

LETTER OF INTENT



**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

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LETTER OF INTENT

The Publication of Intent is to be published in The Cleveland Daily Banner which is a newspaper of general circulation in Bradley County, Tennessee, on or before 04/15/2025 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 East Tennessee Physical Rehabilitation JV, LLC, a/an newly formed entity owned by East Tennessee Physical Rehabilitation JV, LLC with an ownership type of Limited Liability Company and to be managed by itself intends to file an application for a Certificate of Need for the establishment of an Inpatient Rehabilitation Hospital ("IRH"), a/k/a a "Rehabilitation Facility," which will be licensed as such by the Health Facilities Commission. The IRH will have 29 beds and will provide inpatient physical rehabilitation services. The address of the project will be 2800 Westside Drive NW, Cleveland, Bradley County, Tennessee, 37312. The estimated project cost will be \$29,745,558.

The anticipated date of filing the application is 05/01/2025

The contact person for this project is Attorney Jerry Taylor who may be reached at Thompson Burton PLLC - One Franklin Park, 6100 Tower Circle, Suite 200, Franklin, Tennessee, 37067 – Contact No. 615-716-2297.

Jerry Taylor

04/15/2025

jtaylor@thompsonburton.com

Signature of Contact

Date

Contact's Email Address

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

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

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



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PUBLICATION OF INTENT

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

NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED

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 East Tennessee Physical Rehabilitation JV, LLC, a/an newly formed entity owned by East Tennessee Physical Rehabilitation JV, LLC with an ownership type of Limited Liability Company and to be managed by itself intends to file an application for a Certificate of Need for the establishment of an Inpatient Rehabilitation Hospital ("IRH"), a/k/a a "Rehabilitation Facility," which will be licensed as such by the Health Facilities Commission. The IRH will have 29 beds and will provide inpatient physical rehabilitation services. The address of the project will be 2800 Westside Drive NW, Cleveland, Bradley County, Tennessee, 37312. The estimated project cost will be \$29,745,558.

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CRITERIA AND

STANDARDS

Attachment 1NR2

Responses to Standards and Criteria for Rehabilitation Facilities

1. **Determination of Need:** The need for comprehensive inpatient rehabilitation beds shall be determined by applying the guideline of one bed per 1,000 applied to the age 65+ population in the service area of the proposal.

The need shall be based upon the current year's population and projected four years forward. Population statistics from the Department of Health should be used for the calculation.

In accordance with Tennessee Code Annotated 68-11-14607 (g), "no more frequently than one time every three years, a hospital, rehabilitation facility, or mental health hospital may increase its total number of licensed beds in any category by ten percent or less of its licensed capacity at any one campus over any period of one year for any services it purposes it is licensed to perform without obtaining a certificate of need. These licensed beds that were added without a certificate of need should be considered as part of the determination of need formula by the agency.

RESPONSE: The projected 65+ population of the 5-county service area for 2029 is 50,236. According to the formula there is a need for 50 inpatient rehabilitation facility beds. There are 0 IRF beds in the PSA today.

2. **Establishment of Service Area:** The geographic service area shall be reasonable and based on an optimal balance between population density and service proximity of the applicant.

RESPONSE: The primary service area (PSA) is Bradley, McMinn, Meigs, Polk, and Rhea Counties. Patients from these counties accounted for approximately 93% of the inpatient admissions to BMC in 2024.

Bradley County is by far the most populous of the PSA counties in 2025. The population of Bradley County is 113,913; the next closest population is that of McMinn County, which has a population of 55,752. The population of the entire PSA is 235,626, so Bradley County makes up 48.3% of the population. The PSA counties are on average located 24.7 miles from the site for ETPR. Because the site is in the most densely populated area of the PSA, and is also within reasonable driving distance of all counties in the PSA, the proposed service area strikes the

optimal balance between population density and proximity of the applicant. The population projections for the PSA counties are shown below:

Demographic Variable/ Geographic Area	Department of Health/Health Statistics							Bureau of the Census				TennCare	
	Total Population-Current Year (2025)	Total Population-Projected Year (2029)	Total Population-% Change	*Target Population-(65+) Current Year	*Target Population- (65+) Project Year	*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
Bradley County	113,913	117,682	3.31%	21,167	22,892	8.15%	19%	40.4	\$63,789	17,087	15.0%	22,747	20.0%
McMinn County	55,752	56,675	1.66%	11,742	12,326	4.97%	22%	42.7	\$59,674	8,307	14.9%	13,001	23.3%
Meigs County	13,769	14,253	3.52%	3,058	3,266	6.80%	23%	45.4	\$58,395	2,148	15.6%	3,453	25.1%
Polk County	18,244	18,556	1.76%	4,089	4,391	7.39%	24%	46.8	\$60,227	2,737	15.0%	3,827	21.0%
Rhea County	33,948	34,115	0.49%	6,942	7,361	6.04%	22%	42.9	\$58,133	5,432	16.0%	8,396	24.7%
PSA Total/Avg.	235,626	241,281	2.40%	46,998	50,236	6.89%	21%	43.6	\$60,044	36,051	15.3%	51,424	21.8%
State of TN Total	7,242,733	7,462,831	3.04%	1,314,490	1,407,903	7.11%	19%	39.1	\$67,097	1,013,983	14.0%	1,414,667	19.5%

Source: Tennessee State Data Center / Boyd Center for Economic Research

3. **Minimum Bed Requirements:** Inpatient rehabilitation units should have a minimum size of 20 beds.

RESPONSE: N/A; this will be a freestanding IRF.

Freestanding rehabilitation hospitals should have a minimum size of 50 beds.

RESPONSE: The proposed IRF would have 29 beds. The applicant believes this is an appropriate number of beds and strikes a good balance between meeting area needs while not overbuilding.

4. **Relationship to Existing Similar Services in the Area:** The proposal shall discuss what similar services are available in the service area and the latest reported three-year trends in occupancy and utilization of those services. This discussion shall include the likely impact of the proposed increase in rehabilitation beds on existing providers in the proposed service area and shall include how the applicant's services may differ from these existing services. The

agency should consider if the approval of additional beds in the service area will result in unnecessary, costly duplication of services.

RESPONSE: There are no IRFs or IRF beds in the PSA. There are two IRFs in neighboring Hamilton County: Siskin Hospital for Physician Rehabilitation, (“Siskin”) and Encompass Health Rehabilitation Hospital of Chattanooga (“Encompass”). There is also a small 12-bed physical rehabilitation unit in Parkridge Medical Center in Hamilton County. There is an unimplemented CON for the establishment of an IRF in Hamilton County, CSH/LP Behavioral Health and Rehabilitation, CN2409-027A.

Siskin has 96 IRF beds and consistently has a high occupancy rate, and the current occupancy rate is 88%. A substantial share of Siskin’s inpatient occupancy is made up of residents of the PSA. In FYE 6/30/ 2024 Siskin admitted 269 patients from the PSA counties – more than any other IRF or rehab unit in the region. This demonstrates several of the needs which will be met by the proposed ETPR facility in Bradley County: (1) the need for IRF services to be locally available in the e2 county PSA; (2) the need to decompress the extremely high volume at Siskin by shifting some of its volume to the new IRF, and (3) the need to bring these services closer to the homes of the residents of the PSA in need of inpatient physical rehabilitation serves.

Encompass is a 69 bed IRF. Its occupancy rate was only 63% in 2023, and only 61% in 2022. (The 2024 JARs have not been released as of the date of this filing). Encompass admitted only 171 patients from the PSA in 2023 (the latest year for which JARs are available.)

There is also a small, 12-bed physical rehabilitation unit at Parkridge Medical Center in Chattanooga. The 12-bed unit is not a freestanding IRF but instead is a small rehabilitation unit in an acute care hospital. For that reason alone, it should not be considered a “similar facility.” Also, because an acute care hospital does not report the number of patient days for a rehab unit on its JAR, its utilization and occupancy data is not publicly available. For those reasons, Parkridge is omitted from this discussion.

There is an approved but unimplemented CON for the establishment of an IRF in Hamilton County, which was approved in December 2024: CSH/LP Behavioral Health and Rehabilitation, CN2409-0276A. This CON is for 40-bed IRF to be located Ooltewah in far eastern Hamilton County. This facility is not easily accessible geographically to the PSA population, and will likely attract relatively few admissions from the PSA for several reasons. First, this proposed new facility in Ooltewah is a much greater distance and driving time for

patients from the PSA. For example, the distance from Bradley County to the proposed ETPR site is only 2 miles and 7 minutes. To get to the CSH/LP site from Bradley County, one would have to add an additional 15.7 miles and 19 minutes each way to their trip.

It is also clear from the CSH/LP application that the intent of the project is primarily to serve Hamilton County and surrounding counties in Georgia and North Carolina. The applicant for CSH/LP projected only 25% of its entire utilization being from the 5-county PSA . Bradley was projected to provide only 12% of admissions. A full 70% of admissions are projected to come from Hamilton County (40%) and from “Other States” (30%).

Additional inpatient rehabilitation beds, units, or freestanding hospitals should not be approved by the HSDA unless all existing units or facilities in the proposed service area are utilized at the following levels:

10-30 bed unit ~ 75%

31-50 bed unit/facility ~ 80%

51 bed plus unit/facility ~ 85%

RESPONSE: There are no IRFs or IRF beds in the PSA. Both of the IRFs in neighboring Hamilton County are 51+ bed facilities: Siskin has 96 beds and Encompass has 69 beds. Siskin’s current occupancy rate meets the 85% threshold which indicates additional capacity is needed. Encompass does not meet the need threshold.

Siskin’s licensed occupancy rate was 83% in 2024. However, some of its beds were not available during the year due to a phased-in renovation of the entire facility, which has stretched over the past 2-3 years. Siskin’s occupancy rate based on the number of beds and days actually available in 2024 was 88%. Thus, Siskin’s occupancy meets the CON benchmark which indicates that additional bed capacity is needed. The additional capacity is the 29 beds being requested for the new ETPR facility in Bradley County.

A table showing the utilization data for Siskin and Encompass for the past 3 years is attached as Attachment 1N(1).

5. **Quality Considerations:** Applicants should use the Centers for Medicare & Medicaid Services (CMS) required measures for inpatient rehabilitation facilities. As of fall 2019, these measures are as follows:

- a. Pressure ulcers,
- b. Catheter associated urinary tract infection (CAUTI),
- c. Healthcare worker influenza vaccinations,
- d. 30-day post-discharge readmissions,
- e. Clostridium difficile (C. diff),
- f. Falls with injury, and
- g. Functional outcome measures – mobility, self-care.

Applicants should use the following table to demonstrate the quality of care provided at the existing unit or units.

Data Source: Inpatient Rehabilitation Facility Compare

<https://www.medicare.gov/inpatientrehabilitationfacilitycompare/>

Because these measures change over time, applicants should use the measures that are in place at the time of the application. Applicants should provide data from the most recent four quarters from existing facilities operated by the applicant.

For applicants with no existing facility or service line, quality data from the most recent four quarters would be unavailable and not required for the application.

RESPONSE: Although this application is for a proposed new facility and new provider, Siskin holds a 65% share of the applicant and its quality measures score should be considered. Those scores are shown below. There are data for reporting periods which have been published on Medicare Compare, and there are newer sets, the data for which has been reported to Medicare, but has not yet been publicly posted. Siskin's scores are consistently higher than the national average in many categories.

Measure	Currently on CMS Compare				Reported to CMS – Pending public reporting	
	National Average	Siskin Hospital	Date Range	Interpretation of Score	Siskin Hospital	Date Range
Pressure ulcers	1.0%	0.8%	7/1/23 – 6/30/24	Lower number is better	0.7%	7/1/24 – 4/30/25
Catheter associated urinary tract infection (CAUTI),	1.087	8.531	4/1/23 – 3/31/24	Lower number is better	0.000	7/1/24 – 3/31/25
Healthcare worker influenza vaccinations	79.1%	55%	10/1/23 – 3/31/24	Higher number is better	41%	10/1/24 – 3/31/25
30-day post-discharge readmissions	8.90%	8.24%	10/1/2021 – 9/30/23	Lower number is better	Unable to determine	
Clostridium difficile (C. diff)	0.375	0.358	4/1/23 – 3/31/24	Lower number is better	0.373	7/1/24 – 3/31/25
Falls with injury	0.2%	0.2%	7/1/23 – 6/30/24	Lower number is better	0.0%	7/1/24 – 4/30/25
Functional outcome measures – mobility, self-care	56.0%	34.24%	7/1/23 – 6/30/24	Higher number is better	Risk Adjusted. Unable to determine	
Rate of successful return to home or community	66.95%	63.89%	10/1/2021 – 9/30/2023	Higher number is better	72.89%	7/1/24 – 4/30/25
% of pts meds reviewed and provided med list to next healthcare setting	94.7%	96.7%	7/1/23 – 6/30/24	Higher number is better	97.7%	7/1/24 – 4/30/25
% of pts meds reviewed and provided a med list to patient, family and/or caregiver at discharge	97.7%	99.3%	7/1/23 – 6/30/24	Higher number is better	92.8%	7/1/24 – 4/30/25
% of pts meds reviewed and received follow-up care when med issues identified	98.1%	99.1%	7/1/23 – 6/30/24	Higher number is better	99.0%	7/1/24 – 4/30/25

6. **Licensure and Quality Considerations:** Any existing applicant for this CON service category shall be in compliance with the appropriate rules of TDH. Additionally, the applicant shall demonstrate certification by CMS for existing facilities.

RESPONSE: This item is N/A since this is an application for a proposed new facility.

7. **Adequate Staffing:** The applicant must document the availability of adequate professional staff, as per licensing and Centers for Medicare & Medicaid Services (CMS) requirements, to deliver all designated services in the proposal.

RESPONSE: The staffing plan for the first year of operation calls for 56.5 FTE of direct patient care staff and 13.8 FTEs of non-patient care staff. Both Siskin and BMC have the experience and resources to ensure that recruitment, hiring, and training, of staff are in compliance with all applicable licensing and accreditation requirements.

8. **Services to High-Need and Underserved Populations:** Special consideration shall be given to applicants providing services fulfilling the unique needs and requirements of certain high-

need populations, including uninsured, low-income, and underserved geographic regions, as well as other underserved population groups.

RESPONSE: ETPR will participate in TennCare and intends to contract with all TennCare MCOs operating in the East Tennessee region. In addition, a reasonable level of charity care and/or discounted care will be allocated for qualified low-income individuals who are not eligible for TennCare.

Each of the 5 counties in the PSA are designated as a Medically Underserved Area and/or a Medically Underserved Population by the Health Resources and Services Administration. Please see Attachment 1N(2) for verification of those designations.

9. **Access to Services in the Proposed Service Area:** The applicant must demonstrate an ability and willingness to serve equally all of the service area in which it seeks certification. In addition to the factors set forth in HSDA Rule 0720-11-.01(1) (listing 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 a limited access in the proposed service area. Factors influencing access to services in the proposed service area may include drive time to obtain care.

RESPONSE: One of the key needs being met by the proposed new Inpatient Rehabilitation Facility (IRF) is the improvement of local access to essential rehabilitation services for residents of the predominantly rural five-county Proposed Service Area (PSA). Currently, individuals requiring IRF care must travel to Chattanooga in Hamilton County—most often to Siskin Hospital for Physical Rehabilitation—or in some cases as far as Knoxville. This presents significant challenges in both distance and travel time.

For many residents, particularly those in Bradley, Polk, McMinn, Meigs, and Rhea Counties, the trip to Siskin involves traversing White Oak Mountain via I-75 South. This stretch of the interstate is geographically challenging and frequently congested, particularly during rush hour traffic. Ongoing and intermittent road construction projects along I-75 exacerbate delays and unpredictability, especially between the Bradley County line and the outskirts of Chattanooga. This creates a major barrier to access for patients and family members who must make repeated trips during a patient's inpatient rehabilitation stay. Travel under these conditions can exceed 90 minutes each way during peak hours.

By establishing the new IRF with 29 beds in Bradley County, travel burdens are significantly reduced. As shown in the table below and Attachment 1N(3), patients and families from within the PSA will save an average of 27 miles and approximately 37 minutes each way when compared to traveling to Siskin Hospital in Chattanooga. This translates into a total round-trip savings of over an hour and 54 miles daily. The drive times in the table are averages; the reductions in travel times are even more pronounced during peak traffic periods and in the context of ongoing I-75 construction.

Additionally, the new IRF in Bradley County enhances local access for patients and facilitates more frequent and convenient family involvement in care, which is associated with improved recovery outcomes. The strategic location of this facility allows us to provide more equitable service coverage throughout the entire PSA, ensuring that underserved populations in these rural counties have practical, timely access to high-quality rehabilitation services.

MILAGE AND AVERAGE DRIVE TIMES FROM PSA COUNTIES TO IRFs (from geographic center of county)							
		Destination: ETPR		Destination: CSH/LP			
County	County Seat	Distance (Miles)	Drive Time (Minutes)	Distance (Miles)	Drive Time (Minutes)	Saved Distance (Miles)	Saved Time (Minutes)
Bradley	Cleveland	2	7	17.7	26	15.7	19
McMinn	Athens	27.3	26	38	38	10.7	12
Meigs	Decatur	30.6	35	44.9	47	14.3	12
Polk	Benton	27.8	47	41.2	56	13.4	9
Rhea	Dayton	35.6	57	42.1	57	6.5	0
Average		24.7	34.4	36.8	44.8	12.1	10.4

10. **Data Requirements:** Applicants shall 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 practice, existing data reporting streams will be relied upon and adapted over time to collect all needed information.

RESPONSE: The applicant will do so.

UTILIZATION OF IRF BEDS IN CONTIGUOUS COUNTIES*- YTD FYE 6/30/2025 (7/1/24-3/31/25)									
* There are 0 IRF Facilities or Beds in the PSA									
Facility	County	Beds	Total patients	Total Pt. Days	Licensed Bed Days Avialable	Licensed Occupancy Rate	Actual Bed Days Available**	Actually Available Beds Occupancy Rate	Pts. from PSA
Siskin	Hamilton	96	1,465	20,374	26,304	77%	23,248	88%	187
Encompass	Hamilton	69	N/A	N/A	18,906	N/A	N/A	N/A	N/A
Parkridge M.C. (DPU)	Hamilton	12	N/A	N/A	3,288	N/A	N/A	N/A	N/A
**Due to a facility-wide renovation project implemented in phases over the past 3 years, some of the licensed beds were not available.									
UTILIZATION OF IRF BEDS IN CONTIGUOUS COUNTIES*- FYE 6/30/2024									
* There are 0 IRF Facilities or Beds in the PSA									
Facility	County	Beds	Total patients	Total Pt. Days	Licensed Bed Days Avialable	Licensed Occupancy Rate	Actual Bed Days Available **	Actually Available Beds Occupancy Rate	Pts. from PSA
Siskin	Hamilton	96	2,057	29,052	35,136	83%	33,000	88%	269
Encompass	Hamilton	69	N/A	N/A	25,254	N/A	N/A	N/A	N/A
Parkridge M.C. (DPU)	Hamilton	12	N/A	N/A	4392	N/A	N/A	N/A	N/A
**Due to a facility-wide renovation project implemented in phases over the past 3 years, some of the licensed beds were not available.									
UTILIZATION OF IRF BEDS IN CONTIGUOUS COUNTIES*- FYE 6/30/2023 (JAR)									
* There are 0 IRF Facilities or Beds in the PSA									
Facility	County	Beds	Total patients	Total Pt. Days	Licensed Bed Days Avialable	Licensed Occupancy Rate	Actual Bed Days Available**	Actually Available Beds Occupancy Rate	Pts. from PSA
Siskin	Hamilton	96	1,822	28,285	35,040	81%	31,803	89%	207
Encompass	Hamilton	69	1,321	15,970	25,185	46%	N/A	N/A	171
Parkridge M.C. (DPU)	Hamilton	12	244	3265	4,380	75%	N/A	N/A	N/A
**Due to a facility-wide renovation project implemented in phases over the past 3 years, some of the licensed beds were not available.									

UTILIZATION OF IRF BEDS IN CONTIGUOUS COUNTIES*- FYE 6/30/2022 (JAR) - Encompass Licensed Beds As Reported on JAR***

* There are 0 IRF Facilities or Beds in the PSA

Facility	County	Beds	Total patients	Total Pt. Days	Licensed Bed Days Available	Licensed Occupancy Rate	Actual Bed Days Available**	Actually Available Beds Occupancy Rate	Pts. from PSA
Siskin	Hamilton	96	1,896	27,895	35,040	79.6%	31,261	89.2%	226
Encompass	Hamilton	50***	1,222	15,360	18,250	84.2%	N/A	N/A	131
Parkridge M.C. (DPU)	Hamilton	12	250	3313	4,380	75.6%	N/A	N/A	N/A

**Due to a facility-wide renovation project implemented in phases over the past 3 years, some of the licensed beds were not available.

*** Encompass reported 50 licensed beds on its 2022 JAR. It is currently licensed for 69 beds. The applicant believes the report of 50 beds is erroneous.

Please see Div. of Licensure website: <https://internet.health.tn.gov/FacilityListings>.

UTILIZATION OF IRF BEDS IN CONTIGUOUS COUNTIES*- FYE 6/30/2022 (JAR) - Encompass Licensed Beds per Division of Licensure***

* There are 0 IRF Facilities or Beds in the PSA

Facility	County	Beds	Total patients	Total Pt. Days	Licensed Bed Days Available	Licensed Occupancy Rate	Actual Bed Days Available**	Actually Available Beds Occupancy Rate	Pts. from PSA
Siskin	Hamilton	96	1,896	27,895	35,040	79.6%	31,261	89.2%	226
Encompass	Hamilton	69	1,222	15,360	25,185	61.0%	N/A	N/A	131
Parkridge M.C. (DPU)	Hamilton	12	250	3313	4,380	75.6%	N/A	N/A	N/A

**Due to a facility-wide renovation project implemented in phases over the past 3 years, some of the licensed beds were not available.

Parkridge M.C. (DPU)	Hamilton	12	258	3344	4,380	76.3%	N/A	N/A	N/A
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*** Encompass reported 50 licensed beds on its 2022 JAR. It is currently licensed for 69 beds. The applicant believes the report of 50 beds is erroneous.

Please see Div. of Licensure website: <https://internet.health.tn.gov/FacilityListings>; Email from Ann Reed (attached).

Discipline ⓘ	MUA/P ID ⓘ	Service Area Name ⓘ	Designation Type ⓘ	Primary State Name ⓘ	County ⓘ	Index of Medical Underservice Score ⓘ	Status ⓘ	Rural Status ⓘ	Designation Date ⓘ	Update Date ⓘ
Primary Care	1471287761	LI-Bradley County	MUP Low Income	Tennessee	Bradley County, TN	61.0	Designated	Non-Rural	04/15/2018	08/27/2024

Discipline ⓘ	MUA/P ID ⓘ	Service Area Name ⓘ	Designation Type ⓘ	Primary State Name ⓘ	County ⓘ	Index of Medical Underservice Score ⓘ	Status ⓘ	Rural Status ⓘ	Designation Date ⓘ	Update Date ⓘ
Primary Care	1479877773	LI - McMinn County	MUP Low Income	Tennessee	McMinn County, TN	54.0	Designated	Rural	07/06/2018	09/07/2024

Discipline ⓘ	MUA/P ID ⓘ	Service Area Name ⓘ	Designation Type ⓘ	Primary State Name ⓘ	County ⓘ	Index of Medical Underservice Score ⓘ	Status ⓘ	Rural Status ⓘ	Designation Date ⓘ	Update Date ⓘ
Primary Care	1476111867	Meigs County	Medically Underserved Area	Tennessee	Meigs County, TN	60.0	Designated	Rural	11/01/1978	08/27/2024

Discipline ⓘ	MUA/P ID ⓘ	Service Area Name ⓘ	Designation Type ⓘ	Primary State Name ⓘ	County ⓘ	Index of Medical Underservice Score ⓘ	Status ⓘ	Rural Status ⓘ	Designation Date ⓘ	Update Date ⓘ
Primary Care	1479461357	Polk County	Medically Underserved Area	Tennessee	Polk County, TN	50.0	Designated	Rural	10/03/2016	07/06/2018

Discipline ⓘ	MUA/P ID ⓘ	Service Area Name ⓘ	Designation Type ⓘ	Primary State Name ⓘ	County ⓘ	Index of Medical Underservice Score ⓘ	Status ⓘ	Rural Status ⓘ	Designation Date ⓘ	Update Date ⓘ
Primary Care	1476761638	Rhea County	Medically Underserved Area	Tennessee	Rhea County, TN	60.4	Designated	Rural	11/01/1978	07/06/2018

MILAGE AND DRIVE TIMES FROM PSA COUNTIES TO IRFs (from County seat)							
		Destination: ETPR		Destination: Siskin			
County	County Seat	Distance (Miles)	Drive Time (Minutes)	Distance (Miles)	Drive Time (Minutes)	Saved Distance (Miles)	Saved Time (Minutes)
Bradley	Cleveland	3.1	9	33.3	41	30.2	32
McMinn	Athens	27.5	32	58.3	67	30.8	35
Meigs	Decatur	29.9	33	60.8	66	30.9	33
Polk	Benton	16.6	29	47.2	60	30.6	31
Rhea	Dayton	25.5	38	38.6	47	13.1	9
Average		20.5	28.2	47.6	56.2	27.12	28

MILAGE AND DRIVE TIMES FROM PSA COUNTIES TO IRFs (from geographic center of county)							
		Destination: ETPR		Destination: Siskin			
County	County Seat	Distance (Miles)	Drive Time (Minutes)	Distance (Miles)	Drive Time (Minutes)	Saved Distance (Miles)	Saved Time (Minutes)
Bradley	Cleveland	2	7	34.1	57	32.1	50
McMinn	Athens	23	26	53.8	71	30.8	45
Meigs	Decatur	30.6	35	48.2	62	17.6	27
Polk	Benton	27.8	47	59.4	81	31.6	34
Rhea	Dayton	35.6	57	48.7	65	13.1	8
Average		23.8	34.4	48.8	67.2	25.0	32.8

MILAGE AND AVERAGE DRIVE TIMES FROM PSA COUNTIES TO IRFs (from geographic center of county)							
		Destination: ETPR		Destination: CSH/LP			
County	County Seat	Distance (Miles)	Drive Time (Minutes)	Distance (Miles)	Drive Time (Minutes)	Saved Distance (Miles)	Saved Time (Minutes)
Bradley	Cleveland	2	7	17.7	26	15.7	19
McMinn	Athens	27.3	26	38	38	10.7	12
Meigs	Decatur	30.6	35	34.8	47	4.2	12
Polk	Benton	27.8	47	41.2	56	13.4	9
Rhea	Dayton	35.6	57	42.1	57	6.5	0
Average		24.7	34.4	34.8	44.8	10.1	10.4

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

East Tennessee Physical Rehabilitation JV, LLC

Name

2800 Westside Drive NW

Bradley County

Street or Route

County

Cleveland

Tennessee

37312

City

State

Zip

None

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

Jerry Taylor

Attorney

Name

Title

Thompson Burton PLLC

jtaylor@thompsonburton.com

Company Name

Email Address

One Franklin Park, 6100 Tower Circle, Suite 200

Street or Route

Franklin

Tennessee

37067

City

State

Zip

Attorney

615-716-2297

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: 04/15/25

Date LOI was Published: 04/15/25

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)

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

East Tennessee Physical Rehabilitation JV, LLC

Name

One Siskin Plaza

423-634-1212

Street or Route

Phone Number

Chattanooga

Tennessee

37027

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, East Tennessee Physical Rehabilitation, JV, LLC is a joint venture of two not-for-profit health systems which operate inpatient facilities in Tennessee. Siskin Hospital for Physical Rehabilitation, Inc. ("Siskin") owns and operates a 96-bed inpatient rehabilitation facility ("IRF") in Chattanooga, Hamilton County. Bradley Medical Center, LLC ("BMC") owns and operates a 351-bed acute care hospital in Cleveland, Bradley County. Siskin has a 65% ownership share in the applicant, and BMC has 35% ownership share. An ownership chart is included in Attachment 7A.

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 lease two wings of an existing building (formerly the site of an acute care hospital) owned by Bradley Medical Center and located on BMC's Westside satellite campus. A copy of the Option to Lease is attached as Attachment 9A.

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: A floor plan is 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: There is no public bus service in Cleveland or Bradley County. In the absence of municipal bus services, bus transport is provided by SETHRA, the Southeast Tennessee Human Resource Agency. There is a bus stop at the medical office building across from the ETPR site at 2800 Westside Drive NW. Most of the patients served by this project will be inpatients for approximately two weeks. The vast majority of the patients will arrive via ambulance from an acute care hospital; most will leave via private vehicle. Patients' limitations of movement will usually make using most buses and vans impractical. However, throughout the service area, SETHRA will provide certain patients with individually scheduled van transport to medical care, if appropriate to the patient's condition. There is a minimal charge, reimbursable for TennCare patients.

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: A plot plan is attached as Attachment 12A

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:

This proposal is for the establishment of a 29 bed inpatient rehabilitation facility (“IRF”) through a joint venture of the largest acute care hospital in the primary service area (351-bed Bradley Medical Center, or “BMC”) and the largest IRF in the Southeast Tennessee region (96-bed Siskin Hospital for Physical Rehabilitation). It will be located in an existing building, which formerly served as an acute care hospital and now serves as an outpatient center, on the satellite campus of BMC. BMC currently provides will continue to provide a 30-bed inpatient behavioral health service on the Westside campus. This project will not disrupt the current services on the Westside campus. The proposed IRF will provide all levels of physical rehabilitation services, including physical therapy (PT), speech therapy (ST), occupational therapy (OT), respiratory therapy (RT), and neuro-psychology service to help patients cope with their disability and new lifestyle.

This project is a resurrection of substantially the same IRF proposal which received certificate of need approval from the HSDA on April 27, 2022 (the “Prior CON”). That CON was reluctantly surrendered after the minority partner, Tennova Healthcare Cleveland, wholly owned by Brentwood's Community Health System (CHS) – the owner of Bradley Medical Center prior to August 1, 2024 -- pulled out of the JV which held the CON. Shortly thereafter, the hospital was put up for sale, and it was acquired by its current owner Bradley Medical Center in August of 2024.

The departure of Tennova left the project without the participation of the local acute care hospital. This severely compromised the feasibility of the proposed IRF in Bradley County, and Siskin determined that the most transparent way to continue to pursue the IRF in Bradley County was to surrender the CON until it could confer with the new owner about partnering for the IRF venture. Just about the time Siskin and Bradley came to an agreement and got the necessary approvals to move forward with a new CON application, Encompass filed a CON application for an IRF in Bradley County – without the participation of the local acute care hospital.

The need and other justifications for the approved Prior CON still exist today and are even stronger than in 2022 due to continued growth in Bradley County and the overall region. This joint venture between the primary acute care hospital in the PSA, which often needs to place patients for inpatient physical rehabilitation services, and the largest existing IRF in the state, to which BMC already sends numerous patients, is by far the best proposal and is in fact the ideal proposal to meet the needs of the PSA in regard to inpatient physical rehabilitation services.

- Ownership structure

RESPONSE: The applicant, East Tennessee Physical Rehabilitation, JV, LLC is a joint venture of two not-for-profit health systems which operate inpatient facilities in Tennessee. Siskin Hospital for Physical Rehabilitation, Inc. (“Siskin”) owns and operates a 96-bed inpatient rehabilitation facility (“IRF”) in Chattanooga, Hamilton County. Bradley Medical Center, LLC (“BMC”) owns and operates a 351-bed acute care hospital in Cleveland, Bradley County. Siskin has a 65% ownership share in the applicant, and BMC has 35% ownership share.

- Service Area

RESPONSE: The primary service area (PSA) is Bradley, McMinn, Meigs, Polk, and Rhea Counties. Patients from these counties accounted for approximately 93% of the inpatient admissions to BMC in 2024. Bradley County is by far the most populous of the PSA counties. The population of Bradley County is 112,767; the next closest population is that of McMinn County, which has a population of 55,219. The population of the entire PSA is 232,212, so Bradley County makes up 48.5% of the population. The PSA counties are on average located 24.7 miles from the site for ETPR. Because the site is in the most densely populated area of the PSA, and is also within reasonable driving distance of all counties in the PSA, the proposed service area strikes the optimal balance between population density and proximity of the applicant.

- Existing similar service providers

RESPONSE: There are no IRFs in the PSA. There are two IRFs in neighboring Hamilton County: Siskin Hospital for Physical Rehabilitation, (“Siskin”) and Encompass Health Rehabilitation Hospital of Chattanooga (“Encompass”). There is also a small 12-bed physical rehabilitation unit in Parkridge Medical Center in Hamilton County. There is a CON for the establishment of an IRF in Hamilton County, CSH/LP Behavioral Health and Rehabilitation, CN2405-027A. Siskin has 96 IRF beds and consistently has a high occupancy rate, and its current occupancy rate based on available beds is 88%. A substantial share of Siskin’s inpatient occupancy is made up of residents of the PSA. In FYE 6/30/ 2024 Siskin admitted 269 patients from the PSA counties, And is on track to treat the approximately same number of PSA in FYE 6/30/25. This demonstrates several of the needs which will be met by the proposed ETPR facility in Bradley County: (1) the need for IRF services to be locally available in the 5 county PSA; (2) the need to decompress the extremely high volume at Siskin by shifting some of its volume to the new IRF, and (3) the need to bring these services closer to the homes of the residents of the PSA who are in need of inpatient physical rehabilitation services. Encompass is a 69 bed IRF. Its occupancy rate was only 63% in 2023, and only 61% in 2022. (The 2024 JARs have not been released as of the date of this filing). Encompass treated only 171 patients from the PSA in 2023. There is also a small inpatient rehabilitation unit at Parkridge Medical Center. The 12-bed unit is not a freestanding IRF but instead is a small rehabilitation unit in an acute care hospital. For that reason alone, it should not be considered a “similar facility.” Also, because an acute care hospital does not report the number of patient days for a rehab unit on its JAR, its utilization and occupancy data is not publicly available. For those reasons, Parkridge is omitted from this discussion. There is an approved but unimplemented CON for the establishment of an IRF in Hamilton County, which was approved in December 2024: CSH/LP Behavioral Health and Rehabilitation, CN2409-027A. This CON is for 40-bed IRF to be located in far eastern Hamilton County, in Ooltewah. This facility is not easily accessible geographically to the PSA population and will likely attract relatively few admissions from the PSA for several reasons. First, this proposed new facility in Ooltewah is a much greater distance and driving time for patients from the PSA. For example, the distance from Bradley County to the proposed ETPR site is only 2 miles and 7 minutes. To get to the CSH/LP site from Bradley County, one would have to add an additional 15.7 miles and 19 minutes each way to their trip. The drive time is often much longer, as the route is on a two lane service road which runs between two large high schools, rendering the route heavily traveled and often congested with vehicles. It is also clear from the CSH/LPO application that the intent of the project is primarily to serve Hamilton County and surrounding counties in Georgia and North Carolina. The applicant for CSH/LP

projected only 25% of its entire utilization being from the 5-county PSA . Bradley was projected to provide only 12% of admissions. A full 70% of admissions are projected to come from Hamilton County (40%) and from “Other States” (30%).

- Project Cost

RESPONSE: The total estimated project cost, exclusive of the application filing fee, is 29,700,558. The largest expense is the deemed value of the lease over the initial term, which is \$11,785,998. The second largest cost is for the build out, which is \$9,775,000. All equipment, both fixed and moveable, has an estimated cost of \$3,125,000.

- Staffing

RESPONSE: The staffing plan calls for 56.5 FTE patient care staff, and 13.8 FTE non-patient care staff. Both Siskin and BMC have the experience and resources to ensure that recruitment, hiring, and training of staff are in compliance with all applicable licensing and accreditation requirements.

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: There are several needs regarding inpatient rehabilitation services and facilities in the PSA. The proposed ETPR will address those needs. • There is no IRF and there are no IRF beds in the PSA. According to the need formula in the Criteria and Standards, there is a need for 52 IRF beds in the PSA. ETPR would bring 29 IRF beds to the PSA • Residents of the PSA who need IRF services currently have to travel into Chattanooga, often through heavy traffic and over a significant geographic barrier in White Oak Mountain via I-75 South. With ETPR operating, those residents could stay much closer to home and be more accessible to friends and families than would be the case if they were receiving such services in Hamilton County. • The ETPR beds in Bradley County would likely be the choice of most patients from the PSA who are now receiving services at Siskin or another provider in Hamilton County. This would open up bed capacity at Siskin Hospital for Physical Rehabilitation and decompress the very high occupancy levels at that IRF. No other provider can meet the area needs as will this JV involving the local acute care hospital, Bradley Medical Center, and the largest provider of IRF services in the state, Siskin Hospital for Physical Rehabilitation. This partnering of these two not-for-profit hospitals to establish this local IRF has gained the strong support of many elected officials, community leaders, business leaders, and health care providers. A partial collection of support letters is included in Attachment 2E ; more letters of support will be submitted prior to the Commission's consideration of this application.

- Quality Standards

RESPONSE: ETPR will meet or exceed all applicable quality standards. It will be licensed by the HFC Licensure Division and will be accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF) and The Center for Improvement in Healthcare Quality (CIHQ). The IRF partner of ETPR, Siskin Hospital for Physical Rehabilitation, one of the longest-serving and well-respected IRFs in the state. Siskin constantly monitors its performance and its patients' satisfaction to maximize outcomes and the patients' experiences. Siskin is also the recipient of numerous awards and accolades from professional organizations and peer groups. A list of some, but not all, of recent external recognitions is attached as Attachment 2E2.

- Consumer Advantage

- Choice

RESPONSE: The proposed IRF will give the residents of the PSA the choice of having IRF services provided locally, much closer to their homes, rather than having to travel to Hamilton County or elsewhere outside the PSA.

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

RESPONSE: Residents of the PSA face numerous barriers to receiving high quality IRF services. The main barrier to care is there are no IRFs or IRF beds in the 5-county PSA. In the absence of having the service locally available, patients have to travel to Hamilton County, most often to Siskin. The trip to Siskin involves traversing White Oak Mountain via I-75 South. This stretch of the interstate is geographically challenging and frequently congested, particularly during rush hour traffic. Ongoing and intermittent road construction projects along I-75 exacerbate delays and unpredictability, especially between the Bradley County line and the outskirts of Chattanooga. This creates a major barrier to access for patients and family members who must make repeated trips during a patient's inpatient rehabilitation stay. Travel under these conditions can exceed 90 minutes each way during peak hours. ETPR will make IRF services locally available in Cleveland, which is easily accessible to the

other PSA counties. The new IRF in Bradley County enhances local access for patients and facilitates more frequent and convenient family involvement in care, which is associated with improved recovery outcomes.

○ Affordability

RESPONSE: ETPR's proposed average charges are lower than the 2023 average charges of both freestanding IRFs in Hamilton County. (See Attachment 9C). There are other patient cost savings made possible by the proposed new IRF. The cost of travel (gas) will be substantially reduced, and other indirect costs such as lost time from work for family members going to visit the patients will likewise be reduced.

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	\$750,000
2. Legal, Administrative (Excluding CON Filing Fee), Consultant Fees	\$265,000
3. Acquisition of Site	\$0
4. Preparation of Site	\$0
5. Total Construction Costs	\$9,775,000
6. Contingency Fund	\$2,499,560
7. Fixed Equipment (Not included in Construction Contract)	\$625,000
8. Moveable Equipment (List all equipment over \$50,000 as separate attachments)	\$1,500,000
9. Other (Specify): <u>FF&E</u>	\$2,500,000

B. Acquisition by gift, donation, or lease:

1. Facility (inclusive of building and land)	\$11,785,998
2. Building only	\$0
3. Land only	\$0
4. Equipment (Specify): _____	\$0
5. Other (Specify): _____	\$0

C. Financing Costs and Fees:

1. Interim Financing	\$0
2. Underwriting Costs	\$0
3. Reserve for One Year's Debt Service	\$0
4. Other (Specify): _____	\$0

D. Estimated Project Cost (A+B+C)	\$29,700,558
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E. CON Filing Fee	\$45,000
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F. Total Estimated Project Cost (D+E)	\$29,745,558
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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:

Responses to the Criteria and Standards for Rehabilitation Facilities are attached as 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:

The primary service area (PSA) is Bradley, McMinn, Meigs, Polk, and Rhea Counties. Patients from these counties accounted for approximately 93% of the inpatient admissions to BMC in 2024. The requested table showing projected patient origin data follows at the end of this response. A map of the PSA is attached as Attachment 2N.

Bradley County is by far the most populous of the PSA counties. The population of Bradley County is 112,767; the next closest population is that of McMinn County, which has a population of 55,219. The population of the entire PSA is 232,212, so Bradley County makes up 48.5% of the population. The PSA counties are on average located 24.7 miles from the site for ETPR. Because the site is in the most densely populated area of the PSA, and is also within reasonable driving distance of all counties in the PSA, the proposed service area strikes the optimal balance between population density and proximity of the applicant.

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

PROJECTED UTILIZATION

Unit Type: <input type="checkbox"/> Procedures <input type="checkbox"/> Cases <input checked="" type="checkbox"/> Patients <input type="checkbox"/> Other _____		
Service Area Counties	Projected Utilization Recent Year 1 (Year = 2026)	% of Total
Other not primary/secondary county	30	6.98%
Rhea	4	0.93%
Bradley	245	56.98%
Meigs	14	3.26%
Polk	107	24.88%
McMinn	30	6.98%
Total	430	100%

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

RESPONSE:

Please see the table attached as Attachment 3N.

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:

Please see Attachment 3N for population and demographic characteristics of the PSA. Although patients under 65 years of age will be served, the target population for an IRF project is age 65+ projected 4 years into the future, according to the Criteria and Standards. (The target year is 2028, since 2025-2029 population projections have not been released yet).

- 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:

The data in Attachment 3N shows the population of the PSA is relatively older and less affluent than the state as a whole, viz: (1) the 65+ population of the PSA is projected to grow by 8.73% over the next 4 years, compared to the 8.64% growth in the 65+ population projected for the state as a whole; (2) the PSA has poverty-level population of 15.3% compared to a poverty rate of 14.0% for the State of Tennessee; (3) the PSA has a TennCare enrollment equal to 22.1% of the population. The state-wide rate of TennCare enrollment is 19.9%.

ETPR will participate in Medicare to serve the aging population. It will participate in TennCare and expects to have a contract with each of the TennCare MCOs operating in the East Tennessee region. It has allocated a reasonable sum for charity care, and bad debt.

-
- 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:

There are 0 IRFs and 0 rehab beds in the PSA. There are two IRFs located in Hamilton County, which is contiguous to Bradley County. Siskin Hospital for Physical Rehabilitation is a 96-bed IRF and Encompass Chattanooga is a 69 bed IRF. Utilization data for each IRF for the past 3 years for which data is available is attached as Attachment 5N.

There is also a small, 12-bed physical rehabilitation unit at Parkridge Medical Center in Chattanooga. The 12-bed unit is not a freestanding IRF but instead is a small rehabilitation unit in an acute care hospital. For that reason alone, it should not be considered a “similar facility.” Also, because an acute care hospital does not report the number of patient days for a rehab unit on its JAR, its utilization and occupancy data is not publicly available. For those reasons, Parkridge is omitted from this discussion.

There is an approved but unimplemented CON for the establishment of an IRF in Hamilton County, which was approved in December 2024: CSH/LP Behavioral Health and Rehabilitation, CN2409-027A. This CON is for 40-bed IRF to be located in Ooltewah in far eastern Hamilton County. This facility is not easily accessible geographically to the PSA population and will likely attract relatively few admissions from the PSA for several reasons. First, this proposed new facility in Ooltewah is a much greater distance and driving time for patients from the PSA. For example, the distance from Bradley County to the proposed ETPR site is only 2 miles and 7 minutes. To get to the CSH/LP site from Bradley County, one would have to add an additional 15.7 miles and 19 minutes each way to their trip.

It is also clear from the CSH/LPO application that the intent of the project is primarily to serve Hamilton County and surrounding counties in Georgia and North Carolina. The applicant for CSH/LP projected only 25% of its entire utilization being from the 5-county PSA . Bradley was projected to provide only 12% of admissions. A full 70% of admissions are projected to come from Hamilton County (40%) and from “Other States” (30%).

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:

ETPR is a proposed new facility, so there is no historical utilization data. The projected utilization for the first two years is as follows:

Year 1	429 patients	5840 patient days
Year 2	536 patients	7300 patient days

The projected utilization is based on the unmet need projection for IRF beds in the projected service area, Siskin Hospital’s historically rapid growth rate in admissions and future anticipated limitation of capacity for additional admissions to its Chattanooga facility and other more distant facilities, and Bradley County’s rapid growth rate.

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:

N/A.

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: ETPR will have a transfer agreement with Bradley Medical Center.

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: Cigna Health Spring VA CCN TriWest Champ VA

- 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:

This project will have a positive effect on the healthcare system. It will increase competition with and among the IRFs in Hamilton County, but it will not duplicate services because there is no local IRF or IRF beds in the PSA.

Its proposed charges are lower than the 2023 average charges of both freestanding IRFs in Hamilton County. It will provide a choice for consumers to elect to have services provided locally, or to travel to Hamilton County for 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:

The staffing plan for the first year of operation calls for 56.5 FTE of direct patient care staff and 13.8 FTEs of non-patient care staff. Both Siskin and BMC have the experience and resources to ensure that recruitment, hiring, and training of staff are in compliance with all applicable licensing and accreditation requirements.

- 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:

ETPR will be licensed by the HFC Licensure Division. It will be accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF) and The Center for Improvement in Healthcare Quality (CIHQ). ETPR will achieve and maintain compliance with all applicable licensure and accreditation requirements, including those referenced above.

PROJECTED DATA CHART

- ☒ Project Only
☐ Total Facility

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

	Year 1	Year 2
	2026	2027
A. Utilization Data		
Specify Unit of Measure Patients	429	536
B. Revenue from Services to Patients		
1. Inpatient Services	\$11,137,211.00	\$14,062,468.00
2. Outpatient Services	\$0.00	\$0.00
3. Emergency Services	\$0.00	\$0.00
4. Other Operating Revenue (Specify)	\$0.00	\$0.00
Gross Operating Revenue	\$11,137,211.00	\$14,062,468.00
C. Deductions from Gross Operating Revenue		
1. Contractual Adjustments	\$1,820,301.00	\$2,298,414.00
2. Provision for Charity Care	\$111,372.00	\$140,625.00
3. Provisions for Bad Debt	\$330,775.00	\$417,655.00
Total Deductions	\$2,262,448.00	\$2,856,694.00
NET OPERATING REVENUE	\$8,874,763.00	\$11,205,774.00

- 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	\$25,960.86	\$26,235.95	0.00
Deduction from Revenue (<i>Total Deductions/Utilization Data</i>)	\$0.00	\$0.00	\$5,273.77	\$5,329.65	0.00
Average Net Charge (<i>Net Operating Revenue/Utilization Data</i>)	\$0.00	\$0.00	\$20,687.09	\$20,906.29	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:

The applicants proposed gross charges per admission/discharge are shown below, as are the estimated Medicare rates for each category.

Rehab Impairment Category	Estimated Charges	Average Expected Medicare Reimbursement
Stroke	\$31,160.87	\$24,991.02
Nontraumatic brain injury	\$28,845.27	\$23,133.91
Nontraumatic spinal cord injury	\$30,252.26	\$24,262.31
Neurological	\$22,820.57	\$18,302.10
Fracture of LE	\$27,751.97	\$22,257.08
Replacement of LE joint	\$24,563.85	\$19,700.21
Other orthopedic	\$25,797.71	\$20,689.76
Cardiac	\$22,954.09	\$18,409.18
Major multiple trauma, no brain injury or spinal cord injury	\$26,949.13	\$21,613.20
Miscellaneous	\$23,880.76	\$19,152.37
Average	\$26,497.65	\$21,251.11

Source: Siskin Hospital for Physical Rehabilitation

- 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:

The estimated Medicare payment rates are shown in the table in response to item 8C. “CMGs” (Case Mix Groups) rather than DRGs are used to set Medicare reimbursement amounts for inpatient rehabilitation hospitals. A comparison of ETPR’s average proposed gross charge per admission/discharge and those of the two freestanding IRFs in Hamilton County, is shown below, and is attached as Attachment 9C:

COMPARISON OF AVERAGE GROSS CHARGES					
IRF	County	Total Gross Patient Revenue	No. of Adm./Disch.	Avg. Charge	Gross
ETPR (Proposed - 2026)	Bradley	\$11,137,211.00	429		\$25,960.86
Siskin (2023 JAR)	Hamilton	\$52,785,965.00	1822		\$28,971.44
Encompass (2023 JAR)	Hamilton	\$38,310,381.00	1321		\$29,001.05

- 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-2026		Year-2027	
	Gross Operating Revenue	% of Total	Gross Operating Revenue	% of Total
Medicare/Medicare Managed Care	\$8,761,192.00	78.67	\$11,061,005.00	78.66
TennCare/Medicaid	\$74,098.00	0.67	\$99,785.00	0.71
Commercial/Other Managed Care	\$1,696,314.00	15.23	\$2,154,576.00	15.32
Self-Pay	\$42,394.00	0.38	\$42,818.00	0.30
Other(Specify)	\$563,213.00	5.06	\$704,284.00	5.01
Total	\$11,137,211.00	100%	\$14,062,468.00	100%
Charity Care	\$111,372.00		\$140,625.00	

**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: ETPR will participate in Medicare and TennCare. The projected payor mix is shown above.

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 3standing?

☒ 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	<input checked="" type="checkbox"/> Health Facilities Commission/Licensure Division <input type="checkbox"/> Intellectual & Developmental Disabilities <input type="checkbox"/> Mental Health & Substance Abuse Services	Will Apply	IRF
Certification	<input checked="" type="checkbox"/> Medicare <input checked="" type="checkbox"/> TennCare/Medicaid The Center for Improvement in Healthcare Quality (CIHQ) <input checked="" type="checkbox"/> Other (Accreditation)	Will Apply Will Apply Will Apply	IRF IRF IRF
Accreditation(s)	CARF – Commission on Accreditation of Rehabilitation Facilities	Will Apply	IRF

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

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

Please Explain

RESPONSE: During an onsite survey in October 2023, Siskin Subacute West (a Skilled Nursing Facility owned and operated by Siskin Hospital for Physical Rehabilitation) was cited due to concerns about preventing resident falls. Although no major injuries occurred, multiple falls prompted the findings. The primary contributing factor was the limitation of the electronic medical record (EMR) system at the time, which lacked user-friendly access for certified nursing assistant (CNA) staff to review fall prevention interventions at the point of care. As a result of this survey, CMS assessed a Civil Monetary Penalty. In response to the findings, Siskin Subacute West submitted an Allegation of Compliance, which the Tennessee Department of Health accepted on October 28, 2023. A comprehensive Plan of Correction was also developed and approved. Following a successful revisit survey, the facility was officially found in

compliance on December 26, 2023. A copy of the notice of compliance letter is attached as Attachment 7Q. In January 2024, a new Director of Nursing and a new Assistant Director of Nursing were hired. , in March 2024, the organization implemented a new, enhanced electronic medical record system. In April 2025 a recertification survey was conducted and the were zero health deficiencies.

- Suspension or termination of participation in Medicare or TennCare/Medicaid programs; and/or

☒ Yes

☐ No

Please Explain

RESPONSE: The situation described above also resulted in a temporary suspension of admission which was lifted when the deficiencies were corrected.

- Is presently subject of/to an investigation, or party in any regulatory or criminal action of which you are aware.

☐ Yes

☒ No

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		
Nurses and Nursing Assistant	0.00	32.40
Physical Therapists, Assistants and Aides	0.00	11.30
Psychologist	0.00	1.10
Occupational Therapists and Assistants	0.00	4.70
Speech Pathologists	0.00	1.60
Respiratory Therapists	0.00	2.80
Pharmacists and Pharmacy Techs	0.00	2.60
Total Direct Patient Care Positions	N/A	56.5

B. Non-Patient Care Positions		
Dietary Manager/Dietician	0.00	1.10
Receptionist	0.00	2.30
Director of Nursing	0.00	1.10
Nurse Educator	0.00	1.10
Therapy Director	0.00	1.10
IRF-PAI Coordinator	0.00	1.10
Case Manager	0.00	1.10
Medical Records	0.00	1.10
Scheduler	0.00	1.10
Unit Clerks	0.00	2.40
Security	0.00	0.30
Total Non-Patient Care Positions	N/A	13.8
Total Employees (A+B)	0	70.3

C. Contractual Staff		
Contractual Staff Position	0.00	0.00
Total Staff (A+B+C)	0	70.3

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		06/25/25
2. Building Construction Commenced	146	11/17/25
3. Construction 100% Complete (Approval for Occupancy)	381	07/10/26
4. Issuance of License	423	08/21/26
5. Issuance of Service	483	10/20/26
6. Final Project Report Form Submitted (Form HR0055)	573	01/18/27

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

Affidavit of Publication

STATE OF TN }
COUNTY OF BRADLEY } SS

Heather Brown, being duly sworn, says:

That she is Legal Clerk of the Cleveland Daily Banner, a daily newspaper of general circulation, printed and published in Cleveland, Bradley County, TN; that the publication, a copy of which is attached hereto, was published in the said newspaper and on the website on the following dates:

April 15, 2025

That said newspaper was regularly issued and circulated on those dates.

SIGNED:

Heather Brown

Legal Clerk

Subscribed to and sworn to me this 15th day of April 2025

Joyce Taylor

Joyce Taylor, Notary Public, Bradley County, TN

My commission expires: December 10, 2025

70115433 71207474

Rachel Cushing
Lenz Marketing (Bradley Medical Center)
119 East Court Square, Ste 201
Decatur, GA 30030



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 East Tennessee Physical Rehabilitation JV, LLC, a/an newly formed entity owned by East Tennessee Physical Rehabilitation JV, LLC with an ownership type of Limited Liability Company and to be managed by itself intends to file an application for a Certificate of Need for the establishment of an Inpatient Rehabilitation Hospital ("IRH"), a/k/a a "Rehabilitation Facility," which will be licensed as such by the Health Facilities Commission. The IRH will have 29 beds and will provide inpatient physical rehabilitation services. The address of the project will be 2800 Westside Drive NW, Cleveland, Bradley County, Tennessee, 37312. The estimated project cost will be \$29,745,558.

The anticipated date of filing the application is 05/01/2025

The contact person for this project is Attorney Jerry Taylor who may be reached at Thompson Burton PLLC - One Franklin Park, 6100 Tower Circle, Suite 200, Franklin, Tennessee, 37067 - Contact No. 615-716-2297.

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 may be sent to: Health Facilities Commission, Andrew Jackson Building, 9th Floor, 502 Deaderick Street, Nashville, TN 37243 or email at hsda.staff@tn.gov.



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
sos.tn.gov/

JAN EZELL
ALSTON & BIRD LLP, 1201 WEST PEACHTREE STREET
ATLANTA, GA 30309, USA

04/29/2025

Filing Acknowledgment

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

Entity Name:	EAST TENNESSEE PHYSICAL REHABILITATION JV, LLC		
SOS Control #:	002017847	Initial Filing Date:	04/24/2025
Entity Type:	Foreign Limited Liability Company (LLC)	Formation Locale:	Delaware
Status:	Active	Duration Term:	Perpetual
Fiscal Year Close:	June	Annual Report Due:	10/01/2025
Business County:	Hamilton		
Managed By:	Member Managed		
Obligated Member Entity:	No		

Document Receipt

Receipt #: 2025-305517	Filing Fee:	\$300.00
Payment: Credit Card - 3897063549		\$300.00

Registered Agent Address:
C T CORPORATION SYSTEM
300 MONTVUE RD
KNOXVILLE, TN 37919-5546

Principal Office Address:
1 Siskin Plz
Chattanooga, TN 37403
Hamilton County, USA

Congratulations on the successful filing of your **Application for Registration of Foreign Limited Liability Company** for **EAST TENNESSEE PHYSICAL REHABILITATION JV, 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
B2025242400



Tre Hargett
Secretary of State

Application For Certificate Of Authority

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

sos.tn.gov/businesses

Control #: 002017847
Filed: 04/24/2025 02:36 PM

Tre Hargett

Secretary of State

Entity Information

Entity Type: Limited Liability Company

Entity Name: EAST TENNESSEE PHYSICAL REHABILITATION JV, LLC

Fiscal Year Ending Month: June

Additional Designation: (No Additional Designation)

Is this a Series LLC?

☐ Yes ☒ No

Principal Office Address

1 Siskin Plz
Chattanooga, TN 37403
Hamilton County, USA

Mailing Address

1 Siskin Plz
Chattanooga, TN 37403
Hamilton County, USA

When and Where was the Organization Established?

Date Incorporated: 2/9/2022

Country: USA

State: Delaware

Period of Duration:

Perpetual

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

☐ Yes ☒ No

Nature of Business (NAICS):

622310 - Specialty (except Psychiatric and Substance Abuse) Hospitals

The Limited Liability Company will be:

Member 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

C T CORPORATION SYSTEM
300 MONTVUE RD
KNOXVILLE, TN 37919-5546

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: MATTHEW GIBSON

Date: 04/24/2025

Delaware

The First State

Page 1

I, CHARUNI PATIBANDA-SANCHEZ, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EAST TENNESSEE PHYSICAL REHABILITATION JV, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SECOND DAY OF APRIL, A.D. 2025.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



6606477 8300

SR# 20251714706

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, reading "C. P. Sanchez", written over a horizontal line.

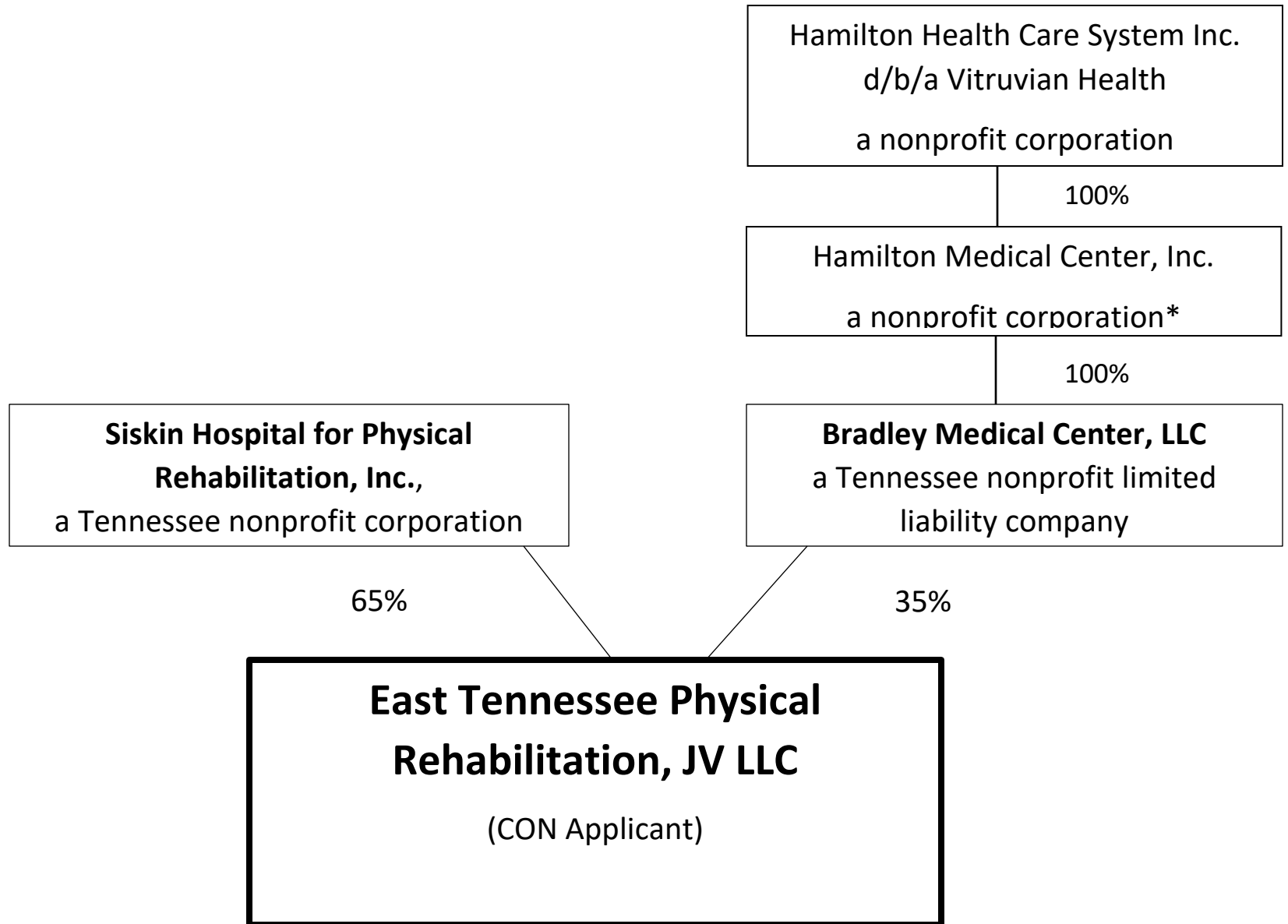
Charuni Patibanda-Sanchez, Secretary of State

Authentication: 203504528

Date: 04-22-25

EAST TENNESSEE PHYSICAL REHABILITATION JV, LLC

Organizational and Ownership Structure



*Hamilton Medical Center's ownership of BMC is temporary until BMC's 401 (c)(3) status is finalized.

Management Agreement is N/A to this application.

OPTION TO LEASE

This Option to Lease (this "Agreement") is made and effective as of the 30th day of April, 2025, by and between Bradley Medical Center, a Landlord ("Landlord" or "Lessor"), and **East Tennessee Physical Rehabilitation, JV, LLC**, a Delaware limited liability company ("Tenant" or "Lessee") (collectively the "Parties").

RECITALS:

A. Landlord is the owner of land and a building consisting of approximately 85,163 square feet, currently functioning as an outpatient health care facility located at 2800 Westside Drive, NW, Cleveland, Tennessee. This Option to Lease pertains to two unoccupied wings of the building consisting of approximately 25,510 square feet) (the "Premises.")

B. Lessee's intended use of the Premises requires a certificate of need ("CON") from the Health Facilities Commission ("HFC") for the establishment of an Inpatient Rehabilitation Facility ("IRF"). Lessee is in the process of submitting an application for a certificate of need to the HFC.

C. If the CON is granted, Tenant wishes to lease the Premises from Landlord to house the proposed IRF.

NOW, THEREFORE, the parties hereby agree as follows:

1. In consideration for the payment by Tenant to Landlord of an Option Fee of \$ 1000.00 (the "Option Fee"), Landlord does hereby grant to Tenant the exclusive right and option (the "Option") to lease the Premises subject to the terms hereinafter specified.

2. Tenant may exercise the Option at any time prior to 5:00 pm CT on August 31, 2025 (the "Option Expiration Date"). To exercise the Option, Tenant must give Landlord written notice of exercise of the Option delivered by hand, by courier delivery service, or by e-mail at the e-mail address agreed upon by the parties, prior to the Option Expiration Date.

3. The Option Expiration Date may be extended by agreement of the parties in writing. Tenant shall be entitled to one (1) 60-day extension of the Option Expiration Date if such extension is reasonably necessary to obtain a decision to grant or deny the CON by the HFC prior to the Option expiration Date. If the Tenant does not timely exercise the Option by the Option Expiration Date, as extended if it is extended, then the Option and all other rights and obligations of the Parties under this Agreement shall terminate. If the reason the Option is not exercised is the fact the CON was not granted, then Landlord will refund the Option Fee to Tenant. Otherwise, Landlord will be entitled to retain the Option Fee.

4. In the event Tenant properly exercises this Option, Landlord and Tenant shall enter into a definitive lease agreement, the terms of which will be negotiated and mutually agreed upon by the Parties (the "Lease Agreement"). The Parties covenant and agree that the following essential terms are in good faith anticipated to be part of the Lease Agreement:

(a). The initial term of the lease shall be ten (10) years, with options to extend the term of the lease as agreed upon by the Parties in the Lease Agreement.

(b) The rent is expected to initially be an amount equal to \$ 46.20 per square foot (excluding any tenant improvement allowances which may be agreed to by the Parties in the Lease Agreement), but the Parties may include in the Lease Agreement commercially reasonable rent escalations. The rent amount is subject to change if necessary after Tenant receives a final fair market valuation of the Premises by a third party valuator.

IN WITNESS WHEREOF, the Parties have affixed their signatures on the day and date first above written, which is the effective date of this Agreement.

LANDLORD AND LESSOR:

Braldey Medical Center

By: Lisa Lovelace

Its: President & CEO

TENANT AND LESSEE:

**EAST TENNESSEE PHYSICAL
REHABILITATION, JV, LLC**

By: Met Shron

Its: President and CEO



SITE PLAN - ENLARGED



1504 WILLIAMS DRIVE, SUITE 200, MURFREESBORO, TN 37130
(615) 632-7220 | WWW.CATALYST-DG.COM

REHABILITATION UNIT RENOVATION



TMPartners, PLLC
Architecture Interiors Planning

A02021

SHPR External Recognitions		
Recognition	Year	Entity
First place in Skilled Nursing	2020, 2021, 2022, 2023, and 2024	Best of the Best Chattanooga
Top three: Physical Therapy & Health Club	2020, 2021, 2022, 2023, and 2024	Best of the Best Chattanooga
Top 10 Inpatient Rehabilitation Hospitals in the United States with the lowest readmission rates – SHPR ranks 3 rd on national list	2023	Becker's Hospital Review
Best Physical Rehabilitation Centers	2020, 2021, and 2023	Newsweek
Best Nursing Homes	2022, 2023, and 2024	US News & World Report
Area's only CIHQ accredited rehabilitation hospital	2023	CIHQ
Certified as a Center of Excellence for Rehabilitation	2023	CIHQ
Inpatient Rehabilitation Program	2023	CARF
Brain Injury Specialty Program	2023	CARF
Stroke Specialty Program	2023	CARF



April 22, 2025

Logan Grant, Executive Director
Health Services and Development Agency
Andrew Jackson State Office Building
502 Deaderick Street, 9th Floor
Nashville, TN 37243

RE: Siskin Hospital for Physical Rehabilitation, Bradley Medical Center **CON Application**

Dear Logan,

I am writing this letter of support for the joint venture inpatient physical rehabilitation hospital project between Siskin Hospital for Physical Rehabilitation and Bradley Medical Center.

With people living longer and longer, many of our residents are in need of stroke recovery, joint replacement and other services. Inpatient physical rehabilitation services can provide that continuum of care. Siskin Hospital has an outstanding brain injury and stroke program, where inpatient rehabilitation services are a key component to returning these patients to full function.

The Cleveland Bradley Chamber of Commerce is a member-based organization that works to promote economic development and workforce readiness in our community. We support all member businesses both large and small and concentrate on making Cleveland and Bradley County a great place to live and work.

Approval of this project will improve the quality of inpatient physical rehabilitation services throughout the southeast region of Tennessee.

If you have any other questions, do not hesitate to give me a call.

Sincerely,

Mike Griffin
President & CEO
Cleveland/Bradley Chamber of Commerce



Physical Medicine & Rehabilitation

Discover Life Beyond Limits

Osteoporosis

Detect, treat and educate

Post-Stroke

Motivate and mobilize

Spasticity

Improve performance and function

Traumatic Brain Injury

Evaluate, manage and mend

Pain Management

Investigate and decrease

Lymphedema

Control and compress

Workers Comp and IME

Objective medical evaluations of work-related injuries

Other services

Injections

Electrodiagnostic Testing



1 Siskin Plaza, Suite 101
Chattanooga, Tennessee 37403



423-803-2226



423-803-2222

April 28, 2025

Logan Grant
Executive Director
Tennessee Health Services and Development Agency
502 Deaderick St
Andrew Jackson Building 9th Floor
Nashville, TN 37243

Re: Siskin Hospital for Physical Rehabilitation, Bradley Medical Center **CON Application**

Dear Mr. Grant,

I am writing this letter in support of the joint venture inpatient physical rehabilitation project between Siskin Hospital for Physical Rehabilitation and Bradley Medical Center. I fully support the Certificate of Need application filed to create a separately licensed inpatient physical rehabilitation facility.

As the Medical Director for Siskin Hospital for Physical Rehabilitation, I believe that having an inpatient rehabilitation facility in Cleveland will benefit patients and the community. An inpatient physical rehabilitation hospital will provide a comprehensive level of rehabilitation care for many residents in the Cleveland/Bradley County region, enabling patients to maximize their recovery from stroke, traumatic brain injury, spinal cord injury, multiple trauma, hip fracture, Parkinson's, and other medically complex conditions.

Furthermore, with the high prevalence of stroke in this area of the country and the shift to the delivery of acute stroke care occurring more often in Cleveland, there is a growing need for excellent, local inpatient physical rehabilitation. Family support is essential to keep patients motivated and comforted while receiving inpatient rehabilitative care. Having the opportunity to remain close to home and to their loved ones will help sustain that motivation.

Overall, I believe that having an inpatient physical rehabilitation facility in Cleveland will be a great benefit for the community.

Please feel free to contact me with questions or concerns.

Sincerely,

Matthew Rider, M.D.
Medical Director for Siskin Hospital for Physical Rehabilitation
mrider@siskinpmr.com
(423) 803-2230

April 22, 2025

Mr. Logan Grant
Executive Director
Tennessee Health Facilities Commission
Andrew Jackson Building, 9th floor
502 Deaderick Street
Nashville, TN 37243

RE: Siskin Hospital for Physical Rehabilitation, Bradley Medical Center, Vitruvian Health CON Application

Dear Mr. Grant,

I am writing this letter of support for the joint venture inpatient physical rehabilitation hospital project between Siskin Hospital for Physical Rehabilitation and Bradley Medical Center. I fully support the Certificate of Need application filed to create a separately licensed inpatient physical rehabilitation facility.

Bradley Medical Center (BMC) and Siskin Hospital have nearly two decades of proven collaboration in outpatient care, demonstrating their commitment and ability to effectively deliver seamless, integrated services tailored specifically to this community. Both BMC and Siskin have been working to update the 2022 project to implement an inpatient rehabilitation hospital for our community. BMC has been providing services in Bradley County since 1952. Siskin began seeing patients in its Cleveland Outpatient Therapy Clinic in 2006. BMC and Siskin's JV is prepared to start immediately. Architectural plans are complete, and we are ensuring rapid access to vital rehabilitation services without delay.

I believe that having an inpatient rehab facility in Cleveland will benefit patients and the community. As Vice President for Academic Affairs at Lee University, I am aware that many of our residents are in need of stroke recovery, joint replacement, and other services. Inpatient physical rehabilitation services can provide that continuum of care. Siskin Hospital has an outstanding brain injury and stroke program, where inpatient rehabilitation services are a key component to returning these patients to full function. Within our community, there are local facilities that are already providing inpatient physical rehabilitation for many of our service areas. This joint venture plan will work collaboratively with all community providers to ensure that comprehensive, quality care is being provided. With this JV, many patients currently receiving care in Chattanooga can receive comprehensive inpatient rehab services. Siskin will focus on shifting patients residing in our community to the new, comprehensive inpatient rehab facility. This joint venture also allows for a more collaborative approach to providing services and minimizing the need to compete for valuable clinical resources. Siskin will work with BMC through an operating agreement to expand necessary support services versus a full duplication of these services.

Approval of this JV project will improve the quality of inpatient physical rehabilitation services throughout the southeast region of Tennessee. By utilizing local organizations such as Siskin Hospital and Bradley

Medical Center, who understand the needs of our community that are already established and invested in the community, we will see that what is earned goes directly back to growing healthcare resources for our community.

Sincerely,

A handwritten signature in cursive script that reads "Deborah Murray". The signature is written in dark ink and is positioned above the printed name and title.

Deborah Murray, EdD
VP for Academic Affairs
Lee University



Bradley Medical Center
Vitruvian Health

2305 Chambliss Avenue NW
Cleveland TN, 37311

April 22, 2025

Mr. Logan Grant
Executive Director
Tennessee Health Facilities Commission
Andrew Jackson Building, 9th floor
502 Deaderick Street
Nashville, TN 37243

RE: Siskin Hospital for Physical Rehabilitation, Bradley Medical Center, Vitruvian Health CON Application

Dear Mr. Grant,

We are writing this letter of support for the joint venture inpatient physical rehabilitation hospital project between Siskin Hospital for Physical Rehabilitation and Bradley Medical Center. We fully support the Certificate of Need application filed to create a separately licensed inpatient physical rehabilitation facility.

Bradley Medical Center (BMC) and Siskin Hospital have nearly two decades of proven collaboration in outpatient care, demonstrating their commitment and ability to effectively deliver seamless, integrated services tailored specifically to this community. Both BMC and Siskin have been working to update the 2022 project to implement an inpatient rehabilitation hospital for our community. BMC has been providing services in Bradley County since 1952. Siskin began seeing patients in its Cleveland Outpatient Therapy Clinic in 2006. BMC and Siskin's JV is prepared to start immediately. Architectural plans are complete, and we are ensuring rapid access to vital rehabilitation services without delay.

We believe that having an inpatient rehab facility in Cleveland will benefit patients and the community. As members of the Bradley Medical Center Medical Staff, we are aware that our residents are in need of stroke recovery, joint replacement, and other services. Inpatient physical rehabilitation services can provide that continuum of care. Siskin Hospital has an outstanding brain injury and stroke program, where inpatient rehabilitation services are a key component to returning these patients to full function. Within our community, there are local facilities that are already providing inpatient physical rehabilitation for many of our service areas. This joint venture plan will work collaboratively with all community providers to ensure that comprehensive, quality care is being provided. With this JV, many patients currently receiving care in Chattanooga can receive comprehensive inpatient rehab services. Siskin will focus on shifting patients residing in our community to the new, comprehensive inpatient rehab facility. This joint venture also allows for a more collaborative approach to providing services and

minimizing the need to compete for valuable clinical resources. Siskin will work with BMC through an operating agreement to expand necessary support services versus a full duplication of these services. Approval of this JV project will improve the quality of inpatient physical rehabilitation services throughout the southeast region of Tennessee. By utilizing local organizations such as Siskin Hospital and Bradley Medical Center, who understand the needs of our community that are already established and invested in the community, we will see that what is earned goes directly back to growing healthcare resources for our community.

Sincerely,
Bradley Medical Center Medical Staff

Bradley Medical Center Medical Staff
Signature Page Attached



April 22, 2025

We are writing this letter of support for the joint venture inpatient physical rehabilitation hospital project between Siskin Hospital for Physical Rehabilitation and Bradley Medical Center. We fully support the Certificate of Need application filed to create a separately licensed inpatient physical rehabilitation facility.

Sincerely,

William Buchner Jr. MD

Lee Radford MD

Kamran Farukh MD

Carl Minami MD

Daniel Kaslun MD

George Samuel

Jason L. Dunn MD

Ethan Rutledge
David Edwards MD

Brent Barrow MD

Ethan Rutledge DO

Dan Vance MD

William Buchner Jr. M.D.

← ~~LEE RADFORD MD~~
TAYLOR BEAR, MD

← LEE RADFORD, MD
KAMRAN FARUKH, MD

CARL MINAMI, MD

PAUL KAROLCZAK, MD

GEORGE SAMUEL, DO

Jason Dunn, MD

ESTON WENGER, MD

JANET SNODDY, MD

TED RICHARDS, DO

Brent Barrow, M.D.

Ethan Rutledge, D.O.

DANIEL VANCE, MD



Bradley Medical Center
Vitruvian Health

2305 Chambliss Avenue NW
Cleveland TN, 37311

April 22, 2025

We are writing this letter of support for the joint venture inpatient physical rehabilitation hospital project between Siskin Hospital for Physical Rehabilitation and Bradley Medical Center. We fully support the Certificate of Need application filed to create a separately licensed inpatient physical rehabilitation facility.

Sincerely,

Christie Thacker MD

D. Paul Stewart D.O.

John Taggers, MD

Azhar Sheikh MD

Selwin Abraham, M.D.

CHRIS THACKER, MD
Daniel Paul Stewart, D.O.

John Taggers, MD
AZHAR SHEIKH, MD
Selwin Abraham, M.D.

April 22, 2025

Mr. Logan Grant
Executive Director
Tennessee Health Facilities Commission
Andrew Jackson Building, 9th floor
502 Deaderick Street
Nashville, TN 37243

RE: Siskin Hospital for Physical Rehabilitation, Bradley Medical Center, Vitruvian Health CON Application

Dear Mr. Grant,

I am writing this letter of support for the joint venture inpatient physical rehabilitation hospital project between Siskin Hospital for Physical Rehabilitation and Bradley Medical Center. I fully support the Certificate of Need application filed to create a separately licensed inpatient physical rehabilitation facility.

Bradley Medical Center (BMC) and Siskin Hospital have nearly two decades of proven collaboration in outpatient care, demonstrating their commitment and ability to effectively deliver seamless, integrated services tailored specifically to this community. Both BMC and Siskin have been working to update the 2022 project to implement an inpatient rehabilitation hospital for our community. BMC has been providing services in Bradley County since 1952. Siskin began seeing patients in its Cleveland Outpatient Therapy Clinic in 2006. BMC and Siskin's JV is prepared to start immediately. Architectural plans are complete, and we are ensuring rapid access to vital rehabilitation services without delay.

I believe that having an inpatient rehab facility in Cleveland will benefit patients and the community. As a business owner in Cleveland, I am aware that many of our residents are in need of stroke recovery, joint replacement, and other services. Inpatient physical rehabilitation services can provide that continuum of care. Siskin Hospital has an outstanding brain injury and stroke program, where inpatient rehabilitation services are a key component to returning these patients to full function. Within our community, there are local facilities that are already providing inpatient physical rehabilitation for many of our service areas. This joint venture plan will work collaboratively with all community providers to ensure that comprehensive, quality care is being provided. With this JV, many patients currently receiving care in Chattanooga can receive comprehensive inpatient rehab services. Siskin will focus on shifting patients residing in our community to the new, comprehensive inpatient rehab facility. This joint venture also allows for a more collaborative approach to providing services and minimizing the need to compete for valuable clinical resources. Siskin will work with BMC through an operating agreement to expand necessary support services versus a full duplication of these services.

Approval of this JV project will improve the quality of inpatient physical rehabilitation services throughout the southeast region of Tennessee. By utilizing local organizations such as Siskin Hospital and Bradley

Medical Center, who understand the needs of our community that are already established and invested in the community, we will see that what is earned goes directly back to growing healthcare resources for our community.

Sincerely,



Nancy Casson

Owner of Red Ribbon

Chairman of Bradley Medical Center Advisory Board

Senator J. Adam Lowe



425 Rep. John Lewis Way, N.
Suite 732
Nashville, TN 37243
(615) 741-1946

sen.adam.lowe@capitol.tn.gov

Senate Chamber State of Tennessee

1st Senatorial District
McMinn, Meigs,
Rhea, and part of Bradley Counties

NASHVILLE

April 29, 2025

Mr. Logan Grant
Executive Director
Tennessee Health Facilities Commission
Andrew Jackson Building, 9th floor
502 Deaderick Street
Nashville, TN 37243

RE: Siskin Hospital for Physical Rehabilitation, Bradley Medical Center, Vitruvian Health CON Application

Dear Mr. Grant,

I am writing this letter of support for the joint venture inpatient physical rehabilitation hospital project between Siskin Hospital for Physical Rehabilitation and Bradley Medical Center and fully support the Certificate of Need application filed to create a separately licensed inpatient physical rehabilitation facility.

Bradley Medical Center (BMC) and Siskin Hospital have nearly two decades of proven collaboration in outpatient care, demonstrating their commitment and ability to effectively deliver seamless, integrated services tailored specifically to this community. Both BMC and Siskin have been working to update the 2022 project to implement an inpatient rehabilitation hospital for our community. BMC has been providing services in Bradley County since 1952. Siskin began seeing patients in its Cleveland Outpatient Therapy Clinic in 2006. BMC and Siskin's JV is prepared to start immediately. Architectural plans are complete, and they are ensuring rapid access to vital rehabilitation services without delay.

I believe that having an inpatient rehab facility in Cleveland will benefit patients and the community. Many of their residents need stroke recovery, joint replacement, and other services. Inpatient physical rehabilitation services can provide that continuum of care. Siskin Hospital has an outstanding brain injury and stroke program, where inpatient rehabilitation services are a key component to returning these patients to full function. This joint venture plan will work collaboratively with all community providers to ensure that comprehensive, quality care is being provided. With this JV, many patients in our community receiving care in Chattanooga can receive comprehensive inpatient rehab services closer to home. Siskin will focus on shifting patients residing in our community to the new, comprehensive inpatient rehab facility. Supporting this JV also allows for a more collaborative approach to providing services and minimizing the need to compete for valuable clinical resources. Siskin will work with BMC

through an operating agreement to expand necessary support services versus a full duplication of these services.

Approval of this JV project will improve the quality and access of inpatient physical rehabilitation services throughout the southeast region of Tennessee. Utilizing local organizations, such as Siskin Hospital and Bradley Medical Center, that are already established and invested in the community. They understand the needs of our community and are invested in it; we will see that what is earned goes directly back to growing healthcare resources for our community.

I strongly encourage your full consideration of this application and welcome you to reach out to my office if I can provide anything further.

Sincerely,

A handwritten signature in black ink, appearing to be "J. Adam Lowe", with a long horizontal line extending to the right.

Senator J. Adam Lowe
Senate District 1

Representative Greg Vital

**STATE REPRESENTATIVE
29TH LEGISLATIVE DISTRICT**

Part of Hamilton County

**425 Rep. John Lewis Way N. Suite 550
Nashville, TN 37243
615-741-3025**



House of Representatives State of Tennessee

NASHVILLE

May 7, 2025

RE: Siskin Hospital for Physical Rehabilitation, Bradley Medical Center **CON Application**

Dear Logan,

I am writing this letter of support for the joint venture inpatient physical rehabilitation hospital project between Siskin Hospital for Physical Rehabilitation and Bradley Medical Center.

With people living longer and longer, many of our residents are in need of stroke recovery, joint replacement and other services. Inpatient physical rehabilitation services can provide that continuum of care. Siskin Hospital has an outstanding brain injury and stroke program, where inpatient rehabilitation services are a key component to returning these patients to full function.

Approval of this project will improve the quality of inpatient physical rehabilitation services throughout the southeast region of Tennessee, as well as the people of District 29.

If you have any other questions, do not hesitate to give me a call.

Sincerely,

House of Representatives
District 29

KEVIN RAPER
STATE REPRESENTATIVE
HOUSE DISTRICT 24

425 5TH AVENUE NORTH, SUITE 508
NASHVILLE, TN 37243-0167
PHONE: (615) 741-1350
FAX: (615) 253-0346

DISTRICT ADDRESS
3440 EDGEWOOD CIRCLE NW
CLEVELAND, TN 37312
PHONE: (423) 421-1416

EMAIL: rep.kevin.raper@capitol.tn.gov

House of Representatives State of Tennessee

NASHVILLE

COMMITTEES

EDUCATION COMMITTEE

HIGHER EDUCATION
SUB-COMMITTEE

INSURANCE COMMITTEE

INSURANCE SUB-COMMITTEE

May 6th, 2025

Logan Grant, Executive Director
Health Services and Development Agency
Andrew Jackson State Office Building
502 Deaderick Street, 9th Floor
Nashville, TN 37243

RE: Siskin Hospital for Physical Rehabilitation, Bradley Medical Center **CON Application**

Dear Logan,

I am writing this letter of support for the joint venture inpatient physical rehabilitation hospital project between Siskin Hospital for Physical Rehabilitation and Bradley Medical Center.

With people living longer and longer, many of our residents are in need of stroke recovery, joint replacement and other services. Inpatient physical rehabilitation services can provide that continuum of care. Siskin Hospital has an outstanding brain injury and stroke program, where inpatient rehabilitation services are a key component to returning these patients to full function.

Approval of this project will improve the quality of inpatient physical rehabilitation services throughout the southeast region of Tennessee.

If you have any other questions, do not hesitate to give me a call.

Sincerely,

A handwritten signature in black ink that reads "Kevin Raper". The signature is written in a cursive, flowing style.

Representative Kevin Raper

Legislative District

MEIGS, POLK & BRADLEY
COUNTIES

Cordell Hull Building 556
Nashville, TN 37243

Phone (615) 741-7799
1-800-449-8366 ext. 17799

rep.dan.howell@capitol.tn.gov

**House of Representatives
State of Tennessee**

DAN HOWELL
REPRESENTATIVE 22ND DISTRICT



Committees

Chairman- Transportation
Committee

Transportation Subcommittee

Chairman- Fiscal Review
Committee

State & Local Committee

Election & Campaign Finance
Subcommittee

Calendar & Rules Committee

April 28th, 2025

Mr. Logan Grant
Executive Director
Tennessee Health Facilities Commission
Andrew Jackson Building, 9th floor
502 Deaderick Street Nashville, TN 37243

RE: Siskin Hospital for Physical Rehabilitation, Bradley Medical Center, Vitruvian Health
CON Application

Dear Mr. Grant,

I am writing this letter of support for the joint venture inpatient physical rehabilitation hospital project between Siskin Hospital for Physical Rehabilitation and Bradley Medical Center and fully support the Certificate of Need application filed to create a separately licensed inpatient physical rehabilitation facility.

Bradley Medical Center (BMC) and Siskin Hospital have nearly two decades of proven collaboration in outpatient care, demonstrating their commitment and ability to effectively deliver seamless, integrated services tailored specifically to this community. Both BMC and Siskin have been working to update the 2022 project to implement an inpatient rehabilitation hospital for our community. BMC has been providing services in Bradley County since 1952. Siskin began seeing patients in its Cleveland Outpatient Therapy Clinic in 2006. BMC and Siskin's JV is prepared to start immediately. Architectural plans are complete, and we are ensuring rapid access to vital rehabilitation services without delay.

I believe that having an inpatient rehab facility in Cleveland will benefit patients and the community. As Representative, many of our residents are in need of stroke recovery, joint replacement, and other services. Inpatient physical rehabilitation services can

provide that continuum of care. Siskin Hospital has an outstanding brain injury and stroke program, where inpatient rehabilitation services are a key component to returning these patients to full function. This joint venture plan will work collaboratively with all community providers to ensure that comprehensive, quality care is being provided. With this JV, many patients in our community receiving care in Chattanooga can receive comprehensive inpatient rehab services closer to home. Siskin will focus on shifting patients residing in our community to the new, comprehensive inpatient rehab facility. Supporting this JV also allows for a more collaborative approach to providing services and minimizing the need to compete for valuable clinical resources. Siskin will work with BMC through an operating agreement to expand necessary support services versus a full duplication of these services.

Approval of this JV project will improve the quality and access of inpatient physical rehabilitation services throughout the southeast region of Tennessee. Utilizing local organizations, such as Siskin Hospital and Bradley Medical Center, that are already established and invested in the community. They understand the needs of our community and are invested in it; we will see that what is earned goes directly back to growing healthcare resources for our community.

Sincerely,



Representative Dan Howell
Chairman, House Transportation Committee
TN District 22

City of Cleveland

CLEVELAND, TENNESSEE

Office of the Mayor

Kevin Brooks
Mayor



Cleveland Municipal Building
190 Church Street, N.E.
P.O. Box 1519
(423) 476-8931
(423) 559-3364 Fax

April 30, 2025

Mr. Logan Grant
Executive Director
Tennessee Health Facilities Commission
Andrew Jackson Building, 9th floor
502 Deaderick Street
Nashville, TN 37243

RE: Siskin Hospital for Physical Rehabilitation, Bradley Medical Center, Vitruvian Health
CON Application

Dear Mr. Grant,

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I believe that having an inpatient rehab facility in Cleveland will benefit patients and the community. As Mayor, many of our residents are in need of stroke recovery, joint replacement, and other services. Inpatient physical rehabilitation services can provide that continuum of care.

Siskin Hospital has an outstanding brain injury and stroke program, where inpatient rehabilitation services are a key component to returning these patients to full function. This joint venture plan will work collaboratively with all community providers to ensure that comprehensive, quality care is being provided. With this JV, many patients in our community receiving care in Chattanooga can receive comprehensive inpatient rehab services closer to home. Siskin will focus on shifting patients residing in our community to the new, comprehensive inpatient rehab facility. Supporting this JV also allows for a more collaborative approach to providing services and minimizing the need to compete for valuable clinical resources. Siskin will work with BMC through an operating agreement to expand necessary support services versus a full duplication of these services.

Approval of this JV project will improve the quality and access of inpatient physical rehabilitation services throughout the southeast region of Tennessee. Utilizing local organizations, such as Siskin Hospital and Bradley Medical Center, that are already established and invested in the community. They understand the needs of our community and are invested in it; we will see that what is earned goes directly back to growing healthcare resources for our community.

Sincerely,

A handwritten signature in blue ink, appearing to read 'K. Brooks', with a long horizontal stroke extending to the right.

Kevin D. Brooks, Mayor
City of Cleveland, TN



Eston K. Wenger, M.D., F.A.C.S.
Jason L. Dunn, M.D., F.A.C.S.
Joshua A. Worthington, M.D., F.A.C.S.
John G. Boxberger, M.D.

May 7, 2025

Mr. Logan Grant

Executive Director

Tennessee Health Facilities Commission

Andrew Jackson Building, 9th floor

502 Deaderick Street

Nashville, TN 37243

RE: Siskin Hospital for Physical Rehabilitation, Bradley Medical Center, Vitruvian Health
CON Application

Dear Mr. Grant,

I am writing this letter of support for the joint venture inpatient physical rehabilitation hospital project between Siskin Hospital for Physical Rehabilitation and Bradley Medical Center and fully support the Certificate of Need application filed to create a separately licensed inpatient physical rehabilitation facility.

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Phone: 423-472-5423

Fax: 423-476-5523

Premier Surgical Associates, PLLC
2175 Chambliss Avenue, Suite D
Cleveland, TN 37312

www.PremierSurgicalCleveland.com



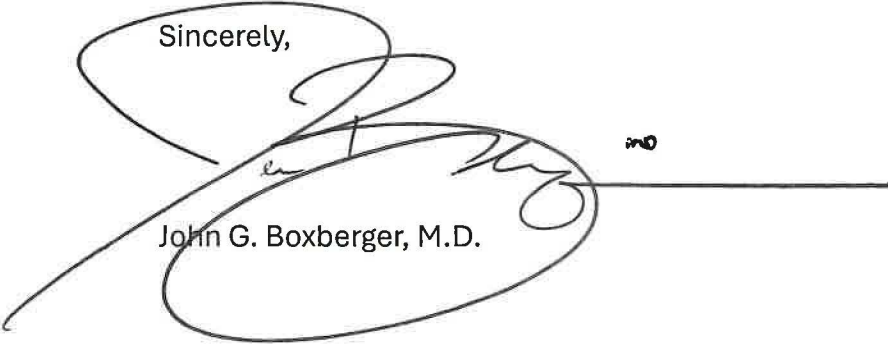
Eston K. Wenger, M.D., F.A.C.S.
Jason L. Dunn, M.D., F.A.C.S.
Joshua A. Worthington, M.D., F.A.C.S.
John G. Boxberger, M.D.

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Approval of this JV project will improve the quality and access of inpatient physical rehabilitation services throughout the southeast region of Tennessee. Utilizing local organizations, such as Siskin Hospital and Bradley Medical Center, that are already established and invested in the community. They understand the needs of our community and are invested in it; BMC will see that what is earned goes directly back to growing healthcare resources for our community.

Sincerely,



John G. Boxberger, M.D.

Phone: 423-472-5423
Fax: 423-476-5523

Premier Surgical Associates, PLLC
2175 Chambliss Avenue, Suite D
Cleveland, TN 37312

www.PremierSurgicalCleveland.com



Eston K. Wenger, M.D., F.A.C.S.
Jason L. Dunn, M.D., F.A.C.S.
Joshua A. Worthington, M.D., F.A.C.S.
John G. Boxberger, M.D.

May 7, 2025

Mr. Logan Grant

Executive Director

Tennessee Health Facilities Commission

Andrew Jackson Building, 9th floor

502 Deaderick Street

Nashville, TN 37243

RE: Siskin Hospital for Physical Rehabilitation, Bradley Medical Center, Vitruvian Health
CON Application

Dear Mr. Grant,

I am writing this letter of support for the joint venture inpatient physical rehabilitation hospital project between Siskin Hospital for Physical Rehabilitation and Bradley Medical Center and fully support the Certificate of Need application filed to create a separately licensed inpatient physical rehabilitation facility.

Bradley Medical Center (BMC) and Siskin Hospital have nearly two decades of proven collaboration in outpatient care, demonstrating their commitment and ability to effectively deliver seamless, integrated services tailored specifically to this community. Both BMC and Siskin have been working to update the 2022 project to implement an inpatient rehabilitation hospital for our community. BMC has been providing services in Bradley County since 1952. Siskin began seeing patients in its Cleveland Outpatient Therapy Clinic in 2006. BMC and Siskin's JV is prepared to start immediately. Architectural plans are complete, and will ensure rapid access to vital rehabilitation services without delay.

Phone: 423-472-5423

Fax: 423-476-5523

Premier Surgical Associates, PLLC
2175 Chambliss Avenue, Suite D
Cleveland, TN 37312

www.PremierSurgicalCleveland.com



Eston K. Wenger, M.D., F.A.C.S.
Jason L. Dunn, M.D., F.A.C.S.
Joshua A. Worthington, M.D., F.A.C.S.
John G. Boxberger, M.D.

I believe that having an inpatient rehab facility in Cleveland will benefit patients and the community. Many of our residents are in need of stroke recovery, joint replacement, and other services. Inpatient physical rehabilitation services can provide that continuum of care. Siskin Hospital has an outstanding brain injury and stroke program, where inpatient rehabilitation services are a key component to returning these patients to full function. This joint venture plan will work collaboratively with all community providers to ensure that comprehensive, quality care is being provided. With this JV, many patients in our community receiving care in Chattanooga can receive comprehensive inpatient rehab services closer to home. Siskin will focus on shifting patients residing in our community to the new, comprehensive inpatient rehab facility. Supporting this JV also allows for a more collaborative approach to providing services and minimizing the need to compete for valuable clinical resources.

Siskin will work with BMC through an operating agreement to expand necessary support services versus a full duplication of these services.

Approval of this JV project will improve the quality and access of inpatient physical rehabilitation services throughout the southeast region of Tennessee. Utilizing local organizations, such as Siskin Hospital and Bradley Medical Center, that are already established and invested in the community. They understand the needs of our community and are invested in it; BMC will see that what is earned goes directly back to growing healthcare resources for our community.

Sincerely,

A handwritten signature in black ink, appearing to be "Jason L. Dunn". The signature is fluid and cursive, with a long horizontal line extending to the right.

Jason L. Dunn, M.D., F.A.C.S.

Phone: 423-472-5423
Fax: 423-476-5523

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Cleveland, TN 37312

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May 7, 2025

Mr. Logan Grant

Executive Director

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Nashville, TN 37243

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Eston K. Wenger, M.D., F.A.C.S.
Jason L. Dunn, M.D., F.A.C.S.
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John G. Boxberger, M.D.

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Sincerely,

A handwritten signature in black ink, appearing to read "Eston K. Wenger".

Eston K Wenger, M.D., F.A.C.S.

Phone: 423-472-5423
Fax: 423-476-5523

Premier Surgical Associates, PLLC
2175 Chambliss Avenue, Suite D
Cleveland, TN 37312

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Eston K. Wenger, M.D., F.A.C.S.
Jason L. Dunn, M.D., F.A.C.S.
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May 7, 2025

Mr. Logan Grant

Executive Director

Tennessee Health Facilities Commission

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CON Application

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Cleveland, TN 37312

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Jason L. Dunn, M.D., F.A.C.S.
Joshua A. Worthington, M.D., F.A.C.S.
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Approval of this JV project will improve the quality and access of inpatient physical rehabilitation services throughout the southeast region of Tennessee. Utilizing local organizations, such as Siskin Hospital and Bradley Medical Center, that are already established and invested in the community. They understand the needs of our community and are invested in it; BMC will see that what is earned goes directly back to growing healthcare resources for our community.

Sincerely,

Joshua A Worthington, M.D., F.A.C.S.

A handwritten signature in black ink, appearing to be "J. Worthington", written over a faint yellow circular stamp.

Phone: 423-472-5423
Fax: 423-476-5523

Premier Surgical Associates, PLLC
2175 Chambliss Avenue, Suite D
Cleveland, TN 37312

www.PremierSurgicalCleveland.com



BRADLEY COUNTY SHERIFF'S OFFICE
BRADLEY COUNTY JUSTICE COMPLEX

2290 Blythe Avenue, SE
Cleveland, TN 37311
www.BradleySheriff.com



Telephone # (423) 728-7300

Fax # (423) 473-1505

May 6, 2025

Mr. Logan Grant
Executive Director
Tennessee Health Facilities Commission
Andrew Jackson Building, 9th floor
502 Deaderick Street
Nashville, TN 37243

RE: Siskin Hospital for Physical Rehabilitation, Bradley Medical Center, Vitruvian Health CON Application

Dear Mr. Grant,

I am writing this letter of support for the joint venture inpatient physical rehabilitation hospital project between Siskin Hospital for Physical Rehabilitation and Bradley Medical Center and fully support the Certificate of Need application filed to create a separately licensed inpatient physical rehabilitation facility.

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I believe that having an inpatient rehab facility in Cleveland will benefit patients and the community. As Sheriff, many of our residents are in need of stroke recovery, joint replacement, and other services. Inpatient physical rehabilitation services can provide that continuum of care. Siskin Hospital has an outstanding brain injury and stroke program, where inpatient rehabilitation services are a key component to returning these patients to full function. This joint venture plan will work collaboratively with all community providers to ensure that comprehensive, quality care is being provided. With this JV, many patients in our community receiving care in Chattanooga can receive comprehensive inpatient rehab services closer to home. Siskin will focus on shifting patients residing in our community to the new, comprehensive inpatient rehab facility. Supporting this JV also allows for a more collaborative approach to providing services and minimizing the need to compete for valuable clinical resources. Siskin will work with BMC through an operating agreement to expand necessary support services versus a full duplication of these services.

Approval of this JV project will improve the quality and access of inpatient physical rehabilitation services throughout the southeast region of Tennessee. Utilizing local organizations, such as Siskin Hospital and Bradley Medical Center, that are already established and invested in the community. They understand the needs of our community and are invested in it; we will see that what is earned goes directly back to growing healthcare resources for our community.

Sincerely,

Sheriff Steve Lawson



Bradley County Fire & Rescue

Post Office Box 1167
Cleveland, TN 37364-1167
Phone: 423-728-7067 Fax: 423-728-7069

Jeff Stewart - Fire Chief

Mr. Logan Grant
Executive Director
Tennessee Health Facilities Commission
Andrew Jackson Building, 9th floor
502 Deaderick Street Nashville, TN 37243

Reiskin Hospital for Physical Rehabilitation, Bradley Medical Center, Vitruvian Health CON Application

Dear Mr. Grant,

I am writing this letter of support for the joint venture inpatient physical rehabilitation hospital project between Siskin Hospital for Physical Rehabilitation and Bradley Medical Center and fully support the Certificate of Need application filed to create a separately licensed inpatient physical rehabilitation facility.

Bradley Medical Center (BMC) and Siskin Hospital have nearly two decades of proven collaboration in outpatient care, demonstrating their commitment and ability to effectively deliver seamless, integrated services tailored specifically to this community. Both BMC and Siskin have been working to update the 2022 project to implement an inpatient rehabilitation hospital for our community. BMC has been providing services in Bradley County since 1952. Siskin began seeing patients in its Cleveland Outpatient Therapy Clinic in 2006. BMC and Siskin's JV is prepared to start immediately. Architectural plans are complete, and we are ensuring rapid access to vital rehabilitation services without delay.

I believe that having an inpatient rehab facility in Cleveland will benefit patients and the community. As {title}, many of our residents are in need of stroke recovery, joint replacement, and other services. Inpatient physical rehabilitation services can provide that continuum of care. Siskin Hospital has an outstanding brain injury and stroke program, where inpatient rehabilitation services are a key component to returning these patients to full function. This joint venture plan will work collaboratively with all community providers to ensure that comprehensive, quality care is being provided. With this JV, many patients in our community receiving care in Chattanooga can receive comprehensive inpatient rehab services closer to home. Siskin will focus on shifting patients residing in our community to the new, comprehensive inpatient rehab facility. Supporting this JV also allows for a more collaborative approach to providing services and minimizing the need to compete for valuable clinical resources.


Siskin will work with BMC through an operating agreement to expand necessary support services versus a full duplication of these services.

Approval of this JV project will improve the quality and access of inpatient physical rehabilitation services throughout the southeast region of Tennessee. Utilizing local organizations, such as Siskin Hospital and Bradley Medical Center, that are already established and invested in the community. They understand the needs of our community and are invested in it; we will see that what is earned goes directly back to growing healthcare resources for our community.

On a side note, we recently had a fulltime firefighter that had a stroke back in February 2025 and had to be placed in Siskin's care in Chattanooga Tn, this fireman lives in Polk County Tn. With him living alone trips to the Cleveland area would be a huge asset for even him. There is several counties in the area that use Bradley Medical Center and adding Siskins Care on top of that would be huge for this area.

Thank you

Jeff Stewart
Fire Chief
Bradley County Fire Rescue
Cleveland Tn.
423-716-3451
jstewart@bradleycountyttn.gov

5-5-25




April 29, 2025

Mr. Logan Grant
Executive Director
Tennessee Health Facilities Commission
Andrew Jackson Building, 9th floor
502 Deaderick Street
Nashville, TN 37243

RE: Siskin Hospital for Physical Rehabilitation, Bradley Medical Center, Vitruvian Health CON Application

Dear Mr. Grant,

I am writing this letter of support for the joint venture inpatient physical rehabilitation hospital project between Siskin Hospital for Physical Rehabilitation and Bradley Medical Center and fully support the Certificate of Need application filed to create a separately licensed inpatient physical rehabilitation facility in Cleveland/Bradley County.

Bradley Medical Center (BMC) and Siskin Hospital have nearly two decades of proven collaboration in outpatient care, demonstrating their commitment and ability to effectively deliver seamless, integrated services tailored specifically to this community. Both BMC and Siskin have been working to update the 2022 project to implement an inpatient rehabilitation hospital for our community. BMC has been providing services in Bradley County since 1952. Siskin began seeing patients in its Cleveland Outpatient Therapy Clinic in 2006. BMC and Siskin's JV is prepared to start immediately. Architectural plans are complete, and we are ensuring rapid access to vital rehabilitation services without delay.

I believe that having an inpatient rehab facility in Cleveland will benefit patients and the community. As Vice President for Economic Development at the Cleveland/Bradley Chamber of Commerce, we understand the importance of this community expanding the range of healthcare services provided locally in order to attract and maintain our population growth and economic well-being. Many of our residents are in need of stroke recovery, joint replacement, and other services. Inpatient physical rehabilitation services can provide that continuum of care. Siskin Hospital has an outstanding brain injury and stroke program, where inpatient rehabilitation services are a key component to returning these patients to full function.

This joint venture plan will work collaboratively with all community providers to ensure that comprehensive, quality care is being provided. With this JV, many patients in our community receiving care in Chattanooga can receive comprehensive inpatient rehab services closer to home. Siskin will focus on shifting patients residing in our community to the new, comprehensive inpatient rehab facility. Supporting this JV also allows for a more collaborative approach to providing services and minimizing the need to compete for valuable clinical resources. Siskin will work with BMC through an operating agreement to expand necessary support services versus a full duplication of these services.

P.O. Box 2275
225 Keith Street
Cleveland, TN 37320-2275



423-472-6587
Fax: 423-472-2019
www.clevelandchamber.com

Mr. Logan Grant
April 29, 2025
Page Two

Approval of this JV project will improve the quality and access of inpatient physical rehabilitation services throughout the southeast region of Tennessee. Utilizing local organizations, such as Siskin Hospital and Bradley Medical Center, that are already established and invested in the community. They understand the needs of our community and are invested in it; we will see that what is earned goes directly back to growing healthcare resources for our community.

Sincerely,

A handwritten signature in blue ink that reads "Douglas Berry". The signature is fluid and cursive, with the first name "Douglas" and last name "Berry" clearly legible.

Douglas Berry
Vice President, Economic Development
Cleveland/Bradley Chamber of Commerce



Bradley Medical Center
Vitruvian Health

2305 Chambliss Avenue NW
Cleveland TN, 37311

May 6, 2025

Mr. Logan Grant
Executive Director
Tennessee Health Facilities Commission
Andrew Jackson Building, 9th floor
502 Deaderick Street
Nashville, TN 37243

RE: Siskin Hospital for Physical Rehabilitation, Bradley Medical Center, Vitruvian Health CON Application

Dear Mr. Grant,

We are writing this letter of support for the joint venture inpatient physical rehabilitation hospital project between Siskin Hospital for Physical Rehabilitation and Bradley Medical Center. We fully support the Certificate of Need application filed to create a separately licensed inpatient physical rehabilitation facility.

Bradley Medical Center (BMC) and Siskin Hospital have nearly two decades of proven collaboration in outpatient care, demonstrating their commitment and ability to effectively deliver seamless, integrated services tailored specifically to this community. Both BMC and Siskin have been working to update the 2022 project to implement an inpatient rehabilitation hospital for our community. BMC has been providing services in Bradley County since 1952. Siskin began seeing patients in its Cleveland Outpatient Therapy Clinic in 2006. BMC and Siskin's JV is prepared to start immediately. Architectural plans are complete, and we are ensuring rapid access to vital rehabilitation services without delay.

We believe that having an inpatient rehab facility in Cleveland will benefit patients and the community. As members of the 100 Black Men of Bradley County, Inc., we are aware that our residents are in need of stroke recovery, joint replacement, and other services. Inpatient physical rehabilitation services can provide that continuum of care. Siskin Hospital has an outstanding brain injury and stroke program, where inpatient rehabilitation services are a key component to returning these patients to full function. Within our community, there are local facilities that are already providing inpatient physical rehabilitation for many of our service areas. This joint venture plan will work collaboratively with all community providers to ensure that comprehensive, quality care is being provided. With this JV, many patients currently receiving care in Chattanooga can receive comprehensive inpatient rehab services. Siskin will focus on shifting patients residing in our community to the new, comprehensive inpatient rehab facility. This joint venture also allows for a more collaborative approach to providing services and

minimizing the need to compete for valuable clinical resources. Siskin will work with BMC through an operating agreement to expand necessary support services versus a full duplication of these services. Approval of this JV project will improve the quality of inpatient physical rehabilitation services throughout the southeast region of Tennessee. By utilizing local organizations such as Siskin Hospital and Bradley Medical Center, who understand the needs of our community that are already established and invested in the community, we will see that what is earned goes directly back to growing healthcare resources for our community.

Sincerely,
100 Black Men of Bradley County, Inc..

100 Black Men of Bradley County, Inc.
Signature Page Attached



May 6, 2025

We are writing this letter of support for the joint venture inpatient physical rehabilitation hospital project between Siskin Hospital for Physical Rehabilitation and Bradley Medical Center. We fully support the Certificate of Need application filed to create a separately licensed inpatient physical rehabilitation facility.

Sincerely,

Print:

JONATHAN C. PORTER

Jokari Pugh

Andy Hudgins
for C. Porter

Charles FLANKARD

Michael A. Benson

Signature:

Jonathan C. Porter

Jokari Pugh
Andy Hudgins

Charles Flankard
Michael A. Benson



We build strength, stability, self-reliance *and* shelter.

May 5, 2025

Mr. Logan Grant
Executive Director
Tennessee Health Facilities Commission
Andrew Jackson Building, 9th floor
502 Deaderick Street
Nashville, TN 37243

RE: Siskin Hospital for Physical Rehabilitation, Bradley Medical Center, Vitruvian Health CON Application

Dear Mr. Grant,

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I believe that having an inpatient rehab facility in Cleveland will benefit patients and the community. As Chief Executive Officer, many of our residents are in need of stroke recovery, joint replacement, and other services. Inpatient physical rehabilitation services can provide that continuum of care. Siskin Hospital has an outstanding brain injury and stroke program, where inpatient rehabilitation services are a key component to returning these patients to full function. This joint venture plan will work collaboratively with all community providers to ensure that comprehensive, quality care is being provided. With this JV, many patients in our community receiving care in Chattanooga can receive comprehensive inpatient rehab services closer to home. Siskin will focus on shifting patients residing in our community to the new, comprehensive inpatient rehab facility. Supporting this JV also allows for a more collaborative approach to providing services and minimizing the need to compete for valuable clinical resources. Siskin will work with BMC through an operating agreement to expand necessary support services versus a full duplication of these services.

Approval of this JV project will improve the quality and access of inpatient physical rehabilitation services throughout the southeast region of Tennessee. Utilizing local organizations, such as Siskin Hospital and Bradley Medical Center, that are already established and invested in the community. They understand the needs of our community and are invested in it; we will see that what is earned goes directly back to growing healthcare resources for our community.

Sincerely,

A handwritten signature in blue ink, appearing to read "David Gray".

David Gray
Chief Executive Officer



April 29, 2025

Mr. Logan Grant
Executive Director
Tennessee Health Facilities Commission
Andrew Jackson Building, 9th floor
502 Deaderick Street
Nashville, TN 37243

RE: Siskin Hospital for Physical Rehabilitation, Bradley Medical Center, Vitruvian Health CON Application

Dear Mr. Grant,

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I believe that having an inpatient rehab facility in Cleveland will benefit patients and the community. As President of Ocoee Foundation, Inc., many of our residents are in need of stroke recovery, joint replacement, and other services. Inpatient physical rehabilitation services can provide that continuum of care. Siskin Hospital has an outstanding brain injury and stroke program, where inpatient rehabilitation services are a key component to returning these patients to full function. This joint venture plan will work collaboratively with all community providers to ensure that comprehensive, quality care is being provided. With this JV, many patients in our community receiving care in Chattanooga can receive comprehensive inpatient rehab services closer to home. Siskin will focus on shifting patients residing in our community to the new, comprehensive inpatient rehab facility. Supporting this JV also allows for a more collaborative approach to providing services and minimizing the need to compete for valuable clinical resources.

Siskin will work with BMC through an operating agreement to expand necessary support services versus a full duplication of these services.

Approval of this JV project will improve the quality and access of inpatient physical rehabilitation services throughout the southeast region of Tennessee. Utilizing local organizations, such as Siskin Hospital and Bradley Medical Center, that are already established and invested in the community. They understand the needs of our community and are invested in it; we will see that what is earned goes directly back to growing healthcare resources for our community.

Sincerely,

A handwritten signature in blue ink, appearing to read "John J. Sheehan Jr.", written over the printed name.

John J. Sheehan Jr.
President
Ocoee Foundation, Inc.



CHURCH OF GOD BENEFITS BOARD, INC.

Post Office Box 4608
Cleveland, Tennessee 37320-4608

Physical Address:

4205 North Ocoee Street
Cleveland, Tennessee 37312
Toll-free (877) 478-7190
Local: (423) 478-7131
Facsimile: (423) 478-7889 or 7886
E-Mail: info@benefitsboard.com

April 28, 2025

Mr. Logan Grant
Executive Director
Tennessee Health Facilities Commission
Andrew Jackson Building, 9th floor
502 Deaderick Street
Nashville, TN 37243

***RE: Siskin Hospital for Physical Rehabilitation, Bradley Medical Center, Vitruvian Health CON
Application***

Dear Mr. Grant,

I am writing in support of the Certificate of Need application filed jointly by Siskin Hospital and Bradley Medical Center for a separately licensed inpatient physical rehabilitation facility.

Bradley Medical Center (BMC) and Siskin Hospital have nearly two decades of proven collaboration in outpatient care, demonstrating their commitment and ability to effectively deliver seamless, integrated services tailored specifically to this community. Both BMC and Siskin have been working to update the 2022 project to implement an inpatient rehabilitation hospital for our community. BMC has been providing services in Bradley County since 1952, while Siskin began seeing patients in its Cleveland Outpatient Therapy Clinic in 2006. The BMC/Siskin facility is prepared to start immediately. Architectural plans are complete, and they can ensure rapid access to vital rehabilitation services without delay.

I believe that having an inpatient rehab facility in Cleveland will benefit patients and our community. As the President and CEO of one of the largest retirement plans in our area, I am aware that many of our residents are in need of stroke recovery, joint replacement, and other services. Inpatient physical rehabilitation services can provide that continuum of care. Siskin Hospital has an outstanding brain injury and stroke program, where inpatient rehabilitation services are a key component to returning these patients to full function. The joint venture plan will work collaboratively with all community providers to ensure that comprehensive, quality care is being provided. Further, with this facility many patients in our community receiving care in Chattanooga can receive comprehensive inpatient rehab services closer to home. Siskin will focus on shifting patients residing in our community to the new, comprehensive inpatient rehab facility. This joint venture also allows for a more collaborative approach to providing services and minimizing the need to compete for valuable clinical resources. Siskin will work with BMC through an operating agreement to expand necessary support services versus a full duplication of these services.

Most importantly, approval of this joint venture project will improve the quality and access of inpatient physical rehabilitation services throughout the southeast region of Tennessee, utilizing local organizations (Siskin Hospital and Bradley Medical Center) that are already established and invested in the community. Because of their commitment to our community, both entities will ensure that what is earned through this joint venture goes directly back to making more healthcare resources available for our community.

Your consideration is greatly appreciated. Blessings,

CHURCH OF GOD BENEFITS BOARD, INC.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Arthur D. Rhodes', with a long horizontal flourish extending to the right.

Arthur D. Rhodes

President and Chief Executive Officer

Life Bridges, Inc.

P.O. Box 29, 764 Old Chattanooga Pike, SW, Cleveland, TN 37311

Diana Jackson, CEO, LCSW

Email: Djackson@lifebridgesonline.com

Office: (423) 421-6436

May 1, 2025

Mr. Logan Grant
Executive Director
Tennessee Health Facilities Commission
Andrew Jackson Building, 9th floor
502 Deaderick Street
Nashville, TN 37243

RE: Siskin Hospital for Physical Rehabilitation, Bradley Medical Center, Vitruvian Health CON Application

Dear Mr. Grant,


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Approval of this JV project will improve the quality and access of inpatient physical rehabilitation services throughout the southeast region of Tennessee. Utilizing local organizations, such as Siskin Hospital and Bradley Medical Center, that are already established and invested in the community. They understand the needs of our community and are invested in it; we will see that what is earned goes directly back to growing healthcare resources for our community.

Sincerely,



Diana Jackson



Hamilton Medical Center
Vitruvian Health

1200 Memorial
Drive
Dalton, GA 30720
706.272.6000
VitruvianHealth.com

Robert M. Chandler
Chairman, Hamilton Medical Center
Board of Trustees

May 2, 2025

Mr. Logan Grant
Executive Director
Tennessee Health Facilities Commission
Andrew Jackson Building, 9th floor
502 Deaderick Street
Nashville, TN 37243

RE: Siskin Hospital for Physical Rehabilitation, Bradley Medical Center, Vitruvian Health Care System CON Application

Dear Mr. Grant,

I am writing this letter of support for the joint venture inpatient physical rehabilitation hospital project between Siskin Hospital for Physical Rehabilitation and Bradley Medical Center. I fully support the Certificate of Need application filed to create a separately licensed inpatient physical rehabilitation facility.

Bradley Medical Center (BMC) and Siskin Hospital have nearly two decades of successful collaboration in outpatient care, demonstrating their commitment and ability to effectively deliver seamless, integrated services tailored specifically to this community. BMC and Siskin have been working to update the 2022 project aimed at implementing an inpatient rehabilitation hospital for the Cleveland, TN, community. BMC has provided services in Bradley County, TN, since 1952. Siskin began seeing patients in its Cleveland, TN, Outpatient Therapy Clinic in 2006. BMC and Siskin's joint venture is ready to start immediately. Architectural plans are complete, and we are ensuring rapid access to vital rehabilitation services without delay.

I believe that having an inpatient rehab facility in Cleveland, TN, will benefit both patients and the Cleveland, TN, community. As Chairman of the Hamilton Medical Center Board of Trustees and a member of Vitruvian Health Care System's Finance and Audit Committee, I recognize that many residents in the Cleveland area require stroke recovery, joint replacement, and other services. Inpatient physical rehabilitation services can provide this continuum of care. Siskin Hospital has an outstanding brain injury and stroke program, where inpatient rehabilitation services are a key component of helping these patients return to full function. This joint venture plan will collaborate with all community providers to ensure comprehensive, quality care.

With this joint venture, many patients in the Cleveland, TN, community receiving care in Chattanooga can access comprehensive inpatient rehab services closer to home. Siskin will focus on transitioning patients from the Cleveland, TN, area to the new comprehensive inpatient rehab facility. Supporting this joint venture also fosters a more collaborative approach to delivering services and reduces the need to compete for valuable clinical resources. Siskin will partner with BMC through an operating agreement to enhance essential support services rather than fully duplicate them.

Approval of this joint venture project is essential. Its goal is to enhance the quality and accessibility of inpatient physical rehabilitation services throughout the Southeast region of Tennessee. The project will collaborate with local organizations, such as Siskin Hospital and Bradley Medical Center, that are already established and invested in the community. They understand the needs of the Cleveland, TN, community and are committed to it; we will ensure that what is earned goes directly back to expanding healthcare resources for the Cleveland, TN, community.

Sincerely,

A handwritten signature in blue ink, reading "Robert Chandler", is written over a horizontal line.

Robert M. Chandler
Chairman, Hamilton Medical Center
Board of Trustees



April 29, 2025

Mr. Logan Grant
Executive Director
Tennessee Health Facilities Commission Andrew Jackson Building, 9th floor
502 Deaderick Street
Nashville, TN 37243

Dear Mr. Grant,

I wholeheartedly support the joint venture inpatient physical rehabilitation hospital project between Siskin Hospital for Physical Rehabilitation and Bradley Medical Center and to fully support the Certificate of Need application filed to create a separately licensed inpatient physical rehabilitation facility. At the age of 72, I am most interested in having a good facility like this nearby!

Bradley Medical Center and Siskin Hospital have proven collaboration in outpatient care, demonstrating their commitment and ability to effectively deliver seamless, integrated services tailored specifically to this community.

I believe that having an inpatient rehab facility in Cleveland will tremendously benefit patients and the community. This joint venture plan will work collaboratively with all community providers to ensure that comprehensive, quality care is being provided. With this JV, many patients in our community receiving care in Chattanooga can receive comprehensive inpatient rehab services closer to home. Supporting this JV also allows for a more collaborative approach to providing services and minimizing the need to compete for valuable clinical resources.

Approval of this JV project will improve the quality and access of inpatient physical rehabilitation services throughout the southeast region of Tennessee. Utilizing local organizations, such as Siskin Hospital and Bradley Medical Center, that are already established and invested in the community.

As the first baby born at the new Bradley Memorial Hospital on Dec.31, 1952, I wholeheartedly support this joint venture!

Sincerely,

423-595-7000

**John P. Neal, III
Attorney at Law
349 Ivey Gate Ridge, Ste 4
Dalton, Georgia 30720
Phone: 706-217-5680**

April 28, 2025

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

RE: Siskin Hospital for Physical Rehabilitation, Bradley Medical Center, Vitruvian Health CON Application

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Bradley Medical Center (BMC) and Siskin Hospital have nearly two decades of proven collaboration in outpatient care, demonstrating their commitment and ability to effectively deliver seamless, integrated services tailored specifically to this community. Both BMC and Siskin have been working to update the 2022 project to implement an inpatient rehabilitation hospital for our community. BMC has been providing services in Bradley County since 1952. Siskin began seeing patients in its Cleveland Outpatient Therapy Clinic in 2006. BMC and Siskin's JV is prepared to start immediately. Architectural plans are complete, and we are ensuring rapid access to vital rehabilitation services without delay.

I believe that having an inpatient rehab facility in Cleveland will benefit patients and the community. As an attorney, I am aware that many of our residents are in need of stroke recovery, joint replacement, and other services. Inpatient physical rehabilitation services can provide that continuum of care. Siskin Hospital has an outstanding brain injury and stroke program, where inpatient rehabilitation services are a key component to returning these patients to full function. This joint venture plan will work collaboratively with all community providers to ensure that comprehensive, quality care is being provided. With this JV, many patients in our community receiving care in Chattanooga can receive comprehensive inpatient rehab services closer to home. Siskin will focus on shifting patients residing in our community to the new, comprehensive inpatient rehab facility. Supporting this JV also allows for a more collaborative approach to providing services and minimizing the need to compete for valuable clinical resources. Siskin will work with BMC through an operating agreement to expand necessary support services versus a full duplication of these services.

Mr. Logan Grant
Executive Director
Tennessee Health Facilities Commission
April 28, 2025
Page 2

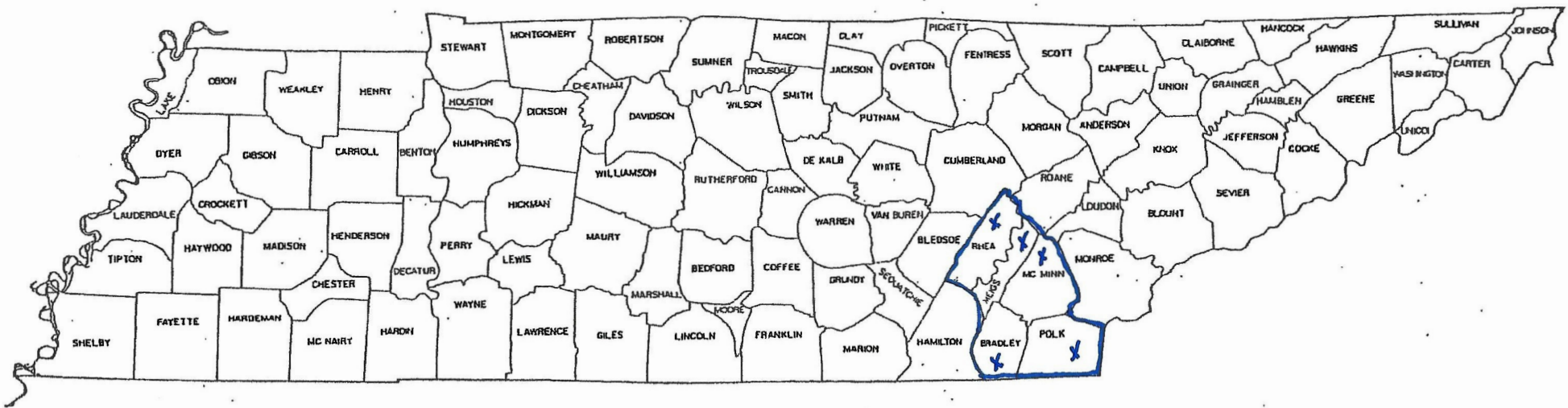
Approval of this JV project will improve the quality and access of inpatient physical rehabilitation services throughout the southeast region of Tennessee. Utilizing local organizations, such as Siskin Hospital and Bradley Medical Center, that are already established and invested in the community. They understand the needs of our community and are invested in it; we will see that what is earned goes directly back to growing healthcare resources for our community.

Sincerely,



John P. Neal, III

PROPOSED SERVICE AREA FOR EAST TENNESSEE PHYSICAL REHABILITATION



Demographic Variable/ Geographic Area	Department of Health/Health Statistics							Bureau of the Census				TennCare	
	Total Population-Current Year (2025)	Total Population-Projected Year (2029)	Total Population-% Change	*Target Population-(65+) Current Year	*Target Population- (65+) Project Year	*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
Bradley County	113,913	117,682	3.31%	21,167	22,892	8.15%	19%	40.4	\$63,789	17,087	15.0%	22,747	20.0%
McMinn County	55,752	56,675	1.66%	11,742	12,326	4.97%	22%	42.7	\$59,674	8,307	14.9%	13,001	23.3%
Meigs County	13,769	14,253	3.52%	3,058	3,266	6.80%	23%	45.4	\$58,395	2,148	15.6%	3,453	25.1%
Polk County	18,244	18,556	1.76%	4,089	4,391	7.39%	24%	46.8	\$60,227	2,737	15.0%	3,827	21.0%
Rhea County	33,948	34,115	0.49%	6,942	7,361	6.04%	22%	42.9	\$58,133	5,432	16.0%	8,396	24.7%
PSA Total/Avg.	235,626	241,281	2.40%	46,998	50,236	6.89%	21%	43.6	\$60,044	36,051	15.3%	51,424	21.8%
State of TN Total	7,242,733	7,462,831	3.04%	1,314,490	1,407,903	7.11%	19%	39.1	\$67,097	1,013,983	14.0%	1,414,667	19.5%

Source: Tennessee State Data Center / Boyd Center for Economic Research

UTILIZATION OF IRF BEDS IN CONTIGUOUS COUNTIES*- YTD FYE 6/30/2025 (7/1/24-3/31/25)									
* There are 0 IRF Facilities or Beds in the PSA									
Facility	County	Beds	Total patients	Total Pt. Days	Licensed Bed Days Aavailable	Licensed Occupancy Rate	Actual Bed Days Available	Actually Available Beds Occupancy Rate*	Pts. from PSA
Siskin	Hamilton	96	1,465	20,374	26,304	77%	23,248	88%	187
Encompass	Hamilton	69	N/A	N/A	18,906	N/A	18,906	N/A	N/A
Parkridge M.C. (DPU)	Hamilton	12	N/A	N/A	3,288	N/A	3,288	N/A	N/A
*Due to a facility-wide renovation project implemented in phases over the past 3 years, some of the licensed beds were not available.									

UTILIZATION OF IRF BEDS IN CONTIGUOUS COUNTIES*- FYE 6/30/2024									
* There are 0 IRF Facilities or Beds in the PSA									
Facility	County	Beds	Total patients	Total Pt. Days	Licensed Bed Days Aavailable	Licensed Occupancy Rate	Actual Bed Days Available	Actually Available Beds Occupancy Rate	Pts. from PSA
Siskin	Hamilton	96	2,057	29,052	35,136	83%	33,000	88%	269
Encompass	Hamilton	69	N/A	N/A	25,254	N/A	25,254	N/A	N/A
Parkridge M.C. (DPU)	Hamilton	12	N/A	N/A	4392	N/A	4392	N/A	N/A
*Due to a facility-wide renovation project implemented in phases over the past 3 years, some of the licensed beds were not available.									

UTILIZATION OF IRF BEDS IN CONTIGUOUS COUNTIES*- FYE 6/30/2023 (JAR)									
* There are 0 IRF Facilities or Beds in the PSA									
Facility	County	Beds	Total patients	Total Pt. Days	Licensed Bed Days Aavailable	Licensed Occupancy Rate	Actual Bed Days Available	Actually Available Beds Occupancy Rate	Pts. from PSA
Siskin	Hamilton	96	1,822	28,285	35,040	81%	31,803	89%	207
Encompass	Hamilton	69	1,321	15,970	25,185	46%	25,185	63%	171
Parkridge M.C. (DPU)	Hamilton	12	244	3265	4,380	75%	4,380	75%	N/A
*Due to a facility-wide renovation project implemented in phases over the past 3 years, some of the licensed beds were not available.									

UTILIZATION OF IRF BEDS IN CONTIGUOUS COUNTIES*- FYE 6/30/2022 (JAR)									
* There are 0 IRF Facilities or Beds in the PSA									

Facility	County	Beds	Total patients	Total Pt. Days	Licensed Bed Days Available	Licensed Occupancy Rate	Actual Bed Days Available	Actually Available Beds Occupancy Rate	Pts. from PSA
Siskin	Hamilton	96	1,896	27,895	35,040	79.6%	31,261	89.2%	226
Encompass	Hamilton	69	1,222	15,360	25,185	61.0%	25,185	61.0%	131
Parkridge M.C. (DPU)	Hamilton	12	250	3313	4,380	75.6%	4,380	75.6%	N/A
*Due to a facility-wide renovation project implemented in phases over the past 3 years, some of the licensed beds were not available.									

UTILIZATION OF IRF BEDS IN CONTIGUOUS COUNTIES*- FYE 6/30/2021 (JAR)

* There are 0 IRF Facilities or Beds in the PSA									
Facility	County	Beds	Total patients	Total Pt. Days	Licensed Bed Days Available	Licensed Occupancy Rate	Actual Bed Days Available	Actually Available Beds Occupancy Rate	Pts. from PSA
Siskin	Hamilton	96	1,896	27,895	35,040	79.6%	31,261	89.2%	226
Encompass	Hamilton	69	1,222	15,360	25,185	61.0%	25,185	61.0%	131
Parkridge M.C. (DPU)	Hamilton	12	258	3344	4,380	76.3%	4,380	N/A	N/A
*Due to a facility-wide renovation project implemented in phases over the past 3 years, some of the licensed beds were not available.									

Rehab Impairment Category	Estimated Charges	Average Expected Medicare Reimbursement
Stroke	\$31,160.87	\$24,991.02
Nontraumatic brain injury	\$28,845.27	\$23,133.91
Nontraumatic spinal cord injury	\$30,252.26	\$24,262.31
Neurological	\$22,820.57	\$18,302.10
Fracture of LE	\$27,751.97	\$22,257.08
Replacement of LE joint	\$24,563.85	\$19,700.21
Other orthopedic	\$25,797.71	\$20,689.76
Cardiac	\$22,954.09	\$18,409.18
Major multiple trauma, no brain injury or spinal cord injury	\$26,949.13	\$21,613.20
Miscellaneous	\$23,880.76	\$19,152.37
Average	\$26,497.65	\$21,251.11

Attachment 8C

COMPARISON OF AVERAGE GROSS CHARGES				
IRF	County	Total Gross Patient Revenue	No. of Adm./Disch.	Avg. Gross Charge
ETPR (Proposed - 2026)	Bradley	\$11,137,211.00	429	\$25,960.86
Siskin (2023 JAR)	Hamilton	\$52,785,965.00	1822	\$28,971.44
Encompass (2023 JAR)	Hamilton	\$38,310,381.00	1321	\$29,001.05



State of Tennessee
Health Facilities Commission
East Tennessee Regional Office

7175 Strawberry Plains Pike, Suite 103, Knoxville, Tennessee 37914
www.tn.gov/hfc Phone: 865-594-9396 Fax: 865-594-5739

AMENDED January 30, 2024

January 23, 2024

Mr. Aaron Spinks, Administrator
Siskin Subacute West
1 Siskin Plaza
Chattanooga, TN 37403

Via Email: aspinks@siskinrehab.org

RE: Compliance Notice
Recertification Survey
CCN: 44-5008

Dear Administrator:

The East Tennessee Regional Office of Health Facilities Commission conducted a recertification survey at your facility on **October 16 – 29, 2023**. Based on onsite revisit survey conducted on **December 26, 2023**, we found your facility to be in substantial compliance with all regulations surveyed as of **November 28, 2023**.

The attached compliance 2567(s) are for your records. If you have any questions, please feel free to contact this office.

Sincerely,

Dr. Debra Verna

Dr. Debra Verna, DNP, MSN, APRN, FNP-BC, LNHA
Public Health Regional Regulatory Program Manager

DV/tw

Enclosure: Compliance 2567

Attachment 7Q

Project Name : East Tennessee Physical Rehabilitation JV, LLC

Supplemental Round Name : 1

Certificate No. : CN2504-014

Due Date : 5/13/2025

Submitted Date : 5/7/2025

1. 1E. Overview

Will the proposed facility offer cardiac and/or pulmonary rehabilitation services, renal dialysis, occupational therapy, physical therapy, speech therapy, orthotic services, and prosthetic services?

What is the status of the hospital where the project will be located. What license number is it currently operated under?

How many beds are actively and/or inactively licensed at the facility currently?

Are the existing behavioral health beds operating at the facility licensed under Bradley Medical Center by HFC or TDMHSAS?

Will the outpatient services remain onsite?

Please confirm that the proposed facility be licensed separately from Bradley Medical Center.

There appears to be a typo on Page 7 "Its occupancy rate was only 63% in 2023, and only 61% in 2023."

Response : Q 1: The proposed facility will offer occupational therapy, physical therapy, and speech therapy. Patients with more complex needs such as renal dialysis and other more complex needs would typically be admitted to Siskin Hospital in Chattanooga.

Q2: The Westside campus is a satellite campus of Bradley Medical Center, and operates under the same hospital license, number 031.

Q3: BMC has 351 licensed beds. On the Westside campus there are 10 acute beds and 30 behavioral health beds. None of the BMC beds are on inactive status.

Q4: The behavioral health beds are operated under the BMC hospital license.

Q5: Yes, the outpatient services will continue to be provided at the Westside campus.

Q6: The proposed IRF will be a separately licensed health care institution.

Q7: That passage should say: "Encompass is a 69 bed IRF. Its occupancy rate was only 63% in 2023, and only 61% in 2022." This has been corrected in the application.

2. 7A. Type of Ownership of Control

Please attach an ownership structure organizational chart showing all entities included in the ownership structure with all members 5% or greater direct or indirect interest.

What other inpatient rehabilitation facilities do the applicant's owners operate, nationally and in Tennessee?

Response : An ownership chart has been added to Attachment 7A, and it has been re-labeled as Attachment 7AR.

Siskin Hospital for Physical Rehabilitation, Inc. is a Tennessee not-for-profit corporation, founded in 1984. Its 96 bed IRF has been operating in Chattanooga since 1992. Siskin Hospital for Physical Rehabilitation is the only IRF operated by the company. It also owns and operates a 108-bed skilled nursing facility called Siskin Subacute West which is located on the same campus as the IRF.

3. 10A. Floor Plan

Please identify the square footage of the project as well as the overall square footage of the building on Attachment 10A. Please revise and resubmit Attachment 10 (labeled as Attachment 10AR).

Response : The overall square footage of the building is approximately 85,630 SF, and the square footage of the project is approximately 25,510 SF. A revised floor plan is attached as Attachment 10AR.

4. 5C. License/Certification

Are both accreditations being pursued related to the IRF? Is this a common practice for the applicant's owners to obtain accreditation from multiple sources?

Response : Yes, Siskin Hospital for Physical Rehabilitation is accredited by both CIHQ and CAR, and the proposed IRF will likewise be accredited by both. Part of Siskin Hospital for Physical Rehabilitation's mission is to provide "high-quality physical rehabilitation services." To demonstrate that Siskin Hospital provides high quality care to all patients, Siskin Hospital's Inpatient Rehabilitation services maintain accreditation and certification through two accrediting bodies: the Center for Improvement in Healthcare Quality (CIHQ) and Commission on Accreditation of Rehabilitation Facilities (CARF).

CIHQ provides accreditation of deemed status as required by Medicare and Medicaid, and specialty certification designation as a Center of Excellence for Rehabilitation (CER) which Siskin Hospital has obtained and retained. To obtain this specialty certification, Siskin Hospital demonstrated compliance with over 100 additional standards specific to the rehabilitative needs of patients including specific requirements for patient care and monitoring, consistent quality assessment and improvement, leadership, resource allocation, assuring a multidisciplinary approach to care, and transition of patients post discharge to assure they succeed.

CARF is an international accrediting organization. Its certification is primarily focused on quality of care and the quality of the patient experience while receiving care. Siskin Hospital has accreditation as a rehabilitation hospital for adults and pediatrics, and specialty accreditation for its brain injury and stroke specialty programs. CARF certification assesses program structure to assure ongoing services including leadership, financial responsibility, workforce development, maintaining the environment of care including health and safety, verifying access for patients and their rights are honored, verifying clinical excellence, including specific criteria for specialty certifications, and validating ongoing efforts at continuous quality improvement.

Both CIHQ CER specialty certification and CARF accreditation are voluntary. Siskin Hospital is the only IRF facility in Southeast Tennessee with both CARF accreditation and designation as a Centers of Excellence in Rehabilitation. Individually, each of these accreditations/certifications would demonstrate Siskin Hospital's commitment to quality patient care. Obtaining both CER designation and CARF accreditation demonstrates Siskin Hospital's absolute commitment to excellence, and distinguishes Siskin Hospital as a uniquely qualified rehabilitation hospital in the State of Tennessee.

5. 2N. Service Area

It is noted that the projected patients from Polk are higher than in McMinn which has a larger population of individuals age 65+. Is there a reason for this, e.g. population centers in the two counties being closer to the facility site?

Response : Yes, that is at least part of the reason. The county seat of McMinn County is Athens, and the county seat of Polk County is Benton. Athens is 27.5 miles from the proposed IRF site, and Benton is 16.6 miles from the site. In addition, Interstate 75 bisects McMinn County and Athens is located just off I-75. This makes it easier for some residents of McMinn County to drive to Knoxville for rehabilitation services. If ETPR is approved, it is believed that over time a substantial portion of this out-migration will be mitigated and more PSA residents will choose to receive care locally at ETPR.

6. 3N. Demographics

Please revise the population projections to 2025-2029 utilizing the Boyd Center projections dashboard. <https://tiny.utk.edu/BoydProj2022>

Please revise the TennCare % of Total Population to correspond with the revised population data.

Please revise and resubmit Attachment 3N (labeled as Attachment 3NR).

Response : These revisions have been made, and the revised table is attached as Attachment 3NR.

7. 5N. Unimplemented services

Are there any differences between the types of services proposed by CSH/LP Behavioral Health and the proposed facility? Also, the reference to NC counties in the service area of the CSH/LP Behavioral Health application appears to be inaccurate.

Please include 2021 JAR data for the IRFs in Hamilton County.

Please include the utilization of the IRF Unit at Parkridge, which is available in Schedule D.13 of the Joint Annual Reports.

Response : ETPR will have no behavioral health beds. The reference to North Carolina in the response to Item 5N has been corrected in the application.

The table has been updated to include the 2021 JAR data, and the utilization data for the IRF Unit at Parkridge Medical Center. Please see Attachment 5NR, and Attachment 1N(1)R.

8. 6N. Utilization and/or Occupancy Statistics

How many of the projected patients are expected to be referred from Bradley Medical Center?

Does the applicant have any hospital discharge data related to rehab appropriate discharges in the service area to support the projections?

How do the applicant's projections overlap with the recently approved CSH/LP projections by counties in the applicant's service area?

What are the most common conditions projected to be referred to the facility?

Response : Q 1: In the first year, 247 of the 429 admissions to ETPR are projected to be referred to ETPR from BMC.

Q2: The table below shows the number of patients who were discharged to SNFs, and of that number, the number who were likely IRF-eligible based upon their DRG diagnoses, and/or the patient’s history. It is assumed that 90% of those would choose to be discharged to ETPR since it would be local and would be affiliated with the hospital.

Discharges From BMC Likely Rehab-Eligible	2023	2024
Total SNF Discharges	1,164	1,271
SNF Discharges with DRGs likely appropriate to IRF based on history	184	229
SNF Discharges Estimated to be Appropriate for IRF based on history	28	34
Totals	212	263

Ninety percent (90%) of 263 rehab-eligible discharges = 237, plus another 10 patients who were referred from BMC to Siskin last year, = 247.

Q3: There is some overlap, but it is not too significant. The 5 counties in the applicants PSA account for over 93% of ETPR's projected patients in Year 1. Those same five counties account for only 24.5% of the total patients in the CSH/LP project. Please see the table below:

	ETPR (Applicant)				CSH/LP (CN2409-027A)		
County	Projected No. of Co. Patients	Projected Total Patients	Co. Pat. % of Total		Projected No. of Co. Patients	Projected Total Patients	Co. Pat. % of Total
Bradley	245	429	57.1%		81	682	11.9%
McMinn	30	429	7.0%		40	682	5.9%
Meigs	14	429	3.3%		9	682	1.3%
Polk	107	429	24.9%		12	682	1.8%
Rhea	4	429	0.9%		25	682	3.7%
Total	400	429	93.2%		167	682	24.5%

Q 4: Stroke, Brain Injury, and Orthopedic injury.

9. 3C. Effects of Competition and/or Duplication

Please address any differences between the types of services, acuity level of patients, conditions, specialized services to be offered at the proposed facility vs other existing or approved but unimplemented IRFs in the region.

Are there any differences between the payors that will be accepted by the applicant and other regional IRF operators?

Response : Q1: The applicant has no information regarding the acuity level of patients served by other existing or approved but unimplemented IRFs in the region.

Patients with exceptionally complex needs and acuity will continue to be admitted to Siskin Hospital in Chattanooga rather than to ETPRH because Siskin's larger staff and larger bed complements will facilitate longer stays for challenged patients. Examples of such challenged patients not typically appropriate for ETPRH would include patients

needing additional services such as dialysis, or patients with complex brain injuries/neurological conditions or spinal cord injuries.

Q2: The applicant intends to accept payors currently accepted by Siskin Hospital in Chattanooga, which are identified in the application. The applicant does not know which insurance plans any other provider contracts with.

10. 4C. Accessibility to Human Resources

Please discuss the applicant's relationships with institutions in the region that can support the staffing of the proposed facility.

Does the applicant and its owners have any recent history of staffing any comparably sized new facilities?

Response : Q 1: Physician coverage and medical directorship will be provided by Siskin Physical Medicine & Rehabilitation (SPMR), a physician group. SPMR and SHPR have a long-standing physician coverage partnership. A Medical Director for the proposed IRF in Cleveland, TN has been identified in the SPMR group.

SHPR will recruit and retain nursing and therapy staff for the proposed IRF Cleveland, TN in the same manner that SHPR recruits and retains staff at its main campus. SHPR works closely with multiple regional nursing and therapy programs at universities and other educational institutions. SHPR started the area's first Certified Nurse Assistant (CNA) training program in partnership with the University of Tennessee at Chattanooga in 2021. This is one example of SHPR's proactive approach to staffing.

SHPR is able to recruit via Job Boards (Indeed & LinkedIn), social media platforms (Facebook, LinkedIn), referrals from current staff, and from students finishing clinical rotations. (On average, SHPR typically employs half of the graduating nursing clinical students from each rotation.) SHPR also holds hiring events and visits various schools to discuss employment opportunities at SHPR. The hospital is actively working with local community groups and publications to identify potential candidates.

Currently, SHPR's therapy and nursing vacancy rates are fairly low. Many of the clinical students rotating through the hospital's therapy and nursing departments seek employment at SHPR after graduating, due to the opportunities and work culture at SHPR. Instead of offering sign-on bonuses, SHPR invests money in existing associates through ensuring that associates' pay ranges remain highly competitive as markets adjust. SHPR offers competitive compensation in comparing with other facilities in the area and provides incentives for its associates to remain engaged with their day-to-day tasks. SHPR also offers referral bonuses to associates – a practice that has been one of its most successful

recruitment tools. Many associates are able to refer potential new hires to SHPR with whom they enjoy working. SHPR's care is only as strong as its associates, so having people who want to work with one another can significantly reduce turnover and provide the best care possible.

Retention is key to SHPR's success in staffing. Approximately 30% of active associates have been employed at Siskin for 10 or more years. Feedback and active engagement from associates is a major reason for the long tenure among SHPR associates. All associates participate in surveys by Press Ganey, to evaluate their experience as associates. Action plans are generated from these surveys to address concerns of associates, in order to increase morale, improve work culture, and reduce turnover rates. In addition to these surveys, SHPR continuously evaluates compensation for all positions, utilizing the Tennessee Hospital Association surveys that are released twice a year. SHPR also has open-door policies for associates to speak with Human Resources and with all the executive leadership, which promotes a safe and transparent environment between the associate and employer.

Q 2: Please see the immediately preceding response regarding Siskin's experience and resources in hiring, training, and retaining staff. Siskin has not started any new start-up facilities recently.

11. 10C. Project Only Payor Mix

The projected (1.0%) Charity Care is noted. It appears that the Charity Care percentage at the Siskin (Hamilton County) facility is less (0.3%). Please discuss the difference between the facilities.

Response : While the applicant allocates 1% of its gross charges for Charity, the actual percentage is determined by charity referrals received, and fluctuates over time.

12. 8C. Proposed Charges

Please list a source for the Table on Page 21.

Response : The source has been listed under the table on page 21 of the application. The data came from Siskin Hospital for Physical Rehabilitation.

13. 9C. Other Facilities Charges

The number of Admissions/Discharges listed on Page 22 at Siskin (2023) appears to be incorrect (1,882 vs. 1,822). Please adjust the admissions and Avg. Gross Charges listed in response to Item 9C.

Response : These revisions have been made to the application.

14. 4Q. TennCare MCO's

Does the applicant intend to contract with WellPoint for TennCare patients?

Response : Per TennCare Medicaid Rules, Inpatient Rehabilitation Services are not covered for persons aged 21 and older (which are the majority of patients served by an IRF).

However, TennCare MCOs can approve inpatient rehabilitation at their discretion. It is Siskin Hospital's experience that TennCare patients can be adequately served by contracting with BlueCare and TennCare Select. Single case agreements will be considered if patients appropriate for inpatient rehabilitation with coverage by WellPoint are referred to ETPRH.

15. 1N. Criteria and Standards

Attachment 1N, Establishment of a Rehabilitation Facility, Criterion #1, Determination of Need

Please update the population data to 2025 to 2029 based on the Boyd Center data and revise the projected bed need for the service area accordingly.

Please show the population table and projections for each county in response to this Criterion.

Please revise and resubmit Attachment 1N (labeled as Attachment 1NR).

Response : The revisions have been made, and the attachment has been resubmitted as Attachment 1NR and Attachment 3NR.

16. 1N. Criteria and Standards

Attachment 1N, Establishment of a Rehabilitation Facility, Criterion #5, Quality Considerations

The CMS Quality Measures for the Siskin Chattanooga appear to contain errors in the following:

Pressure ulcers

Catheter associated urinary tract infection (CAUTI)

Healthcare worker influenza vaccinations

Clostridium difficile (C. diff)

Falls with injury

Rate of successful return to home or community

Please revise and resubmit the response to Criterion #5 (labeled as Attachment 1NR).

Response : The scores reported are not incorrect, but they cover time periods which are different from and more recent than the scores publicly available on Medicare Compare. The more recent data and scores have been reported to Medicare, but have not yet been posted by Medicare.

A table showing the different scores and the time periods they cover is included the response to Criteria 5 in Attachment 1NR.

17. 1N. Criteria and Standards

Attachment 1N(1):

The tables provided in Attachment 1N(1) appear to contain errors with the following:

2022 - Encompass # of licensed beds, licensed bed days available, licensed occupancy rate, actual bed days available, actually available beds occupancy rate.

Please revise and resubmit Attachment 1N(1) (labeled as Attachment 1N(1)R).

Response : The revisions have been made, and the attachment has been resubmitted as Attachment 1N(1)R., included in Attachment 1NR.

18. 1N. Criteria and Standards

Attachment 1N(3):

Attachment 1N(3) appears to contain errors with the following:

First Table:

Decatur to Siskin (miles) & saved distance (miles)

Second Table:

McMinn Co to ETPR (miles) & saved distance (miles)

Meigs Co to Siskin (miles & minutes) & saved distance (miles & minutes)

Third Table:

Meigs Co to CSH/LP (miles) & saved distance (miles)

Please revise and resubmit Attachment 1N(3) (labeled as Attachment 1N(3)R).

Response : These revisions have been made and the attachment has been resubmitted as Attachment 1N(3)R, included in Attachment 1NR.

Project Name : East Tennessee Physical Rehabilitation JV, LLC

Supplemental Round Name : 2

Due Date : 5/14/2025

Certificate No. : CN2504-014

Submitted Date : 5/12/2025

1. 7A. Type of Ownership of Control

Please show any upstream owners of Bradley Medical Center, LLC in Attachment 7AR.

Response : A revised ownership chart showing the upstream ownership of Bradley Medical Center is included in Attachment 7AR2 (last page).

2. 3N. Demographics

There appears to be a minor error in the following:

Polk County - Total Population Projected Year 2029 and PSA Total for 2029.

Please revise attachments 3NR and 1NR to update these population projections.

Response : The corrections have been made and the attachments are being resubmitted as Attachments 3NR2 and 1NR2.

3. 1N. Criteria and Standards

Attachment 1N, Establishment of a Rehabilitation Facility, Criterion #5, Quality Considerations

The CMS Quality Measures for the Siskin Chattanooga appear to contain errors in the following:

Falls with injury

Response : There is no error in the reported data.

4. 1N. Criteria and Standards

Attachment 1N(1):

The tables provided in Attachment 1N(1) appear to contain errors with the following:

2022 - Encompass # of licensed beds, licensed bed days available, licensed occupancy rate, actual bed days available, actually available beds occupancy rate.

Please revise and resubmit Attachment 1N(1)R (labeled as Attachment 1N(1)R2).

Response : The tables have been revised and resubmitted as Attachment 1N(1)R2 (included in Attachment 1NR2).