, and facilitate the flow of information from the state party to the county parties and vice versa.

I ask for your vote in the August 6 Republican primary (early voting runs July 17-August 1). For more information, email gjsandlin@gmail.com."

Head Start announces child nutrition program

Smithville L.B.J. & C. HEAD START announces participation in the Child and Adult Care Food Program. Meals will be provided at no separate charge to eligible children/adults without regard to race, color, national origin, sex, age, or disability served at Smithville Head Start, 118 Kimberly Lane, Smithville, TN 37166.

In accordance with Federal civil rights law and the U.S. Department of Agriculture (USDA) civil rights

regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of SEE **CHILD/PAGE A12**

July 8, 2026
SMITHVILLEREVIEW.COM

SMITHVILLE



0600 REAL ESTATE FOR RENT

FOR RENT
3 bedroom houses for rent.
Call:
615-444-0038
for info

FARM LAND FOR RENT
615-215-1193

0900 LEGALS

DeKALB COUNTY CHANCERY COURT, PROBATE DIVISION
NOTICE TO CREDITORS
THE ESTATE OF BRITTANY CAMPBELL, DECEASED
DOCKET NO. 2026PR56
Notice is hereby given that on the 1st day of July, 2026, Letters of Administration in respect to the estate of Brittany Campbell, deceased, who died July 13, 2025, were issued to the undersigned by the Chancery Court of DeKalb County,

0900 LEGALS

Tennessee.
All persons, resident and non-resident, having claims, matured or not, against the estate are required to file the same with the clerk of the above-named court on or before the earlier of the dates prescribed in (1) or (2) otherwise their claims will be forever barred: (1) (A) Four (4) months from the date of the first publication of this notice if the creditor received an actual copy of this notice to creditors at least sixty (60) days before the date that is four (4) months from the date of the first publication; or (B) Sixty (60) days from the date the creditor received an actual copy of the notice to creditors if the creditor received the copy of the notice less than sixty (60) days prior to the date that is four (4) months from the date of first publication as described in (1)(A); or (2) Twelve (12) months from the decedent's date of death. This the 1st day of July 2026. Melissa Yarbrough, Administratrix
Richard M. Brooks, Attorney
Nicole Wright, Clerk and Master
July 8, 15, 2026

0900 LEGALS

William Kooienga
578 Frazier Hollow Rd
Dowelltown, TN 37059
will take possession of the following abandoned motorcycle on July 25, 2026

2004 Honda VT750C
VIN JH2RC500X4M000797

DeKALB COUNTY CHANCERY COURT, PROBATE DIVISION
NOTICE TO CREDITORS
THE ESTATE OF RONNIE EUGENE BANDY, DECEASED
DOCKET NO. 2026PR50

Notice is hereby given that on the 15th day of June, 2026, Letters of Administration in respect to the estate of Ronnie Eugene Bandy, deceased, who died May 20, 2026, were issued to the undersigned by the Chancery Court of DeKalb County, Tennessee.
All persons, resident and non-resident, having claims, matured or not, against the estate are required to file the same with the clerk of the above-

0900 LEGALS

named court on or before the earlier of the dates prescribed in (1) or (2) otherwise their claims will be forever barred: (1) (A) Four (4) months from the date of the first publication of this notice if the creditor received an actual copy of this notice to creditors at least sixty (60) days before the date that is four (4) months from the date of the first publication; or (B) Sixty (60) days from the date the creditor received an actual copy of the notice to creditors if the creditor received the copy of the notice less than sixty (60) days prior to the date that is four (4) months from the date of first publication as described in (1)(A); or (2) Twelve (12) months from the decedent's date of death. This the 15th day of June 2026. Jeremy Bandy, Administrator
Jeremy D. Trapp, Attorney
Nicole Wright, Clerk and Master
July 1, 8, 2026

Something Missing?
Let the Classifieds Help you find it!

NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED

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 Sunray HHA TN, LLC, a/an proposed home health agency owned by Sunray HHA TN, LLC, with an ownership type of Limited Liability Company (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 limited to home infusion services. The project will serve a proposed service area of 95 counties: Anderson, Bedford, Benton, Bledsoe, Blount, Bradley, Campbell, Cannon, Carroll, Carter, Cheatham, Chester, Claiborne, Clay, Cocke, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Dyer, Fayette, Fentress, Franklin, Gibson, Giles, Grainger, Greene, Grundy, Hamblen, Hamilton, Hancock, Hardeman, Hardin, Hawkins, Haywood, Henderson, Henry, Hickman, Houston, Humphreys, Jackson, Jefferson, Johnson, Knox, Lake, Lauderdale, Lawrence, Lewis, Lincoln, Loudon, Macon, Madison, Marion, Marshall, Maury, McMinn, McNairy, Meigs, Monroe, Montgomery, Moore, Morgan, Obion, Overton, Perry, Pickett, Polk, Putnam, Rhea, Roane, Robertson, Rutherford, Scott, Sequatchie, Sevier, Shelby, Smith, Stewart, Sullivan, Sumner, Tipton, Trousdale, Unicoi, Union, Van Buren, Warren, Washington, Wayne, Weakley, White, Williamson, and Wilson Counties. The address of the project will be 740 Cool Springs Blvd., Suite 120, Office 1, Franklin, Williamson County, Tennessee, 37067. The estimated project cost will be \$202,418. The anticipated date of filing the application is 08/01/2026. The contact person for this project is Mr. Michael Brent who may be reached at Bradley Arant Boult Cummings LLP- 1221 Broadway #2400, Nashville, TN 37203- Contact No. 615-252-2361. 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, 503 Deaderick Street, Nashville, TN 37243 or email at hsd.a.staff@tn.gov.

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Need Your SPACE?
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See how good it feels to rehome the stuff you're not using, and generate some extra cash in the process!

Place Your Ad Today!

Furniture, Electronics, Appliances, Handbags, Jewelry, Sporting Goods, Baby Gear, Bicycles, Tools & More!

The Town of Liberty, Tennessee, hereby provides certain financial information for the Fiscal Year 2027 Budget in accordance with the requirements of Tennessee Code Annotated, Title 6, Chapter 56, Section 206. There was a public hearing concerning the budget at Town Hall on July 20th, 2026 at 7:00 .PM. All citizens were welcome to participate. The budget and all supporting data are a public record and are available for public inspection by anyone at Town Hall.

	General Fund		
	FY 2025 Audited	FY 2026 Estimated	FY 2027 Proposed
Revenues:			
Local Taxes	\$ 84,314	\$ 73,167	\$ 75,853
State of Tennessee	60,494	59,612	60,758
Federal Government	-	-	-
Other Sources	9,921	9,175	10,000
Total Revenues	\$154,729	\$141,954	\$146,611
Expenditures:			
Salaries	\$ 16,741	\$ 16,334	\$ 17,200
Other Cost	62,258	66,424	136,300
Total Expenditures	\$ 78,999	\$ 82,758	\$ 153,500
Beginning Fund Balance	\$ 533,215	\$ 608,945	\$ 668,141
Ending Fund Balance	\$ 608,945	\$ 668,141	\$ 661,252
Number FTE Employees	1	1	1

STATEWIDE CLASSIFIED ADS

Reaching more than 591,000 Readers Every Week!

For placement information, contact this newspaper's classified advertising department.

Auctions

GET THE WORD OUT about your next auction! Save Time & \$\$\$. One Call For All. Your ad can appear in this newspaper + 103 other TN newspapers. For more info, contact this newspaper's classified dept. or call Becky Moats 931-624-8916.

Cable / Satellite TV / Wireless

Choose EarthLink Fiber Internet for speeds up to 5 Gigs, no data caps, no throttling. Prices starting at \$54.95. Plus, a \$100 gift card when you make the switch. Call 1-855-481-3340

Get Boost Infinite! Unlimited Talk, Text and Data! For Just \$25/mo! The Power Of 3 5G Networks, One Low Price! Call Today and Get The Latest iPhone Every Year On Us! 855-454-6457

DIRECTV- All your entertainment. Nothing on your roof! Sign up for Direct and get your first free months of Max, Paramount+, Showtime, Starz, MGM+ and Cinemax included. Choice package \$84.99/mo. Some restrictions apply. Call DIRECTV 1-844-230-4803

Get DISH Satellite TV + Internet! Free

Install, Free HD-DVR Upgrade, 80,000 On-Demand Movies, Plus Limited Time Up To \$600 In Gift Cards. Call Today! 1-844-274-6074

Health / Beauty

Attention: VIAGRA and CIALIS USERS! A cheaper alternative to high drugstore prices! 50 Pill Special - Only \$99! 100% guaranteed. CALL NOW: 1-877-691-6412.

Safe Step Stairlifts. Enjoy greater independence and stay in the home you love. Feel safe on every level. \$750 off plus FREE installation. Made in the U.S.A. Call today for a free quote. 1-866-432-3409

DENTAL INSURANCE from Physicians Mutual Insurance Company. Coverage for 400 plus procedures. Real dental insurance - NOT just a discount plan. Do not wait! Call now! Get your FREE Dental Information Kit with all the details! 1-844-278-8285 www.dental50plus.com/tnpress #6258

Home Improvement

Olshan Foundation Solutions. Your trusted foundation repair experts since

1933. Foundation repair. Crawl space recovery. Basement waterproofing. Water management and more. Free evaluation. Limited time up to \$250 off foundation repair. Call Olshan 1-866-265-5932

Prepare for power outages today with a Generac Home Standby Generator. Act now to receive a FREE 5-Year warranty with qualifying purchase. Call 1-888-869-5542 today to schedule a free quote. It's not just a generator. It's a power move.

Wanted - To Buy

We Buy Houses for Cash AS IS! No repairs. No fuss. Any condition. Easy three step process: Call, get cash offer and get paid. Get your fair cash offer today by calling Liz Buys Houses: 1-877-551-1426

Advertise Throughout Tennessee

YOUR LOW COST ADVERTISING Solution! One call & your 25 word ad will appear in 104 Tennessee newspapers for \$275/wk or 46 Middle TN newspapers for \$120/wk. Call this newspaper's classified advertising dept. or go to www.tnpress.com

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TURN SCRAP INTO CASH!
Scrap \$9/#100 • Aluminum Cans 65 cents/pound
We now buy any kindmetal: brass, copper & batteries

Smith's Truck Salvage
Monday - Friday 8-5 • Saturday 8-noon.
Scales close 30 prior to closing

3584 Jim Cummings Hwy. • Woodbury • 615.563.4343

PUBLIC NOTICE

LEGAL

NOTICE OF TRUSTEE'S SALE OF REAL ESTATE

WHEREAS, on the 18th day of June, 2013, Jonathon E. Clark did make, execute and deliver a certain Deed of Trust to Trustee, Leslie Clark Ledbetter of 6890 South York Highway, Clarkrange, Tennessee 38553, to secure the payment of a certain Promissory Note of even date therewith, with said Note being payable to Morgan Smith. Said Note is more fully described in said Deed of Trust of record in Book 216, Page 956, recorded on August 19, 2013, in the Register's Office for Fentress County, Tennessee, and to which Deed of Trust reference is hereby made; and

WHEREAS, said Deed of Trust was assigned to Lester Clark, more fully described in said Assignment of Deed of Trust of record in Book 433, Page 554, recorded on March 2, 2026, in the Register's Office for Fentress County, Tennessee, and to which Assignment of Deed of Trust reference is hereby made; and

Tract #8: Beginning on a point in the center of Turnberry Drive (50' joint ingress and egress easement) the southeast corner of tract #7 and the southwest corner of tract #8 herein described; Thence with the eastern line of tract #7, North 37°40'34" East, passing a ½" iron pin and cap set this survey at 25.34 feet in all a distance of 254.99 feet to a ½" iron pin and cap set this survey; Thence North 08°28'35" East, a distance of 57.77 feet to a ½" iron pin and cap set this survey; Thence South 86°24'21" East, a distance of 40.17 feet to a ½" iron pin and cap set this survey; Thence North 42°06'02" East, a distance of 147.81 feet to a ½" iron pin and cap set this survey; Thence North 64°00'35" East, a distance of 101.43 feet to a ½" iron pin and cap set this survey; Thence North 49°18'50" East, a distance of 149.60 feet to a ½" iron pin and cap set this survey; Thence North 66°23'54" East, a distance of 378.45 feet to a ½" iron pin and cap set this survey; Thence South 83°25'12" East, a distance of 189.68 feet to a ½" iron pin and cap set this survey; Thence South 68°51'09" East, a distance of 146.85 feet to a ½" iron pin and cap set this survey; Thence South 22°03'53" East, a distance of 72.46 feet to a ½" iron pin and cap set this survey; Thence South 21°57'35" West, a distance of 237.79 feet to a ½" iron pin and cap set this survey a corner of Tract #9; Thence with the west line of tract #9,

South 21°57'35" West, a distance of 558.91 feet to a ½" iron pin and cap set this survey; Thence South 14°50'44" West, a distance of 130.04 feet to a ½" iron pin and cap set this survey; Thence South 36°38'30" West, a distance of 24.80 feet to a point in the center of Turnberry Drive; Thence with the center of said Drive the following, North 55°04'07" West, a distance of 110.10 feet to a point; Thence with a curve having a radius of 500.00 feet, a delta angle of 33°06'58", a chord bearing of North 71°37'36" West, a chord length of 284.99 feet and an arc length of 288.99 feet along the curve to a ½" iron pin and cap set this survey; Thence North 88°11'05" West tangent to said curve, a distance of 224.51 feet to a point Thence with a curve having a radius of 875.00 feet, a delta angle of 26°38'51", a chord bearing of North 74°51'40 "West, a chord length of 403.29 feet and an arc length of 406.95 feet along the curve to the Point of Beginning Containing 17.38 ACRES, more or less. As surveyed by Timothy L. Goad R.L.S. #1748 on February 28, 2012. Bearings are based on magnetic north reading taken on the property.

This Parcel is subject to any right of ways, easements, and/or restrictions that may affect this survey. I do hereby certify that this is a category "A" survey with a ratio of precision of the unadjusted survey of 1: 10,000 or greater. Timothy L. Goad R.L.S. #1748.

Being Tax Map 105, Parcel 030.03, Assessor's Office, Fentress County, Tennessee; and

WHEREAS, on the 15th day of January, 2006, Kenneth Wolter and Barbara Wolter did make, execute and deliver a certain Deed of Trust to Trustee, Leslie Clark Ledbetter of 6890 South York Highway, Clarkrange, Tennessee 38553, to secure the payment of a certain Promissory Note of even date therewith, with said Note being payable to Morgan Smith. Said Note is more fully described in said Deed of Trust of record in Book 93, Page 286, recorded on January 26, 2006, in the Register's Office for Fentress County, Tennessee, and to which Deed of Trust reference is hereby made; and

WHEREAS, said Deed of Trust was assigned to Lester Clark, more fully described in said Assignment of Deed of Trust of record in Book 440, Page 440, recorded on June 23, 2026, in the Register's Office for Fentress County, Tennessee, and to which Assignment of Deed of Trust reference is hereby made; and Lying and being in the Fourth Civil District of Fentress County, Tennessee, and from the courthouse in Jamestown traveling south on highway 127

approximately 14.6 miles to the northern entrance of Franklin Loop road, thence east on Franklin Loop road approximately 0.53 miles to the entrance of Clear Fork Trail and being described more particularly as follows:

Tract #24: Beginning on a ½" iron pin and cap set this survey in the center of a 50-foot joint easement (25-foot each side of Center) a common corner of Tract #25; Thence North 49°28'46" West, a distance of 551.95 feet to a ½" iron pin and cap set this survey; Thence North 45°14'53" East, a distance of 51.88 feet to a ½" iron pin and cap set this survey; Thence North 63°35'37" East, a distance of 341.14 feet to a ½" iron pin and cap set this survey; Thence South 57°52'22" East, a distance of 206.47 feet to a ½" iron pin and cap set this survey; Thence North 72°44'53" East, a distance of 79.27 feet to a ½" iron pin and cap set this survey ;Thence North 28°04'22" East, a distance of 145.16 feet to a ½" iron pin and cap set this survey; Thence South 49°28'46" East, a distance of 197.84 feet to a ½" iron pin and cap set this survey in the center of the 50-foot easement (Clear Fork Trail); Thence with said easement, South 40°31'14" West, a distance of 102.42 feet to a ½" iron pin and cap set this survey; Thence South 40°31'14" West, a distance of 502.00 feet to the Point of Beginning Containing 5.21 ACRES, more or less.

As surveyed by Timothy L. Goad R.L.S. #1748. Being the tracts as shown on drawing # 12802-02 dated 6/01/2004. Tracts are subject to any right of ways, easements, and/or restrictions that may affect this survey.

Being Tax Map 134, Parcel 062.10, Assessor's Office, Fentress County, Tennessee; and

WHEREAS, default has been made in the terms, conditions and payments provided for in said certain Notes heretofore mentioned, and the holder and owner of said Notes has declared the entire unpaid principal balances of said Notes, together with all accrued and unpaid interest, due and payable as provided in said Notes and Deeds of Trust.

THEREFORE, in accordance with the terms of the Deeds of Trust and by virtue of the power and authority vested in the undersigned Trustee by

the aforesaid Deeds of Trust, the public is hereby notified that the undersigned Trustee, Leslie Clark Ledbetter, having been requested so to do by the said holder and owner of the Notes, will sell the hereinafter described real estate at public auction to the highest and best bidder for cash in hand (or credit upon the indebtedness secured if the holder of the secured indebtedness is the successful bidder) at the courthouse door of the Fentress County Courthouse in Jamestown, Tennessee, at the hour of 12:00 p.m. prevailing time on Thursday, the 30th day of July, 2026; said property will be sold in bar of all right and equities of redemption and statutory right of redemption, homestead, dower and all other exemptions of every kind from the borrower which are expressly waived by the terms of said Deed of Trust; said real estate will be sold without any warranties as to liens, existing highway, roadway and utility easements, applicable building and zoning regulations, such state of facts as an accurate survey would disclose, to all encumbrances, Federal Tax Liens, assessments, and mechanics' and material men's liens. The Trustee will pay any state, county or municipal taxes due on the property through the year 2025 and the purchaser at this sale shall be responsible for taxes for 2026 and thereafter. The undersigned Trustee will execute a Deed to the purchaser as Trustee only. The proceeds of this sale will be applied as set out in the Deed of Trust.

In the event the highest bidder at the foreclosure sale should fail to comply with the submitted bid, the Trustee shall have the option of accepting the next highest bid with which the bidder is able to comply, or readvertise and sell at a second sale.

The right is reserved to adjourn the day of the sale to another date certain without further publication upon announcement at the time and place herein set for the above sale.

Dated at Clarkrange, Tennessee, on this the 22nd day of June, 2026.

TRUSTEE: Leslie Clark Ledbetter, 6890 South York Highway, Clarkrange, TN 38553

Publish Dates: Wednesday, July 1, 2026

Wednesday, July 8, 2026

Wednesday, July 15, 2026
7/1, 7/8, 7/15

NOTICE TO CREDITORS (as required by 30-509 as amended by Chapter 229, Public Acts of Tennessee, 1971) Docket # P-26-39 IN THE MATTER OF THE ESTATE of

Gary Dale Reagan, Deceased
NOTICE TO CREDITORS
Estate of Gary Dale Reagan, late, of Fentress County, Tennessee.

Notice is hereby given that on the 29 day of June, 2026, Letters of Testamentary, in respect of the Estate of Gary Dale Reagan, deceased, were issued to the undersigned by the Clerk & Master of Chancery Court of Fentress County, Tennessee.

All persons, resident and non-resident, having claims, matured or not, against the estate are required to file the same with the clerk of the above-named court on or before the earlier of the dates prescribed in (1) or (2), otherwise their claims will forever be barred:

(1)(a.) Four (4) months from the date of the first publication (or posting, as the case may be) of this notice if the creditor received an actual copy of this notice to creditors at least sixty (60) days before the date that is four (4) months from the date of the first publication (or posting);

(b.) Sixty (60) days from the date the creditor received an actual copy of the notice to creditors if the creditor received the copy of the notice less than sixty (60) days prior to the date that is four (4) months from the date of first publication (or posting) as described in (1) (a.); or

(2) Twelve (12) months from the decedent's date of death.

This 29th day of June, 2026.

DANNY WAYNE REAGAN
CO-PERSONAL REPRESENTATIVE/
ADMINISTRATOR
TONY REAGAN
CO-PERSONAL REPRESENTATIVE/
ADMINISTRATOR
LESLIE CLARK LEDBETTER
Attorney At Law for the Estate of GARY DALE REAGAN
6890 South York Highway
Clarkrange, TN. 38553
(931)863-5997
LINDA SMITH
CLERK AND MASTER
140 Justice Center Drive
Suite 110
Jamestown, TN. 38556
7/8, 7/15



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Home (931) 752-5855

HELP WANTED

Seeking experienced farm hand for work in Allardt, TN. \$14.00 paid in cash on Fridays. No drama. Call 865-679-8105 (Bob)

NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED

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 Sunray HHA TN, LLC, a/an proposed home health agency owned by Sunray HHA TN, LLC, with an ownership type of Limited Liability Company (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 limited to home infusion services. The project will serve a proposed service area of 95 counties: Anderson, Bedford, Benton, Bledsoe, Blount, Bradley, Campbell, Cannon, Carroll, Carter, Cheatham, Chester, Claiborne, Clay, Cocke, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Dyer, Fayette, Fentress, Franklin, Gibson, Giles, Grainger, Greene, Grundy, Hamblen, Hamilton, Hancock, Hardeman, Hardin, Hawkins, Haywood, Henderson, Henry, Hickman, Houston, Humphreys, Jackson, Jefferson, Johnson, Knox, Lake, Lauderdale, Lawrence, Lewis, Lincoln, Loudon, Macon, Madison, Marion, Marshall, Maury, McMinn, McNairy, Meigs, Monroe, Montgomery, Moore, Morgan, Obion, Overton, Perry, Pickett, Polk, Putnam, Rhea, Roane, Robertson, Rutherford, Scott, Sequatchie, Sevier, Shelby, Smith, Stewart, Sullivan, Sumner, Tipton, Trousdale, Unicoi, Union, Van Buren, Warren, Washington, Wayne, Weakley, White, Williamson, and Wilson Counties. The address of the project will be 740 Cool Springs Blvd., Suite 120, Office 1, Franklin, Williamson County, Tennessee, 37067. The estimated project cost will be \$202,418. The anticipated date of filing the application is 08/01/2026. The contact person for this project is Mr. Michael Brent who may be reached at Bradley Arant Boulth Cummings LLP- 1221 Broadway #2400, Nashville, TN 37203- Contact No. 615-252-2361. 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, 503 Deaderick Street, Nashville, TN 37243 or email at hsda.staff@tn.gov.

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CLASSIFIEDS

- Wanted
- Cars & Vehicles
- For Sale
- Garage & Estate Sales
- Jobs
- Personals
- Real Estate & Auctions
- For Sale or Rent
- Services

WANTED

WANTED TO BUY: Goats, chickens, sheep & guineas. 931-427-8477 or 256-777-0042.

The **E911 Emergency Communications Board** will have a meeting on Wednesday, **July 8,2026 at 9:00am**. This meeting will be held at the Emergency Management Office located at 3750 Columbia Hwy., Pulaski, TN.

JOBS

and part time available. Call 931-363-5819.

Temporary Right of Way Position- Pulaski Electric System: Position Title: Right of Way Arborist Employment Type: Temporary — non-exempt. Assignment Duration: Nine (9) Months Compensation: \$17.00 per hour. Stay Bonus: \$2,000.00 upon successful completion of the full 9-month assignment. Posting Date: Monday, June 29th, 2026. Application

SUBSTITUTE TRUSTEE’S SALE

Sale at public auction will be on **08/11/2026 on or about 10:00 AM**, at the **North Door of the Giles County Courthouse, 1 Public Square, Pulaski, TN 38478, Giles County, Tennessee**, conducted by the Co-Substitute Trustees as identified and set for the herein below, pursuant to Deed of Trust executed by **OLIVER OWENS AND JACQUELYN OWENS, HUSBAND AND WIFE, to TENNESSEE TITLE SERVICES, LLC, Trustee, and recorded on 10/04/2021 as Instrument No. 21134716, Book DT621 Page 873** in the real property records of Giles County Register’s Office, Tennessee.

Owner of Debt: Nations Direct Mortgage, LLC

The following real estate located in Giles County, Tennessee, will be sold to the highest call bidder subject to all unpaid taxes, prior liens and encumbrances of records:

Land located in the Eleventh (11th) Civil District of Giles County, Tennessee, described as follows:

Beginning at a concrete highway monument on the south margin of U. S. Highway 31A, said point being 102 feet Southerly from the centerline of said highway at approximately highway station 243 + 52.13, the Northeast corner of the Douglas Jett property and the Northwest corner of the property herein described; thence with the South margin of said road North 65 degrees 21 minutes 50 seconds East 8.35 feet to a concrete highway monument; thence North 07 degrees 35 minutes 07 seconds East 63.64 feet to a concrete highway monument; thence North 44 degrees 14 minutes 35 seconds East 146.91 feet to a concrete highway monument; thence North 61 degrees 22 minutes 21 seconds East 109.18 feet to a concrete highway monument; thence North 39 degrees 00 minutes 49 seconds East 140.81 feet to a concrete highway monument in a fence at the Northwest corner of the Randall Gooch property and the Northeast corner of the property herein described; thence leaving the road and with Gooch’s West line and a fence South 12 degrees 16 minutes 32 seconds East 474.50 feet to a metal pin at a 10 inch oak; thence South 09 degrees 43 minutes 41 seconds East 215.16 feet to a metal pin at a stump; thence South 20 degrees 03 minutes 22 seconds East 38.95 feet to a metal pin at a fence corner at the Southwest corner of the Gooch property and the Southeast corner of the property herein described, same being a point in the North line of the James White property; thence with White’s North line, North 87 degrees 00 minutes 37 seconds West 350.85 feet to a metal pin at a projected fence corner at the Northwest corner of the White property; thence with White’s west line South 11 degrees 40 minutes 52 seconds West 203.01 feet to a metal pin at a fence corner at the Northeast corner of the Louise Pollard property; thence with Pollard’s North line North 84 degrees 40 minutes 51 seconds West 240.50 feet to a metal pin at a fence post at the Southeast corner of the above referenced Douglas Jett property and the Southwest corner of the property herein described; thence with an agreed line between Douglas Jett and Mildred L. Simmons, made on the 4th day of March, 1998, North 18 degrees 16 minutes 43 seconds East 565.54 feet to the point of beginning and containing 6.55 acres, more or less, and being the same as that found in Deed Book 229, Page 441, in the Register’s Office of Giles County, Tennessee.

BEING the same property conveyed to Oliver Owens and Jacquelyn Owens, husband and wife by Warranty Deed from Darwin K. Reed and Teresa M. Reed, a married couple of record in Book 392, Page 541 Register’s Office for Giles County, Tennessee.

Tax ID: Map: 77 Parcel: 47 / 11-077 -- 077 --- 047.00 -- 000 / 077-047.00

Current Owner(s) of Property: **OLIVER OWENS AND JACQUELYN OWENS, HUSBAND AND WIFE**

The street address of the above described property is believed to be **2940 LEWISBURG HIGHWAY, PULASKI, TN 38478**, but such address is not part of the legal description of the property sold herein and in the event of any discrepancy, the legal description referenced herein shall control.

SALE IS SUBJECT TO OCCUPANT(S) RIGHTS IN POSSESSION.

THE RIGHT IS RESERVED TO ADJOURN THE DAY OF THE SALE TO ANOTHER DAY, TIME AND PLACE CERTAIN WITHOUT FURTHER PUBLICATION, UPON ANNOUNCEMENT AT THE TIME AND PLACE FOR THE SALE SET FORTH ABOVE. THE TERMS OF SALE ARE CASH. ANY TAXES OR FEES WILL BE THE RESPONSIBILITY OF THE PURCHASER. IF THE SALE IS SET ASIDE FOR ANY REASON, THE PURCHASER AT THE SALE SHALL BE ENTITLED ONLY TO A RETURN OF THE PURCHASE PRICE. THE PURCHASER SHALL HAVE NO FURTHER RECOURSE AGAINST THE GRANTOR, THE GRANTEE, OR THE CO-TRUSTEES.

OTHER INTERESTED PARTIES: Capital One, N.A; Discover Bank

If applicable, the notice requirements of Tenn. Code Ann. 35-5-101 have been met.

All right of equity of redemption, statutory and otherwise, and homestead are expressly waived in said Deed of Trust, but the undersigned will sell and convey only as Substitute Trustee.

If the U.S. Department of Treasury/IRS, the State of Tennessee Department of Revenue, or the State of Tennessee Department of Labor or Workforce Development are listed as Interested Parties in the advertisement, then the Notice of this foreclosure is being given to them, and the Sale will be subject to the applicable governmental entities’ right to redeem the property as required by 26 U.S.C. 7425 and Tenn. Code Ann. §67-1-1433.

Please be advised that the trustee may require entity or trust bidders at this trustee’s sale to provide information, documentation and/or certification of the vesting instructions and the data required to be reported pursuant to FinCEN regulations effective for transfers of residential real property to covered transferees on or after March 1, 2026. The required information must be provided to the trustee before a trustee’s deed upon sale will be issued for covered transfers. Additional information regarding these regulations and the required transferee information and certifications can be found at <https://www.federalregister.gov/documents/2024/08/29/2024-19198/anti-money-laundering-regulations-for-residential-real-estate-transfers> and https://www.fincen.gov/tre-faqs#d_5

This property is being sold with the express reservation that the sale is subject to confirmation by the lender or co-trustees.

For additional sale information visit: <https://www.tnforeclosurenотices.com> Trustee File No. **2026-00160-TN**

Western Progressive - Tennessee, Inc., Co-Substitute Trustee Corporation Service Company, Registered Agent 2908 Poston Ave Nashville, TN 37203-1312

AVT Title Services LLC, Co-Substitute Trustee Park East 725 Cool Springs Blvd., Suite 140 Franklin, TN 37067

SALE INFORMATION: Sales Line: (866) 960-8299 Website:<https://www.altisource.com/loginpage.aspx>

Deadline: Monday, July 13th, 2026. As a temporary employee, this position is not eligible for PES-sponsored medical, vision, or dental insurance. Temporary employees are eligible to participate in the PES 457(b) Deferred Compensation Plan after one (1) month of service in accordance with plan documents. Interested candidates should submit the following to Samantha Williams at careers@pesenergize.com or in person at the PES office located at 128 S 1st St, Pulaski, TN 38478:

• Completed PES employment application- available at Pulaski Electric System or online at pesenergize.com

• Current resume

• Copies of any relevant certifications (e.g., ISA Arborist certification, CDL if applicable)

Applications will be accepted until end of business (5:00 PM) Monday, July 13th, 2026. PES reserves the right to

NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED

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 Sunray HHA TN, LLC, a/an proposed home health agency owned by Sunray HHA TN, LLC, with an ownership type of Limited Liability Company (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 limited to home infusion services. The project will serve a proposed service area of 95 counties: Anderson, Bedford, Benton, Bledsoe, Blount, Bradley, Campbell, Cannon, Carroll, Carter, Cheatham, Chester, Claiborne, Clay, Cocke, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Dyer, Fayette, Fentress, Franklin, Gibson, Giles, Grainger, Greene, Grundy, Hamblen, Hamilton, Hancock, Hardeman, Hardin, Hawkins, Haywood, Henderson, Henry, Hickman, Houston, Humphreys, Jackson, Jefferson, Johnson, Knox, Lake, Lauderdale, Lawrence, Lewis, Lincoln, Loudon, Macon, Madison, Marion, Marshall, Maury, McMinn, McNairy, Meigs, Monroe, Montgomery, Moore, Morgan, Obion, Overton, Perry, Pickett, Polk, Putnam, Rhea, Roane, Robertson, Rutherford, Scott, Sequatchie, Sevier, Shelby, Smith, Stewart, Sullivan, Sumner, Tipton, Trousdale, Unicoi, Union, Van Buren, Warren, Washington, Wayne, Weakley, White, Williamson, and Wilson Counties. The address of the project will be 740 Cool Springs Blvd., Suite 120, Office 1, Franklin, Williamson County, Tennessee, 37067. The estimated project cost will be \$202,418. The anticipated date of filing the application is 08/01/2026. The contact person for this project is Mr. Michael Brent who may be reached at Bradley Arant Boult Cummings LLP- 1221 Broadway #2400, Nashville, TN 37203- Contact No. 615-252-2361. 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, 503 Deaderick Street, Nashville, TN 37243 or email at hdsa.staff@tn.gov.

NOTICE OF TRUSTEE’S SALE

WHEREAS, default has occurred in the performance of the covenants, terms, and conditions of a Deed of Trust Note dated July 25, 2017, and the Deed of Trust of even date securing the same, recorded August 2, 2017, in Book No. DT557, at Page 769, in Office of the Register of Deeds for Giles County, Tennessee, executed by Cynthia J Pierce, conveying certain property therein described to Fidelity National Title as Trustee for Mortgage Electronic Registration Systems, Inc., as beneficiary, as nominee for Nations Lending Corporation, its successors and assigns; and the undersigned, Foundation Legal Group, LLP fka Wilson & Associates, P.L.L.C., having been appointed Successor Trustee by PHH Asset Services LLC.

NOW, THEREFORE, notice is hereby given that the entire indebtedness has been declared due and payable; and that an agent of Foundation Legal Group, LLP fka Wilson & Associates, P.L.L.C., as Successor Trustee, by virtue of the power, duty, and authority vested in and imposed upon said Successor Trustee, by PHH Asset Services LLC, will, on **July 28, 2026 on or about 11:00 AM, at the Giles County Courthouse 1 Public Square, Pulaski, TN 38478**, offer for sale certain property hereinafter described to the highest bidder FOR certified funds paid at the conclusion of the sale, or credit bid from a bank or other lending entity pre-approved by the successor trustee. The sale is free from all redemptions, which are expressly waived in the Deed of Trust, said property being real estate situated in Giles County, Tennessee, and being more particularly described as follows:

The land referred to herein below is situated in the County of Giles, State of Tennessee in Deed Book D356 at Page 25 and is described as follows: **A certain tract or parcel of land located in Giles County, Tennessee, being more fully described as follows: A certain parcel of land, lying and being in the 6th Civil District of Giles County, Tennessee, about 4 miles SW of the intersection of Tennessee Hwy. No. 11 and U.S. Hwy 64, on a new road about 1/2 mile south of Tennessee Hwy. No. 11, and more particularly described as follows: Beginning at an iron pin in the SW corner of the intersection of two public roads; thence S 4 degrees W 570 ft. to a stake; thence N 89 degrees 45 minutes W 560 ft. to a point in the centerline of the road; thence with said centerline N 30 degrees E 81 ft., N 55 degrees E 100 ft., N 46 degrees 30 minutes E 150 ft., N 35 degrees E 50 ft., N 21 degrees E 100 ft., and N 4 degrees 30 minutes W 219 ft. to a railroad spike in the road; thence S 87 degrees E (omitted in prior deed) 330 ft. to the beginning and containing 5.0 acres more or less, and being Lot No. 1 of Hidden Hills Subdivision. SUBJECT TO CONDITIONS AND RESTRICTIONS OF RECORD IN DEED BOOK 216, PAGE 588, AND AMENDED IN DEED BOOK 282, PAGE 59, REGISTER’S OFFICE OF GILES COOUNTY, TENNESSEE.**

ALSO KNOWN AS: 1963 Hidden Hills Road, Pulaski, TN 38478

This sale is subject to all matters shown on any applicable recorded plat; any unpaid taxes; any restrictive covenants, easements, or setback lines that may be applicable; any statutory rights of redemption of any governmental agency, state or federal; any prior liens or encumbrances as well as any priority created by a fixture filing; and to any matter that an accurate survey of the premises might disclose. In addition, the following parties may claim an interest in the above-referenced property:

CYNTHIA J PIERCE
ESTATE OF CYNTHIA PIERCE
HEIR(S) OF CYNTHIA PIERCE
FRANKLIN B PIERCE
CONNIE EUGENE HOLLANDER

The sale held pursuant to this Notice may be rescinded at the Successor Trustee’s option at any time. The right is reserved to adjourn the day of the sale to another day, time, and place certain without further publication, upon announcement at the time and place for the sale set forth above. In the event of inclement weather, the trustee hereby announces that the sale will be postponed and that notices of said postponement for inclement weather will be mailed to interested parties of record. As of July 1, 2025, notices pursuant to Tennessee Code Annotated §35-5-101 et seq. are posted online at www.internetpostings.com by a third-party internet posting company. **FLG No. 366504**

DATED June 19, 2026

Foundation Legal Group, LLP fka WILSON & ASSOCIATES, P.L.L.C., Successor Trustee

4 Easy Ways To Place Your Ads

1. Email to kgarrett@mainstreetmediatn.com
2. Call Kelley Garrett at 931-363-3544
3. Stop by our office.
4. Online at www.pulaskicitizen.com

close this posting early if a suitable candidate is identified. Pulaski Electric System is an Equal Opportunity Employer. All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, disability, or any other characteristic protected by applicable law.

GARAGE/YARD SALES

BIG 3 FAMILY YARD SALE: Friday, Saturday and Sunday, 24865 Morrow Rd., Ardmore TN behind the Country Club next to Dog Day Flea Market. Glassware, jewelry, cast iron, tools, yard tools, hand tools, cookware, pots & pans, fishing stuff, lures, rods & reels, old tools, old glassware, knives, sports stuff, toys, antiques, old iron wheels, signs, hardware, goats, and lots of neat stuff.

PUBLIC NOTICE

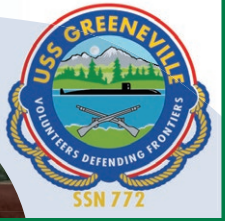
NOTICE TO CREDITORS
PROBATE COURT OF GILES COUNTY, TENNESSEE
NO. P-2629-26
ESTATE OF JUDA FAY VINCENT, AKA JUDA FAYE VINCENT, Deceased, Date of Death: 05/03/2026
Notice is hereby given that on the 23rd day of June, 2026, Letters of Testamentary in respect of the Estate of JUDA FAY VINCENT, AKA, JUDA FAYE VINCENT, Deceased, who died on May 3, 2026, were issued to the undersigned by the Probate Court of Giles County, Tennessee. All persons, resident and non-resident, having claims, matured or unmatured, against the Estate, are required to file the same with the Clerk of the above-named Court on or before the earlier of the dates prescribed in (l) or (2) otherwise their claims will be forever barred:
(1) (A) Four (4) months from the date of the first publication (or posting, as the case may be) of this notice if the creditor received an actual copy of this

Continued on next page



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GREENEVILLE

Estate Sale

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JULY 2 & 3

THURS - FRI

8AM - 2:30PM

JULY 9, 10 & 11

THURS - SAT

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Notice Of Substitute Trustee's Sale

Whereas, Tabitha Starcher, A Single Person by Deed of Trust (the "Deed of Trust"), dated 7/31/2017 and of record in Deed Book 590A, Page(s) 1994-2005, and/or as Instrument Number 17006452, in Register's Office of Greene County, Tennessee, conveyed to Gordon Foster, Trustee, the hereinafter described real property to secure the payment of a certain Promissory Note (the "Note") described in the Deed of Trust, which Note was payable to Mortgage Lenders of America, LLC, and subsequently assigned to Freedom Mortgage Corporation, and

Whereas, Nestor Solutions of Tennessee, LLC has been duly appointed Substitute Trustee by the owner and holder of the Note by instrument recorded in Deed Book 772A, Page(s) 1963-1965 and/or as Instrument Number 26006271 in Register's Office of Greene County, Tennessee; and Whereas, default has been made in the payment of the Note; and Whereas, the owner and holder of the Note has demanded that the hereinafter described real property be advertised and sold in satisfaction of the indebtedness and costs of foreclosure in accordance with the terms and provisions of the Note and Deed of Trust. The notice requirements of T.C.A. §35-5-101 and 35-5-104 have been satisfied.

Now, Therefore, notice is hereby given that an agent of Nestor Solutions of Tennessee, LLC, Substitute Trustee, pursuant to the power, duty, and authority vested in and conferred by the Deed of Trust, will proceed to sell the below-mentioned property on 8/18/2026, at 2:00 PM at the Front Door of the Greene County Courthouse, 101 South Main Street, Greeneville, TN 37743, to the highest call bidder for cash free from all legal, equitable and statutory rights of redemption, exemptions of homestead, rights by virtue of marriage, and all other exemptions of every kind, all of which have been waived in the Deed of Trust, certain real property located in Greene County, Tennessee, described as follows:

Situate In The 13th Civil District Of Greene County, Tennessee, And Being Lot No. 13r Of A Survey Titled "Redivision Of Lot 13 Of Old Mill Estate And Lot 14, Block D, Of Rustic Acres" Which Appears Of Record In Plat Cabinet F, Slide 1, In The Register's Office For Greene County, Tennessee, To Which Further Reference Is Hereby Made And Incorporated Herein. This Realty Is Further Conveyed Subject To The Restriction That Single Wide Mobile Homes Are Not Permitted. Description Taken From Previous Deed. Being The Same Property Conveyed To Third Base Investments, LLC, By Special Warranty Deed Of Pennymac Loan Services, LLC, Dated March 23, 2017, Of Record In Book 585A, Page 2274, In The Register's Office For Greene County, Tennessee. And Being The Same Property Conveyed To Tabitha Starcher, A Single Person By Warranty Deed Of Third Base Investments, LLC, A Tennessee Limited Liability Company, Dated July 31, 2017, Of Record In Book 590A, Page 1992, In The Register's Office For Greene County, Tennessee. TAX ID: 099N-F-001.00 The street address of the above-described property is believed to be 96 Meadow Ln, Greeneville, TN 37745, but if such address is not part of the legal description of the property sold herein and in the event of any discrepancy, the legal description herein shall control. This sale is subject to all matters shown on any applicable recorded plat; any unpaid taxes; any restrictive covenants, easements or setback lines that may be applicable; any statutory rights of redemption of any governmental agency, state or federal; any prior liens or encumbrances as well as any priority created by a fixture filing; and to any matter that an accurate survey of the premises might disclose.

In addition, the following parties may claim an interest in the above-referenced property:
Owner of Property: Tabitha Starcher Secretary of Housing and Urban Development, Deed of Trust Book 692A, Page(s) 930-936 and/or Instrument #22010497 Secretary of Housing and Urban Development, Deed of Trust Book 719A, Page(s) 1255-1261 and/or Instrument #24001317 Secretary of Housing and Urban Development, Deed of Trust Book 738A, Page(s) 2144-2150 and/or Instrument #25000486 Midland Credit Management, Inc, Deed of Trust Book 729A, Page(s) 1268-1269 and/or Instrument #24006984 The sale is subject to occupant(s) rights in possession of the premises. All right of equity of redemption, statutory and otherwise, and homestead are expressly waived in said Deed of Trust, and the title is believed to be good, but the undersigned will sell and convey only as Substitute Trustee.

The right is reserved to adjourn the day of the sale to another day, time, and place certain without further publication, upon announcement at the time and place for the sale set forth above. If the sale is set aside for any reason, the purchaser at the sale shall be entitled only to a return of the purchase price.

The purchaser shall have no further record against the grantor, the grantee or the trustee.
Notice To Bidders: Please be advised that the highest bidder ("purchaser") at this trustee's sale may be required to provide information, documentation and/or certification as mandated by applicable federal law, and entity and trust purchaser should be prepared to provide beneficial ownership information as required by federal reporting requirements effective for transfers of residential real property to covered transferees on or after March 1, 2026.

If applicable, the required information must be provided to the trustee before a trustee's deed will be issued for covered transfers. Additional information regarding these regulations and the required transferee information and certifications can be found at <https://www.federalregister.gov/documents/2024/08/29/2024-19198/anti-money-laundering-regulations-for-residential-real-estate-transfers> and https://www.fincen.gov/rre-faqs#D_5.
Internet Posting Website: <https://tennesseepostings.com/>
Publication Dates: 7/01/2026 and 7/8/2026
Nestor Solutions of Tennessee, LLC,
Substitute Trustee
214 5th Street, Suite 205
Huntington Beach, California 92648
Phone: (888) 403-4115
TS#: 2026-25072-TN

NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED

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 Sunray HHA TN, LLC, a/an proposed home health agency owned by Sunray HHA TN, LLC, with an ownership type of Limited Liability Company (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 limited to home infusion services. The project will serve a proposed service area of 95 counties: Anderson, Bedford, Benton, Bledsoe, Blount, Bradley, Campbell, Cannon, Carroll, Carter, Cheatham, Chester, Claiborne, Clay, Cocke, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Dyer, Fayette, Fentress, Franklin, Gibson, Giles, Grainger, Greene, Grundy, Hamblen, Hamilton, Hancock, Hardeman, Hardin, Hawkins, Haywood, Henderson, Henry, Hickman, Houston, Humphreys, Jackson, Jefferson, Johnson, Knox, Lake, Lauderdale, Lawrence, Lewis, Lincoln, Loudon, Macon, Madison, Marion, Marshall, Maury, McMinn, McNairy, Meigs, Monroe, Montgomery, Moore, Morgan, Obion, Overton, Perry, Pickett, Polk, Putnam, Rhea, Roane, Robertson, Rutherford, Scott, Sequatchie, Sevier, Shelby, Smith, Stewart, Sullivan, Sumner, Tipton, Trousdale, Unicoi, Union, Van Buren, Warren, Washington, Wayne, Weakley, White, Williamson, and Wilson Counties. The address of the project will be 740 Cool Springs Blvd., Suite 120, Office 1, Franklin, Williamson County, Tennessee, 37067. The estimated project cost will be \$202,418. The anticipated date of filing the application is 08/01/2026. The contact person for this project is Mr. Michael Brent who may be reached at Bradley Arant Boulton Cummings LLP- 1221 Broadway #2400, Nashville, TN 37203- Contact No. 615-252-2361. 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, 503 Deaderick Street, Nashville, TN 37243 or email at hfsa.staff@tn.gov.

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NOTICE OF SUCCESSOR TRUSTEE'S SALE

WHEREAS, default has occurred in the performance of the covenants, terms and conditions of a Note dated APRIL 28, 2021, and the Deed of Trust of even date, securing said Note recorded APRIL 30, 2021 in Book 764, at Page 230-242, as Document #154051, in the Register's office for HARDIN County, Tennessee, executed by KODY RYAN WHITE, UNMARRIED MAN, conveying the certain property described therein to MEGAN K. TROTT, Trustee, for the benefit of MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ("MERS"), AS BENEFICIARY, AS NOMINEE FOR FIRST COMMUNITY MORTGAGE, INC., its successors and assigns and to MARINOSCI LAW GROUP, P.C., having been appointed as Successor Trustee by instrument of record JUNE 22, 2026 in the Register's office for HARDIN County, Tennessee in Book 853, at Page 2250-2252, as Document #186687.

WHEREAS, the owner and holder of the Note has declared the entire indebtedness due and payable and demanded that the hereinafter described real property be advertised and sold in satisfaction of indebtedness and costs of foreclosure in accordance with the terms and provisions of the Note and Deed of Trust.

NOW, THEREFORE, notice is hereby given that an agent of Marinosci Law Group, P.C., as Successor Trustee, pursuant to the power, duty and authority vested in and conferred upon said Successor Trustee, by the Deed of Trust, will on August 19, 2026 at 11:00 AM at the front door of the Hardin County Courthouse, 465 Main Street, Savannah, TN 38372 offer for sale to the highest bidder for cash, and free from all legal, equitable and statutory rights of redemption, exemptions of homestead, rights by virtue of marriage, and all other exemptions of every kind, all of which have been waived in the Deed of Trust, certain real property located in Hardin County, Tennessee, described as follows:

Land situated in the county of Hardin in the state of TN beginning at a stake in the east margin of Foursquare Avenue, the southwest corner of lot 20, and the northwest corner of the lot 18 herein conveyed; runs thence east with the south boundary line of lot 20, 140 feet to a stake, the southeast corner of lot 20 and the northeast corner of lot 18; thence south with the west boundary line of lot 19, 100 feet to a stake at the southwest corner of lot 19 at the northwest corner of lot 17, the southeast corner of lot 18 herein conveyed, and the northeast corner of lot 16; thence west with the south boundary line of said lot 18 and the north boundary line of lot 16 a distance of 140 feet to a stake in the east margin of foursquare avenue, then southwest corner of lot 18 and the northwest corner of lot 16; thence north with the east margin of foursquare avenue 100 feet to the beginning corner. (Description according to prior deed.)

This being the same property conveyed to Kody Ryan White by deed of Mary K. Loudenback dated April 26, 2021 of record in Record Book 764, page 228 in the Register's Office of Hardin County, Tennessee.

More Commonly Known As: 125 FOURSQUARE ST, SAVANNAH, TN 38372

Said sale shall be held subject to all matters shown on any applicable recorded plat; any unpaid taxes; any restrictive covenants, easements, or setback lines that may be applicable; any statutory rights of redemption of any governmental agency, state or federal; any prior liens or encumbrances as well as any priority created by a fixture filing; to any matter that an accurate survey of the premises might disclose; and subject to, but not limited to, the following parties who may claim an interest in the above-referenced property: KODY RYAN WHITE, TENNESSEE VALLEY ELECTRIC COOPERATIVE, OCCUPANTS/TENANTS OF 125 FOURSQUARE ST, SAVANNAH, TN 38372

To the best of the Successor Trustee's knowledge, information, and belief, there are no other Federal or State tax lien claimants or other claimants upon the subject property which would require notice pursuant to the terms and provision of T.C.A. § 35-5-104 or T.C.A. § 67-1-1433 or 26 U.S.C. § 7425.

The sale held pursuant to this Notice may be rescinded at the Successor Trustee's option at any time. The Successor Trustee may postpone the above referenced sale from time to time as needed without further publication. The Successor Trustee will announce the postponement on the date and at the time and location of the originally scheduled sale.

This is an attempt to collect a debt, and any information obtained will be utilized for that purpose.

Marinosci Law Group, P.C., Successor Trustee
555 Perkins Extended, Suite 445
Memphis, TN 38117 (26-04256^730)
Office: (901) 203-0680; Fax: (901) 440-0561
Publication Dates: 07/09/2026, 07/16/2026
Online publication at: www.nwpostingservices.com

IN THE CHANCERY COURT FOR HARDIN COUNTY, TENNESSEE

LAKEVIEW LOAN SERVICING, LLC,
PLAINTIFF,

vs. CASE NO. CH-1091

BETTY ROBERTS, REBECCA ROBERTS AUSTIN,
GAYLENE GREGORY, DEAN ALLEN JARRELL,
MANDI GREGORY A/K/A CHARLENE AMANDRA GREGORY
AND THE ESTATE AND UNKNOWN HEIRS OF LILLY PARISH,
DEFENDANTS.

ORDER OF PUBLICATION

This cause came to be heard before Honorable Chancellor of the Chancery Court for Hardin County, Tennessee, upon the Motion of the Plaintiff for Service by Publication on Estate and Unknown Heirs of Lilly Parish, and it appearing to the Court from the Motion and supporting affidavit that:

1. The names and whereabouts of the unknown heirs and next of kin of Lilly Parish cannot be ascertained upon diligent inquiry; and
2. Service by publication is therefore appropriate pursuant to Tennessee Rules of Civil Procedure.

IT IS, THEREFORE, ORDERED, ADJUDGED, AND DECREED

1. That the Court cause notice of this action to be published for four (4) consecutive weeks in the paper of record for Hardin County, Tennessee

2. That said unknown heirs, and all persons claiming any interest through them, appear and make defense within thirty (30) days after the date of the last publication, otherwise judgment by default may be entered, and the cause proceeded with ex parte as to them; and
3. That a copy of this Order and the notice be placed in the record of this case.

Ordered this 17th day of June, 2026.

/s/ Chancellor Vicki Hoover

Approved for entry:

Padgett Law Group

/s/ Zachary B. Johnson (#036314)

Attorney for the Plaintiff

5100 Poplar Avenue Suite 2208

Memphis, TN 38137

(850) 422-2560 Office, Ext. [7153]

(850) 422-2527 Fax

Zach.Johnson@padgettlawgroup.com (724tc)

NOTICE

The Board of Commissioners of Hardin Medical Center will meet on Tuesday, July 21, 2026 at 6:00 p.m. in the board room for the July meeting.

TRUSTEE'S NOTICE OF SALE

OF REAL ESTATE AND AFFIXED MANUFACTURED HOME

ANTHONY R. STEELE is the Trustee of a Deed of Trust executed on March 12, 2024, by CORDARYL SHAWN JOHNSON and CASEY RENEE JOHNSON aka Casey Johnson, a married couple. The Deed of Trust appears of record in the Register's Office of Hardin County, Tennessee, at **Record Book 835, Page 2222** ("Deed of Trust"). The Trustee will sell the property described in the Deed of Trust at a foreclosure sale requested by the current holder of the Deed of Trust and underlying indebtedness, **Vanderbilt Mortgage and Finance, Inc.** Pursuant to T.C.A. §47-9-604 this sale shall also include the affixed manufactured home described as one (1) 2024 Southern Energy Manufactured Home bearing Serial Number SAD033192ALAC.

Sale Date and Location: JULY 31, 2026, at 10:00 a.m. at the front door of the Hardin County Courthouse, 465 Main Street, Savannah, TN 38372. The terms of sale shall be payment by cashier's check or certified funds immediately upon conclusion of the sale.

Third-party internet posting website: **foreclosuretennessee.com**

Property Description: Abbreviated description per TCA 35-5-104(a)(2) is the property referenced and described in the Deed of Trust and additionally at Record Book 835, Page 666, and commonly known as **1430 Burnt Church Rd., Savannah, TN 38372**.

Property Address: 1430 Burnt Church Rd., Savannah, TN 38372
Tax Map Identification No.: 092-006.05 (However, the property description shall control in the event of any inconsistencies between the description and address or tax identification number).

Parties Interested: None known.

All sales of Property, both real and personal, are "AS IS" and "WHERE IS" without representation or warranty as to merchantability or fitness for a particular purpose or of any kind, except as to title and authority to convey.

The sale of the described property is subject to all matters shown on any recorded plan; any unpaid taxes, any restrictive covenants, easements, set-back lines, prior liens, encumbrances, if any, and any other priority as may appear in the public records. Title to the manufactured home may be transferred by Bill of Sale or Certificate of Title, as the case may require.

The right is preserved to adjourn the day of the sale to another day, time and place certain without further publication, upon announcement at the time and place for the sale set forth above.

THE PURPOSE OF THIS COMMUNICATION IS TO COLLECT THE DEBT AND ANY INFORMATION OBTAINED AS A RESULT WILL BE USED FOR THAT EXPRESS PURPOSE ONLY. THIS COMMUNICATION IS FROM A DEBT COLLECTOR.

This the 1st day of July, 2026.

Anthony R. Steele, Trustee

Winchester, Sellers, Foster & Steele, P.C.

P. O. Box 2428

Knoxville, TN 37901

(865) 637-1980

Publication Dates: July 9 and 16, 2026 (#740.5850)

NOTICE TO CREDITORS

THE ESTATE OF MARGARETT EULENE WILLIAMS

Notice is hereby given that on the 1st day of July 2026, Letters of Testamentary (or of administration as the case may be), in respect to the estate of MARGARETT EULENE WILLIAMS, who died on June 7, 2026, were issued to the undersigned by the Probate Division of the Chancery Court of Hardin County, Tennessee.

All persons, resident, and nonresident, having claims, matured or unmatured, against the estate are required to file the same in triplicate with the Clerk of the above-named court on or before the earlier of the dates prescribed in (1) or (2); otherwise, their claims will be forever barred:

- (1) (A) Four (4) months from the date of the first publication (or posting, as the case may be) of this notice if the creditor received an actual copy of this notice to creditors at least sixty (60) days before the date that is four (4) months from the date of the first publication (or posting); or

- (B) Sixty (60) days from the date the creditor received an actual copy of the notice to creditors if the creditor received the copy of the notice less than sixty (60) days prior to the date that is four (4) months from the date of the first publication (or posting) as described in (1)(A); or

- (2) Twelve (12) months from the decedent's date of death.

This the 1st day of July 2026.

/s/ Donald G. Doran, Personal Representative/Executor

/s/ Brennan E. Parrish, Attorney for the Estate

/s/ Jennifer Fielder, Clerk and Master (792tp)

NOTICE

The Hardin County Board of Education will hold a Planning Meeting on Monday, July 13, 2026, at 5:30 p.m. at the Hardin County Board of Education located at 155 Guinn St. Savannah, TN 38372. (Downstairs Board Room) Public is invited.

SEALED BIDS

The City of Crump is taking sealed bids for the replacement of metal roof, gutters, and fascia boarding for the Crump City Hall Complex located at 3020 Hwy 64 in Crump, TN. Bids will be accepted until July 20, 2026 by 3:00 PM. The City of Crump reserves the right to accept or reject any and all bids. For more information call 731-632-4224 or email crumpcityhall@yahoo.com.

NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED

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 Sunray HHA TN, LLC, a/an proposed home health agency owned by Sunray HHA TN, LLC, with an ownership type of Limited Liability Company (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 limited to home infusion services. The project will serve a proposed service area of 95 counties: Anderson, Bedford, Benton, Bledsoe, Blount, Bradley, Campbell, Cannon, Carroll, Carter, Cheatham, Chester, Claiborne, Clay, Cocke, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Dyer, Fayette, Fentress, Franklin, Gibson, Giles, Grainger, Greene, Grundy, Hamblen, Hamilton, Hancock, Hardeman, Hardin, Hawkins, Haywood, Henderson, Henry, Hickman, Houston, Humphreys, Jackson, Jefferson, Johnson, Knox, Lake, Lauderdale, Lawrence, Lewis, Lincoln, Loudon, Macon, Madison, Marion, Marshall, Maury, McMinn, McNairy, Meigs, Monroe, Montgomery, Moore, Morgan, Obion, Overton, Perry, Pickett, Polk, Putnam, Rhea, Roane, Robertson, Rutherford, Scott, Sequatchie, Sevier, Shelby, Smith, Stewart, Sullivan, Sumner, Tipton, Trousdale, Unicoi, Union, Van Buren, Warren, Washington, Wayne, Weakley, White, Williamson, and Wilson Counties. The address of the project will be 740 Cool Springs Blvd., Suite 120, Office 1, Franklin, Williamson County, Tennessee, 37067. The estimated project cost will be \$202,418. The anticipated date of filing the application is 08/01/2026. The contact person for this project is Mr. Michael Brent who may be reached at Bradley Arant Boulton Cummings LLP- 1221 Broadway #2400, Nashville, TN 37203- Contact No. 615-252-2361. 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, 503 Deaderick Street, Nashville, TN 37243 or email at hsda.staff@tn.gov.

NOTICE OF SUCCESSOR TRUSTEE'S SALE

WHEREAS, default has occurred in the performance of the covenants, terms and conditions of a Note dated JUNE 10, 2021, and the Deed of Trust of even date, securing said Note recorded JUNE 16, 2021 in Book 768, at Page 480-491, as Document #155020, in the Register's office for HARDIN County, Tennessee, executed by KEVIN D STRICKLIN AND VANESSA STRICKLIN, HUSBAND AND WIFE AS JOINT TENANTS WITH RIGHT OF SURVIVORSHIP, conveying the certain property described therein to CREASY & JONES ATTORNEY AT LAW, P.C., Trustee, for the benefit of MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ("MERS"), AS BENEFICIARY, AS NOMINEE FOR STOCKTON MORTGAGE CORPORATION its successors and assigns and to MARINOSCI LAW GROUP, P.C., having been appointed as Successor Trustee by instrument of record JUNE 16, 2026 in the Register's office for HARDIN County, Tennessee in Book 853, at Page 2028-2030, as Document #186626.

WHEREAS, the owner and holder of the Note has declared the entire indebtedness due and payable and demanded that the hereinafter described real property be advertised and sold in satisfaction of indebtedness and costs of foreclosure in accordance with the terms and provisions of the Note and Deed of Trust.

NOW, THEREFORE, notice is hereby given that an agent of Marinosci Law Group, P.C., as Successor Trustee, pursuant to the power, duty and authority vested in and conferred upon said Successor Trustee, by the Deed of Trust, will on August 5, 2026 at 11:00 AM at the front door of the Hardin County Courthouse, 465 Main Street, Savannah, TN 38372 offer for sale to the highest bidder for cash, and free from all legal, equitable and statutory rights of redemption, exemptions of homestead, rights by virtue of marriage, and all other exemptions of every kind, all of which have been waived in the Deed of Trust, certain real property located in Hardin County, Tennessee, described as follows:

BEING LOTS NO. 8 AND 9 IN UNIT 1, JERROLD'S SUBDIVISION, A PLAT OF SAID SUBDIVISION BEING OF RECORD IN PLAT BOOK 2, PAGE 68, IN THE REGISTER'S OFFICE FOR HARDIN COUNTY, TENNESSEE, AND REFERENCE IS HEREMADE TO SAID PLAT AND TO THE BOOK AND PAGE WHERE RECORDED FOR A FULL DESCRIPTION OF THE SAME, AND THE DESCRIPTION THEREGIVEN IS INCORPORATED HEREIN BY REFERENCE THERETO AS THOUGH COPIED VERBATIM HEREIN.

THIS BEING THE SAME PROPERTY CONVEYED TO KEVIN D. STRICKLIN AND WIFE, VANESSA STRICKLIN BY DEED OF TERRY WAYNE GOODMAN DATED JUNE 10, 2021 OF RECORD IN RECORD BOOK 768, PAGE 465 IN THE REGISTER'S OFFICE OF HARDIN COUNTY, TENNESSEE.

More Commonly Known As: 375 OPEL LOOP, SAVANNAH, TN 38372

Said sale shall be held subject to all matters shown on any applicable recorded plat; any unpaid taxes; any restrictive covenants, easements, or setback lines that may be applicable; any statutory rights of redemption of any governmental agency, state or federal; any prior liens or encumbrances as well as any priority created by a fixture filing; to any matter that an accurate survey of the premises might disclose; and subject to, but not limited to, the following parties who may claim an interest in the above-referenced property: BILLY AIDAN STRICKLIN, ESTATE OF KEVIN D STRICKLIN, JAZLYN A. STRICKLIN, UNKNOWN HEIRS OF THE ESTATE OF KEVIN STRICKLIN, VANESSA STRICKLIN, OCCUPANTS/TENANTS OF 375 OPEL LOOP, SAVANNAH, TN 38372.

To the best of the Successor Trustee's knowledge, information, and belief, there are no other Federal or State tax lien claimants or other claimants upon the subject property which would require notice pursuant to the terms and provision of T.C.A. § 35-5-104 or T.C.A. § 67-1-1433 or 26 U.S.C. § 7425.

The sale held pursuant to this Notice may be rescinded at the Successor Trustee's option at any time. The Successor Trustee may postpone the above referenced sale from time to time as needed without further publication. The Successor Trustee will announce the postponement on the date and at the time and location of the originally scheduled sale.

This is an attempt to collect a debt, and any information obtained will be utilized for that purpose.

Marinosci Law Group, P.C., Successor Trustee

555 Perkins Extended, Suite 445

Memphis, TN 38117

Office: (901) 203-0680; Fax: (901) 440-0561

Publication Dates: 07/02/2026, 07/09/2026

Online publication at: www.nwpostingservices.com

(#26-03967^720)

NOTICE OF AUCTION:

JULY 20TH

• 2020 NISS RGE VIN#:JN1BJ1CV2LW547682

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ADVERTISEMENT FOR BIDS

2026 ASPHALT RESURFACING PROJECT

CITY OF SAVANNAH

Sealed bids for the 2026 Asphalt Resurfacing Project will be received by the City of Savannah, at the office of Blake Walley, City Manager located at City Hall, 140 Main Street, Savannah, TN 38372 until 11:00 AM local time on Friday, July 24, 2026 and then at said office publicly opened and read aloud.

The work consists generally with asphalt resurfacing of identified City streets. The work shall include, but not be exclusive to mobilization, street cleaning, tack coat, milling, asphalt resurfacing, traffic control and all other incidentals necessary for completion.

All work shall be completed in accordance with the most current version of the Tennessee Department of Transportation Standard Specifications, supplemented by the project contract documents.

Bid documents may be obtained beginning July 9, 2026, from Blake Walley, City Manager at City Hall, 140 Main Street, Savannah, TN 38372, Tel: (731) 925-3300 ext. 156.

Each proposal must be accompanied by a certified or cashier's check or bid bond in the minimum amount of FIVE PERCENT (5%) of the contract price for the purpose of guaranteeing the Bidder will enter into an acceptable contract. The successful Bidder will be required to furnish a contract performance bond and payment bond of ONE HUNDRED PERCENT (100%) of the contract price.

Bidders are required to be licensed as a Tennessee Prime (General) Contractor and qualified for the type of construction being bid. Bidder shall show such evidence by clearly displaying his or her current license number on the outside of the sealed envelope in which the bid is delivered.

The City of Savannah reserves the right to waive any informalities or to reject any or all bids. Bids accepted and read will remain effective for a period of sixty (60) calendar days after the date and time set for the opening of such bid.

The City of Savannah is an equal opportunity affirmative action employer, drug free with policies of nondiscrimination on the basis of race, sex, religion, color, national or ethnic origin, age, disability or military service.

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Post-Intelligencer

Henry County Public Notices

Call 731-642-1162 or e-mail classifieds@parispi.net

6 THURSDAY, JULY 9, 2026

THE PARIS POST-INTELLIGENCER

NOTICE TO CREDITORS

Estate of:
Charles Grady Hauhe of Henry County, Tennessee

Notice is hereby given that on July 1, 2026 letters testamentary (or of administration as the case may be) in respect of the estate of Charles Grady Hauhe who died May 31, 2026 were issued to the undersigned by the Clerk and Master of Henry County, Tennessee. All persons, resident and non-resident, having claims, matured or unmatured, against the estate are required to file the same with the Clerk of the above-named Court on or before the earlier of the dates prescribed in (1) or (2) otherwise their claims will be forever barred: (1) (A) Four (4) months from the date of the first publication (or posting, as the case may be) of this notice if the creditor received an actual copy of this notice to creditors at least sixty (60) days before date that is four (4) months from the date of the first publication (or posting); or (B) Sixty (60) days from the date the creditor received an actual copy of the notice to creditors, if the creditor received the copy of the notice less than sixty (60) days prior to the date that is four (4) months from the date of the first publication (or posting) as described in (1)(A); or (2) Twelve (12) months from the decedent's date of death. All persons indebted to the above Estate must come forward and

make proper settlement with the under-signed at once. This 1st day of July, 2026.

Charles Jason Hauhe
Executor

Attorney: Beau E. Pemberton
ESTATE OF:
Charles Grady Hauhe
Albert Wade, Jr.
Clerk and Master

NOTICE TO CREDITORS

Estate of:
William D. Robinson Henry County, Tennessee

Notice is hereby given that on June 18, 2026 letters testamentary (or of administration as the case may be) in respect of the estate of William D. Robinson who died May 16, 2026 were issued to the undersigned by the Clerk and Master of Henry County, Tennessee. All persons, resident and non-resident, having claims, matured or unmatured, against the estate are required to file the same with the Clerk of the above-named Court on or before the earlier of the dates prescribed in (1) or (2) otherwise their claims will be forever barred: (1) (A) Four (4) months from the date of the first publication (or posting, as the case may be) of this notice if the creditor received an actual copy of this notice to creditors at least sixty (60) days before date that is four (4) months from the date of the first publication (or posting); or (B) Sixty (60) days from the date the creditor received an actual

copy of the notice to creditors, if the creditor received the copy of the notice less than sixty (60) days prior to the date that is four (4) months from the date of the first publication (or posting) as described in (1)(A); or (2) Twelve (12) months from the decedent's date of death. All persons indebted to the above Estate must come forward and

make proper settlement with the under-signed at once. This 18th day of June, 2026.

William Hunter Robinson
Executor

Attorney: Steve Greer
ESTATE OF: William D. Robinson
Albert Wade, Jr.
Clerk and Master

NORTHWEST TENNESSEE ECONOMIC DEVELOPMENT COUNCIL

PUBLIC SERVICE ANNOUNCEMENT

The Board of Directors of Northwest Tennessee Economic Development Council will hold a Board meeting on Friday, **July 17, 2026, beginning at 10:00 a.m.** The meeting will be physically held at the Northwest TN Head Start/Early Head Start Central Office located at 938C Walnut Avenue W., McKenzie, TN in person only.

HENRY COUNTY BOARD OF EDUCATION

Is Requesting Sealed Bids for:
WEEKEND BACKPACK FOOD

Bid Opening will be
Thursday, July 16, 2026 at 8:30 am CT
Henry County Board of Education
313 South Wilson Street
Paris, TN 38242
Phone: 731-642-9733

Specifications may be obtained by visiting our website.
<https://www.henryk12.net/page/district-bids> or by contacting LonNita McDonald at mcdonaldl@henryk12.net

NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED

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 Sunray HHA TN, LLC, a/an proposed home health agency owned by Sunray HHA TN, LLC, with an ownership type of Limited Liability Company (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 limited to home infusion services. The project will serve a proposed service area of 95 counties: Anderson, Bedford, Benton, Bledsoe, Blount, Bradley, Campbell, Cannon, Carroll, Carter, Cheatham, Chester, Claiborne, Clay, Cocke, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Dyer, Fayette, Fentress, Franklin, Gibson, Giles, Grainger, Greene, Grundy, Hamblen, Hamilton, Hancock, Hardeman, Hardin, Hawkins, Haywood, Henderson, Henry, Hickman, Houston, Humphreys, Jackson, Jefferson, Johnson, Knox, Lake, Lauderdale, Lawrence, Lewis, Lincoln, Loudon, Macon, Madison, Marion, Marshall, Maury, McMinn, McNairy, Meigs, Monroe, Montgomery, Moore, Morgan, Obion, Overton, Perry, Pickett, Polk, Putnam, Rhea, Roane, Robertson, Rutherford, Scott, Sequatchie, Sevier, Shelby, Smith, Stewart, Sullivan, Sumner, Tipton, Trousdale, Unicoi, Union, Van Buren, Warren, Washington, Wayne, Weakley, White, Williamson, and Wilson Counties. The address of the project will be 740 Cool Springs Blvd., Suite 120, Office 1, Franklin, Williamson County, Tennessee, 37067. The estimated project cost will be \$202,418. The anticipated date of filing the application is 08/01/2026. The contact person for this project is Mr. Michael Brent who may be reached at Bradley Arant Boult Cummings LLP- 1221 Broadway #2400, Nashville, TN 37203- Contact No. 615-252-2361. 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, 503 Deaderick Street, Nashville, TN 37243 or email at hdsa.staff@tn.gov.

What if AMERICA DIDN'T Notice?

PUBLIC NOTICES

HELP EXPOSE:

- FRAUD IN GOVERNMENT
- DISHONEST BUSINESSES
- UNFAIR COMPETITIVE PRACTICES

Find it in **The P-I Classifieds**

NOTICE FROM THE HENRY COUNTY ELECTION COMMISSION

215 Grove Blvd. * Suite B
Paris, TN 38242
731-642-0411
Monday-Friday 8:00 a.m. - 4:30 p.m.

Henry County voters who wish to request a ballot that will enable them to vote by mail must request the ballot in writing. Prepared forms may be picked up at the Election Office or you may get a form from the Henry County Election Commission website (www.henrycoelection.com). The request can be mailed to the Henry County Election Commission, P.O. Box 967, Paris, TN 38242. A qualified voter may request an application to the Election Commission office until July 27, 2026.

The request must include the reason for request, voter's Social Security number, voter's date of birth, address of the voter's residence, date and name of the election requesting to vote, address where ballot is to be sent, and the signature of the voter. **Photo identification is not required for absentee voting unless you are a first time voter. Exceptions do apply for first time voters so please call the office if you have never voted before.**

HENRY COUNTY AUGUST STATE PRIMARY/COUNTY GENERAL

Early voting by personal appearance for the Thursday, August 6, 2026 Henry County Tennessee State Primary/County General will begin on Friday, July 17, 2026 through Saturday, August 1, 2026. Early voting will be held at the Henry County Election Commission Office located at 215 Grove Blvd. (Across from Grove Tower)

EARLY VOTING HOURS

MONDAY - FRIDAY 8:30 AM - 4:30 PM
SATURDAY JULY 18 & 25, 2026 - 9:00 AM - 12:00 PM (NOON)
SATURDAY AUGUST 1, 2026 - 9:00 AM - 12:00 PM (NOON)

VOTER ID LAW

Federal or state government issued photo ID is required to vote. Please call the Henry County Election Commission at 731-642-0411 or visit GoVoteTN.com with any questions.

The Election Commission does not discriminate on the basis of disability. If there are any questions about needed accommodations in the voting process call the Henry County Election Commission at (731) 642-0411.

HENRY COUNTY ELECTION COMMISSION

Steve Goggans, Chairman Sylvia Humphreys, Secretary
Art Smith, Member Jim Poe, Member Bennie Akers, Member
DeLaina Green, Administrator of Elections

NOTICE FROM THE HENRY COUNTY ELECTION COMMISSION

215 Grove Blvd. Suite B
Paris, TN 38242
731-642-0411
Monday-Friday 8:00 a.m. - 4:30 p.m.

Notice is hereby given that the General/Municipal Election is hereby called for in Henry County, TN for Tuesday, November 3, 2026 at all precincts to elect the following:

GENERAL/MUNICIPAL ELECTION

City of Henry - Mayor
City of Henry - Alderman (2 Positions)
City of Paris - Commissioner (3 Positions)
City of Puryear - Alderman (2 Positions)
Henry County School Board - District 5 (Unexpired Term)

The deadline to qualify for all offices listed for the General/Municipal Election will be **Thursday, August 20, 2026 at 12:00 noon**. The last day to register to vote is Monday, October 5, 2026. Early voting begins on October 14, 2026 and ends on October 29, 2026.

VOTER ID LAW

Federal or state government issued photo ID is required to vote.

Pursuant to TCA 2-3-109, notice is hereby given that the elderly voters or voters with disabilities assigned to vote in precincts where the polling place is inaccessible, may vote early at the Election Commission Office during the early voting dates or by an **absentee ballot by mail**. Any elderly voter or voter with a disability desiring to vote at the Election Commission Office on Tuesday, November 3, 2026, must notify the Election Commission Office in writing by October 24, 2026.

HENRY COUNTY ELECTION COMMISSION

Steve Goggans, Chairman Sylvia Humphreys, Secretary
Art Smith, Member Jim Poe, Member Bennie Akers, Member
DeLaina Green, Administrator of Elections



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NOTICE

DENTAL INSURANCE from Physicians Mutual Insurance Company. Coverage for 400 plus procedures. Real dental insurance - NOT just a discount plan. Do not wait! Call now! Get your FREE Dental Information Kit with all the details! 1-844-278-8285 www.dental50plus.com/tnpress#6258 (TnScan)

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BUSINESS SERVICE

OLSHAN FOUNDATION SOLUTIONS. Your trusted foundation repair experts since 1933. Foundation repair. Crawl space recovery. Basement waterproofing. Water management and more. Free evaluation. Limited time up to \$250 off foundation repair. Call Olshan 1-866-265-5932 (TnScan)

PUBLIC SALE

YOUR LOW COST ADVERTISING Solution! One call & your 25 word ad will appear in 97 Tennessee newspapers for \$275/wk or 27 West TN newspapers for \$100/wk. Call **The Paris Post-Intelligencer** newspaper's classified advertising dept. (731)642-1162 or go to www.tnpress.com/newspaper-networks (TnScan)

MERCHANDISE

CHOOSE EARTHLINK FIBER Internet for speeds up to 5 Gigs, no data caps, no throttling. Prices starting at \$54.95. Plus, a \$100 gift card when you make the switch. Call 1-855-481-3340 (TnScan)

Prepare for power outages today with a Generac Home Standby Generator. Act now to receive a FREE 5-Year warranty with qualifying purchase. Call 1-888-869-5542 today to schedule a free quote. It's not just a generator. It's a power move. (TnScan)

GET BOOST INFINITE! Unlimited Talk, Text and Data For Just \$25/mo! The Power Of 3 5G Networks, One Low Price! Call Today and Get The Latest iPhone Every Year On Us! 855-454-6457 (TnScan)

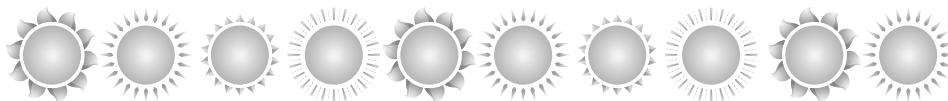
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DIRECTV- ALL your entertainment. Nothing on your roof! Sign up for Direct and get your first free months of Max, Paramount+, Showtime, Starz, MGM+ and Cinemax included. Choice package \$84.99/mo. Some restrictions apply. Call DIRECTV 1-844-230-4803 (TnScan)

AUCTION SALE

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REPORTS

PUBLIC NOTICES

NOTICE OF SUBSTITUTE TRUSTEE'S SALE STATE OF TENNESSEE, Humphreys COUNTY

WHEREAS, Alexander W. Feole, as borrower(s), executed a Deed of Trust to Mortgage Electronic Registration Systems, Inc., as beneficiary, as nominee for HomeBridge Financial Services, Inc. dba Real Estate Mortgage Network, Lender, and Renee Kammer, Trustee(s), which was dated 9/24/2019, and recorded on 10/2/2019, as Instrument No. 19002651 in Book TD232 Page 1584, in Humphreys County, Tennessee Register of Deeds; such Deed of Trust having been modified by the Order Granting Default Judgment (the "Order") in Cause No. 2023-CV-74 in the Chancery Court for Humphreys County, Tennessee (Carrington Mortgage Services, LLC, Plaintiff, vs. Brittany Nicole Dixon, Defendant), wherein it was ordered, adjudged and decreed that Brittany Nicole Dixon is deemed to have conveyed her entire title interest under the foregoing Deed of Trust, and that said Deed of Trust remains a valid encumbrance on all title interests in the real property commonly known as 102 Hill Street, Waverly, Tennessee; the Order recorded on 06/03/2024 as Instrument No. 24001423, Record Book 1, Pages 1273-1274; said Deed of Trust as modified by the Order to secure the payment of a Note in the amount of \$161,616.00, as modified by that Loan Modification Agreement recorded on 06/10/2021 as Instrument No. 21002036, in Book TD238, Page 2812, in Humphreys County, Tennessee Register of Deeds.

WHEREAS, default having been made in the payment of the debt(s) and obligation(s) thereby secured by the said Deed of Trust and the current holder of said Deed of Trust; Carrington Mortgage Services, LLC, (the "Holder"), appointed the undersigned, Vylla Solutions - Tennessee, LLC, as Substitute Trustee, with all the rights, powers and privileges of the original Trustee named in said Deed of Trust; and

NOW, THEREFORE, notice is hereby given that the entire indebtedness has been declared due and payable as provided in said Deed of Trust by the Holder, and that as agent for the undersigned, Vylla Solutions - Tennessee, LLC, Substitute Trustee, by virtue of the power and authority vested in it, will on 7/16/2026, at or about 11:00 AM at the usual and customary location At the front door of the Humphreys County Courthouse, 100 N Court Square, Waverly 37185, proceed to sell at public outcry to the highest and best bidder for cash, the following described property situated in Humphreys County, Tennessee, to wit:

Land situated in Humphreys County, Tennessee: THIS BEING A CERTAIN PARCEL OF LAND LYING AND BEING SITUATED IN THE SECOND CIVIL DISTRICT OF HUMPHREYS COUNTY, TENNESSEE, LOCATED IN THE CITY OF WAVERLY, TENNESSEE, ON THE SOUTH SIDE OF, AND ADJOINING POWERS

BOULEVARD, AND ON THE WEST SIDE OF, AND ADJOINING HILL STREET, AND BEING MORE PARTICULARLY DESCRIBED AS FOLLOWS:

BEGINNING AT AN IRON PIN FOUND IN THE SOUTH RIGHT-OF-WAY OF POWERS BOULEVARD, SAID POINT BEING THE NORTHEAST CORNER TO THE WILLIAM W. LADD PROPERTY, AND ALSO BEING THE NORTHWEST CORNER TO THE HEREIN DESCRIBED PARCEL, AND RUNS THENCE WITH THE SOUTH RIGHT-OF-WAY OF POWERS BOULEVARD, NORTH 74 DEGREES 11 MINUTES 30 SECONDS EAST 220.00 FT. TO AN IRON PIN SET AT THE INTERSECTION WITH THE WEST RIGHT-OF-WAY OF HILL STREET, SOUTH 15 DEGREES 48 MINUTES 30 SECONDS EAST 122.06 FT. TO AN IRON PIN FOUND AT THE CORNER OF A CHAIN-LINK FENCE, SAID POINT BEING THE NORTHEAST CORNER TO THE BARNEY CAGLE PROPERTY; THENCE RUNS WITH CAGLE'S NORTH BOUNDARY AND THE CHAIN-LINK FENCE, SOUTH 74 DEGREES 11 MINUTES 30 SECONDS WEST 153.90 FT. TO A POINT IN THE FENCE; THENCE CONTINUES WITH THE FENCE AND CAGLE'S NORTH BOUNDARY, SOUTH 74 DEGREES 35 MINUTES 30 SECONDS WEST 66.10 FT. TO AN IRON PIN FOUND IN THE EAST BOUNDARY TO THE WILLIAM W. LADD PROPERTY, SAID POINT BEING THE NORTHWEST CORNER TO CAGLE, AND THE SOUTHWEST CORNER TO THE HEREIN DESCRIBED PROPERTY; THENCE RUNS WITH LADD'S EAST BOUNDARY, NORTH 15 DEGREES 48 MINUTES 30 SECONDS WEST 121.60 FT. TO THE POINT OF BEGINNING, CONTAINING AN AREA BY COMPUTATION OF 0.62 ACRE. SURVEY MADE ON APRIL 23, 1992 BY THOMAS C. WHITE & ASSOCIATES, LAND SURVEYORS, WAVERLY, TENNESSEE, THOMAS C. WHITE, SURVEYOR, TENNESSEE REGISTRATION NO. 69. ALL BEARINGS ARE GIVEN IN REFERENCE TO MAGNETIC MERIDIAN IN RELATION TO A SURVEY OF A PART OF THE SUBJECT PROPERTY MADE IN AUGUST, 1972. APPROXIMATE DECLINATION AT TIME OF SAID 1972 SURVEY, 02 DEGREES 20 MINUTES EAST, ALL AS SHOWN ON THOMAS C. WHITE & ASSOCIATES DRAWING NO. 865-6792.

BEING THE SAME PROPERTY CONVEYED TO ALEXANDER W. FEOLE AND BRITTANY NICOLE DIXON BY WARRANTY DEED FROM RYAN K. LAWSEY AND WIFE, MIRANDA LAWSEY, DATED SEPTEMBER 24, 2019 OF RECORD IN BOOK 208, PAGE 754, IN THE REGISTER'S OFFICE OF HUMPHREYS COUNTY, TENNESSEE.

THIS CONVEYANCE IS SUBJECT TO THE FOLLOWING:

SUBJECT TO THE RIGHT OF WAY OF HILL STREET AND EAST POWERS BLVD (ALSO KNOWN AS POWERS BLVD).

Tax Parcel ID: 053K A 010.00

Address/Description: 102 HILL ST, WAVERLY, TN 37185

Current Owner(s): Alexander W. Feole and Brittany Nicole Dixon

Other Interested Party(ies): United States of America, acting through the Rural Housing Service; and Castle Credit Co. Holdings, LLC

If the Internal Revenue Service and/or U.S. Department of Treasury is listed as Other Interested Party above, then the notice required under 26 U.S.C. 7425(b) was timely provided and the sale of the land advertised will be subject to the right of the U.S. to redeem the land as provided in 26 U.S.C. 7425(d)(1). If the Tennessee Department of Revenue and/or the Tennessee Department of Labor and Work Force Development is listed as Other Interested Party above, then the notice required under TCA 67-1-1433(b) was timely provided and for each lien identified, the sale of the land advertised will be subject to the right of The State of Tennessee to redeem the land as provided in TCA 65-1-1420.

The sale of the property described above shall be subject to all matters shown on any recorded plat; any and all liens against said property for unpaid property taxes; any restrictive covenants, easements or set-back lines that may be applicable; any prior liens or encumbrances as well as any priority created by a fixture filing; a deed of trust; and any matter than an accurate survey of the premises might disclose.

All right and equity of redemption, statutory or otherwise, homestead, and dower are expressly waived in said Deed of Trust, and the title is believed to be good, but the undersigned will sell and convey only as Substitute Trustee.

The right is reserved to adjourn/postpone the day of the sale to another day, time, and place certain, by verbal announcement at the time and place for the sale set forth above; if the postponement is for five (5) days or more, the postponement announcement will also be posted on website of www.foreclosure-postings.com

Except to the extent that the Substitute Trustee may bind and obligate Mortgagees to warrant title the Property under the terms of the Deed of Trust, conveyance of the Property shall be made without any representations or warranties whatsoever, express or implied. All sales are "as is, where is".

The entire purchase price is due and payable at the conclusion of the auction in the form of certified funds. Insufficient funds will not be accepted. Amounts received in excess of the winning bid will be refunded to the successful purchaser. This property is being sold with express reservation that the sale is subject to confirmation by lender or Substitute Trustee.

This office is attempting to collect a debt. Any information obtained will be used for that purpose.

Please be advised that the trustee may require entity or trust bidders at this

trustee's sale to provide information, documentation and/or certification of the vesting instructions and the data required to be reported pursuant to FinCEN regulations effective for transfers of residential real property to covered transferees on or after March 1, 2026. The required information must be provided to the trustee before a Substitute trustee's deed will be issued for covered transfers. The Buyer may be required to pay charges associated with the gathering and reporting of information to FinCEN. Additional information regarding these regulations and the required transferee information and certifications can be found at:

https://www.federal-register.gov document s/2024/08/29/2024-19198/ anti-money-laundering-regulations-for-residential-real-estate-transfers and https://www.fincen.gov/rre-faqs#D_5

Vylla Solutions - Tennessee, LLC, Substitute Trustee

P.O. Box 3309 Anaheim, California 92803

Phone: (888) 313-1969 TS#: 24-31960

Publication Dates: 6/3/2026, 6/24/2026, 7/1/2026 7/8/2026

Online Posting Website and Date of Posting: www.foreclosure-postings.com

Publication Dates: June 3, 2026, June 24, 2026, July 1 and 8, 2026.

BID NOTICE

The City of Waverly TN is seeking bids to clean out their two sludge ponds located at 3552 Old State Rt 1 New Johnsonville TN. Any inquiries can call Jon Williams Chief Operator at 931-264-0396 or email at Jwilliams@waverlytn.org

Publication Date: July 8, 2026.

NOTICE TO FURNISHERS OF LABOR AND MATERIALS TO: Dement Construction Co., LLC PROJECT NO.: 43S001-F3-005, 43S001-M3-003 CONTRACT NO.: CNX118 COUNTY: Humphreys The Tennessee Department of Transportation is about to make final settlement with the contractor for construction of the above numbered project. All persons wishing to file claims pursuant to Section 54-5-122, T.C.A. must file same with the Director of Construction, Tennessee Department of Transportation, Suite 700 James K. Polk Bldg., Nashville, Tennessee 37243-0326, on or before 8/21/2026.



NEED MONEY?? Sell it in the CLASSIFIEDS!!

HUMPHREYS COUNTY ARREST REPORT

The Following is the Humphreys County Arrest Report Summary for the week of June 22 - 28, 2026. The arrest report is a matter of public record at the Humphreys County Sheriff's Office. Individuals listed in the report are innocent until proven guilty in a court of law. This record reflects all county law enforcement agencies.

- Allen, Russell Eric: Poss of Drug Paraphernalia
- Baker, Johnny Ray Jr.: Assault X2, Burglary, DORSL, Leaving the Scene of Accident Property, Traffic Control Device
- Brewer, John Isaac: Assault Against First Responder X2, Convicted Felon in Possession of Firearm, DUI, Resisting Arrest
- Brignac, Deborah Jean: DORSL
- Elam, Janice Ann: MANF/SELL/DELIVERY/POSSESS of Meth
- Farlow, Heather Lachelle: VOP
- Golden, Shari Lynn: DORSL
- Gregory, Jerry Scott: Poss of Drug Paraphernalia
- Higginbotham, Stephanie Lewis: Enticing/Purchasing Alcoholic Beverages
- Hinton, Austin Mathew Ray: FTA, Prohibited Purchase/Poss of Tobacco
- Hudson, Koby Michael: Enticing/Purchasing Alcoholic Beverages
- Hughes, Rebecca Michelle: Poss of Drug Paraphernalia
- Kurzyniec, Jennifer Rebecca: Open Container, Poss of Drug Paraphernalia, Shoplifting, Simple Possession/Casual Exchange
- Martin, Chanx X'Zayvier: VOP
- Mayberry, Craig Allen: Stalking, Violation of Order of Protection/RESTRAI
- Mayberry, Tyler Gray: VOP
- Mayes, Antonio Lakeith: Falsification of TBI Registration Form
- Morris, Jeffrey Norman: Abuse of Elderly or Vulnerable Adult, Domestic Assault
- Myers, Deshaun Lavell: Burglary
- Neely, Vernencio Lee-Vern: FTA X2
- Odum, Jonathon Matthew: Aggravated Assault, Child Abuse or Neglect (If Violent), Kidnapping
- Reish, David Samuel: Criminal Trespass
- Rogers, Charles Martin: Contempt of Court/CAPIAS
- Stevens, Jeb Lee: FTA, Poss of Drug Paraphernalia
- Walker, Shanon Keith: Domestic Assault
- Whitehead, Amber Renee: DORSL
- Woodward, Joshua Andrew: Aggravated Assault, Domestic Assault, False Imprisonment
- Wright, Scott James: Criminal Trespass, Vandalism

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931-296-1455

NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED
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 Sunray HHA TN, LLC, a/an proposed home health agency owned by Sunray HHA TN, LLC, with an ownership type of Limited Liability Company (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 limited to home infusion services. The project will serve a proposed service area of 95 counties: Anderson, Bedford, Benton, Bledsoe, Blount, Bradley, Campbell, Cannon, Carroll, Carter, Cheatham, Chester, Claiborne, Clay, Cocke, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Dyer, Fayette, Fentress, Franklin, Gibson, Giles, Grainger, Greene, Grundy, Hamblen, Hamilton, Hancock, Hardeman, Hardin, Hawkins, Haywood, Henderson, Henry, Hickman, Houston, Humphreys, Jackson, Jefferson, Johnson, Knox, Lake, Lauderdale, Lawrence, Lewis, Lincoln, Loudon, Macon, Madison, Marion, Marshall, Maury, McMinn, McNairy, Meigs, Monroe, Montgomery, Moore, Morgan, Obion, Overton, Perry, Pickett, Polk, Putnam, Rhea, Roane, Robertson, Rutherford, Scott, Sequatchie, Sevier, Shelby, Smith, Stewart, Sullivan, Sumner, Tipton, Trousdale, Union, Van Buren, Warren, Washington, Wayne, Weakley, White, Williamson, and Wilson Counties. The address of the project will be 740 Cool Springs Blvd., Suite 120, Office 1, Franklin, Williamson County, Tennessee, 37067. The estimated project cost will be \$202,418. The anticipated date of filing the application is 08/01/2026. The contact person for this project is Mr. Michael Brent who may be reached at Bradley Arant Boult Cummings LLP- 1221 Broadway #2400, Nashville, TN 37203- Contact No. 615-252-2361. 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, 503 Deaderick Street, Nashville, TN 37243 or email at hdsd.staff@tn.gov.

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LEGAL NOTICES

LEGAL NOTICES

INVITATION FOR BIDS Solid Waste Disposal Services

The Town of Bluff City, Tennessee invites bids from qualified vendors to provide Solid Waste collection and disposal services for residential users of the Town. Sealed bids must be submitted to Bluff City Town Hall, 4391 Bluff City Highway, Bluff City, TN 37618, no later than 3:00 p.m. Eastern Standard Time on Friday, July 16, 2026. No FAXED bids will be accepted. Bids received after the specified time will be considered non-responsive. Sealed bids must be submitted on the provided Bid Form in a sealed envelope/package, clearly marked **Bluff City RFP: Solid Waste Disposal Services**. A complete copy of this solicitation may be obtained at www.bluffcitytn.gov or by contacting Krista Morris, Town Manager, at kmorris@bluffcitytn.gov. COL-2001090

LEGAL NOTICES

Appalachian Detention and Wise Correctional facilities

Frizzell Construction is soliciting WBE/MBE/ DBE suppliers and sub-contractors for bids on The Appalachian Detention Center in Honaker, VA and the Wise Correctional Facility in Coeburn, VA. Both projects are renovation to their Wastewater Treatment Plant and Bid June 16,2026 at 2:00PM Interested parties can call Kevin Smith @ (423)764-5107 or E-Mail ksmith@fcci.com COL-2001089

LEGALS

LEGALS

Legal Notices

Legal Notices



VIRGINIA DEPARTMENT OF TRANSPORTATION

Request for Qualifications Contract ID #: C00116281DB145 I-81 Widening MM 317 to MM 319 Design-Build Project

The Virginia Department of Transportation (VDOT) is seeking Statements of Qualifications for the I-81 Widening Mile Marker (MM) 317 to MM 319, Design Build Project from qualified and experienced respondents with design and construction experience of highway facilities. This project is in Frederick County along I-81 between MM 317 and MM 319. The project is a bundle of three elements, and the three elements are part of single procurement and will be awarded as a single contract. Following is the brief description of each element: (1) I-81 Widening MM 317-319: I-81 will be expanded from two to three lanes each way between MM 317-319 to improve safety, reliability, and capacity. The project includes three bridge pairs (CSX rail, US 11, Winchester & Western rail), and raising the interstate profile to meet clearance over Route 11. This element also includes two large box culverts that provide floodplain conveyance beneath I-81. (2) Exit 317 Interchange Improvements: The existing I-81/US 11 diamond interchange will be converted to a diverging diamond interchange to reduce congestion, queues, and safety issues that currently extend onto I-81. The redesign improves traffic flow, supports future growth, adds a park-and-ride lot, and converts Welltown Road and Crown Lane into a one-way couplet to ease Route 11 congestion. (3) Exit 317 Northbound Ramp Realignment: The I-81 northbound off-ramp will be realigned to intersect with US Route 11, eliminating one of the existing signalized intersections and consolidating traffic control into a single signalized intersection at the northbound on-ramp. Removing one of the closely spaced intersections will improve the overall level of service and traffic operations along US Route 11.

Questions/clarifications regarding the Request for Qualifications (RFQ) should be submitted to Kabin Luitel, PE, CFM (Kabin.Luitel@vdot.virginia.gov).

Copies of the RFQ and additional submittal requirements can be found at Bid Express (bidexpress.com).

The Department assures compliance with Title VI requirements of non-discrimination in all activities pursuant to this advertisement.

LEGAL

LEGAL

NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED

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Suicide is the most preventable form of death: most suicidal people desperately want to live; they just can't see a way out of their problems. Help them by giving them the National Suicide Prevention Lifeline number (1-800-273-TALK). It could save their lives.

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General

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DIVORCE-Uncontested, \$525.00 + \$89.00 court cost. WILLS-\$295.00. No court appearance. Estimated completion time twenty-one days. Hilton Oliver, Attorney (Facebook). 757-490-0126. Se Habla Espanol. BBB Member. <https://hiltonoliverattorneyva.com>

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PUBLIC NOTICES

NOTICE TO FURNISHERS OF LABOR AND MATERIALS TO: Southern Constructors, Inc. PROJECT NO.: R1SVAR-M3-051 CONTRACT NO.: CNZ225 COUNTY: Knox

The Tennessee Department of Transportation is about to make final settlement with the contractor for construction of the above numbered project. All persons wishing to file claims pursuant to Section 54-5-122, T.C.A. must file same with the Director of Construction, Tennessee Department of Transportation, Suite 700 James K. Polk Bldg., Nashville, Tennessee 37243-0326, on or before 8/21/2026.

Govt Public Notices

IN THE JUVENILE COURT OF KNOX COUNTY, TENNESSEE

STATE OF TENNESSEE DEPARTMENT OF CHILDREN'S SERVICES

PETITIONER

IN THE MATTER OF: Baby Girl Knox, aka Natalie Jane Knox, b.d. 5/28/2026 A CHILD UNDER EIGHTEEN (18) YEARS OF AGE

ORDER FOR PUBLICATION

In this cause, it appears to the Court from the allegations of the Petition that the Department of Children's Services is seeking to declare Baby Girl Knox, aka Natalie Jane Knox, a voluntarily delivered child pursuant to Tenn. Code Ann. § 68-11-255 and Tenn. Code Ann. § 36-1-142. A copy of said Petition may be obtained at the Office of the Juvenile Court Clerk of Knox County, Knoxville, Tennessee, (865) 215-6400. The child was born on May 28, 2026, in Knoxville, Tennessee, at what appears to be full-term gestation, has light brown hair and blue eyes and weighed 6 lbs 13oz and was 19 inches long and appears to be of Caucasian descent. The child was voluntarily left at Tennova North Knoxville Regional Medical Center for adoption on May 28, 2026. The mother is of unknown descent and her county of origin is unknown. The father is of unknown descent and his county of origin is unknown. Failure by the biological mother to seek contact with the child through the Department of Children's

Govt Public Notices

Services or to revoke the voluntary delivery within thirty (30) days of the date of the last publication of notice shall constitute abandonment of the child and of the mother's interests, constituting grounds for termination of her parental rights. The putative father of said child who fails to claim paternity by contacting the Department or by registering with the putative father registry within thirty (30) days of the date of the last publication of notice shall be barred from thereafter bringing any action to establish paternity of the infant. Such failure will constitute abandonment of any right to notice of, or to a hearing in, any judicial proceeding for the adoption of such infant and that consent of such putative father shall not be required for adoption of the infant. In the event that the biological mother or the putative father require additional information, they should contact Olivia Rader, Family Services Worker, Department of Children's Services, 2600 Western Avenue, Knoxville, Tennessee, 37921, phone: 865-306-9987.

IT IS, THEREFORE, ORDERED, that said biological mother and putative father enter their appearance herein on November 3, 2026, at 9 A.M. and that a copy of this order be published for four consecutive weeks in *The Knoxville News Sentinel*, a newspaper published in Knox County, Tennessee. The Final Hearing to terminate the parental rights of the biological mother and of the putative father is scheduled for **November 3, 2026, at 9 A.M.** Failure of said persons claiming an interest in the child to appear at the final hearing will result in the loss of their parental rights to the child.

Enter this 29th day of May, 2026

/s/ Stacy Eckard JUVENILE COURT JUDGE MAGISTRATE

APPROVED FOR ENTRY: /s/ Emily K. Mullins, Emily K. Mullins, BPR#037927 Assistant General Counsel Tennessee Department of Children's Services 2600 Western Avenue Knoxville, Tennessee 37921 865-712-5636

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PUBLIC NOTICES

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PUBLIC NOTICES

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PROPOSED SUBSTANTIAL AMENDMENT TO THE STATE OF TENNESSEE'S FY 2026-27 ANNUAL ACTION PLAN AND HOME-ARP ALLOCATION PLAN

The State of Tennessee plans to make several substantial amendments to its FY 2026-27 Annual Action Plan (AAP) and HOME-ARP Allocation Plan. The AAP details how the State of Tennessee plans to use federal funding for its Consolidated Planning programs. The U.S. Department of Housing and Urban Development (HUD) has already reviewed and approved the State's FY 2026-27 AAP. The amendment to the FY 2026-27 AAP would allow HOME Rental Development funding to be awarded to subgrantees in the form of a low-interest loan to support the construction of rental units for projects that also have received Low-Income Housing Tax Credit (LIHTC) funding. (This amendment does not prevent organizations from applying for HOME Rental Development funding as a grant, so long as the HOME grant is not combined with LIHTC funding.) The HOME-ARP Program was created to assist people experiencing homelessness, those at risk of experiencing it, and several other qualifying populations with the impacts of the COVID-19 pandemic. The first amendment to the HOME-ARP Allocation Plan would reallocate a total of \$12,450,512.45 from Non-Profit Operating, Non-Profit Capacity Building, Rental Development, and Administration and Planning activities to Supportive Services activities. The second substantial amendment would allow organizations awarded HOME-ARP funding to "prefer" (or use funding preferentially for) Qualifying Population 3 (QP3), people who are fleeing, or attempting to flee domestic violence, dating violence, sexual assault, stalking, or human trafficking. (The second amendment does not prevent organizations serving other QPs from applying for or being awarded funding.) Tennesseans are encouraged to review and make comments on these proposed amendments beginning on July 8, 2026. Links to review the proposed amendments to the FY 2026-27 Annual Action Plan and HOME-ARP Allocation Plan, summaries of the proposed amendments in English and Spanish, and a form to submit comments will be available at <https://thda.org/research-planning/public-notices-and-comment/> from July 8 through August 7, 2026, along with details for an in-person and virtual public hearing about the amendments. For questions and accommodation requests (e.g., requests for assistance due to a disability and/or limited English language proficiency), please email research@thda.org.

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PUBLIC NOTICES / RECORDS

GENERAL SESSIONS

The following cases were heard in Lake County General Sessions Court on June 18, 2026, according to court records:

Arraignments

Michael Richard Cain – Speeding 55/78 – driving school 7/30/26; seat belt 18 and older dismissed/warning.
Charles Higgins – Driving while license suspended, contempt of court – 10 days; public defender appointed; report to jail 7/2/26 at 9 a.m.

Appearance

Gary Allen – Meth – mfg, del, sell, poss with intent; poss unlaw drug paraphernalia uses & activities.
Patrick Benoit – Driving while license revoked 2nd or subsequent, DUI second

PUBLIC NOTICES

PUBLIC NOTICE

The Reelfoot Lake Regional Utility and Planning District is now accepting resumes for a full-time Office Assistant. Duties include bookkeeping, record keeping, billing, collections, customer service, policy enforcement, etc. Must be self-motivated and reliable. Hours of operation are Monday through Friday 8:30 A.M. - 4:30 P.M.. Pay is based on experience.

Benefits will be discussed in the interview. Resumes will be accepted from July 8, 2026 - July 17, 2026. Please send resumes to 5465 W Hwy. 22, Hornbeak, TN 38232-5147.

7/8 RT

Northwest Tennessee Economic Development Council Public Service Announcement

The Board of Directors of Northwest Tennessee Economic Development Council will hold a Board meeting on Friday, July 17, 2026, beginning at 10:00 a.m. The meeting will be physically held at the Northwest TN Head Start/Early Head Start Central Office located at 938C Walnut Avenue W., McKenzie, TN in person only.

7/8 RT

PUBLIC NOTICE

I am applying for a title for a 2008 Dodge Charger, VIN# 2B3K-A43G68H262359. Any party holding interest in the vehicle needs to contact Blake Butler via certified mail with return receipt requested within 10 business days of the posting of this ad to 1417 Ewell Ave., Dyersburg, TN 38024

7/8 RT

POSTED NOTICE

All land and timber owned by John F. Fields and David Fields is posted. This includes black bottom woods, south west of Tiptonville. Trespassers will be arrested and prosecuted to the fullest extent.

JOHN F. FIELDS AND DAVID FIELDS

offense – bond \$2,500.
Desarea Cole – Driving while license suspended – bond \$3,500.
Billy Dean – Domestic assault.
Preston Johnson – Simple poss/casual exchange – app 8/20/26.
Nipsey Jones – Aggravated assault domestic amended to domestic assault; ankle monitor not needed; no contact with victim.
Ricardo Molina – Agg child abuse/neglect/endangerment.
Donnie Prince – DUI first offense – bond \$1,000.

Payment Status

Gary Allen – Simple poss/casual exchange, poss unlaw drug paraphernalia uses & activities, prevent/obstruct service of legal process, poss/sell/barter/give away legend drug, contempt of court, probation violation – not booked.
Patrick Benoit – Driving while license revoked 2nd or subsequent, evading arrest flight – vehicle, contempt of court, failure to appear – bond \$3,500.
Desarea Cole – Failure to appear on citation, con-

tempt of court, probation violation, driving while license suspended, seat belt 18 and older, registration expired, financial responsibility law, contempt of court, probation violation, theft up to \$1,000, Schedule II drugs – mfg, del, sell, poss, poss unlaw drug paraphernalia uses & activities, simple poss/casual exchange, contempt of court, criminal impersonation, criminal trespass, vandalism up to \$1,000, driving while license suspended, contempt of court, probation violation, domestic assault, contempt of court, probation violation, Schedule II drugs – mfg, del, sell, poss, contempt of court.
Jackson Davis – Simple poss/casual exchange, poss unlaw drug paraphernalia uses & activities – to bring drug screen back; reset payment 7/20/26; domestic assault.
Robert Fortner – Vandalism up to \$1,000, driving while license suspended, financial responsibility law.
Charles Higgins – Driving while license suspended, contempt of court.
Robert Thacker – Theft up to \$1,000, driving while license revoked, meth –

mfg, del, sell, poss with intent, simple poss/casual exchange, probation violation – not booked.
Desarea Cole – Theft of property – guilty plea, 11/29 to 10 days/cost; banned from Food Rite; report to jail Tuesday, 6/23/26 at 10 a.m.; sentence to run concurrent with circuit case.

Status

Chester McDonald – Simple poss/casual exchange, Schedule III drugs – mfg, del, sell, poss, poss unlaw drug paraphernalia uses & activities, contempt of court, probation violation – booked; going to rehab; status 7/20/26.
Jeffery Tumbo Jr. – Domestic assault – show cause 6/25/26.

Preliminary Hearing

Erin Reid – Aggravated stalking – bond \$2,000; prelim 7/2/26.

Hearing

Colton Holder – Simple poss/casual exchange – bond \$2,500; sentence hearing 6/22/26.

Trial

Bruce Hughes – Obedience to any required traffic control device dismissed; DUI first offense – guilty plea, 11/29 to 48 hrs/cost,

\$350 fine, one-year loss of license; implied consent enhancement dismissed; bond \$1,000; report to jail Saturday, 6/27/26 at 8 a.m.

NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED

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 Sunray HHA TN, LLC, a/an proposed home health agency owned by Sunray HHA TN, LLC, with an ownership type of Limited Liability Company (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 limited to home infusion services. The project will serve a proposed service area of 95 counties: Anderson, Bedford, Benton, Bledsoe, Blount, Bradley, Campbell, Cannon, Carroll, Carter, Cheatham, Chester, Claiborne, Clay, Cocke, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Dyer, Fayette, Fentress, Franklin, Gibson, Giles, Grainger, Greene, Grundy, Hamblen, Hamilton, Hancock, Hardeman, Hardin, Hawkins, Haywood, Henderson, Henry, Hickman, Houston, Humphreys, Jackson, Jefferson, Johnson, Knox, Lake, Lauderdale, Lawrence, Lewis, Lincoln, Loudon, Macon, Madison, Marion, Marshall, Maury, McMinn, McNairy, Meigs, Monroe, Montgomery, Moore, Morgan, Obion, Overton, Perry, Pickett, Polk, Putnam, Rhea, Roane, Robertson, Rutherford, Scott, Sequatchie, Sevier, Shelby, Smith, Stewart, Sullivan, Sumner, Tipton, Trousdale, Unicoi, Union, Van Buren, Warren, Washington, Wayne, Weakley, White, Williamson, and Wilson Counties. The address of the project will be 740 Cool Springs Blvd., Suite 120, Office 1, Franklin, Williamson County, Tennessee, 37067. The estimated project cost will be \$202,418. The anticipated date of filing the application is 08/01/2026. The contact person for this project is Mr. Michael Brent who may be reached at Bradley Arant Boult Cummings LLP- 1221 Broadway #2400, Nashville, TN 37203- Contact No. 615-252-2361. 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, 503 Deaderick Street, Nashville, TN 37243 or email at hsd.a.staff@tn.gov.

IN THE CHANCERY COURT FOR LAKE COUNTY, TENNESSEE

LAKE COUNTY, TENNESSEE,
of the State of Tennessee,
PLAINTIFF,

VS.

DELINQUENT TAXPAYERS OF,
AND CERTAIN TRACTS OR PARCELS
OF REAL ESTATE, WITHIN
LAKE COUNTY, TENNESSEE
AS SHOWN BY EXHIBIT “A” HERETO,

DEFENDANTS.

NO. 26-CV-48
26-CV-47
26-CV-60
26-CV-31
26-CV-53
26-CV-19
26-CV-27
26-CV-28
26-CV-52
26-CV-63

ORDER OF PUBLICATION

This cause came on to be heard this 26 day of June, 2026, on the Motion of the Plaintiff for an Order of Publication in this cause, and it appearing that service of process by publication is appropriate in this cause to afford those Defendants who cannot be found or served and who are identified on the list attached hereto as Exhibit A and made a part hereof, timely and proper notice of the filing and pendency of this cause, and of the assessed real estate taxes for tax year 2024 which are past due and owing by said Defendants in the amounts recorded upon said list; and good cause appearing,

IT IS ORDERED, ADJUDGED AND DECREED that the Defendants identified on Exhibit A shall be and are hereby

ordered to be served with process and timely notice of the filing and pendency of this cause, and of the assessed real estate taxes for tax year 2024 which are past due and owing by the Defendants in the amounts hereinafter stated, by the publication of this Order for four (4) consecutive weeks in the Lake County Benner, a newspaper of general circulation in Lake County, Tennessee. FURTHER ORDERED, that said Defendants shall be and are hereby ordered and directed to appear, answer or otherwise defend against the Plaintiff’s Complaint in this cause by serving such appearance, answer or defense upon the Plaintiff’s attorney, Becky S. Dykes, whose address is 422 McGaughey Street, P. O. Box 1729, Dyersburg, Tennessee 38025-1729, within thirty (30) days after the date of last publication of this Order, otherwise default judgment may be entered against them and their property sold at public auction for the recovery of delinquent property taxes.

SO ORDERED, this 26 day of June, 2026.

APPROVED:

Becky S. Dykes

Attorney for Plaintiff, Lake County, Tennessee
422 McGaughey Street
P. O. Box 1729
Dyersburg, Tennessee 38025-1729
(731) 285-0374

Chancellor Tony Childress

Taxing Agency: Lake County Delinquent Taxes				
Tax Years Selected: All Tax Years through 2026				
Case Number	Owner	Property Address	Parcel	Total Base Tax Due For Parcel
26-CV-19	Campbell Mack F C/O Kristen Campbell	623 Main St. S	05-057 N -N -057 K -014.00--000	\$793.00
26-CV-39	Kimble Stephanie C/O Bolden Charles	604 Clifton St.	02-029 D-B-029 D-027.11--000	\$17.00
26-CV-27	Jason Evans	3170 State Rt. 78 N	07-021 - -021 -017.20--000	\$1,088.00
26-CV-28	Fant Ellis R C/O Kevin Allen	221 Ashby Dr.	02-030 --030 -007.13--000	\$560.00
26-CV-52	Strayhorn Linnie Harold	600 Clifton St.	02-029 D -B -029 D -027.09--000	\$129.00
26-CV-63	Young Juanita	119 College St.	02-029 E -D -029 E-009.00--000	\$332.00
26-CV-39	Kimble Stephanie C/O Bolden Charles	604 Clifton St.	02-029 D -B -029 D -027.11--000	\$24.00
26-CV-47	Scott Stacey Michelle	1102 Church St.	02-030 H-A-030 H-026.00--000	\$687.00
26-CV-48	Smith Franklin Ray	Maze Rd.	05-057F-B -057F -014.28--000	\$141.00
26-CV-53	Terry Birdie, Terry Marcus L/E Terry Zachary	820 McBride St.	02-029 D-C -029 D -012.00--000	\$345.00
26-CV-31	Hollingsworth Trust	Main St.	05-057 K-N -057 K -007.02--000	\$105.00
26-CV-60	Williams Willie Paul & Loretta	Church St. 1105-1111	02-030 H-D -030 H-003.00--000	\$123.00
				\$18,035.00

Bargain Browser

CLASSIFIEDS

Wanted	Cars & Vehicles	For Sale	Garage & Estate Sales	Jobs	Personals	Real Estate & Auctions	For Sale or Rent	Services
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MISCELLANEOUS

WANTED: Cash paid for estates, antiques, collectibles, iron cookware, firearms or anything old or unusual. Call 931-244-3970.

REAL ESTATE

HOUSE FOR RENT: 309 Pilkinton Drive, Lawrenceburg. 3 BR, 1 bath,

central H&A, stove, ref., dishwasher furnished \$1,000 plus deposit. Good credit score. 931-629-0408.

SERVICES

Jimmy's Fence & Repairs: Specializes in aluminum, wood, rough iron, chain link, and PVC. Contact Jim Ventrice (931) 201-1487.

NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED

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 Sunray HHA TN, LLC, a/an proposed home health agency owned by Sunray HHA TN, LLC, with an ownership type of Limited Liability Company (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 limited to home infusion services. The project will serve a proposed service area of 95 counties: Anderson, Bedford, Benton, Bledsoe, Blount, Bradley, Campbell, Cannon, Carroll, Carter, Cheatham, Chester, Claiborne, Clay, Cocke, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Dyer, Fayette, Fentress, Franklin, Gibson, Giles, Grainger, Greene, Grundy, Hamblen, Hamilton, Hancock, Hardeman, Hardin, Hawkins, Haywood, Henderson, Henry, Hickman, Houston, Humphreys, Jackson, Jefferson, Johnson, Knox, Lake, Lauderdale, Lawrence, Lewis, Lincoln, Loudon, Macon, Madison, Marion, Marshall, Maury, McMinn, McNairy, Meigs, Monroe, Montgomery, Moore, Morgan, Obion, Overton, Perry, Pickett, Polk, Putnam, Rhea, Roane, Robertson, Rutherford, Scott, Sequatchie, Sevier, Shelby, Smith, Stewart, Sullivan, Sumner, Tipton, Trousdale, Unicoi, Union, Van Buren, Warren, Washington, Wayne, Weakley, White, Williamson, and Wilson Counties. The address of the project will be 740 Cool Springs Blvd., Suite 120, Office 1, Franklin, Williamson County, Tennessee, 37067. The estimated project cost will be \$202,418. The anticipated date of filing the application is 08/01/2026. The contact person for this project is Mr. Michael Brent who may be reached at Bradley Arant Boult Cummings LLP- 1221 Broadway #2400, Nashville, TN 37203- Contact No. 615-252-2361. 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, 503 Deaderick Street, Nashville, TN 37243 or email at hsd.a.staff@tn.gov.

SUBSTITUTE TRUSTEE'S NOTICE OF SALE

Sale at public auction will be on July 23, 2026, at or about 10:00 AM, local time, at the Lawrence County Courthouse, 240 West Gains Street, Lawrenceburg, TN 38464, pursuant to the Deed of Trust executed by Jordan M Coleman and Beverly Coleman, husband and wife, to Susan Voss, as Trustee for Regions Bank dba Regions Mortgage dated October 25, 2022, and recorded in Book 694, Page 644, in the Register's Office for Lawrence County, Tennessee ("Deed of Trust"), conducted by Padgett Law Group, having been appointed Substitute Trustee, all of record in the Lawrence County Register's Office. Default in the performance of the covenants, terms, and conditions of said Deed of Trust has been made; and the entire indebtedness has been declared due and payable.

Party entitled to enforce the debt: Regions Bank

Other interested parties: None

The hereinafter described real property located in Lawrence County will be sold to the highest call bidder subject to all unpaid taxes, prior liens and encumbrances of record:

Legal Description: Situated, lying and being in the 8th Civil District of Lawrence County, Tennessee, further described as follows:

Being Lot No. 2 of the Prosser Place Subdivision, Section 1, a plat of which is of record in Plat Cabinet A, Slide 98, Register's Office of Lawrence County, Tennessee.

This conveyance is made subject to the restrictions of record in Trust Book 401, Pages 424-29, Register's Office of Lawrence County, Tennessee and also sewer lines, building setback lines, etc. as shown on the above referenced plat.

Description according to plat prepared by Cleghorn & Associates, Tennessee Registered Land Surveyor #1440, 1274 First Avenue, Lawrenceburg, Tennessee 38464.

This being the same property conveyed to Kayla Hardiman by Warranty Deed from Nancy L. Michling dated January 10, 2007 of record in Record Book 249, Page 689, Register's Office of Lawrence County, Tennessee. The said Kayla Hardiman is nka Kayla Sublett.

This being the same property conveyed to Jordan M. Coleman and wife, Beverly Coleman by Warranty Deed from Kayla Sublett fka Kayla Hardiman of record in Record Book 694, Page 642, Register's Office of Lawrence County, Tennessee.

Street Address: The street address of the property is believed to be 853 Prosser Road, Leoma, TN 38468, but such address is not part of the legal description of the property. In the event of any discrepancy, the legal description herein shall control.

Map/Parcel Number: 096L-A-020.00

Current owner(s) of Record: Jordan M. Coleman and Beverly Coleman

This sale is subject to all matters shown on any applicable recorded Plat or Plan; any unpaid taxes and assessments; any restrictive covenants, easements or setback lines that may be applicable; rights of redemption, equity, statutory or otherwise, not otherwise waived in the Deed of Trust, including rights of redemption of any government agency, state or federal; and any and all prior deeds of trust, liens, dues, assessments, encumbrances, defects, adverse claims and other matters that may take priority over the Deed of Trust upon which this foreclosure sale is conducted or are not extinguished by this Foreclosure Sale.

THE PROPERTY IS SOLD WITHOUT ANY REPRESENTATIONS OR WARRANTIES, EXPRESSED OR IMPLIED, RELATING TO TITLE, MARKETABILITY OF TITLE, POSSESSION, QUIET ENJOYMENT OR THE LIKE AND FITNESS FOR A GENERAL OR PARTICULAR USE OR PURPOSE. The title is believed to be good, but the undersigned will sell and convey only as Substitute Trustee.

The right is reserved to postpone or adjourn the sale to another specified time certain or to another date, time, and location certain, without further newspaper publication upon announcement by posting with the third-party internet posting company and announced on the date, time, and location of sale set forth above or any subsequent postponed or adjourned date, time, and location of sale; provided, however if the sale is postponed or adjourned for less than five (5) days after the original sale, announcement by internet posting is not required.

If you purchase a property at the foreclosure sale, the entire purchase price is due and payable at the conclusion of the auction in the form of a certified check made payable to or endorsed to Padgett Law Group. No personal checks will be accepted. To this end, you must bring sufficient funds to outbid the lender and any other bidders. Insufficient funds will not be accepted. Amounts received in excess of the winning bid will be refunded to the successful purchaser at the time the foreclosure deed is delivered.

This property is being sold with the express reservation that the sale is subject to confirmation by the lender or trustee. This sale may be rescinded by the Substitute Trustee at any time.

This Notice of Sale has been posted by Capital City Posting and can be viewed online at CapitalCityPostings.com.

Padgett Law Group, Substitute Trustee
6267 Old Water Oak Road, Suite 203
Tallahassee, FL 32312
(850) 422-2520 (telephone)
(850) 422-2567 (facsimile)
attorney@padgettlawgroup.com

JOBS

Temporary Right of Way Position- Pulaski Electric System: Position Title: Right of Way Arborist Employment Type: Temporary — non-exempt. Assignment Duration: Nine (9) Months Compensation: \$17.00 per hour. Stay Bonus: \$2,000.00 upon successful completion of the full 9-month assignment. Posting Date: Monday, June 29th, 2026. Application

Deadline: Monday, July 13th, 2026. As a temporary employee, this position is not eligible for PES-sponsored medical, vision, or dental insurance. Temporary employees are eligible to participate in the PES 457(b) Deferred Compensation Plan after one (1) month of service in accordance with plan documents. Interested candidates should submit the following to Samantha Williams at Careers@pesenergize.com or in person at the PES office located at 128

NOTICE OF SUBSTITUTE TRUSTEE'S SALE

WHEREAS, default has occurred in the performance of the covenants, terms, and conditions of a Deed of Trust dated **July 22, 2024**, executed by **Nathaniel Morrison and Brittney Morrison**, husband and wife, to **Jerry Bridenbaugh, Associate as Trustee, for Mortgage Electronic Registration Systems, Inc., as beneficiary, as nominee for United Wholesale Mortgage, LLC, its successors and assigns**, and appearing of record on **August 13, 2024**, in the Register's Office of Lawrence County, Tennessee, at Book 754, Page 262, and Instrument Number 24004243.

WHEREAS, the beneficial interest of said Deed of Trust was last transferred and assigned to **Lakeview Loan Servicing, LLC**, the party entitled to enforce said security interest; and having appointed Clear Recon LLC, the undersigned, as Substitute Trustee by instrument filed or being filed for record in the Register's Office of Lawrence County, Tennessee, with all of the rights, powers, and privileges of the original Trustee named in said Deed of Trust.

NOW, THEREFORE, notice is hereby given that the entire indebtedness has been declared due and payable as provided in said Deed of Trust, and that the undersigned, Clear Recon LLC, as Substitute Trustee or his duly appointed agent, by virtue of the power, duty, and authority vested and imposed upon said Substitute Trustee will, on **July 28, 2026, at 2:00 PM**, local time, at the East Door of the Lawrence County Courthouse, 240 West Gains Street, located in Lawrenceburg, Tennessee, proceed to sell at public outcry to the highest and best bidder for cash or certified funds **ONLY**, paid at the conclusion of the sale, the following described property situated in **Lawrence County**, to wit:

The land referred to herein below is situated in the County of Lawrence, State of Tennessee, and is described as follows:

Exhibit A

Legal Description

Beginning at a mag nail, set, lying 562.77' from the northeast corner of Christina Blade, Record Book 400, page 970, lying on the center of Alexander Springs Road; thence with the center of the road N 08°16'29" W a distance of 172.01' to a mag nail, set, the southeast corner of Michael Woodard, Deed

Book 148, page 785; thence with Woodard N 89°40'37" W a distance of 30.56'; thence N 89°40'37" W a distance of 294.20' to a metal pin, set, capped Hillhouse #2718; thence S 07°12'20" E a distance of 210.74' to a metal pin, set, capped Hillhouse #2718; thence N 83°27'49" E a distance of 325.18' to the true point of beginning, containing 1.42 acres, more or less. This legal description is based off a survey done by Hillhouse Land Surveying, dated 10/05/2018, E-File #2018-111, for Kevin Walker.

Parcel ID: 023058.33000

This being a portion of the property conveyed to Kevin Walker and wife, Meredith Walker by Warranty Deed dated October 2, 2018, from James G. Allen, of record in Record Book 546, Page 244, Register's Office of Lawrence County, Tennessee.

Parcel ID: 023-058.33-000

Commonly known as **101 Alexander Springs Rd Summertown, TN 38483**

The street address and parcel number(s) of the above described property are believed to be correct; however, such references are not a part of the legal description of the property sold herein, and, in the event of any discrepancy, the legal description herein shall control

This sale is subject to tenant(s)/occupant(s) rights in possession.

This sale is subject to all matters shown on any applicable recorded plat; any unpaid taxes; any restrictive covenants, easements, or setback lines that may be applicable; any statutory rights of redemption of any governmental agency, state or federal; any prior liens or encumbrances as well as any priority created by a fixture filing; and to any matter that an accurate survey of the premises might disclose. In addition, the following parties may claim an interest in the above-referenced property: **Nathaniel Morrison and Brittney Morrison.**

Notice of Sale Published On-line at [HTTPS://BetterChoiceNotices.com](https://BetterChoiceNotices.com)

If the United States or the State of Tennessee have any liens or claimed lien(s) on the Property, and are named herein as interested parties, timely notice has been given to the applicable governmental entity, and the sale will be subject to any applicable rights of redemption held by the entity as required by 26 U.S.C. § 7425 and/or Tennessee Code § 67-1-1433.

All right and equity of redemption, statutory and otherwise, homestead, and dower are expressly waived in said Deed of Trust, and the title is believed to be good; however, the undersigned will sell and convey only as Substitute Trustee.

The transfer shall be AS IS, WHERE IS, AND WITH ALL FAULTS, and without warranties of any kind, express or implied, as to the condition of the Property and the improvements located thereon, including merchantability or fitness for particular purpose. Trustee shall make no covenant of seisin or warranty of title, express or implied, and will sell and convey the subject real property by Substitute Trustee's Deed only.

The right is reserved to adjourn the day of the sale to another day, time, and place certain without further publication, upon announcement at the time and place for the sale set forth above.

This property is being sold with the express reservation that the sale is subject to confirmation by the lender or trustee. This sale may be rescinded by the Substitute Trustee at any time.

THIS OFFICE IS ACTING AS A DEBT COLLECTOR AND IS ATTEMPTING TO COLLECT A DEBT. ANY INFORMATION OBTAINED WILL BE USED FOR THAT PURPOSE.

Clear Recon LLC
Substitute Trustee
651 East 4th Street Suite 200
Chattanooga, Tennessee 37403
Phone: (877) 319-8840
File No: 1154-746A

3 Easy Ways To Place Your Ads

- Online at www.lawrencecountyadvocate.net
- Email to jcope@mainstreetmediatn.com
- Stop by our office.

S 1st St, Pulaski, TN 38478:

- Completed PES employment application- available at Pulaski Electric System or online at pesenergize.com
- Current resume
- Copies of any relevant certifications (e.g., ISA Arborist certification, CDL if applicable)

Applications will be accepted until end of business (5:00 PM) Monday, July 13th, 2026. PES reserves the right to close this posting early if a suitable candidate is identified. Pulaski Electric System is an Equal Opportunity Employer. All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, disability, or any other characteristic protected by applicable law.

FOR SALE

AUSTRALIAN SHEPHERD PUPPIES, 6 weeks old til June 25. Ready to go \$175. Joe Gingerich, 4444 Muckle Branch Rd., Ethridge, TN, 38456.

FOR SALE: Truck and Camper, Ford 250-Gas-Starts, runs good, , A/C, King Cab \$3000. 2001 Keystone Camper-50 amp-Washer hook-up, \$10,000. (931) 629-1622.

YARD SALE

YARD SALE in basement July 9th, 10th, 11th at 122 Barnett Rd., Lawrenceburg. 7:00 til 5:00. Rain or shine.

PUBLIC NOTICE

DANIEL TOUGHETT

In Case No26-168 Chancery Court, Columbia, Tennessee.

Marissa Danielle Gerig, Plaintiff.

Vs

Daniel Toughett, Defendant.

In the above styled cause, it satisfactorily appears from allegations properly sworn to that you, the said Daniel Toughett are a Non-Resident of the State of Tennessee, so that ordinary process of this Court cannot be served on you. Upon Motion, it is therefore ordered that publication be made for you for 4 consecutive weeks in Lawrence County Advocate a newspaper of general circulation, published in Lawrenceburg, Lawrence County, Tennessee, notifying you to file a written plea or answer to the complaint in this cause with the Court at the Courthouse in Columbia, Tennessee, and serve a copy thereof with Plaintiff's attorney, Gene Hallworth, of Columbia, Tennessee, on or before 30 days from July 16, 2026. And if you fail to do so, the Plaintiff will apply to the Court for judgment by default against you for the

relief demanded in the complaint and this cause will be set for hearing, ex parte, at Columbia, Tennessee.

This the 17th day of June, 2026.

Larry M. Roe, Jr.

Clerk & Master

Gene Hallworth

Sol's for Plaintiff

This notice to be run Four Consecutive Weeks June 24, 2026, July 1, 2026, July 8, 2026, July 15, 2026

IN THE PROBATE COURT OF LAWRENCE COUNTY, TENNESSEE

NOTICE TO CREDITORS

CASE NO.: P-26-3262

As Required by Chapter

No. 886 Public Acts of Tennessee 2012,

TCA §30-2-306(b))

IN THE MATTER OF THE ESTATE OF: Merinda Hendrix Gieske, Deceased

Resident of Lawrence County, Tennessee

Notice is hereby given that on the 24th day of June, 2026, Letters Testamentary, in the respect of the Estate of Merinda Hendrix Gieske who died May 29, 2026, were issued to the undersigned by the Probate Court of Lawrence County, Tennessee. All persons, resident and non-resident, having claims, matured or unmatured, against the Estate, are required to file the same with the Clerk of the above-named Court on or before the earlier of the dates prescribed in (I) or (2) otherwise their claims will be forever barred: (1) (A) Four (4) months from the date of the first publication (or posting, as the case may be) of this notice if the creditor received an actual copy of this notice to creditors at least sixty (60) days before date that is four (4) months from the date of the first publication (or posting); or (B) Sixty (60) days from the date of the creditor received an actual copy of the notice to creditors, if the creditors received the copy of the notice less than sixty (60) days prior to the date that is (4) months from the date of the first publication (or posting) as described in (I)(A); or (2) Twelve (12) months from the decedent's date of death.

This the 23rd day of June, 2026

Gina L. Haddix

Deanna G. Gieske

Kristy

Clerk & Master

Sheila

Workman

Deputy Clerk

Ryan P. Durham,

Durham Law, PLLC

P.O. Box 1122

Lawrenceburg, TN 38464

Run dates: July 8, 2026 and July 15, 2026

Make the smart and ONLY CHOICE when tackling your roof!



FREE ESTIMATE 1.833.506.1117

Expires 12/31/2023

Limited Time Offer! SAVE! Up to 50% OFF ON YOUR INSTALLATION TAKE AN ADDITIONAL 10% OFF

Additional savings for military, health workers and first responders

MADE IN THE U.S.A.

All classified ads must be submitted by 2:30 PM on Thursday.

WILLIAMS PLUMBING SERVICE

GREAT RATES ~ GREAT SERVICE!

- Hot Water Heaters
- Busted Pipes Fixes
- Commodos & Seals
- Pipe Insulation
- Faucet Repair
- Drains

931-242-2443

IN THE GENERAL SESSIONS COURT FOR LAWRENCE COUNTY, TENNESSEE

Case No. 50GS1-2026-CV-46501

JESSICA NUNES & PAUL WELSH v. GRACE YOUNG & CHRISTOPHER HIGDON

NOTICE OF SERVICE BY PUBLICATION

To: Grace Young & Christopher Higdon

A Petition has been filed against you in the General Sessions Court of Lawrence County, Tennessee, Case No. 50GS1-2026-CV-46501. You must file an Answer or otherwise respond **within 30 days** from the last date of publication. Failure to respond may result in a default judgment.

It is further ordered that this notice shall be published in The Advocate, a weekly newspaper of general circulation in Lawrence County, once weekly for **four consecutive weeks** beginning on the 24th day of June, 2026.

Issued by: **Debbie Riddle, Clerk**, Lawrence County General Sessions Court
240 West Gaines St., Lawrenceburg, TN 38464

When you need to know now

lawrencecountyadvocate.net

✕

@LCoAdvocate



Lawrence County Advocate

BUSINESS AND ECONOMICS

NOTICE OF EARLY VOTING STATE PRIMARY AND STATE AND COUNTY GENERAL ELECTION Thursday, August 6, 2026

The Lewis County Election Commission will conduct **EARLY VOTING** for the August 6, 2026, State Primary and State and Lewis County General Election. Any properly registered voter may cast a ballot by personal appearance at the Election Commission Office located at 35 Smith Avenue, Hohenwald, TN, beginning on **Friday, July 17, 2026, and ending on Saturday August 1, 2026.**

Early Voting Days/Times			
Friday / July 17	8:00 a.m. – 4:00 p.m.	Saturday, July 18	8:00 a.m. – 12:00 (NOON)
Mon. – Fri. / July 20-24	8:00 a.m. – 4:00 p.m.	Saturday, July 25	8:00 a.m. – 12:00 (NOON)
Mon. – Fri. / July 27-31	8:00 a.m. – 4:00 p.m.	Saturday, Aug. 1	8:00 a.m. – 12:00 (NOON)

***VOTING ABSENTEE BY MAIL:** A voter must **MEET CERTAIN LEGAL QUALIFICATIONS** to vote an absentee ballot by mail. A voter desiring to vote absentee by mail, may either be in person at the Lewis County Election Commission office, or by mail, request an application for an absentee ballot. Such request for application must be received no later than **Monday, July 27, 2026.** A request received by mail will serve as an application for ballot **ONLY** if it contains **ALL** the following:

- Name of the voter (as registered)
- Voter's legal residence (911 address)
- Voter's social security number
- Address to mail the ballot to (if different from residence address)
- Election(s) the voter wishes to vote in
- Reason the voter wishes to vote absentee by-mail
- Request must be signed by the voter

IMPORTANT: If you don't vote during Early Voting OR absentee by mail, you MUST vote at your precinct on ELECTION DAY !!

***CHANGE OF ADDRESS DEADLINE: August 1, 2026.** Pursuant to T.C.A. §2-2-109 (a), the last time to change your address inside your county of registration is the close of business on the 5th day before Election Day. Voters who have moved within Lewis County may change their address at the Early Voting site or by sending a change of address in writing to the Lewis County Election Commission office, 35 Smith Avenue, Hohenwald, TN.

***VOTER REGISTRATION:** Is **CLOSED** until after the August 6, 2026, Election.

- ❖ The Election Commission Office does **NOT** discriminate on the basis of disability. If there are questions about accommodation needed in the voting process, please call (931) 796-0510.

If you vote in person during Early Voting or on Election Day, you **must** present a photo ID issued by the federal or Tennessee state government. These IDs may be current or expired. College student IDs and photo IDs issued by cities, counties and other states will **NOT** be accepted.

To learn more about the law, including exemptions and how to get a free photo ID if you do not have one, visit:

<http://sos.tn.gov/products/elections/what-id-required-when-voting>

Questions? If you have questions regarding the above procedures or about the election process in general, please call the Lewis County Election Commission office at 796-0510. Regular office hours are 8:00 a.m. to 4:30 p.m. weekdays, Monday through Friday.

LEWIS COUNTY ELECTION COMMISSION
Rebecca Rawdon, Chairlady
Robin Davis, Secretary
Frankie Floied, Caleb Thomas, David Thomas
Rusty Isbell, Administrator of Elections
Phone: 931-796-0510
Email: lcelection@outlook.com
Website: <https://www.lewiscountyelection.org/>

OFFICIAL BALLOT FOR LEWIS COUNTY STATE PRIMARY AND STATE AND COUNTY GENERAL ELECTION HELD ON August 6, 2026

Precinct NEWSPAPER
Page 1 of 3

Please use a black or blue ink pen to mark your ballot. To vote for your choice in each contest, completely fill in the box next to your choice.

STATE REPUBLICAN PRIMARY	
GOVERNOR	
Vote for One (1)	
☐ Marsha Blackburn	
☐ Monty Fritts	
☐ John Rose	
☐	Write-in
UNITED STATES SENATE	
Vote for One (1)	
☐ Bill Hagerty	
☐	Write-in
UNITED STATES HOUSE of REPRESENTATIVES District 5	
Vote for One (1)	
☐ Charlie Hatcher	
☐ Andy Ogles	
☐	Write-in
TENNESSEE HOUSE of REPRESENTATIVES District 69	
Vote for One (1)	
☐ Jody Barrett	
☐	Write-in
STATE EXECUTIVE COMMITTEEMAN District 28	
Vote for One (1)	
☐ Dennis Driggers	
☐ Chris Morris	
☐	Write-in

STATE EXECUTIVE COMMITTEEWOMAN District 28	
Vote for One (1)	
☐ Angie McClanahan	
☐	Write-in
STATE DEMOCRATIC PRIMARY	
GOVERNOR	
Vote for One (1)	
☐ Carnita Atwater	
☐ Tim Cyr	
☐ Jerri Green	
☐ Adam "Ditch" Kurtz	
☐ Kevin Lee McCants	
☐	Write-in
UNITED STATES SENATE	
Vote for One (1)	
☐ Marquita Bradshaw	
☐ Maria Brewer	
☐ Kevin Lee McCants	
☐ Civil Miller-Watkins	
☐ Diana Onyejiaka	
☐	Write-in
UNITED STATES HOUSE of REPRESENTATIVES District 5	
Vote for One (1)	
☐ Yolanda Cooper-Sutton	
☐ DeVante R. Hill	
☐ Rachel Hurley	
☐ Carrie Ann Iacomini	
☐ Chaz Molder	
☐	Write-in

TENNESSEE HOUSE of REPRESENTATIVES District 69	
Vote for One (1)	
☐ Van Harris	
☐ Rachael Murray	
☐	Write-in
STATE EXECUTIVE COMMITTEEMAN District 28	
Vote for One (1)	
☐ Seth James Campbell	
☐	Write-in
STATE EXECUTIVE COMMITTEEWOMAN District 28	
Vote for One (1)	
☐ Vicki Hale	
☐	Write-in
STATE AND COUNTY GENERAL	
CIRCUIT COURT JUDGE District 32 Unexpired Term	
Vote for One (1)	
☐ William K. Lane, III Republican Party Nominee	
☐	Write-in
COUNTY MAYOR	
Vote for One (1)	
☐ James "Ryan" Skelton Republican Party Nominee	
☐ Shane Blackwood Independent Candidate	
☐	Write-in
COUNTY COMMISSION District 1	
Vote for One (1)	
☐ Larry F. Pigg Independent Candidate	
☐	Write-in

COUNTY COMMISSION District 2	
Vote for One (1)	
☐ Brian Peery Independent Candidate	
☐	Write-in
COUNTY COMMISSION District 3	
Vote for One (1)	
☐ Timmie Hinson Independent Candidate	
☐	Write-in
COUNTY COMMISSION District 4	
Vote for One (1)	
☐ Kyle Bobo Republican Party Nominee	
☐ Jared Murray Democratic Party Nominee	
☐	Write-in
COUNTY COMMISSION District 5	
Vote for One (1)	
☐ Patrick O. Halfacre II Republican Party Nominee	
☐	Write-in
COUNTY COMMISSION District 6	
Vote for One (1)	
☐ Terry Wayne Barnes Republican Party Nominee	
☐ Mike Clay Democratic Party Nominee	
☐ Aren Ragsdale Independent Candidate	
☐	Write-in

COUNTY COMMISSION District 7	
Vote for One (1)	
☐ Abraxas Roden Republican Party Nominee	
☐ Bradley Loveless Independent Candidate	
☐	Write-in
COUNTY COMMISSION District 8	
Vote for One (1)	
☐ Larry Wayne Harper Republican Party Nominee	
☐ Billy W. Dyer Independent Candidate	
☐	Write-in
COUNTY COMMISSION District 9	
Vote for One (1)	
☐ Caleb Feichtinger Republican Party Nominee	
☐	Write-in
COUNTY TRUSTEE	
Vote for One (1)	
☐ Mike Webb Republican Party Nominee	
☐	Write-in
SHERIFF	
Vote for One (1)	
☐ Matt Tiller Republican Party Nominee	
☐	Write-in
CIRCUIT COURT CLERK	
Vote for One (1)	
☐ Kayla Hinson Independent Candidate	
☐	Write-in

COUNTY CLERK	
Vote for One (1)	
☐ Sandra Clayton Independent Candidate	
☐	Write-in
REGISTER of DEEDS	
Vote for One (1)	
☐ Cheryl Staggs Independent Candidate	
☐	Write-in
SCHOOL BOARD District 1	
Vote for One (1)	
☐ Cassie Pigg Couch Republican Party Nominee	
☐	Write-in
SCHOOL BOARD District 3	
Vote for One (1)	
☐ Lindsey Alford Himes Republican Party Nominee	
☐	Write-in
SCHOOL BOARD District 5	
Vote for One (1)	
☐ Matthew Adkins Republican Party Nominee	
☐	Write-in
SCHOOL BOARD District 7	
Vote for One (1)	
☐ Blake Farr Independent Candidate	
☐	Write-in
SCHOOL BOARD District 9	
Vote for One (1)	
☐ Cody Mitchell Republican Party Nominee	
☐	Write-in

CONSTABLE District 1	
Vote for One (1)	
No Candidate Qualified	
☐	Write-in
CONSTABLE District 2	
Vote for One (1)	
☐ Donn Kraemer Republican Party Nominee	
☐	Write-in
CONSTABLE District 3	
Vote for One (1)	
☐ Braxton Best Independent Candidate	
☐ Lawrence A. Kinzie Independent Candidate	
☐	Write-in
CONSTABLE District 4	
Vote for One (1)	
☐ Jonathan Pitts Republican Party Nominee	
☐	Write-in
CONSTABLE District 5	
Vote for One (1)	
☐ Ian Leadon Independent Candidate	
☐	Write-in
CONSTABLE District 6	
Vote for One (1)	
No Candidate Qualified	
☐	Write-in
CONSTABLE District 7	
Vote for One (1)	
No Candidate Qualified	
☐	Write-in

CONSTABLE District 8	
Vote for One (1)	
No Candidate Qualified	
☐	Write-in
CONSTABLE District 9	
Vote for One (1)	
☐ Ryan Johnston Republican Party Nominee	
☐	Write-in
JUDICIAL RETENTION QUESTIONS	
Supreme Court - At Large Kyle A. Hixson	
Vote for One (1)	
Shall Kyle A. Hixson be retained in office as a Judge of the Supreme Court, At Large, or be replaced?	
☐ Retain	
☐ Replace	
Supreme Court - At Large Mary L. Wagner	
Vote for One (1)	
Shall Mary L. Wagner be retained in office as a Judge of the Supreme Court, At Large, or be replaced?	
☐ Retain	
☐ Replace	
Court of Appeals - Eastern Division William E. Phillips II	
Vote for One (1)	
Shall William E. Phillips II be retained in office as a Judge of the Court of Appeals, Eastern Division, or be replaced?	
☐ Retain	
☐ Replace	

Court of Appeals - Western Division Steve Maroney	
Vote for One (1)	
Shall Steve Maroney be retained in office as a Judge of the Court of Appeals, Western Division, or be replaced?	
☐ Retain	
☐ Replace	
Court of Appeals - Western Division Valerie L. Smith	
Vote for One (1)	
Shall Valerie L. Smith be retained in office as a Judge of the Court of Appeals, Western Division, or be replaced?	
☐ Retain	
☐ Replace	
Court of Criminal Appeals - Eastern Division Stacy L. Street	
Vote for One (1)	
Shall Stacy L. Street be retained in office as a Judge of the Court of Criminal Appeals, Eastern Division, or be replaced?	
☐ Retain	
☐ Replace	
Court of Criminal Appeals - Eastern Division Steven W. Sword	
Vote for One (1)	
Shall Steven W. Sword be retained in office as a Judge of the Court of Criminal Appeals, Eastern Division, or be replaced?	
☐ Retain	
☐ Replace	

PUBLIC NOTICE

The Lewis County Board of Commissioners will not be meeting on the third Monday July.

Instead, they will be meeting on Monday, July 27, 2026 in order to vote on the Fiscal Year 2027 budget, while conducting other business.

This meeting will start at 6:00pm in the Commission Chambers of the historic Courthouse. As always, this meeting is open to the public, and everyone is welcome to attend.

Jonah Keltner
Lewis County Mayor

NOTICE OF BID

The Lewis County Highway Department will be accepting bids for chip seal on .4 mile of county road. Contact the highway department at 931-796-2287 or email lhcd@lewishwytn.com for road location and specification sheet. Sealed bids will be opened on July 13, 2026 at 10:00 a.m. at the office of the Lewis County Highway Department, 327 Buffalo Rd., Hohenwald. Bids will not be accepted via fax or email. The Lewis County Highway Department does not discriminate based on race, color or national origin in federal or state sponsored programs pursuant to Title VI of the Civil Rights Act of 1964. We reserve the right to accept or reject bids.

Kerry Cagle
Lewis County Highway Commissioner

NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED

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 Sunray HHA TN, LLC, a/an proposed home health agency owned by Sunray HHA TN, LLC, with an ownership type of Limited Liability Company (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 limited to home infusion services. The project will serve a proposed service area of 95 counties: Anderson, Bedford, Benton, Bledsoe, Blount, Bradley, Campbell, Cannon, Carroll, Carter, Cheatham, Chester, Claiborne, Clay, Cocke, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Dyer, Fayette, Fentress, Franklin, Gibson, Giles, Grainger, Greene, Grundy, Hamblen, Hamilton, Hancock, Hardeman, Hardin, Hawkins, Haywood, Henderson, Henry, Hickman, Houston, Humphreys, Jackson, Jefferson, Johnson, Knox, Lake, Lauderdale, Lawrence, Lewis, Lincoln, Loudon, Macon, Madison, Marion, Marshall, Maury, McMinn, McNairy, Meigs, Monroe, Montgomery, Moore, Morgan, Obion, Overton, Perry, Pickett, Polk, Putnam, Rhea, Roane, Robertson, Rutherford, Scott, Sequatchie, Sevier, Shelby, Smith, Stewart, Sullivan, Sumner, Tipton, Trousdale, Unicoi, Union, Van Buren, Warren, Washington, Wayne, Weakley, White, Williamson, and Wilson Counties. The address of the project will be 740 Cool Springs Blvd., Suite 120, Office 1, Franklin, Williamson County, Tennessee, 37067. The estimated project cost will be \$202,418. The anticipated date of filing the application is 08/01/2026. The contact person for this project is Mr. Michael Brent who may be reached at Bradley.Arant@boults.com or by phone at 615-252-2361. 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, 503 Deaderick Street, Nashville, TN 37243 or email at hbsa.staff@tn.gov.

www.elkvalleytimes.com

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CLASSIFIEDS

CALL TENNADS

105 ANNOUNCEMENTS

All residential real estate advertised herein is subject to the Federal Fair Housing Act and applicable state and local laws. The Fair Housing Act makes it illegal to advertise "any preference, limitation, discrimination because of race, color, religion, sex, handicap, familial status, or national origin, or intention to make any such preference, limitation or discrimination."

We will not knowingly accept any advertising for residential real estate that appears to or violate federal and/or state and local law.

CLASSIFIED ERROR RESPONSIBILITY
We take great care to avoid typographical errors. However, in the event of an error, we are responsible only for the first incorrect insertion of an ad. We do not assume any responsibility, for any reason, for an error in an ad beyond the cost of the ad itself. Management reserves the right to reject, revise & properly classify all advertisements. Ad position has no bearing on the results you receive and cannot be guaranteed.

For Your Convenience We Accept

AMERICAN EXPRESS Cards VISA MasterCard DISCOVER NOVUS

for ALL PURCHASES including: Classified, Advertising, Book Sales, Printing & Subscriptions.

220 HOUSES FOR RENT

2 Br 1 Ba, no pets, appliances are included, covered carport, \$1200/month
Fayetteville Area
(931) 675-4743

490 GARAGE & RUMMAGE SALES

Big 3 Family Yard Sale
Fri, Sat & Sun.
24865 Morrow Rd.
Ardmore, TN behind Country Club next to Dog Day Flea Market. Glassware, Jewelry, Cast Iron, Tools, Yard Tools, Hand Tools, Cookware, Pots and Pans, Fishing Stuff, Lures, Rod and Reels, Old Tools, Old Glassware, Knives, Sports Stuff, Toys, Antiques, Old Iron Wheels, Signs, Hardware, Goats, and Lots of Neat Stuff!

530 MISCELLANEOUS FOR SALE

Moving Sale
Tulahoma News
Come to Front Office
505 Lakeway Place
Monday - Friday
9 - 11 and 1 - 3
We have lots of the following:
Desks and Chairs
Filing Cabinets
Breakroom Tables and Worktables and Shelves
Printers, Copiers, Fax Machines and Microfilm
Readers, Newspaper racks and Carts
Wooden and Plastic Pallets
End rolls of newsprint paper

605 SALES

WE BUY JUNK CARS AND TRUCKS!
We also buy running vehicles. Will remove vehicles from your yard!
(931) 993-4007

720 WANTED TO BUY AUTOS

WE BUY ALL VEHICLES!
All Kinds & Types, running or not! We can also remove your junk cars.
(931) 993-4007

900 STATEWIDES

Auctions
GET THE WORD OUT about your next auction! Save Time & \$\$\$! One Call For All. Your ad can appear in this newspaper + 103 other TN newspapers. For more info, contact this newspaper's classified dept. or call Becky Moats

900 STATEWIDES

931-624-8916.
Cable / Satellite TV / Wireless

Choose EarthLink Fiber Internet for speeds up to 5 Gigs, no data caps, no throttling. Prices starting at \$54.95. Plus, a \$100 gift card when you make the switch. Call 1-855-481-3340

Get Boost Infinite! Unlimited Talk, Text and Data For Just \$25/mo! The Power Of 3 5G Networks. One Low Price! Call Today and Get The Latest iPhone Every Year On Us! 855-454-6457

DIRECTV- All your entertainment. Nothing on your roof! Sign up for Direct and get your first free months of Max, Paramount+, Showtime, Starz, MGM+ and Cinemax included. Choice package \$84.99/mo. Some restrictions apply. Call DIRECTV 1-844-230-4803

Get DISH Satellite TV + Internet! Free Install. Free HD-DVR Upgrade. 8 0 0 0 0 0 On Demand Movies. Plus Limited Time Up To \$600 In Gift Cards. Call Today! 1-844-274-6074

Health / Beauty

Attention: VIAGRA and CIALIS USERS! A cheaper alternative to high drugstore prices! 50 Pill Special - Only \$99! 100% guaranteed. CALL NOW : 1-877-691-6412.

Safe Step Stairlifts. Enjoy greater independence and stay in the home you love. Feel safe on every level. \$750 off plus FREE installation. Made in the U.S.A. Call today for a free quote. 1-866-432-3409

DENTAL INSURANCE from Physicians Mutual Insurance Company. Coverage for 400 plus procedures. Real dental insurance - NOT just a discount plan. Do not wait! Call now! Get your FREE Dental Information Kit with all the details!
1-844-278-8285
www.dental50plus.com/tncpress #6258

Home Improvement

Olshan Foundation Solutions. Your trusted foundation repair experts since 1933. Foundation repair. Crawl space recovery. Basement waterproofing. Water management and more. Free evaluation. Limited time up to \$250 off foundation repair. Call Olshan 1-866-265-5932

Prepare for power outages today with a Generac Home Standby Generator. Act now to receive a FREE 5-Year warranty with qualifying purchase. Call

900 STATEWIDES

1-888-869-5542 today to schedule a free quote. It's not just a generator. It's a power move.

Wanted - To Buy

We Buy Houses for Cash AS IS! No repairs. No fuss. Any condition. Easy three step process: Call, get cash offer and get paid. Get your fair cash offer today by calling Liz Buys Houses: 1-877-551-1426
Advertise Throughout Tennessee
YOUR LOW COST ADVERTISING Solution! One call & your 25 word ad will appear in 104 Tennessee newspapers for \$275/wk or 46 Middle TN newspapers for \$120/wk. Call this newspaper's classified advertising dept. or go to www.tnpress.com

To Place Your Ad In Classified Call:
CALL TENNADS
1-931-455-4545 ext. 2

NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED

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 Sunray HHA TN, LLC, a/an proposed home health agency owned by Sunray HHA TN, LLC, with an ownership type of Limited Liability Company (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 limited to home infusion services. The project will serve a proposed service area of 95 counties: Anderson, Bedford, Benton, Bledsoe, Blount, Bradley, Campbell, Cannon, Carroll, Carter, Cheatham, Chester, Claiborne, Clay, Cocke, Coffee, Crockett, Cumberland, Grundy, Decatur, DeKalb, Dickson, Dyer, Fayette, Fentress, Franklin, Gibson, Giles, Grainger, Greene, Grundy, Hamblen, Hamilton, Hancock, Hardeman, Hardin, Hawkins, Haywood, Henderson, Henry, Hickman, Houston, Humphreys, Jackson, Jefferson, Johnson, Knox, Lake, Lauderdale, Lawrence, Lewis, Lincoln, Loudon, Macon, Madison, Marion, Marshall, Maury, McMinn, McNairy, Meigs, Monroe, Montgomery, Moore, Morgan, Obion, Overton, Perry, Pickett, Polk, Putnam, Rhea, Roane, Robertson, Rutherford, Scott, Sequatchie, Sevier, Shelby, Smith, Stewart, Sullivan, Sumner, Tipton, Trousdale, Unicoi, Union, Van Buren, Warren, Washington, Wayne, Weakley, White, Williamson, and Wilson Counties. The address of the project will be 740 Cool Springs Blvd., Suite 120, Office 1, Franklin, Williamson County, Tennessee, 37067. The estimated project cost will be \$202,418. The anticipated date of filing the application is 08/01/2026. The contact person for this project is Mr. Michael Brent who may be reached at Bradley Arant Boult Cummings LLP- 1221 Broadway #2400, Nashville, TN 37203- Contact No. 615-252-2361. 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 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, 503 Deaderick Street, Nashville, TN 37243 or email at hsda.staff@tn.gov.

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43			44		45		47
48		49	50		51		52
53					54		55
56					57		
58					59		

CLUES ACROSS

- Tall, upright post on a boat
- Basics
- Used to refer to cited works
- Folds
- Former UK PM
- Scorch the surface of
- Moved quickly on foot
- Sacred state for a Muslim
- Growl
- Pearl Jam frontman
- Irritating person
- Something requiring a solution
- Firing
- Hazards
- Taiwan capital
- Impudence
- Rock frontman

CLUES DOWN

- One who rides an elephant
- Absence of bacteria
- Soviet Socialist Republic
- Men's fashion accessories
- "Honey" actress Jessica
- Round red root vegetable
- Latin term for "charity"
- Doesn't smell good
- Mental health issue
- Millisecond
- Hairstyle
- Edible starch
- Middle Eastern

CLUES ACROSS

- Protein-rich liquids
- Indian musical pattern
- Cancer and Capricorn
- Country along the Arabian peninsula
- A bend
- Fishes of the herring family
- Antelopes
- Chaos
- Popular music app
- Cooking material
- Musical instrument
- San Diego ballplayers
- Small amounts
- Poured
- Fabric
- Food option
- Finger millet
- The U. of Miami mascot is one
- Alberta, Canada river
- Canadian flyers
- Dry white wine drink

LAST WEEK'S ANSWERS

TEGG	WTV	TRAW
ABOUT	ANA	HEBE
TABLET	RUM	ELIS
SNIPES	TMP	NIBS
	TIMEPIECES	
HIPHONE	ERRRED	
ADAPTED	DE	
HOLLA	SELWA	
	HAD	CHILLEAN
GUARANTINE		
SUBR	CIA	GLADES
PIAS	HAP	SAFARI
ANNE	ELT	SARAN
ESSS	SSS	RISE

Legals

IN THE CHANCERY COURT FOR THE FOURTEENTH JUDICIAL DISTRICT MANCHESTER, COFFEE COUNTY, TENNESSEE
Case No. 25CV-203
IN RE:
THE ADOPTION OF:
PENILOPE DAWN BRIANN TABER, d/o/b
February 24, 2017,
By:
DUSTIN CHASE KILGORE and wife, LITISHA MARIE CHURCH KILGORE, Petitioners,
vs.
SHAON WILLIAM HARRIS and ALEXIS BRIANN TABER, Respondents.
NONRESIDENT NOTICE

In this cause, it appearing to my satisfaction from the Petitioners' Petition for Termination of Parental Rights and for Adoption of a Related Child, which is sworn to, that the whereabouts and residence of the Respondent, SHAON WILLIAM HARRIS, are unknown and cannot be ascertained upon diligent inquiry so that ordinary process of law can be served upon him, it is therefore ordered that the Respondent, SHAON WILLIAM HARRIS, enter an appearance before the Chancery Court of Coffee County, Tennessee, on or before Friday, July 24th, 2026, and plead answer to the Petitioners' Petition, or the same will be taken for confessed and the cause set for hearing ex parte.

It is further ordered that a copy of this notice be published for four consecutive weeks in The Elk Valley Times, a newspaper published in Lincoln County, Tennessee.
APPROVED FOR ENTRY:
ROBERTSON, WORSHAM, GREGORY, GIFFIN & HOSKINS, PLLC
BY: /s/

ON-LINE AUCTION ONLY CHANCERY SALE OF REAL ESTATE
210 WALLACE DRIVE, FAYETTEVILLE, TENNESSEE

STATE OF TENNESSEE DEPARTMENT OF HUMAN SERVICES, PETITIONER, VS

DEBORAH LAMBRIX, RESPONDENT.
CASE NO. 286

In obedience to a decree of the Chancery Court at Fayetteville, Tennessee, made in the above styled action on the 16th day of June, 2026, entered in Minute Book 205, Page 262, and order dated June 24, 2026 and entered in Minute Book 205, page 306, I will on Thursday, July 30, 2026 sell on-line, with sale ending at 7:00 pm, to the highest and best bidder for cash, (except that only 10% of the purchase consideration will be required on the date of sale and remainder upon confirmation of the sale) the following described Real Estate. Said Chancery Court Sale will be conducted electronically, and you must register and bid on-line at www.vanmassey.com. A buyer's premium will apply and be added by Van Massey Realty and Auction Company. Said

MICHAEL E. GIFFIN
BPR# 014320
Attorney for Petitioners
105 W. Lincoln St.
P. O. Box 790
Tulahoma, Tennessee 37388
Office: (931) 455-5407
Telefax: (931) 454-1287
Email: rwgglawfirm@gmail.com

ORDER FOR PUBLICATION

It appearing to the Court, after reviewing the Petitioners' Motion for Order for Publication and supporting Affidavit, that after due and diligent search and inquiry, the Petitioners, DUSTIN CHASE KILGORE and LITISHA MARIE CHURCH KILGORE, have been unable to determine the whereabouts of the Respondents, SHAON WILLIAM HARRIS ALEXIS BRIANN TABER, and good cause having been shown;

IT IS, THEREFORE, ORDERED, ADJUDGED AND DECREED that the Petitioners, DUSTIN CHASE KILGORE and wife, LITISHA MARIE CHURCH KILGORE, are hereby granted leave to effect constructive service of process upon the Respondents, SHAON WILLIAM HARRIS and ALEXIS BRIANN TABER, by publication in the manner prescribed by law.
APPROVED FOR ENTRY:
ROBERTSON, WORSHAM, GREGORY, GIFFIN & HOSKINS, PLLC
By: /s/ MICHAEL E. GIFFIN
BPR# 014320
Attorney for Petitioners
105 W. Lincoln St.
P. O. Box 790
Tulahoma, Tennessee 37388
Telephone: (931) 455-5407
Telefax: (931) 454-1287
Email: rwgglawfirm@gmail.com
June 24, July 1, 8 and 15, 2026.

Real Estate is located in the 8th Civil District of Lincoln County, Tennessee and described as follows:
Located at 210 Wallace Drive, Fayetteville, Tennessee, more particularly described as being situated on Control Map 102D, Group B, Parcel 019.00, as found of record in the Lincoln County, Tennessee Assessor of Property's Office. And being the same real property conveyed to Deborah Lambrix and Glenn Lemmons, as Tenancy in Common with Rights of Survivorship, by deed dated February 3, 2014, and of record in Book K13, page 668, which can be found in the Register's Office of Lincoln County, Tennessee, to which reference is here had for particulars. The said Deborah Lambrix became the sole owner of the property after Glenn Lemmons died on January 16, 2026. There was no new survey. The above-described property is being sold "as is, where is" subject to all existing utility easements and is also subject to court approval.

This 8th day of July, 2026.

Rebecca Bartlett Carpenter, Special Commissioner
931-993-9339
July 8, 15 and 22, 2026.

Ponting Joins Maury Regional Medical Staff

COLUMBIA, Tenn. — Dr. John Michael "JM" Ponting, a radiology specialist, has joined the medical staff at Maury Regional Medical Center. He is practicing with Southern Radiology Associates.

Ponting earned his medical degree from the University of Kentucky College of Medicine in Lexington, Kentucky. He completed his residency at the Indiana University School of Medicine in Indianapolis, Indiana, and a fellowship in vascular and interventional radiology at Stanford University in Palo Alto, California. He is board-certified in interventional radiology and diagnostic radiology.

At Southern Radiology Associates, Ponting joins Drs. Nathanael Berkley, Brice Boughner, James Butler, Daniel



Dr. John Michael Ponting

Grippo, James D. Grippo, Michael Rissing, David Michael Hellman, Joseph Shackelford, and Marvin Pate, Gary Podgor-ski, Matthew Pratter,

MRMG Urology Welcomes an Advanced Practice Professional

COLUMBIA, Tenn. — Eden L. Leighton, FNP-C, a certified family nurse practitioner, has joined the medical staff at Maury Regional Medical Group Urology.

Leighton earned her undergraduate degree from Martin Methodist College in Pulaski, Tennessee, and her master's degree from the University of North Alabama in Florence, Alabama. Before transitioning into her role as a nurse practitioner, she spent seven years serving patients as a registered nurse at Maury Regional Health.

At MRMG Urology, specialists treat adult patients for a wide range of conditions affecting the urological system, including kidney stones, urinary tract infections, incontinence, male reproductive health, and bladder and prostate cancers.



Eden L Leighton, FNP-C

MRMG Urology is located at 1222 Trotwood Avenue, Suite 601, in Columbia. Office hours are Monday–Thursday from 8 a.m. to 4 p.m. and Friday from 8 a.m. to 2:30 p.m. At the practice, Leighton joins Ian B. Berger, MD, Justin K.

Kropf, MD, Troy R. Larson, MD, Lindsey Chapman, FNP-C and Robert Campbell, FNP-C.

For more information, call 931.840.8547 or visit MauryRegional.com/urology. A physician referral is required.



CLASSIFIEDS

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105 ANNOUNCEMENTS

CLASSIFIED ERROR RESPONSIBILITY
We take great care to avoid typographical errors. However, in the event of an error, we are responsible only for the first incorrect insertion of an ad. We do not assume any responsibility, for any reason, for an error in an ad beyond the cost of the ad itself. Management reserves the right to reject, revise & properly classify all advertisements. Ad position has no bearing on the results you receive and cannot be guaranteed.

490 GARAGE & RUMMAGE SALES

Carport Sale
2500 Veona Caney Road,
Friday/July 10 & Sat/ July 11;
9am to 6pm. Large microwave,Ceiling fan, Toys, Land-scape Rocks, Flowers-Day Lilies, Tall Phlox, Dianthus, More. Rain or Shine.

530 MISCELLANEOUS FOR SALE

FOR SALE
BLACKBERRIES. Fresh Picked every morning. Only \$17 per gallon. Call 931-359-5549 and leave a message and your call will be returned.

530 MISCELLANEOUS FOR SALE

Moving Sale
Tullahoma News Come to Front Office
505 Lakeway Place
Monday - Friday
9 - 11 and 1 - 3
We have lots of the following:
Desks and Chairs
Filing Cabinets
Breakroom Tables and
Worktables and Shelves
Printers, Copiers, Fax Ma-chines and Microfilm Readers, Newspaper racks and Carts
Wooden and Plastic Pallets
End rolls of newsprint paper

280 HOUSES FOR SALE

In search of the owner of a mobile home abandoned on my property. VIN# TNFLV26A 50086RL12. Please contact Edna at 423-902-0507.

720 WANTED TO BUY- AUTOS

WE BUY ALL VEHICLES!
All Kinds & Types, running or not! We can also remove your junk cars. (931) 993-4007

NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED
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 Sunray HHA TN, LLC, a/an proposed home health agency owned by Sunray HHA TN, LLC, with an ownership type of Limited Liability Company (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 limited to home infusion services. The project will serve a proposed service area of 95 counties: Anderson, Bedford, Benton, Bledsoe, Blount, Bradley, Campbell, Cannon, Carroll, Carter, Cheatham, Chester, Claiborne, Clay, Cocke, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Dyer, Fayette, Fentress, Franklin, Gibson, Giles, Grainger, Greene, Grundy, Hamblen, Hamilton, Hancock, Hardeman, Hardin, Hawkins, Haywood, Henderson, Henry, Hickman, Houston, Humphreys, Jackson, Jefferson, Johnson, Knox, Lake, Lauderdale, Lawrence, Lewis, Lincoln, Loudon, Macon, Madison, Marion, Marshall, Maury, McMinn, McNairy, Meigs, Monroe, Montgomery, Moore, Morgan, Obion, Overton, Perry, Pickett, Polk, Putnam, Rhea, Roane, Robertson, Rutherford, Scott, Sequatchie, Sevier, Shelby, Smith, Stewart, Sullivan, Sumner, Tipton, Trousdale, Unicoi, Union, Van Buren, Warren, Washington, Wayne, Weakley, White, Williamson, and Wilson Counties. The address of the project will be 740 Cool Springs Blvd., Suite 120, Office 1, Franklin, Williamson County, Tennessee, 37067. The estimated project cost will be \$202,418. The anticipated date of filing the application is 08/01/2026. The contact person for this project is Mr. Michael Brent who may be reached at Bradley Arant Boult Cummings LLP- 1221 Broadway #2400, Nashville, TN 37203- Contact No. 615-252-2361. 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, 503 Deaderick Street, Nashville, TN 37243 or email at hsd.a.staff@tn.gov.

CLUES ACROSS

1. Tall, upright post on a boat
5. Basics
9. Used to refer to cited works
11. Folds
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19. Particles
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Durst

CLUES DOWN

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2. Absence of bacteria
3. Soviet Socialist Republic
4. Men's fashion accessories
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6. Round red root vegetable
7. Latin term for "charity"
8. Doesn't smell good
9. Mental health issue
10. Millisecond
11. Hairstyle
12. Edible starch
14. Middle Eastern

military title
15. Protein-rich liquids
18. Indian musical pattern
20. Cancer and Capricorn
24. Country along the Arabian peninsula
26. A bend
28. Fishes of the herring family
30. Antelopes
32. Chaos
34. Popular music app
35. Cooking material
37. Musical instrument
38. San Diego ball-players
40. Small amounts
42. Poured
43. Fabric
45. Food option
47. Finger millet
49. The U. of Miami mascot is one
50. Alberta, Canada river
51. Canadian flyers
55. Dry white wine drink

LAST WEEK'S ANSWERS

T	E	G		M	T	V	T	R	A	M
A	B	O	U	T	A	H	A	H	E	B
T	A	B	L	E	T	R	U	M	C	L
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B	U	S		C	L	A	S			
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B	E	S		A	S					

Classifieds

To Advertise, visit our website: **Classifieds.columbiadailyherald.com**

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- Business & Services email: **ColumbiaBusSer@gannett.com**
- To post job openings, visit: **Columbiadailyherald.com/jobs**

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All classified ads are subject to the applicable rate card, copies of which are available from our Advertising Dept. All ads are subject to approval before publication. The Columbia Daily Herald reserves the right to edit, refuse, reject, classify or cancel any ad at any time. Errors must be reported in the first day of publication. The Columbia Daily Herald shall not be liable for any loss or expense that results from an error in or omission of an advertisement. No refunds for early cancellation of order.

ANNOUNCE

Announcements

Get Boost Infinite! Unlimited Talk, Text and Data For Just \$25/mo! The Power Of 3 5G Networks, One Low Price! Call Today and Get The Latest iPhone Every Year On Us! 855-454-6457 (TnSCAN)

Attention: VIAGRA and CIALIS USERS! A cheaper alternative to high drugstore prices! 50 Pill Special - Only \$99! 100% guaranteed. CALL NOW: 1-877-691-6412 (TnScan)

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931 626 9083

RENTALS

PUBLISHER'S NOTICE

All real estate advertised herein is subject to the Federal Fair Housing Act, which makes it illegal to advertise any preference, limitation, or discrimination because of race, color, religion, sex, handicap, familial status, or national origin, or intention to make any such preference, limitation, or discrimination. We will not knowingly accept any advertising for real estate which is in violation of the law. All persons are hereby informed that all dwellings advertised are available on an equal opportunity basis.

SPRING CREEK APARTMENTS

**464 SPRING CREEK STREET
CHAPEL HILL TN 37034**

Now Accepting Applications
One & Two Bedroom Apartments
(Income Based Apartments)
Applications available at the complex office or call 931-364-7179.

“This institution is an equal opportunity provider and employer”

PUBLIC NOTICES

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Single Family Rentals

Columbia FOR RENT: 2 and 3 bedroom mobile homes. Utilities included. Also single and double wide mobile home lots for rent. Call 931-381-3873

Public Notices

PROPOSED SUBSTANTIAL AMENDMENT TO THE STATE OF TENNESSEE'S FY 2026-27 ANNUAL ACTION PLAN AND HOME-ARP ALLOCATION PLAN

The State of Tennessee plans to make several substantial amendments to its FY 2026-27 Annual Action Plan (AAP) and HOME-ARP Allocation Plan. The AAP details how the State of Tennessee plans to use federal funding for its Consolidated Planning programs. The U.S. Department of Housing and Urban Development (HUD) has already reviewed and approved the State's FY 2026-27 AAP. The amendment to the FY 2026-27 AAP would allow HOME Rental Development funding to be awarded to subgrantees in the form of a low-interest loan to support the construction of rental units for projects that also have received Low-Income Housing Tax Credit (LIHTC) funding. (This amendment does not prevent organizations from applying for HOME Rental Development funding as a grant, so long as the HOME grant is not combined with LIHTC funding.) The HOME-ARP Program was created to assist people experiencing homelessness, those at risk of experiencing it, and several other qualifying populations with the impacts of the COVID-19 pandemic. The first amendment to the HOME-ARP Allocation Plan would reallocate a total of \$12,450,512.45 from Non-Profit Operating, Non-Profit Capacity Building, Rental Development, and Administration and Planning activities to Supportive Services activities. The second substantial amendment would allow organizations awarded HOME-ARP funding to “prefer” (or use funding preferentially for) Qualifying Population 3 (QP3), people who are fleeing, or attempting to flee domestic violence, dating violence, sexual assault, stalking, or human trafficking. (The second amendment does not prevent organizations serving other QPs from applying for or being awarded funding.) Tennesseans are encouraged to review and make comments on these proposed amendments beginning on July 8, 2026. Links to review the proposed amendments to the FY 2026-27 Annual Action Plan and HOME-ARP Allocation Plan, summaries of the proposed amendments in English and Spanish, and a form to submit comments will be available at <https://thda.org/research-planning/public-notice-and-comment/> from July 8 through August 7, 2026, along with details for an in-person and virtual public hearing about the amendments. For questions and accommodation requests (e.g., requests for assistance due to a disability and/or limited English language proficiency), please email research@thda.org.

Public Notices



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CLASSIFIEDS

760 Aircraft

105 Announcements

780 Antique Vehicles

410 Antiques

210 Apartments For Rent

420 Appliances

745 ATV's

150 Auctions

750 Auto Parts & Accessories

895 Auto Repair

710 Autos for Sale

370 Bicycles

355 Boats & Marine Equipment

430 Building Materials

800 Building & Remodeling

610 Business Opportunity

250 Business Property For Rent

290 Business Property For Sale

380 Camping Equipment

110 Card of Thanks

805 Catering

180 Cemeteries & Lots

595 Child & Elderly Care

601 Clerical

440 Clothing

731 Commercial Vehicles

405 Computers

225 Condos for Rent

283 Condos for Sale

597 Convalescent Care

590 Domestic

810 Draperies

825 Electrical

545 Electronics

600 Employment

455 Exercise Equipment

450 Farm Equipment

300 Farms & Farmland

460 Feed, Seed, Plants

140 Financial

470 Food

608 Food Service

480 Fuel

510 Furniture

490 Garage & Rummage Sales

602 General Jobs

820 General Services

880 Guttering

445 Health & Beauty

500 Heating & Air Conditioning

360 Hobbies & Toys

220 Houses For Rent

280 Houses For Sale

120 In Memory

835 Income Tax Services

830 Insulation

295 Investment Properties

575 Jewelry

620 Jobs Wanted

840 Lawn Care

580 Lawn & Garden Equipment

520 Livestock

845 Locksmith

285 Log Homes

170 Lost & Found

305 Lots & Acreage

560 Machinery & Tools

603 Medical

447 Medical Equipment

530 Miscellaneous For Sale

192 Mobile Homes For Rent

190 Mobile Homes For Sale

194 Mobile Home Sites

740 Motorcycles

540 Musical Merchandise

621 Musicians/Bands

400 Office Equipment

850 Painting

125 Personals

550 Pets & Supplies

855 Photography

890 Plumbing

604 Professional

130 Public Notices

325 Real Estate Wanted

350 Recreational Vehicles

200 Rentals

860 Roofing

230 Rooms For Rent

605 Sales

630 School & Instruction

865 Sewing & Alterations

365 Sports Equipment

733 Sport Utility Vehicles

900 Statewides

160 Swap & Trade

375 Swimming Pools

606 Teaching

533 Tickets

700 Transportation

535 Travel

607 Trucking

730 Trucks & Vans

870 Upholstery

735 Utility Trailers

570 Wanted To Buy

720 Wanted To Buy-Autos

270 Wanted To Rent

105 ANNOUNCEMENTS

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For Your Convenience We Accept

AMERICAN EXPRESS

VISA

MasterCard

DISCOVER

NOVUS

for ALL PURCHASES including: Classified, Advertising, Book Sales, Printing & Subscriptions.

530 MISCELLANEOUS FOR SALE

Moving Sale

Tullahoma News

Come to Front Office

505 Lakeway Place

Monday - Friday

9 - 11 and 1 - 3

We have lots of the following:

Desks and Chairs

Filing Cabinets

Breakroom Tables and Worktables and Shelves

Printers, Copiers, Fax Machines and Microfilm Readers, Newspaper racks and Carts

Wooden and Plastic Pallets

End rolls of newsprint paper

To Place Your Ad In Classified Call:

CALL TENNADS

1-931-455-4545 ext. 2

LEGAL NOTICES

Legals

Chancery Court Moore County, Lynchburg, Tennessee
NOTICE TO CREDITORS
As Required by TCA §30-2-306
Case Number 3339
Estate of: Neal D. Glascoe, Deceased
Notice is hereby given that on June 26, 2026 letters testamentary (or of administration as the case may be) in respect of the estate of Neal D. Glascoe, who died October 28, 2025 were issued to the undersigned by the Clerk & Master of Moore County, Tennessee. All persons, resident and non-resident, having claims, matured or unmatured, against the estate are required to file the same with the Clerk of the above-named Court on or before the earlier of the dates prescribed in (1) or (2) otherwise their claims will be forever barred:
(1) (A) Four (4) months from the date of the first publication (or posting, as the case may be) of this notice if the creditor received an actual copy of this notice to creditors, if the creditor received the copy of the notice less than sixty (60) days prior to the date that is four (4) months from the date of the first publication (or posting) as described in (1)(A); or
(2) Twelve (12) months from the date of the decedent's date of death.
All persons indebted to the above Estate must come forward and make proper settlement with the undersigned at once.
Date: 6/24/26
/s/
Peggy E. Glascoe
Personal Representative
Date: 6/24/24
/s/
John T. Bobo
BOBO, HUNT & WHITE
Attorney for the Estate
111 N. Spring Street, Suite 202
P.O. Box 169
Shelbyville, TN 37162-0169
(931) 684-4611
Date: 6/26/26
/s/
Tammy P. Roberts,
Clerk & Master
P.O. Box 206
Lynchburg, TN 37352
(931) 759-7028
July 2, 9, 2026.

LEGAL NOTICES

Legals

MOORE COUNTY, TENNESSEE
NOTICE OF SUBSTITUTE TRUSTEE'S SALE AND FORECLOSURE WHEREAS, default having been made in payment of the debts and obligation secured to be paid by that certain Deed of Trust dated November 28, 2022, of record in Book T175, Page 445, in the Register's Office of Moore County, Tennessee (the "Deed of Trust"), Juan Manuel Celestino Garcia and Marisela Celestino, Husband and Wife, ("Grantor(s)") conveyed to Geoffrey J. Post, Trustee for Tower Community Bank, certain real property, described below, (the "Property") to secure the payment of a certain obligation described in the Deed of Trust including, without limitation, that evidenced by a certain, notice is hereby given that the entire indebtedness has been declared due and payable and that Buddy B. Presley, Jr., Successor Trustee pursuant to Notice of Substitution of Trustee recorded in Deed Book T189, Page 849, and any successor trustee who may succeed it, pursuant to the power, duty and authority vested in and imposed upon it in the Deed of Trust will on **Friday, August 7, 2026, at 10:00 o'clock a.m. CST, at the North entrance courthouse steps facing Main Street of the Moore County Courthouse at 196 Main St, Lynchburg, TN 37352** offer for sale to the highest and best bidder for cash, and free from any equity of redemption, statutory right of redemption, homestead, dower, curtesy and all other exemptions which are expressly waived in the Deed of Trust, certain real property situated in Moore County, Tennessee, described as follows: **LAND IN MOORE COUNTY, TENNESSEE, BEING LOT NO. 20, OF THE MICHAEL PETTY SUBDIVISION, OF RECORD IN PLAT BOOK 1, PAGE 176, REGISTER'S OFFICE FOR MOORE COUNTY, TENNESSEE, TO WHICH REFERENCE IS HEREBY MADE FOR A MORE COMPLETE AND ACCURATE LEGAL DESCRIPTION OF SAID PROPERTY. Property Address 895 Smith Chapel Drive, Shelbyville, TN 37160. Tax Map Parcel No. 006-003.18.** The sale held pursuant to this Notice may be rescinded at the Successor Trustee's option at any time. The right is reserved to adjourn the day of the sale to another day, time, and place certain without further publication, upon announcement at the time and place for the sale set forth above. In the event of inclement weather, the trustee hereby announces that the sale will be postponed and that notices of said postponement for inclement weather will be mailed to interested parties of record. **NOTICE OF SALE TO PARTIES INTERESTED:** Said sale will be subject to any and all unpaid ad valorem taxes (plus penalty and interest, if any) that may be a lien upon the Property; any and all liens, defects, encumbrances, adverse claims, and other matters which take priority over the Deed of Trust upon which this foreclosure sale is had; any statutory rights of redemption not otherwise waived in the Deed of Trust, including rights of redemption of any governmental agency, state or federal, which might not have been waived by such governmental agency; all notes, stipulations, restrictions, easements, conditions and regulations as set out on recorded plat; any governmental zoning and subdivision ordinances or regulations in effect thereon; the accuracy of the Index Book of the said Register's Office; and any other matters which an accurate survey of the Property might disclose; all other matters which are prior in right to the lien of the Deed of Trust and all matters shown on any applicable plat. The Deed of Trust recites title to the property as unencumbered except as provided above, but Substitute Trustee will make no covenant of seisin or warranty of title, express or implied, and will sell and convey by Trustee's Quitclaim Deed as Substitute Trustee only subject to the above. Further, the transfer shall be "As Is" and without warranty of any kind, express or implied, as to the condition of such property and the improvements located thereon, including merchantability or fitness for particular purpose. The right is reserved to adjourn the day of sale to another date and time without further publication upon announcement at the time set above and to sell to the second highest bidder in the event the highest bidder does not comply with the terms of the sale. **THIS IS AN ATTEMPT TO COLLECT A DEBT, AND ANY INFORMATION OBTAINED WILL BE USED FOR THAT PURPOSE.** Dated this 30 th day of June, 2026. Presley Law Firm, 1384 Gunbarrel Road, Suite A, Chattanooga, Tennessee 37421 (423) 826-1800 Third Party Website: foreclosuretennessee.com Publication Dates: July 9, 16, 23, 2026.
July 9, 16, 23, 2026.

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CLUES ACROSS

1. Tall, upright post on a boat

5. Basics

9. Used to refer to cited works

11. Folds

13. Former UK PM

May

15. Cold region of Russia

16. Standard operating procedure

17. Separating

19. Particles

21. A way to map out

22. Referee declares

23. Beginner

25. Water (Spanish)

26. Gov't lawyers

27. Non-reproductive parts of an organism

29. Spanish friends

31. A type of tree

33. Walk heavily

34. About a wood

36. Free-swimming marine invertebrate

38. Political action committee

39. SB19 hit song

41. Scorch the surface of

43. Moved quickly on foot

44. Sacred state for a Muslim

46. Growl

48. Pearl Jam frontman

52. Irritating person

53. Something requiring a solution

54. Firing

56. Hazards

57. Taiwan capital

58. Impudence

59. Rock frontman

Durst

CLUES DOWN

1. One who rides an elephant

2. Absence of bacteria

3. Soviet Socialist Republic

4. Men's fashion accessories

5. "Honey" actress Jessica

6. Round red root vegetable

7. Latin term for "charity"

8. Doesn't smell good

9. Mental health issue

10. Millisecond

11. Hairstyle

12. Edible starch

14. Middle Eastern

LAST WEEK'S ANSWERS

TEGO ABOUT WYV TRAW

SNIPES IMP NIBS

HIPBONE ERRED

ADAPTED DEY

HOLLA SELMA

CLUE HAPLESS

QUARANTINE

SUBS CIA OLADIES

PIAS HAP SAFARI

ANNE ELI SARAN

CESS Ssa RVISE

SUDOKU

		7		1	3		9
		6	9		1		4
			7	3			
	1					5	8
	4			6			
		2	3	5	8		
	2			3			
9			2				
		5		8			

Answers From Last Week

9	6	4	7	2	5	3	8	1
3	8	2	4	9	1	7	6	5
7	1	5	3	8	6	2	9	4
8	7	6	5	1	3	4	2	9
2	3	9	8	6	4	1	5	7
5	4	1	2	7	9	6	3	8
6	5	8	1	4	2	9	7	3
1	2	3	9	5	7	8	4	6
4	9	7	6	3	8	5	1	2

PUBLIC NOTICES / LEISURE

sudoku Solutions on Page 8

Easy

8			9			3		
1	9	3	4					8
				8			9	7
	5		7		4	2		
	1	2				7	3	
	4	9		3	2	6		
		5	8	7		9		
2		6				8	5	1
9			2		6	4		3

Medium

		5	9	7		4		
7	4						6	5
				2	5			7
						3		
2	3	8	6	4	7			
						2	3	8
		7	6	3		2		
		9						3
1		3		7	5		8	

NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED

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 Sunray HHA TN, LLC, a/an proposed home health agency owned by Sunray HHA TN, LLC, with an ownership type of Limited Liability Company (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 limited to home infusion services. The project will serve a proposed service area of 95 counties: Anderson, Bedford, Benton, Bledsoe, Blount, Bradley, Campbell, Cannon, Carroll, Carter, Cheatham, Chester, Claiborne, Clay, Cocke, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Dyer, Fayette, Fentress, Franklin, Gibson, Giles, Grainger, Greene, Grundy, Hamblen, Hamilton, Hancock, Hardeman, Hardin, Hawkins, Haywood, Henderson, Henry, Hickman, Houston, Humphreys, Jackson, Jefferson, Johnson, Knox, Lake, Lauderdale, Lawrence, Lewis, Lincoln, Loudon, Macon, Madison, Marion, Marshall, Maury, McMinn, McNairy, Meigs, Monroe, Montgomery, Moore, Morgan, Obion, Overton, Perry, Pickett, Polk, Putnam, Rhea, Roane, Robertson, Rutherford, Scott, Sequatchie, Sevier, Shelby, Smith, Stewart, Sullivan, Sumner, Tipton, Trousdale, Unicoi, Union, Van Buren, Warren, Washington, Wayne, Weakley, White, Williamson, and Wilson Counties. The address of the project will be 740 Cool Springs Blvd., Suite 120, Office 1, Franklin, Williamson County, Tennessee, 37067. The estimated project cost will be \$202,418. The anticipated date of filing the application is 08/01/2026. The contact person for this project is Mr. Michael Brent who may be reached at Bradley Arant Boult Cummings LLP- 1221 Broadway #2400, Nashville, TN 37203- Contact No. 615-252-2361. 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, 503 Deaderick Street, Nashville, TN 37243 or email at hsda.staff@tn.gov.

CROSSWORD

PUZZLE NO. 350

ACROSS

- 1. Kitchen gadget
- 6. That woman
- 9. Porky ____
- 12. Ooze out
- 13. " ____ Got a Secret"
- 14. Expert
- 15. Make payment
- 16. Zing
- 17. Ballpoint
- 18. Infants' aprons
- 20. Alone
- 22. More trite
- 25. Glance
- 26. Vatican dweller
- 27. Age
- 29. Sculpture and music
- 33. Eroded
- 34. Bundle of bills
- 35. Be in the red
- 36. Fuss: hyph.
- 38. ____ out (make do)
- 39. Discharge
- 40. Fashion
- 42. Items of value
- 44. Book or movie type: hyph.
- 47. Gator's kin
- 48. Additionally
- 49. Injure

- 51. Sidestep
- 55. Tiny insect
- 56. Fleecy one
- 57. Vocal solos
- 58. Nay's opposite
- 59. Lawn moisture
- 60. Stairs

DOWN

- 1. ____ se
- 2. Woodsman's tool
- 3. Caribbean export
- 4. Tasteworthy
- 5. Fasten again
- 6. Place for a Hula-Hoop
- 7. December 31, e.g.
- 8. Return the favor
- 9. Daddy
- 10. Cake froster
- 11. Well-mannered one
- 19. Made coffee
- 21. Pod vegetable
- 22. Petty quarrel
- 23. Oz-visiting pooch
- 24. Mimicked
- 25. Make beloved
- 28. Acorn's parent
- 30. "When in ____..."
- 31. Taunt
- 32. Places
- 37. ____-limits

1	2	3	4	5		6	7	8		9	10	11
12							13				14	
15							16				17	
				18		19			20	21		
22	23	24					25					
26					27	28			29	30	31	32
33					34					35		
36				37	38				39			
			40	41			42	43				
44	45	46				47						
48				49	50			51		52	53	54
55				56				57				
58				59				60				

- 39. Accompany
- 41. Directed
- 43. Fountain drinks
- 44. Hang around
- 45. Roadway marker
- 46. Small bit
- 47. Ship's hands
- 50. Astonish
- 52. Game cube
- 53. Generation ____
- 54. Dangerous curve

ANSWER TO PUZZLE NO. 350

S	D	E	L	S	W	E	D	A	V	E		
S	V	I	V	E	M	E	T	N	N	A		
E	D	O	D	O	R	A	M	O	O	L		
			C	O	R	C	I	F	I	S		
S	T	E	S	S	A	V	A	F				
L	I	W	E	K	E	O	D	O	L			
E	M	O		D	W	M	I	E				
S	T	R	A	N	O	E	P	O				
			A	E								
L	R	A	V	A		S	B	I				
N	E											
E	A	V	E	L	I	E	D	N	X	E		
G	I	D			R	E	H	R	E	R	A	V

PUBLIC NOTICES

from Page 5

follows:

A certain tract or parcel of land located in the Fourth (4 th) Civil District of Perry County, Tennessee, and being more particularly described as follows, to wit:

BEGINNING at a stake in the edge of a road, and runs thence west 96 feet to a stake in Paul DePreist's line; thence north with said Paul DePreist's line, 196 feet or more, to a stake in Ray Warren' line; thence east 96 feet to a stake; thence south 196 feet, or more, to the beginning.

Being the same property conveyed to Sollie D. Bates and wife, Idell Bates, by warranty deed or Larry Coble and wife, Carolyn Coble, dated September 17, 1973, of record in Deed Book L-13, page 15, in the Register's Office of Perry County, Tennessee. Sollie D. Bates predeceased Idell Bates, and she became the owner of said real estate as the surviving tenant by the entirety. The said Idell Bates is now deceased and pursuant to the Last Will and Testament of

Idell Bates, of record in Book D-30, page 852, in said Register's office, the hereinabove described property was devised to Danny Edward Dabbs.

This property is an improved tract identified as tax map 019J, group B, parcel 014.00, in the office of the Assessor of Property of Perry County, Tennessee. The address of the above-described property is believed to be 93 Breece Drive, Lobelville, Tennessee 37097; but such address is not part of the legal description of the property sold herein, and in the event of any discrepancy, the legal description herein shall control.

Pursuant to T.C.A. 35-5-104, other parties that may have an interest in the tract of land herein described are the following:

1. Perry County Clerk & Master through unpaid taxes assessed as tax map 019J, group B, parcel 014.00, for 2024 county taxes in the amount of \$782.10, plus penalty and interest; and for 2024

city taxes in the amount of \$295.41, plus penalty and interest.

2. Perry County Trustee through unpaid county taxes assessed as tax map 019J, group B, parcel 014.00, for 2025 in the amount of \$575.58, plus penalty and interest.

3. City of Lobelville through unpaid city taxes assessed as tax map 019J, group B, parcel 014.00, for 2025 in the amount of \$192.75, plus penalty and interest.

4. Agreed Judgment in favor of Discovery Bank, Plaintiff, c/o Nathan & Nathan, PC, P.O. Box 1715, Birmingham, AL 35201, filed against Danny E. Dabbs, Defendant, recorded on June 9, 2025, in Book D-47, page 282, in the Register's Office of Perry County, Tennessee.

The sale will be made free from the equity of redemption, homestead, dower and all other rights and exemptions, which were expressly waived under said deed of trust.

Trustee will convey all his right, title and interest,

but without warranties of title.

The sale will be made subject to any and all encumbrances, including but not limited to unpaid taxes; and I will sell and convey as Trustee and not otherwise.

The sale held pursuant to this Notice may be rescinded at the Trustee's option at any time. The right is reserved to adjourn the day of the sale to another day, time and place certain without further publication, upon announcement at the time and place for the sale set forth above.

Third-party internet posting website: foreclosurenennessee.com

THIS IS AN ATTEMPT TO COLLECT A DEBT. ANY INFORMATION

OBTAINED WILL BE USED FOR THAT PURPOSE.

This 1st day of July, 2026.

William E. Bates, Trustee
Bank of Perry County
P.O. Box 341 | Linden, TN 37096

B 7/1 & 7/8

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Wade Mastre, Owner
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• Demolition
• Building Sites
• Dig Basement
• Driveways
• Hauling
Swailey LLC
EXCAVATING
Ph./Fax 931-589-3137 BTFN

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"Experience You Can Trust
At A Price You Can Afford"
Service • Repair • Replacement
Ray Brewer, Jr. 931-796-4584
Owner 931-628-1958

NITTO • TOYO • SUPER SWAMPER • MICHELIN • UNIROYAL • many more
Leeper Tires
New & Used Tires - Custom Wheels
3930 Lower Lick Creek Rd. ZACH & WAYNE LEEPER
LINDEN, TN 931-589-2026
OIL CHANGES & BRAKES OR CELL: 615-336-8656
WHEELS: KMC, EAGLE, AMERICAN RACING...many more

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1220 Squirrel Hollow Dr. | Linden 931-589-2155

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TOD'S MOBILE MECHANIC SERVICE
TOD WILCOX
311 New Era Landing Rd.
Linden, Tenn 37096
Phone: 931-628-4320

DEADLINE TO PLACE/CHANGE AD IN THIS DIRECTORY: 4pm FRIDAY / / / / 931-589-2169

Summer safety risks homeowners often overlook when hosting

Summer is the perfect season for gathering outdoors with friends and family, but if you're a homeowner planning to host barbecues, pool parties or holiday celebrations this year, it's important to consider the potential safety and liability risks that may be affecting your own backyard. A little advance planning can help you ensure that your guests enjoy safe, healthy experiences at your home and leave with only happy memories. According to the U.S. Consumer Product Safety Commission, thousands of injuries each year are linked to fireworks, grills and swimming pools. While most summer gatherings end without incident, Mercury Insurance is encouraging homeowners to remember that smart preparation can help you avoid unfortunate accidents and costly damage. A few simple safety checks can help homeowners create a safer environment for everyone while protecting the property they've worked hard to build.

Set your summer up for success by paying special attention to these five often-overlooked seasonal safety risks.

Guest Injuries and Liability Risks

Since summer gatherings naturally increase foot traffic around a property, it should be safe to walk around. Uneven walkways, loose decking, poor lighting and pet-related incidents can all lead to injuries that homeowners may not anticipate.

Before hosting events, audit your property to repair trip hazards and ensure walkways and outdoor gath-

ering areas are well-lit. If you have pets that may become stressed around large groups, secure them before guests arrive. Since unforeseen events can still occur despite your best efforts, review your liability coverage to understand available protections.

Unsupervised Pool Areas

Swimming pools can provide endless summer fun, but they also present one of the most serious safety risks around the home. Drowning remains a leading cause of accidental death for young children, making active supervision essential whenever children are near water.

If your backyard includes a pool, ensure that gates and barriers are functioning properly, keep rescue equipment nearby and consider pool alarms and self-closing gates for additional protection. Most importantly, never leave children unattended around water.

Backyard Grill Fires

Grilling is a summer tradition, but outdoor cooking equipment can quickly become a fire hazard if used improperly. Placing your grill too close to flammable objects, letting grease build up and leaving the grill unattended can all increase the risk of property damage.

Start by making sure your grill is set up at least 10 feet away from homes, fences and overhangs before you fire it up. Clean grease trays regularly, never leave a grill unattended while cooking and keep a fire extinguisher accessible during outdoor cooking.

Fireworks Too Close to Homes and Landscaping

Fireworks-related fires increase significantly during summer, particularly in dry climates where even one stray spark can ignite vegetation or nearby structures.

The safest option, when possible, is to attend professional displays rather than hosting your own. However, if you're planning on lighting up your skies this summer, follow all local laws and restrictions regarding fireworks and keep your launch site well away from homes, vehicles and dry landscaping. Have a water source readily available when using legal consumer fireworks.

Outdoor Electrical Hazards

Extension cords, decorative lighting, outdoor speakers and fans often receive extra use during summer gatherings. Damaged cords or overloaded outlets can create shock and fire hazards. As you set up your summer entertainment systems, check your equipment to be sure it's rated for outdoor use. Keep electrical connections away from pools and water features, avoid overloading electrical outlets and take a few extra minutes before each gathering to inspect outdoor cords for wear and damage.

"Most homeowners focus on making their gatherings enjoyable, but safety should be part of the preparation process," Anderson said. "Taking a few minutes to identify potential hazards before guests arrive can help prevent accidents and allow everyone to focus on enjoying the season."

District Attorney General Dunaway clarifies new Public Chapter 1100 (deadly force protecting property)

The Tennessee General Assembly passed Public Chapter 1100 this year. The law went into effect on July 1, 2026. This new law deals with the threatening or use of deadly force. I have seen media reports that are inaccurately describing the effect of the new law. My concern is that the general public will rely on the inaccurate media descriptions being disseminated and misunderstand when deadly force can lawfully be threatened or used in Tennessee. I have had many calls from citizens inquiring about this new law. I write here to provide a brief summary of the new law and to clarify when deadly force can be threatened or used.



DUNAWAY

Public Chapter 1100 primarily amends Tennessee Code Annotated § 39-11-614 which is titled "Protection of Property". The current language of the statute (effective until July 1, 2026) authorizes the use of "force" (not deadly force) in certain circumstances in order to protect property. Public Chapter 1100 amends the language to allow the threatening or use of "deadly force" under the following circumstances (but pay close attention to the last condition listed).

A person who is NOT engaged in the commission of a felony or a class A misdemeanor and who is in a place where he or she lawfully resides is justified in using deadly force against another to protect property, IF:

- He or she is in lawful possession of real or personal property and it is reasonable to believe the threatening or use of deadly force is immediately necessary to prevent or terminate a trespass on the land or unlawful interference with the property;
- He or she has been unlawfully dispossessed of real or personal property and the threatening or use of deadly force is reasonably believed necessary to reenter the land or recover the property, if the person threatens or uses deadly force immediately or in fresh pursuit after the dispossession;
- In addition, he or she reasonably believes that deadly force is immediately necessary to prevent another's commission of arson, burglary, robbery, aggravated robbery or aggravated cruelty to animals;
- In addition, he or she reasonably believes that the property cannot be protected or the other person's actions terminated by any other means, AND IN ADDITION
- For deadly force to be threatened or used, there must be imminent (right now) danger of death, serious bodily injury or grave sexual abuse to the person or a third person.

Under the new law, the existence of an imminent risk of death, serious bodily injury or grave sexual abuse to a person MUST be present anytime deadly force is threatened or used... even if the force is being used to protect property.

CRMC Cardiac Imaging moves to Outpatient Imaging Center

Cookeville Regional Medical Center (CRMC) is pleased to announce that as of July 1, CRMC cardiac imaging services has relocated from their space at Tennessee Heart to the Outpatient Imaging Center, 251 W. 3rd St., Cookeville.

This move brings together three essential imaging services under one roof, making it easier than ever for patients throughout the Upper Cumberland region to access the specialized care they need.

Patients visiting the Outpatient Imaging

Center will now find all the following services conveniently available in a single location:

- Outpatient Imaging
- The Breast Center
- Cardiac Imaging

In addition to these three locations, Cookeville Regional also has an Im-

aging Center on its main campus.

CRMC provides a comprehensive suite of advanced services including Cardiac CT, HeartFlow Analysis, Cardiac MRI, Echocardiography (cardiac ultrasound), and Nuclear Medicine.

These services allow CRMC's expert team to detect a wide range of heart conditions with the precision and technology patients deserve and all close to home.

NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED

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 Sunray HHA TN, LLC, a/an proposed home health agency owned by Sunray HHA TN, LLC, with an ownership type of Limited Liability Company (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 limited to home infusion services. The project will serve a proposed service area of 95 counties: Anderson, Bedford, Benton, Bledsoe, Blount, Bradley, Campbell, Cannon, Carroll, Carter, Cheatham, Chester, Claiborne, Clay, Cocke, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Dyer, Fayette, Fentress, Franklin, Gibson, Giles, Grainger, Greene, Grundy, Hamblen, Hamilton, Hancock, Hardeman, Hardin, Hawkins, Haywood, Henderson, Henry, Hickman, Houston, Humphreys, Jackson, Jefferson, Johnson, Knox, Lake, Lauderdale, Lawrence, Lewis, Lincoln, Loudon, Macon, Madison, Marion, Marshall, Maury, McMinn, McNairy, Meigs, Monroe, Montgomery, Moore, Morgan, Obion, Overton, Perry, Pickett, Polk, Putnam, Rhea, Roane, Robertson, Rutherford, Scott, Sequatchie, Sevier, Shelby, Smith, Stewart, Sullivan, Sumner, Tipton, Trousdale, Unicoi, Union, Van Buren, Warren, Washington, Wayne, Weakley, White, Williamson, and Wilson Counties. The address of the project will be 740 Cool Springs Blvd., Suite 120, Office 1, Franklin, Williamson County, Tennessee, 37067. The estimated project cost will be \$202,418. The anticipated date of filing the application is 08/01/2026. The contact person for this project is Mr. Michael Brent who may be reached at Bradley Arant Boult Cummings LLP- 1221 Broadway #2400, Nashville, TN 37203- Contact No. 615-252-2361. 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, 503 Deaderick Street, Nashville, TN 37243 or email at hsda.staff@tn.gov.

FISH DAY!

IT'S TIME TO STOCK YOUR POND!

Delivery will be:

Wednesday, July 22
Livingston 8:45-9:30 @
Overton Farmer's Co-op
Byrdstown 10:00-10:45 @
Pickett Farmer's Co-op
Jamestown 11:30-12:15 @
Fentress Co. Co-op
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SUNDAY JULY 12 STARTING 6PM

FIREWORKS AT DARK

My name is Chris Pryor, and I am proud to announce that I will be running for Pickett County Trustee.

For those who may not know me, I was born and raised right here in Pickett County and graduated from Pickett County High School in 1993. I've been married to my wonderful wife and partner, Natasha Storie Pryor, for 19 great years, and together we have three children: Brody, Nora, and Millie.

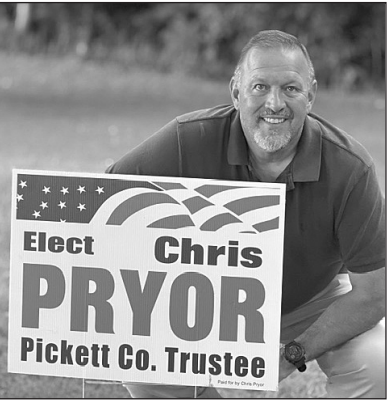
Since Sept. 1, 2007, I have owned and operated a successful business here in Pickett County. Along the way, I've had the privilege of meeting many wonderful customers who have become lifelong friends. These experiences have helped me build strong relationships and a deep understanding of our community.

I am now seeking to continue serving our county in a new way, by working for you, the citizens of Pickett County, as your Trustee. With my experience working with the public, I will strive to make the tax-paying process as simple, efficient, and stress-free as possible. I pledge to treat every citizen and future resident with courtesy, respect, and friendliness.

I humbly ask for your support and your vote, whether during early voting or on Election Day, August 6, 2026.

Thank you for your time and consideration.

Chris Pryor

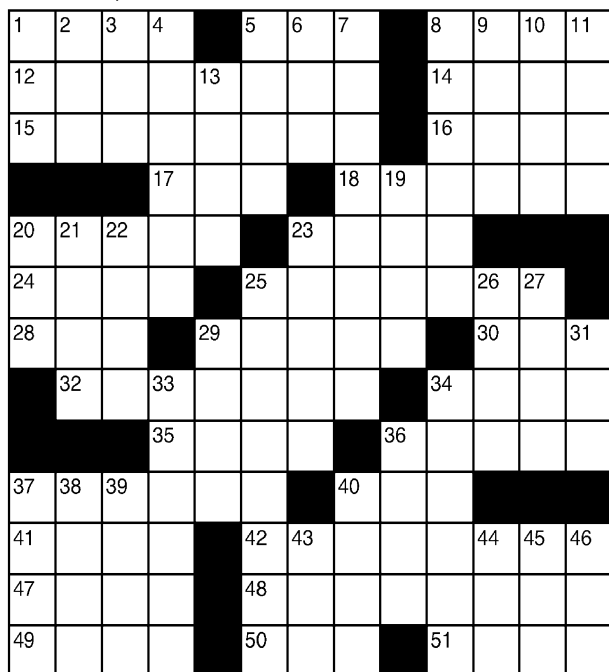


Paid for by the candidate.

King Crossword

ACROSS

- 1 Gas station fixture
5 Doo follower
8 Rabbit's tail
12 Pantene's business
14 Peddled item
15 Figure out
16 "Das Lied von der —"
17 Indian lentil stew
18 iPod accessory
20 Cool veggies
23 1504, in old Rome
24 Fr. holy women
25 Evening affairs
28 Bit of ink
29 "SNL" segments
30 Wager
32 Stockings
34 Ham's dad
35 Resort near Snowbird
36 Tubular pasta
37 As a whole
40 Duo's pronoun
- 41 Hoopster Malone
42 Strongman of myth
47 Needle case
48 Implanted
49 Lavish affection (on)
50 ACLU issues
51 Shakespeare title starter
- 19 Broadcasts
20 Chicago winter hrs.
21 Beehive State
22 High-fat diet
23 Kelly of "One Tree Hill"
25 Courtroom artist
26 Black, in verse
27 Penn or Astin
29 Missile shelter
31 Chance —
33 — Mae (loan offerer)
34 Poet Pablo
36 Brownish purple
37 Scratched (out)
38 Post-WWII alliance
39 Very dry
40 Spheres
43 911 responder
44 "Bad" cholesterol
45 Sushi fish
46 Radical '60s gp.
- DOWN**
1 Third degree?
2 Dubai's country, for short
3 Amp plug-in
4 Lion packs
5 Wonka's creator
6 "— you awake?"
7 Geneticist's study
8 Veer
9 Sugar or starch, for short
10 Language of Pakistan
11 Ticked (off)
13 Tax prep pros



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NOTICE OF MEETING POLK COUNTY 911 DISTRICT BOARD OF DIRECTORS

The Board of Directors of the Polk County 911 Emergency Communications District will meet at 5:00 p.m., August 13, in the District Office, 2009 Highway 64, Ocoee, TN, or such other location that may be announced, where and at which time the Board will consider any matter that may be properly presented. Board members have the right to electronically participate. The public is invited to all meetings. Any person may request an agenda of the meeting by contacting wda-vispolktn911@outlook.com - Rachel Roberts, Secretary-Treasurer, 911 Board of Directors

Notice

NOTICE TO CREDITORS

IN THE MATTER OF: Estate of JAMES DUNN (deceased) Docket No. 2026-PR-31

Notice is hereby given that on the 1st day of July 2026, Letters Testamentary (or of Administration as the case may be) in respect of the estate of James Dunn, deceased, who died March 24, 2026 were issued to the undersigned by the Chancery Court (Probate Division) of Polk County, Tennessee. All persons, resident and non-resident, having claims, matured or un-matured, against the estate are required to file the same with the Clerk of the Chancery Court on or before the earlier of the dates prescribed in (1) or (2), otherwise their claims will be forever barred. (1) (A) Four (4) months from the date of the first publication (or posting, as the case may be) of this notice if the creditor received an actual copy of this notice to creditors at least sixty (60) days before the date that is four (4) months from the date of the first publication (or posting); or (B) Sixty (60) days from the date the creditor received an actual copy of this notice less than sixty (60) days prior to the date that is four (4) months from the date of first publication (or posting) as described in (1) (A); or (2) Twelve (12) months from the decedent's date of death.

This 1st day of July 2026.

(Signed): Personal Representative — Kimberly Ann Wooten

Laura M Crawford, Attorney at Law 337 Main St, P.O. Box 930, Ducktown, TN 37326, Phone: 423-496-3603

Kimberly A. Ingram, Clerk & Master, P.O. Box 689 Benton, TN 37307

Pub dates 7-9, 7-16 2026

Notice

NOTICE TO FURNISHERS OF LABOR

AND MATERIALS TO:

Wright Brothers

Construction Co., Inc.

PROJECT NO.: 70S314-F8-002

CONTRACT NO.: CN262011

COUNTY: Polk

The Tennessee Department of Transportation is about to make final settlement with the contractor for construction of the above numbered project. All persons wishing to file claims pursuant to Section 54-5-122, T.C.A. must file same with the Director of Construction, Tennessee Department of Transportation, Suite 700 James K. Polk Bldg., Nashville, Tennessee 37243-0326, on or before 8/21/2026.

Notice

NOTICE TO CREDITORS

IN THE MATTER OF: Estate of JAVID KELLEY (deceased) Docket No. 2026-PR-30

Notice is hereby given that on the 18th day of June 2026, Letters of Testamentary (or of Administration as the case may be) in respect of the estate of Javid Kelley, deceased, who died May 29, 2026 were issued to the undersigned by the Chancery Court (Probate Division) of Polk County, Tennessee. All persons, resident and non-resident, having claims, matured or un-matured, against the estate are required to file the same with the Clerk of the Chancery Court on or before the earlier of the dates prescribed in (1) or (2), otherwise their claims will be forever barred. (1) (A) Four (4) months from the date of the first publication (or posting, as the case may be) of this notice if the creditor received an actual copy of this notice to creditors at least sixty (60) days before the date that is four (4) months from the date of the first publication (or posting); or (B) Sixty (60) days from the date the creditor received an actual copy of this notice less than sixty (60) days prior to the date that is four (4) months from the date of first publication (or posting) as described in (1) (A); or (2) Twelve (12) months from the decedent's date of death.

This 18th day of June 2026.

(Signed): Personal Representative - Deborah J. Kelley

Eric S. Armstrong, Attorney at Law 275 North Ocoee Street, Suite A, Cleveland, TN 37312, Phone: 423-479-3050

Kimberly A. Ingram, Clerk & Master P.O. Box 689 Benton, TN 37307

Pub dates 7-2, 7-9 2026

Notice

NOTICE TO CREDITORS

ESTATE OF MARY LOU LASSITER (deceased) Docket No. 2026-PR-28

Notice is hereby given that on the 2nd day of June 2026, Letters of Administration in respect of the estate of Mary Lou Lassiter, deceased, who died May 3, 2026 were issued to Sally Toensfeldt by the Chancery Court (Probate Division) of Polk County, Tennessee. All persons, resident and non-resident, having claims, matured or un-matured, against the estate are required to file the same with the Clerk of the Chancery Court on or before the earlier of the dates prescribed in (1) or (2) otherwise their claims will be forever barred:

(1) (A) Four (4) months from the date of the first publication (or posting, as the case may be) of this notice if the creditor received an actual copy of this notice to creditors at least sixty (60) days before the date that is four (4) months from the date of the first publication (or posting); or (B) Sixty (60) days from the date the creditor received an actual copy of this notice less than sixty (60) days prior to the date that is four (4) months from the date of first publication (or posting) as described in (1) (A); or (2) Twelve (12) months from the decedent's date of death.

This 2nd day of June 2026.

Signed Sally Toensfeldt, Administrator

Kimberly A. Ingram Clerk & Master P.O. Box 689 Benton TN 37307

Attorney: Laura M. Crawford 337 Main Street, P.O. Box 930 Ducktown, Tennessee 37326

Pub dates 7-2, 7-9 2026

NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED

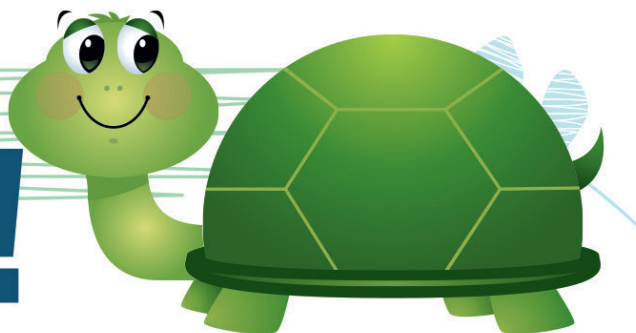
This is to provide official notice to the Health Facilities Commission and all interested parties, in accordance with T.C.A. §68-11-1601 et seq., and the Rules of the Health Facilities Commission, that Sunray HHA TN, LLC, a/an proposed home health agency owned by Sunray HHA TN, LLC, with an ownership type of Limited Liability Company (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 limited to home infusion services. The project will serve a proposed service area of 95 counties: Anderson, Bedford, Benton, Bledsoe, Blount, Bradley, Campbell, Cannon, Carroll, Carter, Cheatham, Chester, Claiborne, Clay, Cocke, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Dyer, Fayette, Fentress, Franklin, Gibson, Giles, Grainger, Greene, Grundy, Hamblen, Hamilton, Hancock, Hardeman, Hardin, Hawkins, Haywood, Henderson, Henry, Hickman, Houston, Humphreys, Jackson, Jefferson, Johnson, Knox, Lake, Lauderdale, Lawrence, Lewis, Lincoln, Loudon, Macon, Madison, Marion, Marshall, Maury, McMinn, McNairy, Meigs, Monroe, Montgomery, Moore, Morgan, Obion, Overton, Perry, Pickett, Polk, Putnam, Rhea, Roane, Robertson, Rutherford, Scott, Sequatchie, Sevier, Shelby, Smith, Stewart, Sullivan, Sumner, Tipton, Trousdale, Unicoi, Union, Van Buren, Warren, Washington, Wayne, Weakley, White, Williamson, and Wilson Counties. The address of the project will be 740 Cool Springs Blvd., Suite 120, Office 1, Franklin, Williamson County, Tennessee, 37067. The estimated project cost will be \$202,418. The anticipated date of filing the application is 08/01/2026. The contact person for this project is Mr. Michael Brent who may be reached at Bradley Arant Boult Cummings LLP- 1221 Broadway #2400, Nashville, TN 37203- Contact No. 615-252-2361. 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, 503 Deaderick Street, Nashville, TN 37243 or email at hsd.a.staff@tn.gov.

Why Shell
Out More?

Herald-Citizen

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SHOP THE CLASSIFIEDS!



10150 Garage Sales

4- FAMILY YARD SALE
937 DEERFIELD DR
FRI 7/10 & SAT 7/11
7AM TO 2PM
Clothes, household items, and lots of miscellaneous items.

Estate Sale
July 10-11 8-5
Friday and Saturday
3436 Officers Chapel Road
Cookeville

Estate of the late Janice Parish. A Huge Sale!!! House, garage, and shed are completely full! Items to include: Quilts, pottery, Blue Willow China, China Cupboard, console table, mirror, GE washer, Dresser, Shelving units, Chenille spread, Antique toys, luggage, costume jewelry, McCoy, vintage Pyrex, antique radio, Linens, antique fans, dresser sets, books, sheet music, office chair, desks, sewing machine, wonderful lamps, shells, file cabinets, toy cars, vacuums, shredders, pillows, Longerberger baskets, doilies, Albums, TVs, children's books, Paintings, Xmas, easter and Halloween decor, vintage Halloween masks, baskets, recliner, sofa, wing back chair, Yamaha Keyboard, cameras, glider, sweetgrass baskets, Pioneer stack stereo and speakers, Wonderful dulcimer, vintage wedding dress, cleaning supplies, golf clubs, bassinet, Lots of Vera Bradley pieces, Pots and Pans, bakeware, electronics, dishes, small appliances, sewing supplies, musical items, lots and lots of tools, tool boxes, vintage baseball glove, coolers, license plates, vintage wooden sleds, bird bath, picnic table, outdoor furniture, grill, ladders, wheelchair, walker, garden tools, stained glass windows, steamer trunk, great antique wooden carpenter's box, and so much more! Note: there are several pocket knives and ammunition
For more information call Patti Ross (931) 808-6535
See pictures at Estatesales.net

LAWN SALE
765 E 20th St. Cookeville
8 - 2
Lots of stuff! Thinning down.
July 10 & 11

10150 Garage Sales

GARGE SALE
1401 COUNTRY CLUB PL
FRI 7/10 & SAT 7/11
7:00AM TO 5:00PM
Christmas, Halloween, Easter, Valentine, and home decor, men's clothes size L-3XL pants size 40-46, women's clothes size M-XL, men's shoes 9-13, women's size 8 1/2 to 9 1/2, golf clubs, golf bags, coolers and much more.
Let us fit all your family needs!

MULTI FAMILY YARD SALE
1715 Denton Ave. Cookeville
July 10 - 12
7 - ?
Men's, women's, kids, appliances, too much to list.

YARD SALE
SAT. 7/11; 8AM
353 Brookside Dr. Algood
Men's golf clothes, ladies' clothes, men's shoes, jewelry. Troy-Bilt riding mower, tools, and many other numerous items.
CANCEL IF RAINS
931-265-4475

10200 Employment
CR Electric Services
is interviewing experienced electricians.
Please call 931-644-1146 or 931-528-0017
if you are interested.

10500 Merchandise
I buy used American Made tools Mechanics & Machinists
Call David the tool recycler 931-250-7406.

10600 Real Estate For Rent
1009 Brown Avenue
2BDR/1.5BA;
\$1,050 monthly.
Appliances furnished
W/D hook ups
Wood & tile flooring.
NO PETS/ NO SMOKING.
931-239-6938

NEWLY RENOVATED
University apt.
333 East 12th St.
2BDR/ 1BA
W/D hook ups;
Appliances furnished;
\$1100 monthly
NO PETS/ NO SMOKING
931-239-6938

10900 Legals

IN THE Sessions COURT OF RHEA COUNTY, TENNESSEE, AT DAYTON:
Molly Hayden
Plaintiff
VS.
Stevie Nicole Ezell
Defendant
Case No. 25-CV-398
Upon motion of the Plaintiff, Molly Hayden, and it appearing that the address, residence and whereabouts of the Defendant, Stevie Nicole Ezell, are unknown and the whereabouts cannot be ascertained by the Plaintiff after due and diligent search and inquiry: it is, therefore, ORDERED that publication be made for four (4) consecutive weeks, as required by law, in The Herald-Citizen, a newspaper of general circulation published in Cookeville, Tennessee, notifying the Defendant, Stevie Nicole Ezell to file an answer with Plaintiffs attorney, John Michel Deakins whose address is 385 2nd Ave,

10900 Legals

Ste. 1 Dayton, TN 37321 within thirty (30) days from the last date of publication, exclusive of said last date of publication, or a judgment by default may be entered and the case set for hearing ex parte as to said Defendant, Stevie Nicole Ezell, in the Sessions Court of Rhea County in Dayton, Tennessee. **IT IS FURTHER ORDERED** that this notice be published for four (4) consecutive weeks in The Herald News. This the 8th day of June, 2026 Jamie Holloway, Circuit Court Clerk Dane Brown, Deputy Clerk 6/17, 6/24, 7/1, 7/8

NOTICE OF FORECLOSURE SALE STATE OF TENNESSEE, PUTNAM COUNTY
WHEREAS, Amanda Nicole Miller executed a Deed of Trust to Mortgage Electronic Registration Systems, Inc., as beneficiary, as nominee for Union Home Mortgage Corp, Lender

10900 Legals

and JMG, PLLC, Trustee(s), which was dated August 25, 2022, and recorded on August 30, 2022, in Book 1428, at Page 546 in Putnam County, Tennessee Register of Deeds. **WHEREAS**, default having been made in the payment of the debt(s) and obligation(s) thereby secured by the said Deed of Trust and the current holder of said Deed of Trust, Union Home Mortgage Corp., (the "Holder"), appointed the undersigned, Brock & Scott, PLLC, as Substitute Trustee, with all the rights, powers and privileges of the original Trustee named in said Deed of Trust; and **NOW, THEREFORE**, notice is hereby given that the entire indebtedness has been declared due and payable as provided in said Deed of Trust by the Hold-

er, and that as agent for the undersigned, Brock & Scott, PLLC, Substitute Trustee, by virtue of the power and authority vested in it, will on **August 13, 2026, at 10:00 AM** at the usual and customary location at the Putnam County Courthouse, Cookeville, Tennessee, proceed to sell at public outcry to the highest and best bidder for cash, the following described property situated in Putnam County, Tennessee, to wit: Lying and being in the Third (3rd) Civil District of Putnam County, Tennessee, to wit: Being Lot 58 of Lake Pointe Subdivision, Phase II, a plat of which is recorded in Plat Cabin-et B, Slide 122, in the Register's Office of Putnam County, Tennessee (ROPCT), and being more particularly described as follows: Beginning at

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EARLY and ABSENTEE VOTING

AUGUST 6, 2026 ELECTION

2 Locations for Early Voting

If you are registered to vote in Smith County, you may choose to vote early for all eligible offices on the ballot at either the Carthage or Gordonsville location regardless of where you live in the county. Please note the dates and times the locations are open.

If you wait until Election Day to vote, you must go to the precinct located in the district where you live.

Carthage - Turner Building
122 Turner High Circle, Suite 105
Carthage, TN 37030

July 17 thru Aug 01, 2026
Monday - Friday 8 am - 4 pm
Saturdays 9 am - 12 pm
July 21 & 28 (Tuesdays) 8 am - 6 pm ★

Gordonsville - Civic Center
63 Main St, East
Gordonsville, TN 38563

July 21, 22, and 23
Tuesday..... July 21 8 am – 6 pm ★
Wednesday July 22 8 am – 4 pm
Thursday..... July 23 8 am – 4 pm

Election Day is August 6, 2026
The polls will be open from 7:00 am until 7:00 pm

Voting Early by Personal Appearance
Any voter who lives and is registered in Smith County may vote early during the dates and times listed above for early voting at either location.

Photo ID Requirements
State law requires all voters who vote by personal appearance to present a photo ID issued by the US or TN government. For more information regarding exemptions and acceptable forms of photo IDs, please contact our office.

Voting by Mail
A registered voter desiring to vote absentee by mail must meet certain legal qualifications. To vote an absentee ballot by mail, the voter must make the request in writing and include their name, social security number, date of birth, residential address, mailing address (if different from residential address), the election(s) they wish to vote in and political preference if voting in a Primary, the reason they are requesting to vote an absentee ballot and their signature. The last day we will accept written requests by mail, fax or email is July 27, 2026.

SMITH COUNTY ELECTION COMMISSION
122 Turner High Circle, Suite 105
Carthage, TN 37030
Phone: 615-735-8241 – Fax 615-735-8253
vote@smithcountyelection.com

Office Hours: Monday-Friday 8:00 a.m. to 4:00 p.m.

Wesley Rigsby, Chairman • Anne Waggoner, Secretary
Jerry Solimine, Commissioner • Katie Penny, Commissioner • Ken Lawrence, Commissioner
Korinne Hill, Administrator of Elections

Official Sample Ballot - August 6, 2026

REPUBLICAN PRIMARY

OFFICIAL BALLOT
STATE OF TENNESSEE
SMITH COUNTY
AUGUST 6, 2026
STATE REPUBLICAN PRIMARY

GOVERNOR
Vote For One (1)

☐ MARSHA BLACKBURN
☐ MONTY FRITTS
☐ JOHN ROSE
☐ WRITE-IN

UNITED STATES SENATE
Vote For One (1)

☐ BILL HAGERTY
☐ WRITE-IN

UNITED STATES HOUSE OF REPRESENTATIVES DISTRICT 6
Vote For One (1)

☐ NATISHA BROOKS
☐ JOHNNY GARRETT
☐ JON HENRY
☐ VAN HILLEARY
☐ WRITE-IN

TENNESSEE SENATE DISTRICT 15
Vote For One (1)

☐ PAUL BAILEY
☐ WRITE-IN

TENNESSEE HOUSE OF REPRESENTATIVES DISTRICT 40
Vote For One (1)

☐ MICHAEL HALE
☐ WRITE-IN

STATE EXECUTIVE COMMITTEEMAN DISTRICT 15
Vote For One (1)

☐ MIKE CALLAHAN
☐ WRITE-IN

STATE EXECUTIVE COMMITTEEWOMAN DISTRICT 15
Vote For One (1)

☐ LINDA CLARK
☐ WRITE-IN

OFFICIAL BALLOT
STATE OF TENNESSEE
SMITH COUNTY
AUGUST 6, 2026
STATE DEMOCRATIC PRIMARY

GOVERNOR
Vote For One (1)

☐ CARNITA ATWATER
☐ TIM CYR
☐ JERRI GREEN
☐ ADAM "DITCH" KURTZ
☐ KEVIN LEE MCCANTS
☐ WRITE-IN

UNITED STATES SENATE
Vote For One (1)

☐ MARQUITA BRADSHAW
☐ MARIA BREWER
☐ KEVIN LEE MCCANTS
☐ CIVIL MILLER-WATKINS
☐ DIANA ONYEJAKA
☐ WRITE-IN

UNITED STATES HOUSE OF REPRESENTATIVES DISTRICT 6
Vote For One (1)

☐ LORE BERGMAN
☐ MIKE CROLEY
☐ CHRISTOPHER MARTIN FINLEY
☐ MIRIAM LEIBOWITZ
☐ CHANEY MOSLEY
☐ WRITE-IN

TENNESSEE SENATE DISTRICT 15
Vote For One (1)

☐ NO CANDIDATE QUALIFIED
☐ WRITE-IN

TENNESSEE HOUSE OF REPRESENTATIVES DISTRICT 40
Vote For One (1)

☐ DANIEL T. HAWTHORNE
☐ WRITE-IN

STATE EXECUTIVE COMMITTEEMAN DISTRICT 15
Vote For One (1)

☐ MCNALLY "MACK" LUNN
☐ TROY D. SMITH
☐ WRITE-IN

STATE EXECUTIVE COMMITTEEWOMAN DISTRICT 15
Vote For One (1)

☐ SARA KRUSZKA
☐ ANNE FERRELL QUILLEN
☐ WRITE-IN

DEMOCRATIC PRIMARY

COUNTY GENERAL ELECTION

OFFICIAL BALLOT
STATE AND COUNTY
GENERAL ELECTION
SMITH COUNTY, TENNESSEE
AUGUST 6, 2026

COUNTY COMMISSIONER DISTRICT 2
Vote For Three (3)

☐ JEREMY D. DENNIS
☐ CHARLES (CHAS) KENT
☐ ZACKARY STROEBERT
☐ WILLIAM S. (BILLY) BASS
☐ WRITE-IN

COUNTY MAYOR
Vote For One (1)

☐ JEFF MASON
☐ ARTHUR G. SHADY
☐ WRITE-IN

COUNTY COMMISSIONER DISTRICT 1
Vote For Three (3)

☐ WILLIAM "BILL" ELLIOTT
☐ RICHEY E. GREGORY
☐ HELEN J VOSE
☐ RUSTY WILLIAMS
☐ WRITE-IN

COUNTY COMMISSIONER DISTRICT 3
Vote For Three (3)

☐ SCOTTY BARRETT
☐ LYNN BROWN
☐ RONALD C PASCHAL
☐ WRITE-IN

COUNTY COMMISSIONER DISTRICT 4
Vote For Three (3)

☐ MATTHEW J. INYART
☐ CORDELL H. SMITH JR
☐ WRITE-IN

COUNTY COMMISSIONER DISTRICT 5
Vote For Three (3)

☐ STEVEN LUSH
☐ WRITE-IN

COUNTY COMMISSIONER DISTRICT 6
Vote For Three (3)

☐ JAVIN CRIPPS
☐ JUSTIN MAULDIN
☐ ERIKA EBEL
☐ WRITE-IN

COUNTY COMMISSIONER DISTRICT 7
Vote For Three (3)

☐ TOMMY BANE
☐ JUNIOR FIELDS
☐ CONNOR D. McDONALD
☐ WRITE-IN

COUNTY COMMISSIONER DISTRICT 8
Vote For Three (3)

☐ NO CANDIDATE QUALIFIED
☐ WRITE-IN

COUNTY TRUSTEE
Vote For One (1)

☐ JULIE WRIGHT
☐ WRITE-IN

SHERIFF
Vote For One (1)

☐ STEVE HOPPER
☐ WRITE-IN

CIRCUIT COURT CLERK
Vote For One (1)

☐ TOMMY TURNER
☐ WRITE-IN

COUNTY CLERK
Vote For One (1)

☐ CLIFA NORRIS
☐ WRITE-IN

REGISTER OF DEEDS
Vote For One (1)

☐ JERRI LIN VADEN-MALONE
☐ WRITE-IN

SCHOOL BOARD DISTRICT 3
Vote For One (1)

☐ MARTY MCALEB
☐ WRITE-IN

SCHOOL BOARD DISTRICT 4
Vote For One (1)

☐ NO CANDIDATE QUALIFIED
☐ WRITE-IN

SCHOOL BOARD DISTRICT 5
Vote For One (1)

☐ ANTHONY HACKETT
☐ WRITE-IN

SCHOOL BOARD DISTRICT 6
Vote For One (1)

☐ STANLEY CLAYWELL
☐ TRESSA D. BUSH
☐ J.D. DRIVER
☐ SCOTTY LEWIS
☐ WRITE-IN

MAYOR
Vote For One (1)

☐ JOEY NIXON
☐ WRITE-IN

WARD 1
TOWN OF SOUTH CARTHAGE
Vote For One (1)

☐ BOBBY LAW
☐ WRITE-IN

WARD 2
TOWN OF SOUTH CARTHAGE
Vote For One (1)

☐ SAM MURLEY
☐ WRITE-IN

JUDICIAL RETENTION QUESTIONS

JUDICIAL RETENTION QUESTIONS

Supreme Court At Large
Vote For One (1)
Shall Valerie L. Smith be retained in office as a Judge of the Court of Appeals, Western Division, or be replaced?

☐ RETAIN
☐ REPLACE

Supreme Court At Large
Vote For One (1)
Shall Mary L. Wagner be retained in office as a Judge of the Supreme Court, At Large, or be replaced?

☐ RETAIN
☐ REPLACE

Court of Appeals Eastern Division
Vote For One (1)
Shall William E. Phillips II be retained in office as a Judge of the Court of Appeals, Eastern Division, or be replaced?

☐ RETAIN
☐ REPLACE

Court of Appeals Western Division
Vote For One (1)
Shall Steve Maroney be retained in office as a Judge of the Court of Appeals, Western Division, or be replaced?

☐ RETAIN
☐ REPLACE

Court of Appeals Western Division
Vote For One (1)
Shall Valerie L. Smith be retained in office as a Judge of the Court of Appeals, Western Division, or be replaced?

☐ RETAIN
☐ REPLACE

Court of Criminal Appeals Eastern Division
Vote For One (1)
Shall Stacy L. Street be retained in office as a Judge of the Court of Criminal Appeals, Eastern Division, or be replaced?

☐ RETAIN
☐ REPLACE

Court of Criminal Appeals Eastern Division
Vote For One (1)
Shall Steven W. Sword be retained in office as a Judge of the Court of Criminal Appeals, Eastern Division, or be replaced?

☐ RETAIN
☐ REPLACE

Wesley Rigsby, Chairman
Anne Waggoner, Secretary
Jerry Solimine, Member
Katie Penny, Member
Ken Lawrence, Member
Korinne Hill, Administrator of Elections
SMITH COUNTY ELECTION COMMISSION

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“American as Apple Pie”, a crowd favorite float.

Samuel P Demonbreun photo



Samuel P Demonbreun photo

The aftermath of the watermelon drop.

250

FROM **PAGE A1**

Warren County Historian Jimmy Haley then delivered the main address of the program. Haley walked the crowd through the history behind the Declaration of Independence and the road to American freedom.

Haley set the scene of Philadelphia on July 4, 1776 and detailed the events that led up to the signing of the Declaration. From the French and Indian War, the Stamp Act, the Boston Massacre, the Boston Tea Party and the intolerable acts, Haley walked the crowd through the long fuse that eventually lit the American Revolution.

Haley made a special note about Dr. Joseph Warren, the county's namesake, and the role he played in penning the Suffolk Resolves in open defiance of British rule.

“When the Suffolk Resolves were written and penned by Dr. Joseph Warren, our own county's namesake, it clearly stated that the

American stance was in open defiance of British rule,” Haley said.

Haley then read key excerpts from Thomas Jefferson's Declaration of Independence, including the famous line that all men are created equal and endowed with the unalienable rights of life, liberty and the pursuit of happiness.

“God bless America on this 250th birthday,” Haley said.

Haley also noted the art show at the Chamber of Commerce that showcased paintings from the Revolutionary War era. Haley then led a cemetery tour focused on the Revolution just after noon starting at the Chamber.

The Silver and Gold Band closed out the Patriotic Program with another song.

The Yankee Doodle Parade followed and brought a big dose of hometown charm to the downtown celebration. Kids and their parents rolled through the streets with patriotic floats made out of wagons, tricycles and just about any vehicle they could decorate. Red, white and blue was

everywhere.

Onlookers saw a replica of Mt. Rushmore, an army tank and American icons like Abe Lincoln, Uncle Sam and the Statue of Liberty waltz through the streets of downtown McMinnville.

The parade was a fun showcase of young patriotism in Warren County. Families lined the route to cheer on the little ones as they showed off their creativity and their love for their country.

The Watermelon Drop kept the crowd downtown and gave everyone one more reason to stick around. The event has become a Fourth of July favorite in McMinnville and drew a big crowd.

The McMinnville Fire Department hoisted their aerial ladder up to the sky and let nearly 10 watermelons crash down onto the parking lot outside the courthouse. Folks in attendance saw giant melons smash into pavement and disintegrate into nothing.

Those with brave palettes and immune systems scoured the ground for watermelon pieces large enough to eat.

Next on the agenda was the Mr. and Mrs. Stars and Stripes pageant held at the Park Theater. The pageant is a Fourth of July favorite for young kids in Warren County and always draws a fun crowd of parents and family members. The event gives the little ones a chance to shine on stage in their patriotic best and

adds one more layer of tradition to the McMinnville Fourth of July celebration.

250 years after a group of patriots put quill to paper in Philadelphia, the promise of America was still evident on the streets of downtown McMinnville.

From the crack of the 21 gun salute to the little ones rolling by in

decorated wagons, from the sound of the Silver and Gold Band echoing off the storefronts to the sticky-faced kids grinning ear to ear with watermelon in hand, Warren County showed up and showed out.

The American spirit that started 250 years ago found itself right at home in downtown McMinnville.

A proven District Attorney General for Warren and Van Buren Counties, Lisa Zavogiannis isn't campaigning as an assistant; she is running as a seasoned leader who understands the two roles are fundamentally different. With 16 years of experience, she brings an unmatched level of expertise to the position.

I would appreciate your vote on August 6

LISA

AVOGIANNIS

DISTRICT ATTORNEY

PAID FOR BY THE COMMITTEE TO ELECT LISA ZAVOGIANNIS, JANA WILSON RINGEMANN TREASURER

ESTATE AUCTION

SATURDAY, JULY 11, AT 9:00 AM

BRICK HOME AND LARGE LOT
DETACHED GARAGE & OUTBUILDINGS
2019 HANDICAP VAN, ANTIQUES,
TOOLS & PERSONAL PROPERTY
ESTATE OF JAMES & BERNICE DRIVER

NO BUYER PREMIUM

NO BUYER PREMIUM

Located at 67 Hidden Valley Circle in Centertown off Old Nashville Hwy. Watch for auction signs.

Beautiful brick home, 2 bedrooms, 2 bathrooms, living room, kitchen, dining area, and an extremely large den could be converted to bedroom, nice utility room and a covered front porch. Built-in appliances in the kitchen and has been well maintained. Situated on a large lot, also includes a 2-car garage and 2 other outbuildings. Conveniently located off the 4-lane highway from McMinnville or Woodbury. Within walking distance of churches, restaurant, and Dollar General. Nice one-level home that feels like home with a covered porch.

We will also sell the following personal property: 2019 Honda Odyssey Braunability Handicap van w/74,095 miles, electric wheel chair, Victorian couch & chairs, marble top end tables, wash stand, sofa mirror, oak roll-top desk, pictures, hen on nest, lamps, figurines, rocking chair, antique lantern, oak dining table & 6 chairs, parlor lamp, oak china cabinet, ironing board stool, oil lamp, refrigerator, mixing bowls, egg dish, Corning Ware, Fire King bowls, glasses, assorted pottery pieces, cookie jar, rolling pin, curio cabinet, lift chair, sectional couch, 2 platform rocker/recliners, wing back chairs, couch, washer & dryer, 4 bar stools, standing oak jewelry box, wrought iron chair, cast iron skillet, China set by Johann Havland, and lots more items.

TERMS: 10% down day of sale on real estate, balance on or before 30 days of sale date. Cash or good check on all personal property day of sale. Credit cards accepted for 3% processing fee.

NO BUYERS PREMIUM.

AUCTIONEER'S NOTE: Prater Realty & Auction and Paul Holder Realty & Auction team up to offer you this nice estate auction. We have been friends and neighbors with the Driver family for many years. Everything is well maintained, cared for and would be nice for you to own. We will sell personal property at 9:00 AM and then sell the real estate at 11:00 AM followed by the handicap van. If you are looking for a nice home, van or personal property, don't miss this sale.

PRATER REALTY & AUCTION

474-3715

Firm# 4968
2940 Nashville Hwy.
www.praterrealty.com

Phillip Prater
Broker/Auctioneer
931-939-2063

Firm Lic. No. 33
108 East Main Street
Office 931-473-7321

David Miller
Principal Broker/Auctioneer
931-808-9999

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Tools & More!

NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED

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 Sunray HHA TN, LLC, a/an proposed home health agency owned by Sunray HHA TN, LLC, with an ownership type of Limited Liability Company (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 limited to home infusion services. The project will serve a proposed service area of 95 counties: Anderson, Bedford, Benton, Bledsoe, Blount, Bradley, Campbell, Cannon, Carroll, Carter, Cheatham, Chester, Claiborne, Clay, Cocke, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Dyer, Fayette, Fentress, Franklin, Gibson, Giles, Grainger, Greene, Grundy, Hamblen, Hamilton, Hancock, Hardeman, Hardin, Hawkins, Haywood, Henderson, Henry, Hickman, Houston, Humphreys, Jackson, Jefferson, Johnson, Knox, Lake, Lauderdale, Lawrence, Lewis, Lincoln, Loudon, Macon, Madison, Marion, Marshall, Maury, McMinn, McNairy, Meigs, Monroe, Montgomery, Moore, Morgan, Obion, Overton, Perry, Pickett, Polk, Putnam, Rhea, Roane, Robertson, Rutherford, Scott, Sequatchie, Sevier, Shelby, Smith, Stewart, Sullivan, Sumner, Tipton, Trousdale, Unicoi, Union, Van Buren, Warren, Washington, Wayne, Weakley, White, Williamson, and Wilson Counties. The address of the project will be 740 Cool Springs Blvd., Suite 120, Office 1, Franklin, Williamson County, Tennessee, 37067. The estimated project cost will be \$202,418. The anticipated date of filing the application is 08/01/2026. The contact person for this project is Mr. Michael Brent who may be reached at Bradley Arant Boult Cummings LLP- 1221 Broadway #2400, Nashville, TN 37203- Contact No. 615-252-2361. 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, 503 Deaderick Street, Nashville, TN 37243 or email at hfsda.staff@tn.gov.

The McMinnville-Warren County Chamber of Commerce is seeking an energetic, creative, and community-minded professional to join our team.

This position is ideal for someone who enjoys building relationships, creating engaging marketing content, attending social events, and supporting local businesses.

Responsibilities Include:

- Manage social media, marketing, and Chamber communications
- Coordinate member engagement, ribbon cuttings, and serve as a primary point of contact for Chamber members, visitors, and community partners
- Manage daily office operations, including correspondence, payments, recordkeeping, and general administrative support
- Maintain accurate member records and databases
- Prepare membership packets, certificates, and member communications
- Coordinate ribbon cuttings, grand openings, member recognition activities, and New Member Spotlights
- Respond to member inquiries and provide exceptional customer service.
- Assist with office operations and member services
- Represent the Chamber throughout the community

We're looking for someone who has:

- Excellent communication and customer service skills
- Experience with social media, Canva, and Microsoft Office
- Strong organizational and multitasking abilities
- A positive attitude, professionalism, and a passion for community involvement

This position is part-time with the possibility of becoming full-time. Pay is DOE. Occasional evening and weekend events are required.

To Apply:

Submit your resume and cover letter to jwoods@warrentn.com.

Help us strengthen local businesses, build community connections, and make a difference in McMinnville-Warren County!

PUBLIC NOTICE

NOTICE OF TRUSTEE'S SALE

WHEREAS, default has occurred in the performance of the covenants, terms, and conditions of a Deed of Trust Note dated March 8, 2022, and the Deed of Trust of even date securing the same, recorded March 22, 2022, in Book No. RB117, at Page 467, in Office of the Register of Deeds for Van Buren County, Tennessee, executed by David B Bonds and Sarah Denise Bonds, conveying certain property therein described to Yale Riley as Trustee for Mortgage Electronic Registration Systems, Inc., as beneficiary, as nominee for Rocket Mortgage, LLC, FKA Quicken Loans, LLC, its successors and assigns; and the undersigned, Foundation Legal Group, LLP fka Wilson & Associates, P.L.L.C., having been appointed Successor Trustee by Rocket Mortgage, LLC. NOW, THEREFORE, notice is hereby given that the entire indebtedness has been declared due and payable; and that an agent of Foundation Legal Group, LLP fka Wilson & Associates, P.L.L.C., as Successor Trustee, by virtue of the power, duty, and authority vested in and imposed upon said Successor Trustee, by Rocket Mortgage, LLC, will, on August 18, 2026 on or about 10:00 AM, at the Main Entrance of the Van Buren County Courthouse 179 Veterans Square, Spencer, TN 38585, offer for sale certain property hereinafter described to the highest bidder FOR certified funds paid at the conclusion of the sale, or credit bid from a bank or other lending entity pre-approved by the successor trustee. The sale is free from all redemptions, which are expressly waived in the Deed of Trust, said property being real estate situated in Van Buren County, Tennessee, and being more particularly described as follows:

Land situated in the County of Van Buren in the State of TN. TRACT NO. 1 BEGINNING ON A 5 INCH LOCUST POST LOCATED APPROXIMATELY 12 FEET WEST OF THE CENTER OF A COUNTY GRAVEL ROAD AND APPROXIMATELY 1/10 MILE NORTH OF WHERE SAID COUNTY GRAVEL ROAD INTERSECTS THE TURKEY SCRATCH ROAD, SAID POST IS THE SOUTHEAST CORNER OF THIS DESCRIBED PARCEL AND ALSO A CORNER FOR CALVIN VAN WINKLE, THENCE LEAVING SAID COUNTY GRAVEL ROAD AND GOING WITH VAN WINKLE N83-17-26W 189.75 FEET TO A 3 INCH CONCRETE MONUMENT IN A FENCE LINE, SAID MONUMENT IS THE COMMON CORNER OF THIS DESCRIBED PARCEL AND VAN WINKLE IN THE LINE OF SIMMONS, THENCE LEAVING VAN WINKLE AND GOING WITH SIMMONS ALONG AN ESTABLISHED FENCE LINE N03-42-45E 95.27 FEET TO A1/2 INCH PIPE, SAID PIPE IS THE NORTHWEST CORNER OF THIS

PUBLIC NOTICE

DESCRIBED PARCEL AND ALSO A CORNER FOR THE REMAINDER OF THE RAYMOND WILHITE PROPERTY FROM WHICH THIS DESCRIBED PARCEL WAS TAKEN IN THE LINE OF SIMMONS, THENCE LEAVING SIMMONS AND GOING WITH WILHITE S83-43-28E 163.75 FEET TO A1/2 INCH PIPE ON THE WESTERN SIDE OF THE AFOREMENTIONED COUNTY GRAVEL ROAD, THENCE LEAVING WILHITE AND GOING WITH THE WESTERN SIDE OF ROAD S11-06-57E 101.24 FEET TO THE BEGINNING, CONTAINING 0.40 ACRES AS SURVEYED BY DAVID H. BRADLEY, R.L.S. #1137, ON APRIL 10, 1984. TRACT NO. 2 BEGINNING ON A STAKE ON THE WEST SIDE OF THE LITTLE FALLS ROAD; PROCEEDED THENCE NORTH 11 DEGREES WEST 106 FEET TO A STAKE; THENCE NORTH 84 DEGREES 30 MINUTES WEST 187 FEET TO A STAKE IN A FENCE; THENCE SOUTH 2 DEGREES 30 MINUTES WEST 100 FEET TO A STAKE IN SAID FENCE; THENCE SOUTH 84 DEGREES 30 MINUTES EAST 214 FEET TO THE BEGINNING CONTAINING 0.21 OF AN ACRE, MORE OR LESS, AS SURVEYED BY CARL LAWSON, R.L.S. #79 ON FEBRUARY 20,1974. ALSO KNOWN AS: 99 Poplar Street, Spencer, TN 38585

This sale is subject to all matters shown on any applicable recorded plat; any unpaid taxes; any restrictive covenants, easements, or setback lines that may be applicable; any statutory rights of redemption of any governmental agency, state or federal; any prior liens or encumbrances as well as any priority created by a fixture filing; and to any matter that an accurate survey of the premises might disclose. In addition, the following parties may claim an interest in the above-referenced property: DAVID B BONDS SARAH DENISE BONDS U.S. BANK NATIONAL ASSOCIATION UNIFUND CCR, LLC

The sale held pursuant to this Notice may be rescinded at the Successor Trustee's option at any time. The right is reserved to adjourn the day of the sale to another day, time, and place certain without further publication, upon announcement at the time and place for the sale set forth above.

In the event of inclement weather, the trustee hereby announces that the sale will be postponed and that notices of said postponement for inclement weather will be mailed to interested parties of record. As of July 1, 2025, notices pursuant to Tennessee Code Annotated §35-5-101 et seq. are posted online at www.internetpostings.com by a third-party internet posting company. FLG No. 366583 DATED June 29, 2026 Foundation Legal Group, LLP fka WILSON & ASSOCIATES, P.L.L.C., Successor Trustee

SPARTA

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FOR SALE

For Sale

*End Table \$20.00

*Brown Recliner \$200.00

*Entertainment Center \$200.00

*Cabinet \$50.00

*Rocking chair with ottoman \$100.00

*pictures (different prices)

*Wheelchair \$200.00

Call (931) 256-8111 leave a message

SPARTA

LIVE.COM

PUBLIC NOTICE

NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED

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 Sunray HHA TN, LLC, a/an proposed home health agency owned by Sunray HHA TN, LLC, with an ownership type of Limited Liability Company (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 limited to home infusion services. The project will serve a proposed service area of 95 counties: Anderson, Bedford, Benton, Bledsoe, Blount, Bradley, Campbell, Cannon, Carroll, Carter, Cheatham, Chester, Claiborne, Clay, Cocke, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Dyer, Fayette, Fentress, Franklin, Gibson, Giles, Grainger, Greene, Grundy, Hamblen, Hamilton, Hancock, Hardeman, Hardin, Hawkins, Haywood, Henderson, Henry, Hickman, Houston, Humphreys, Jackson, Jefferson, Johnson, Knox, Lake, Lauderdale, Lawrence, Lewis, Lincoln, Loudon, Macon, Madison, Marion, Marshall, Maury, McMinn, McNairy, Meigs, Monroe, Montgomery, Moore, Morgan, Obion, Overton, Perry, Pickett, Polk, Putnam, Rhea, Roane, Robertson, Rutherford, Scott, Sequatchie, Sevier, Shelby, Smith, Stewart, Sullivan, Sumner, Tipton, Trousdale, Unicoi, Union, Van Buren, Warren, Washington, Wayne, Weakley, White, Williamson, and Wilson Counties. The address of the project will be 740 Cool Springs Blvd., Suite 120, Office 1, Franklin, Williamson County, Tennessee, 37067. The estimated project cost will be \$202,418. The anticipated date of filing the application is 08/01/2026. The contact person for this project is Mr. Michael Brent who may be reached at Bradley Arant Boult Cummings LLP- 1221 Broadway #2400, Nashville, TN 37203- Contact No. 615-252-2361. 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, 503 Deaderick Street, Nashville, TN 37243 or email at hsd.a.staff@tn.gov.

FOR SALE

PUBLIC NOTICE

NOTICE OF EARLY VOTING & ABSENTEE VOTING
State Primary and County General
August 6, 2026

To the Voters of Van Buren County, Tennessee:

EARLY VOTING

BY PERSONAL APPEARANCE July 17, 2026 – August 1, 2026

EARLY VOTING LOCATION: VAN BUREN COUNTY ELECTION COMMISSION OFFICE
VAN BUREN COUNTY ADMIN BLDG.
121 Taft Drive | Spencer, Tennessee 38585

OFFICE HOURS FOR
EARLY VOTING : Mon., Tues., Wed., Thurs., Fri. - 9:00 am-5:00 pm
Saturday - 9:00 a.m. to 2:00 p. m.

ABSENTEE VOTING BY MAIL

If you wish to vote by mail, you must meet certain legal requirements pursuant to T.C.A 2-6-201. You must request a ballot in writing over your signature. The request can be made as much as 90 days in advance of an election and not later than 10 days prior to an election. Requests for absentee ballots must be in writing and signed by the voter. The LAST day for the Election Commission to receive applications to vote absentee is July 27, 2026. Requests can be hand delivered or mailed to the Van Buren County Election Commission P. O. Box 254, Spencer, Tennessee 38585

THE REQUEST FOR VOTING BY MAIL CAN SERVE AS THE APPLICATION FOR BALLOT IF IT CONTAINS THE FOLLOWING INFORMATION:

1. The voter’s name;
2. The voter’s address in Van Buren County;
3. The voter’s date of birth;
4. The voter’s social security number;
5. The address to mail the ballot;
6. The election in which the voter wishes to vote (including a party preference if the election is a primary); and
7. The reason the voter is requesting to vote by mail;
8. The request MUST BE SIGNED BY THE VOTER.

If the request does not contain all the information listed above, the election commission shall send the voter an application for an absentee ballot in order to obtain the needed information

PHOTO ID REQUIREMENT

Federal or Tennessee state government issued photo ID is now required to vote, unless an exception applies. College student IDs, photo IDs issued by other states, county or city governments, including library cards, will not be accepted. To learn more about the new law and its exceptions, please call Van Buren County Election Commission at 931-946-2728 or visit GoVoteTN.com.
Voters who vote absentee by mail, residents of licensed nursing homes, assisted living centers, or those hospitalized are exempt.

ATTENTION CANDIDATES

Display of campaign posters, signs or other campaign materials, distribution of campaign materials and solicitation of votes is strictly prohibited within 100 feet of any polling place. The election commission office is a polling place during early voting. TCA 2-7-111

The Election Commission does not discriminate on the basis of disability. If there are questions about needed accommodations in the voting process, call 931-946-2728

July 7, 2026 VOTER REGISTRATION DEADLINE

Van Buren County Election Commission

Office location –121 Taft Drive, Van Buren County Admin Bldg., Spencer, TN 38585
Phone - 931-946-2728
Office Hours – 8:00 a.m. to 4:00 p.m. – Monday–Friday

Kurt Powers, Chairman
Shirley Hitchcock, Secretary
Kathleen Rogers, Member

Randy Johns, Member
Jerry Hodges Member
Wayne Simons, Adm. of Elections

Project Name : Sunray HHA TN, LLC

Supplemental Round Name : 1

Certificate No. : CN2607-015

Due Date : 8/12/2026

Submitted Date : 8/10/2026

1. 1E. Overview

What experience does the applicant, or its owners have in operating a home health agency specializing in home infusion nursing?

Does the applicant intend to operate an ambulatory infusion center at its pharmacy office site?

Does the applicant plan to provide chemotherapy services?

Does the applicant intend to serve pediatric patients. If so, please describe typical scenarios.

Response : Question:

What experience does the applicant, or its owners have in operating a home health agency specializing in home infusion nursing?

ANSWER:

The applicant and other entities which are subsidiaries of The Sunray Companies, LLC (collectively referred to in these supplemental answers as “Sunray Companies” or “Sunray”) do not have experience in operating any home health agency. However, as noted elsewhere the applicant is a Vital Care franchisee and there are numerous other Vital Care franchisees which have received CONs for a home health agency specializing in home infusion, some of which are currently under development and some of which are in operation, and the applicant anticipates being able to call upon Vital Care as well as other franchisees for support if needed. The applicant would also note that the Sunray Companies, through various other subsidiaries, operate numerous businesses which require similar administrative and managerial support as a home health agency, and support for the applicant will be available from other entities within the “family” of Sunray Companies. As to other support, such as clinical support, the related pharmacy (Sunray RX NSHTN, LLC) will have the ability to offer medical and clinical administrative support via pharmacists and others on its staff. In addition, please see Attachment SC1 for more information as to the Sunray Companies’ historical or affiliate quality measures, geographic oversight, metrics/source data, and awards.

Does the applicant intend to operate an ambulatory infusion center at its pharmacy office site?

ANSWER:

The applicant will be operating an ambulatory infusion center at its pharmacy office site, and anticipates having several “infusion chairs” in that space, starting with six chairs, with space to add several more as demand warrants.

Does the applicant plan to provide chemotherapy services?

ANSWER:

At this time the applicant does not intend to provide chemotherapy services.

Does the applicant intend to serve pediatric patients. If so, please describe typical scenarios.

ANSWER:

While the applicant has received, as of the date of the application, at least one support letter from a multi-specialty physician group which includes a large pediatric practice, the applicant believes pediatric patients will not be a portion of its patient base in the beginning

2. 1E. Overview

How many other Vital Care franchisees are currently licensed or have recently had an approved CON for home health services?

Response : ANSWER:

There are currently 6 Vital Care franchisees in Tennessee shown on the map at <https://vitalcare.com/find-a-location/locations/?state=TN> . One of those is the applicant’s pharmacy affiliate, Sunray RX NSHTN, LLC, which was recently licensed as a pharmacy and will begin providing infusion pharmacy medications and services in the near future, including in-suite infusions:

SUNRAY RX NSHTN LLC dba Vital Care of Franklin, TN

740 Cool Springs Blvd Suite 120

Franklin, TN 37067

Facility License Number: 00008332

Status: Licensed

Date of Original Licensure: 07/31/2026

Date of Expiration: 07/31/2028

NOTE: Please consider the foregoing and this paragraph an update to the answer provided in 1E in the original application, as at that time the applicant stated that the Tennessee Department of Health, Board of Pharmacy (“BOP”), had informed the applicant that the pharmacy license should be issued by the end of July (on July 23, 2026, BOP completed an inspection of the space leased for the pharmacy, and Sunray RX NSHTN LLC passed that inspection (the issuance of Facility License Number: 00008332 for a pharmacy on July 31, 2026 is now shown on the Department website, but the “paper license” has not yet been received.)

In addition, 2 more “pharmacy and in-suite infusions” franchisees are:

Cumberland Vital Care

3106 Miller Ave. Suite 101

Crossville, TN 38555

And

Dixie Vital Care

311 Landrum Place Suite 600

Clarksville, TN 37043

Vital Care of Memphis (Tristate) has operated both a pharmacy (with in-suite infusions) and an HHA limited to home infusion only for several years at:

1680 Century Center Parkway

Suite 10

Memphis, TN 38134

Vital Care of Knoxville (AKA Blueberry) has operated a pharmacy (with in-suite infusions) for several years, and earlier this year began operating an HHA limited to home infusion only (pursuant to a CON granted in 2025) at:

6700 Baum Drive Suite 22

Knoxville, TN 37919

Vital Care of Chattanooga (AKA River City) operates a pharmacy (with in-suite infusions) and in early 2026 received a CON for an HHA limited to home infusion only at:

1200 Mountain Creek Road

Suite 440

Chattanooga, TN 37405

3. 2E. Rationale for Approval

Does the applicant intend to focus on serving a specific geographic population, or offer specific therapies that other franchisees or existing home infusion agencies do not?

How has the applicant identified need across the whole of Tennessee without an existing patient base of pharmacy or ambulatory infusion patients?

Does the applicant operate a Mississippi based pharmacy or home health agency that serves Tennessee patients?

Can the applicant demonstrate any specific quality measures of its historical operations or the operations of affiliates that may share common ownership?

The attached policies for Vital Care are noted. Is any quality measurement data available for franchisees of Vital Care in the state or nationally?

Response : Question :

Does the applicant intend to focus on serving a specific geographic population, or offer specific therapies that other franchisees or existing home infusion agencies do not?

ANSWER:

While the applicant will initially focus on serving patients in the geographic areas nearest its related pharmacy) and in-suite location in the Greater Nashville area (primarily Williamson and Davidson counties, plus the counties contiguous to them (Rutherford, Wilson, Cheatham, Robertson, Sumner, Marshall, Hickman and Dickson), and secondarily another 14 Middle Tennessee) first year projection of 1 or more noted in 2N. The applicant would note that like the other 3 Vital Care franchisees noted above in the Memphis, Knoxville and Chattanooga metropolitan areas, two of which obtained CON's for all 95 counties and one of which obtained a CON for over 60 counties, the applicant anticipates a growing business which will need to be able to offer home infusion if all 95 counties. At this time the applicant does not anticipate offering any specific therapies that other Vital Care franchisees or existing home infusion agencies do not currently offer, the applicant believes it will be important to be able to offer all approved infusions in all counties as the medical community, including pharmaceutical manufacturers and companies such as Vital Care, receives additional approvals for the home infusion of more and more medications.

How has the applicant identified need across the whole of Tennessee without an existing patient base of pharmacy or ambulatory infusion patients?

How has the applicant identified need across the whole of Tennessee without an existing patient base of pharmacy or ambulatory infusion patients?

ANSWER:

The applicant has worked to identify need throughout the entire state of Tennessee by its research as to the patient base of pharmacy and ambulatory infusion patients, including data reported in Joint Annual Reports and various CON applications which the HFC has approved in the past few years, and proprietary data of Vital Care.

Does the applicant operate a Mississippi based pharmacy or home health agency that serves Tennessee patients?

ANSWER:

Neither the applicant nor any other entity in the Sunray Companies currently operate a pharmacy or home health agency in any state.

Can the applicant demonstrate any specific quality measures of its historical operations or the operations of affiliates that may share common ownership?

ANSWER:

While the applicant, as a new entity, has no historical operations, there are numerous entities within the Sunray Companies which are regularly reviewed and surveyed on a variety of benchmarks, including quality measures. The Sunray Companies include various hotels, plus health related business which are licensed and review by agencies similar to the Tennessee Department of Health in Mississippi and Louisiana, as well as state cosmetology boards, boards of massage therapy, and other boards. In addition, please see Attachment SC1 for more information as to the Sunray Companies' historical or affiliate quality measures, geographic oversight, metrics/source data, and awards.

The attached policies for Vital Care are noted. Is any quality measurement data available for franchisees of Vital Care in the state or nationally?

ANSWER:

At this time the applicant is not aware of any such non-proprietary quality measurement data available for Vital Care franchisees, but would note the Tennessee Vital Care franchises would be reviewed regularly by the Tennessee Department of Health, Board of Pharmacy, and the HFC Division of Licensure periodically reviews HHAs.

4. 4E. Project Cost Chart

Please attach the following:

<https://www.tn.gov/content/dam/tn/hfc/documents/HFC-Building-Land-Lease-Cost-FairMarket.xlsx> as the lease costs do not appear to be identified in Attachment 9A.

Response : *The Fair Market Value versus Total Lease Cost calculation chart was erroneously omitted from the original application portal submission. Below is the calculation of Fair Market Value versus Total Lease Cost:*

Fair Market Value versus Total Lease Cost for Project cost Chart Calculation			
<i>Building and Land Lease Cost and Fair Market</i>			
<i>Amount Rounded to Nearest Dollar</i>			
<i>Use the HIGHEST calculated value in the Project Cost Chart</i>			
<u>LEASE</u>			
Number of Months for Lease		120	
Lease Monthly Payment		\$745	
Total Lease Payments		\$89,418	
<u>FAIR MARKET VALUE OF BUILDING/LAND</u>			
Property Assessment Document Specified Amount	\$4,466,080	Assessed total value	
Total Square Footage of Building/Land	35,512		
Square Footage Used By Project	300		
Calculated Market Value	\$37,729		

5. 1N. Criteria and Standards

Please respond the Item 1N. No attachment is included.

Response : Please see Attachment 1N.

6. 2N. Service Area

It is noted that only 24 of 95 counties include projected utilization in Year One. Please provide additional information supporting the inclusion of all 95 counties in the proposed service area as a new provider.

Since the applicant can only demonstrate need in 24 of the 95 counties in Year One, it the applicant willing at accept a limitation of only those 24 counties?

To what extent can the applicant document referrals it has received for home infusion services that it has been unable to meet due to the lack of suitable existing providers?

Response : Question :

It is noted that only 24 of 95 counties include projected utilization in Year One. Please provide additional information supporting the inclusion of all 95 counties in the proposed service area as a new provider.

ANSWER:

As noted in the narrative for the answer to 2N, the applicant desires to be able to serve all 95 counties, but the portal chart does not appear to allow entry of less than a whole number, and the other counties may average less than one so the applicant was unable to list those counties in the 2N chart with the other 24 counties where the projection is between 1 and 27. Moore County is projected to be less than one, so the applicant increased Moore to 3 to include those other (“more”) counties, as the portal chart does not include a category for “other.” Please advise if the applicant should create an attachment page listing those “less than one” counties as “<1.”

Since the applicant can only demonstrate need in 24 of the 95 counties in Year One, is the applicant willing to accept a limitation of only those 24 counties?

ANSWER:

The applicant believes the overall numbers and circumstance demonstrate a need for all 95 counties, which the application intends to help address, and therefore desires a CON for all 95 counties, as the HFC has approved for the two most recent Vital Care franchisees (the third (older-approved in 2022 and 2024) Vital Care franchisee obtained a CON for over 60 counties), and has approved for several other (non-Vital Care franchisee) applicants seeking similar HHA CONs, and would note that those 3 Vital Care franchisees noted above located in the Memphis, Knoxville and Chattanooga metropolitan areas, are located in metropolitan areas currently estimated to have populations of between approximately 550,000 and 1,350,000, while the Nashville metropolitan area is now estimated to have a population in excess of 2,000,000 (according to general population data available from Wikipedia, using various sources including the University of Tennessee Knoxville, the Office of Management and Budget, and the United States Census Bureau).

To what extent can the applicant document referrals it has received for home infusion services that it has been unable to meet due to the lack of suitable existing providers?

ANSWER:

The applicant has submitted 3 support letters, and anticipates receiving several more, all of which it believes indicate insufficient suitable providers, and would also note other information in its application (as well as other recent applications) regarding the lack of sufficient support for home infusion patients from traditional home health agencies.

7. 3N. Demographics

Please respond to the demographic table 3NB. Nothing is attached.

Response : Please see attachment 3NB.

8. 4N. Special Needs of Service Area

Does the applicant have any source able data related to the high prevalence of specific conditions that its therapies will treat in certain regions of the state?

Has the applicant identified any specific gaps in payor source coverage in specific regions of the state that it plans to address?

What are the specific limitations of TennCare MCO networks related to reimbursement of home infusion nursing services?

Please confirm how TennCare patient referrals for home infusion nursing services will be handled by the applicant.

Response : Does the applicant have any sourceable data related to the high prevalence of specific conditions that its therapies will treat in certain regions of the state?

ANSWER:

The applicant would note information in its application (as well as other recent applications) regarding the increasing number of approved infusions in all counties as the medical community, including pharmaceutical manufacturers and companies such as Vital Care, receives additional approvals for the home infusion of more and more medications.

Has the applicant identified any specific gaps in payor source coverage in specific regions of the state that it plans to address?

ANSWER: While applicant is not currently intending to participate in TennCare/Medicaid due to most infusions not yet being covered by TennCare the applicant intends to monitor any changes which may occur as to payor sources.

What are the specific limitations of TennCare MCO networks related to reimbursement of home infusion nursing services?

ANSWER: The applicant understands the TennCare MCO network are currently not covering many infusions, and for those which may be covered the applicant does not believe the TennCare MCO networks currently provide adequate reimbursement for such home infusion nursing services. In many instances, it is excluded from coverage all together, or provides less than adequate hours. The services are limited to one (1) visit, up to eight (8) hours, and no more than 27 hours per week. However, the nursing may not be covered in the home if it is solely for medication administration, which is the anticipation as many of the intended patients may not be receiving other services. The applicant will continue to monitor any changes provided by the TennCare MCO networks and consider providing home infusion for TennCare patients as warranted.

Please confirm how TennCare patient referrals for home infusion nursing services will be handled by the applicant.

ANSWER: The applicant will evaluate TennCare referrals in the same manner as other referrals and utilize its existing financial hardship policies for the services that may not be covered fully

or at all. The applicant will work with the prescribing provider to assess patient's suitability for home infusion services. If the patient qualifies for financial hardship, the applicant will provide the nursing services to the patient as charity care. If the patient does not qualify for financial hardship, the patient will be provided the option of receiving the services in the applicant's ambulatory infusion center, or receiving their services from another provider of infusion. The charity care provision is an independent decision of each provider and the applicant and its related pharmacy intend to establish relationships with providers that may be able to provide the nursing at no cost to the patient through their infusion center or at the patient's home.

9. 5N. Unimplemented services

Attachment 5N is missing.

Please include a breakdown of other licensed and outstanding recently approved but unimplemented CONs for home infusion services in TN.

Please discuss the projections associated with other recently approved CONs for home infusion and whether there are any differences between the applicant's projected utilization and those other recently approved projects.

Response : ANSWER: See Attachment 5N submitted with this supplement.

Please include a breakdown of other licensed and outstanding recently approved but unimplemented CONs for home infusion services in TN.

ANSWER: See Attachment 5N submitted with this supplement.

Please discuss the projections associated with other recently approved CONs for home infusion and whether there are any differences between the applicant's projected utilization and those other recently approved projects.

ANSWER: The applicant does not believe there are any material differences between the applicant's projected utilization and those of other recently approved projects, including those of other Vital Care franchisees, which operate in a similar fashion as the applicant intends to operate.

10. 6N. Utilization and/or Occupancy Statistics

Please clarify how the applicant will serve East and West Tennessee. Is the applicant planning to ramp up to those grand divisions? If so, please provide an overview of the future ramp up.

Please identify the 10 most common therapies the applicant projects to deliver.

Please provide a detailed methodology for how the projected number of nursing visits and the number of visits by county were established, specifically given the applicant's status as a newly established provider of pharmacy and home health care services in Tennessee.

Please identify all assumptions including the information on historical demand for home infusion services across the 95-county service area.

Please identify the projected number of patients who will require home infusion visits greater than 2 hours vs. less than 2 hours in duration.

How many total visits are projected to be required for patients on average?

Does the applicant intend to provide letters of unmet need for any specific counties in the state?

Response : Question :

Please clarify how the applicant will serve East and West Tennessee. Is the applicant planning to ramp up to those grand divisions? If so, please provide an overview of the future ramp up.

ANSWER: The applicant will initially focus on serving patients in the geographic areas nearest its related pharmacy) and in-suite location in the Greater Nashville area (primarily Williamson and Davidson counties, plus the counties contiguous to them (Rutherford, Wilson, Cheatham, Robertson, Sumner, Marshall, Hickman and Dickson), and secondarily another 14 Middle Tennessee) first year projection of 1 or more noted in 2N. However, with the anticipated development of referral sources and networks the applicant anticipates a slow ramp-up to include other areas of the state. The applicant would note that like the other 3 Vital Care franchisees noted above in the Memphis, Knoxville and Chattanooga metropolitan areas, two of which obtained CON's for all 95 counties and one of which obtained a CON for over 60 counties, the applicant anticipates a growing business which will need to be able to offer home infusion if all 95 counties. The applicant believes it will be important to be able to offer all approved infusions in all counties as the medical community, including pharmaceutical manufacturers and companies such as Vital Care, receives additional approvals for the home infusion of more and more medications.

Please identify the 10 most common therapies the applicant projects to deliver.

ANSWER: The "top ten" list may change from time to time as new infusion therapies are approved for in-home infusion, and as various existing infusion therapies are marketed (both to prescribers and to the general public, as such marketing efforts have been shown to influence inquire of their physicians about such treatments), but the applicant believes that current list includes Ocrevus, Tysabri, Soliris, Vyepti, Prolastin, Skyrizi, Tremfya, Entyvio, Immunoglobulin therapy, and Dalvance.

Please provide a detailed methodology for how the projected number of nursing visits and the number of visits by county were established, specifically given the applicant's status as a newly established provider of pharmacy and home health care services in Tennessee.

ANSWER: The applicant's methodology included a review of anticipated utilization projections from Vital Care, and projections by other recent applicants, especially other Vital Care franchisees which operate a pharmacy and a related home health agency together, and also factored in the average number of visits for patients, and time for those visits.

Please identify all assumptions including the information on historical demand for home infusion services across the 95-county service area.

ANSWER: The applicant would note that several Certificate of Need projects have been approved in recent years seeking to provide only home infusions (limited to products provided by an

affiliated pharmacy), and that those projects demonstrated the unique offerings to be provided by home infusion therapy, including extensive nursing hours, consecutive visit days, patient

and family education, and additional monitoring and reporting requirements for patient safety and therapeutic efficacy. The applicant expects to provide a similar number of projected visits as some of the approved applications, because the nursing visits are driven by the type of therapy the patient is receiving. For example, an IVIG patient will typically require an infusion of 4-5 hours of nursing care per day of therapy for 1-4 days per month. These patients typically receive therapy for many years, and oftentimes for the rest of their life. Each new patient adds to the overall nursing visits and hours required in a given year. However, for an example of a patient receiving treatment for their migraines with Vyepti, one of the limited distribution drugs the applicant's related pharmacy anticipates dispensing, only 1 hour of infusion time is required every three months. Given the different nursing requirements of each therapy type provided by the pharmacy, an average of 6 visits per patient per year is often used to project the number of patient visits for a year. The time required for an infusion is entirely patient specific, and it can vary greatly dependent on the prescribed infusion rate, the patient's tolerability including their vital signs, and potential side effects.

Please identify the projected number of patients who will require home infusion visits greater than 2 hours vs. less than 2 hours in duration.

ANSWER: The applicant projects approximately 65% of the projected patients will require infusions greater than 2 hours, with 35% of the projected patients requiring infusions of less than 2 hours in duration.

How many total visits are projected to be required for patients on average?

ANSWER: A projection of total visits will vary depending on the type of therapy/infusion. Many of the therapies require life-long maintenance therapy and the patient will always require weekly or monthly infusion to slow the progression of their disease and minimize their symptoms, while others have a set duration. The basis for these projections by the applicant also factors in historical

utilization of the pharmacies of other Vital Care franchisee's ambulatory infusion center patients receiving in-suite infusions, but who may desire to transition to home infusion, as well as pharmacy self-administration patients who may transition to home infusion patients as their disease progresses.

Does the applicant intend to provide letters of unmet need for any specific counties in the state?

ANSWER:

The applicant has requested such letters from other providers, but they have not yet been received. The applicant would also note that it believes such letters provided for CONs recently approved for other Vital Care franchisees may be applicable for this application

11. 3C. Effects of Competition and/or Duplication

Will the applicant accept any payor sources that are currently not accepted by existing providers?

Will the applicant offer unique therapies to its patients compared to other infusion pharmacies in the state?

What, if any, key differences are expected between the applicant's service model and the other Vital Care franchisees?

Response : Question :

Will the applicant accept any payor sources that are currently not accepted by existing providers?

ANSWER: At this time the applicant anticipates payor sources similar to most of those providing payments for patients of similar home infusion home health agencies, but would note that as a Vital Care franchisee its related pharmacy may obtain “participating specialty pharmacy” status with various payor sources from time to time. For example, see Attachment SM, which is provided by United Healthcare with respect to some of its medication sourcing protocols, and includes Vital Care on some of the attached listings.

Will the applicant offer unique therapies to its patients compared to other infusion pharmacies in the state?

ANSWER: Similar to the answer above, Vital Care and its franchises may on occasion have access to certain therapies due to its related pharmacy obtaining “participating specialty pharmacy” status with various payor sources or providers.

What, if any, key differences are expected between the applicant's service model and the other Vital Care franchisees?

ANSWER:

The applicant believes all the Vital Care franchisees will offer similar a services model pursuant to their respective franchise agreements, but with somewhat different franchise territory immediately surrounding their respective pharmacy and in-suite infusion sites, but with an overall ability for each franchisee to be a part of a network to assure appropriate services to all.

12. 4C. Accessibility to Human Resources

Does the applicant have any previous experience staffing and providing clinical oversight of a comparable geographic area?

Does the applicant intend to directly employ all staff or will contract staff be utilized?

Please describe the clinical leadership structure and governing body structure of the applicant's proposed home health agency.

Please discuss how the 4.5 FTE direct care staff will be adequate to provide 24/7 coverage of professional nursing services, remote monitoring and patient education across the 95-county service area.

What regions will the nursing staff be based in?

Will the FTEs be made up of multiple nurses in each region?

Response : Question :

Does the applicant have any previous experience staffing and providing clinical oversight of a comparable geographic area?

ANSWER: The applicant would also note that the Sunray Companies, through various other subsidiaries, operate numerous businesses which require similar administrative and managerial support as a home health agency, especially as to staffing. Specific as to clinical support, the related pharmacy (Sunray RX NSHTN, LLC) will have the ability to offer medical and clinical

administrative support via pharmacists and others on its staff. In addition, please see Attachment SC1 for more information as to the Sunray Companies' historical and affiliate geographic oversight for staffing and oversight.

Does the applicant intend to directly employ all staff or will contract staff be utilized?

ANSWER:

The applicant and/or Sunray RX NSHTN, LLC intend to directly employ, either by the pharmacy and/or the HHA, a substantial portion of the staff, however, the applicant anticipates using contract staff in certain circumstances, as well as sometimes engaging an agency such as Naven Health, Inc., a specialized skilled nursing staffing agency operating in all 50 states (specializing in infusion nursing care), which recently received a CON from the HFC (for all 95 counties) for its Tennessee operations.

Please describe the clinical leadership structure and governing body structure of the applicant's proposed home health agency.

ANSWER: Tori Harrigill is General Counsel and the Director of Sunray RX, LLC (the immediate parent of the applicant and its affiliated pharmacy), all of which are within the family the Sunray Companies. The lead pharmacist for Sunray RX NSHTN, LLC will oversee the pharmacy and work closely with the home health agency (and report to Ms. Harrigill). The nurse manager will

report to the pharmacist, who oversees the administration of all pharmaceuticals, including intravenous administration. The applicant would also note that one of the owners of the Sunray Companies, Max Harrigill, is a physician.

13. 4C. Accessibility to Human Resources

What types of clinical staffing requirements will be required for nursing staff serving the pediatric population?

What is the clinical supervision structure for the applicant's home health agency?

Will the RN staff hired for the project be required to have a CRNI designation prior to employment?

Please describe the steps of the infusion delivery process from the point the medication is delivered to being administered by a nurse.

What is the typical shelf life of infusion medications that are delivered to a patient's home?

Response : What types of staffing requirements will be required for nursing staff serving the pediatric population?

ANSWER: At this time such staffing requirements have not been established, but if and when staffing for any pediatric patients is needed it will be experienced RNs with documented and demonstrated proficiencies in providing home infusion to the pediatric population due to the additional complexities present in the population. The applicant anticipates a relatively small number of pediatric infusion patients, and anticipates being able to identify a nurse with the skills necessary to provide these infusions.

What is the clinical supervision structure for the applicant's home health agency?

ANSWER: The lead pharmacist for Sunray RX NSHTN, LLC will oversee the pharmacy and work closely with the home health agency (and report to Ms. Harrigill). The nurse manager will

report to the pharmacist, who oversees the administration of all pharmaceuticals, including intravenous administration.

Will the RN staff hired for the project be required to have a CRNI designation prior to employment?

ANSWER: CRNI designation would not be a requirement prior to employment, but the applicant will strongly encourage and support obtaining such a designation, and believes in supporting the team to expand their knowledge and skills, which will include a policy to reimburse for continuing education and professional certification programs, so if and when a nurse was eligible for the certification the applicant would assist financially and as to time requirements for obtaining the certification. Additionally, the applicant will encourage nursing staff to be or become an Ig Certified RN, to specialize in providing Ig treatments to patients.

Please describe the steps of the infusion delivery process from the point the medication is delivered to being administered by a nurse.

ANSWER: The medication is dispensed to the patient in a temperature controlled and verified shipping container with any applicable supplies and is transported to the patient's home via a courier service, or national shipping carrier such as FedEx or UPS with express/overnight shipping. The patient receives the pharmaceuticals and will refrigerate any medication requiring refrigeration until instructed to remove it by the nurse ahead of their scheduled infusion appointment time. At the infusion, the nurse will verify the patient's identity, vitals, medication name, dosage, including lot number and expiration date, and applicable supplies. The nurse will verify the patient has the necessary anaphylaxis medication on hand and available. The nurse will gain IV access to begin administration of the medication and monitor the patient throughout the duration of the infusion including vitals and infusion related reactions, or adverse events. Following the completion of the medication, the nurse will disconnect the IV access while continuing to monitor the patient. While monitoring the patient vitals, the nurse will notify the

pharmacist and/or the patient's physician should any issues arise. For certain pharmaceuticals, the patient requires additional monitoring by the nurse following the infusion per medication or provider recommendations. For example, Tysabri requires a

one-hour additional monitoring period at the conclusion of the infusion for the first 12 monthly infusions to observe for possible adverse effects.

What is the typical shelf life of infusion medications that are delivered to a patient's home?

ANSWER: The typical shelf life of most infusion medications is two years, however infusions compounded by the applicants related pharmacy may have a shelf life as short as ten days.

14. 5C. License/Certification

What category of ACHC accreditation will the applicant pursue?

Does the applicant intend to enroll in Medicare Part B as a Qualified Home Infusion Therapy Supplier? If not, please explain.

How will the applicant handle referrals for patients who are enrolled in regular Medicare Part B and wish to utilize their home infusion therapy (HIT) benefit which cover nursing visits, caregiver training and patient monitoring?

Is the applicant a supplier of infusion related DME for in-home use?

Based upon the limitations of the Medicare Home Infusion Therapy benefit, what percentage of home infusion therapy visits would be eligible for coverage vs. those that would not be e.g. (anti-infectives).

Response : Question :

What category of ACHC accreditation will the applicant pursue?

ANSWER: The applicant intends to seek "Infusion Nursing Certification" from ACHC, and will promptly apply for such accreditation following licensure as a home health agency, to supplement the certification being sought by the affiliated pharmacy. As to the pharmacy, it has applied to ACHC for IRX-NO797 (Infusion Pharmacy Without Sterile Compounding), and will subsequently apply for USP <797> to include the process of sterile compounding, (one the "clean room" has been certified).

Does the applicant intend to enroll in Medicare Part B as a Qualified Home Infusion Therapy Supplier? If not, please explain.

ANSWER: Yes, the applicant intends to enroll in Medicare Part B as a Qualified Home Infusion Therapy Supplier.

How will the applicant handle referrals for patients who are enrolled in regular Medicare Part B and wish to utilize their home infusion therapy (HIT) benefit which cover nursing visits, caregiver training and patient monitoring?

ANSWER: The applicant will coordinate with its affiliated pharmacy as to referrals for patients who are enrolled in regular Medicare Part B and wish to utilize their home infusion therapy (HIT) benefit which cover nursing visits, caregiver training and patient monitoring, in order to assure the patient is adequately covered for the infusion needs of the patient/

Is the applicant a supplier of infusion related DME for in-home use?

ANSWER: The applicant anticipates that its affiliated pharmacy will be a supplier of infusion-related durable medical equipment for in-home use.

Based upon the limitations of the Medicare Home Infusion Therapy benefit, what percentage of home infusion therapy visits would be eligible for coverage vs. those that would not be e.g. (anti-infectives).

ANSWER: The applicant anticipates that 100% of the home infusion therapy visits would be eligible for coverage under the Medicare Home Infusion Therapy Benefit. The applicants affiliated pharmacy anticipates credentialing and participation with Medicare for the eligible therapies under the benefits for which its patients are eligible, with most therapies being billed under the pharmacy benefit, or Part D, especially for Medicare Advantage patients. Other pharmaceuticals covered by the Medicare Part B benefit are

required to be administered in a hospital outpatient center or ambulatory infusion clinic under medical director supervision. Anti-infectives administered under Medicare Part B are typically not covered by this benefit and would be covered under a home health visit instead for dressing changes and line management.

15. 5C. License/Certification

Please discuss whether the CMS moratorium on new home health providers will impact the implementation of this project.

Please discuss the full scope of operational support provided to the applicant by its franchisor.

Response : Please discuss whether the CMS moratorium on new home health providers will impact the implementation of this project.

ANSWER: The applicant does not anticipate that the CMS moratorium will have a material impact on the implementation of this project, as the moratorium does not affect the applicant's related pharmacy, and such pharmacies may participate in Medicare through several different enrollment categories (including Part D and Part B, As to the applicant itself, general information obtained from some health care trade associations based in Washington DC seems to indicate that the moratorium will hopefully end after November 13, 2026, as CMS has not indicated an intention to extend the moratorium beyond mid-November, or lift the moratorium early.

Please discuss the full scope of operational support provided to the applicant by its franchisor.

ANSWER: As a franchisor supporting numerous franchisees across the county, Vital Care provides a variety of patient education materials for the patients of a franchisee, as well as items for the franchisees for the safe and efficient operation of a pharmacy and/or home health agency, including group purchasing arrangements, patient screening materials, care planning materials, charity care policies, performance improvement and quality check policies and materials, and so forth. Some of these items are included in attachments which were included with the original application.

16. 9C. Other Facilities Charges

Please include all home health agencies providing infusion services in the charge comparisons for Attachment 9C.

Response : Please see attachment 9C.

17. 10C. Project Only Payor Mix

Please source the data provided in response to Item 10C.

Please confirm that the 22.5% of gross operating revenue is projected to come from Medicare Advantage patients.

Under what circumstances will the applicant accept patients for Charity Care?

Response : Question :

Please source the data provided in response to Item 10C.

ANSWER: The data provided based the payor mix on to historic and anticipated utilization experienced and anticipated by other franchisees of Vital Care as to pharmaceuticals dispensed by their related pharmacy pharmacy, including utilization Medicare Part D and Medicare Advantage patients.

Please confirm that the 22.5% of gross operating revenue is projected to come from Medicare Advantage patients.

ANSWER: The applicant anticipates 10% of its payor mix would be traditional Medicare patients,

because of the limitations of the Medicare coverage for pharmaceuticals dispensed by the pharmacy, and the anticipated utilization rate of Medicare Part D and Medicare Advantage patients.

Under what circumstances will the applicant accept patients for Charity Care?

ANSWER: The applicant and its affiliated pharmacy will have a policy for providing charity care. Patients demonstrating financial need will be evaluated following this policy and will be provided

charity care if the criteria are met. Vital Care as the franchisor has, and the applicant anticipates that its affiliated pharmacy, will establish relationships with several pharmaceutical manufacturers and patient assistance programs which can provide these services at a free or reduced cost to patients if there is need. The applicants charity care

18. 7Q. Legal Judgements

The applicant has selected Yes in response to the question about suspension/termination but without any detail. Please clarify if this is accurate.

Response : The PDF of the application as printed by the applicant upon filing shows that "no" was made, but if somehow a selection of "yes" is shown on the official version that was an error, and "no" should have been selected.

Project Name : Sunray HHA TN, LLC

Supplemental Round Name : 2

Certificate No. : CN2607-015

Due Date : 8/14/2026

Submitted Date : 8/11/2026

1. 1N. Criteria and Standards

Attachment 1N, Home Health Services, Criterion 1 Determination of Need

Please respond to this criterion with the most recently published Home Health Need Projections from TDH 2025-2028.

Response : Please see Attachment 1N

2. 1N. Criteria and Standards

Attachment 1N, Home Health Services, Criterion 5, Current Service Area Utilization

Please attach statewide utilization (all HHAs) and infusion only provider utilization for 2025.

Response : Please see Attachment 1N

3. 1N. Criteria and Standards

Attachment 1N, Home Health Services, Criterion 7, Community Linkage Plan

The existing relationships of the lead pharmacist are noted. Please identify any specific referral arrangements with appropriate health care system providers/services (that comply with CMS patient choice protections) and working agreements with other related community services assuring continuity of care focusing on coordinated, integrated systems.

Response : The applicant's affiliated pharmacy has interviewed several potential employees to work with the lead pharmacist and assist with "account executive" functions, and is now in the process of hiring such employees to engage with social workers, discharge planners and various other healthcare professions as to the assistance the pharmacy can provide to such healthcare professionals for their patients who may be in need of in-suite infusions, as well as home infusions. However, as the pharmacy is a new operator and only received its license about 2 weeks ago, no specific arrangements have yet been made with any healthcare providers, but those are anticipated to be finalized in the near future. These employees are also anticipated to attend (and plan when warranted) various health fairs

and undertake other efforts to assist with the growth of the pharmacy and the applicant, and will also coordinate such efforts with the applicant's franchisor.

4. 1N. Criteria and Standards

Attachment 1N, Home Health Services, Criterion 8, TennCare Managed Care Organizations (MCOs) and Financial Viability

Please explain the 100% HIT benefit assumption.

Please address TennCare participation in response to this Criterion.

Response : As to the HIT benefit assumption, the applicant has reviewed several recent similar applications for home infusion, as well as information and assistance provided by Vital Care regarding a variety of its pharmacy and infusion franchisees around the country, and believes the assumption is reasonable, especially given the status of various Vital Care pharmacies as to Medicare. While the applicant is not currently intending to participate in TennCare/Medicaid due to most infusions not yet being covered by TennCare the applicant intends to monitor any changes which may occur, and if a decision is later made to seek TennCare participation and work with the MCOs, the applicant and the Sunray Companies have the financial viability to deal with any delays as to certification, or otherwise.

5. 1N. Criteria and Standards

Attachment 1N, Home Health Services, Criterion 9, Proposed Charges

Please address the two charge considerations using the 2025 JAR for infusion providers.

Response : See Attachment 1N9

6. 1N. Criteria and Standards

Attachment 1N, Home Health Services, Criterion 11, Quality Control and Monitoring

Please confirm whether the applicant is proposing full adoption of the attached (Attachment VCSD 4915-3925-4466) policies of Vital Care as its own once it is operational.

Response :

Confirmed, as a Vital Care franchisee the applicant will work with Vital Care as to a variety of benefits afforded, including not only items such as guidance on Quality Control and Monitoring, but also many other benefits mentioned in this application (a Vital Care charity care policy, case management protocols, family support training, etc).

7. 2N. Service Area

Please attach a document demonstrating projected utilization by patient county of residence if the applicant is unable to do so in the table provided in the application portal.

Please explain what is meant by less than 1 patient being served in a county?

Response : Please see Attachment 2N-SA as to such utilization by county, which includes counties with less than one patient being served in in a particular county during a given year due to averaging over more than one year, for some of the counties which are less populous, or geographically further away from the Applicant's office , especially during the "ramp-up" process.

8. 3N. Demographics

Please source the data provided in Attachment 3NB.

The following items in Attachment 3NB require revisions:

Median Household Income and % in Poverty (all rows). Please base this data on the Census Quickfacts site.

Please update the TennCare Enrollment data and TennCare Enrollees as % of Total to be based on May 2026 data.

Response : See Replacement Attachment R3NB, which has such numbers updated accordingly, and has source data noted.

9. 5N. Unimplemented services

Please provide historical utilization of home health services from 2023-2025 for all providers statewide as well as specific utilization for agencies reporting home infusion over the same period.

Response : See Attachment 5N for information reported in general, and specific as to only home infusion.

10. 6N. Utilization and/or Occupancy Statistics

How many total visits are projected to be required for patients on average?

Please submit any additional documentation supporting the projected need in the statewide service area, including letters from potential referring providers.

Response : As to total visits, because the nursing visits are driven by the type of therapy the patient is receiving. and can change due to progress of the patient, or setbacks experienced, etc, as well as improvements in medications and therapies, an overall average is difficult to predict. Even though the time required for an infusion is entirely patient specific, and can vary greatly dependent on the prescribed infusion rate, the patient's tolerability including their vital signs, potential side effects, etc, other applicants have estimated averages of about 6 visits per year, which the applicant believes is a reasonable estimate.

As to additional support letters, the applicant has requested such letters from several sources and anticipates more will be received before the CON hearing.

11. 5C. License/Certification

Please clarify which specific home health agency services (skilled nursing) will specifically be covered under the HIT benefit.

What type of coverage is the applicant referring to as 100% HIT eligible?

It is understood that the CMS moratorium does not affect the applicant's pharmacy. How will it affect the applicant's registration and certification as a CMS home health agency if an application cannot be made until November 2026 at the earliest?

Response : HIT-eligible coverage generally relates to patients referred to and accepted by the applicant's related pharmacy under this benefit for a covered therapy, such as immunoglobulin therapy, but can include infusion drugs for therapy, pain management, antifungals and antivirals, etc, and the nursing services related to the infusion of such drugs.

Given the anticipated date for the CON hearing (September 23, 2026), and with no material construction required for the applicant's office (since it is being subleased in space already constructed and being utilized by the applicant's related pharmacy), the applicant does not think there will be any negative effect from the moratorium, which is set to expire November 13, 2026. The applicant anticipates filing its licensure application with the HFC's Licensure Division shortly after the CON hearing, well before November 13, and if the HFC's Licensure Division processes the application in its normal time frame the moratorium will have expired before the license is received, and CMS certification can then be sought immediately upon issuance of the license and submission of evidence of licensure to CMS.

12. 9C. Other Facilities Charges

Please attach charge data based on the following:

- a. The average charge per visit and/or episode of care by service category, if available in the JAR data.
- b. The average charge per patient based upon the projected number of visits and/or episodes of care and/or hours per patient, if available in the JAR data.

Response : See Attachment 9C as to charge data.

13. 10C. Project Only Payor Mix

Please attach the charity care policy for the applicant.

Response : Please see Attachment 10C-CCP for a copy of the charity care policy.

Project Name : Sunray HHA TN, LLC

Supplemental Round Name : 3

Certificate No. : CN2607-015

Due Date : 8/14/2026

Submitted Date : 8/13/2026

1. 3N. Demographics

Please revise the following items in Attachment R3NB:

Median Household Income: Benton, Moore, Putnam and State of TN Total

TennCare Enrollees: Hardeman County, State of TN Total

Response : Please see Replacement Attachment R3NB, with corrections made as to the counties and columns noted.