



State of Tennessee
Health Facilities Commission

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

**INITIAL APPLICATION FOR LICENSE OF SERVICES
FOR HOSPITAL OR OUTPATIENT DIAGNOSTIC CENTER**

1. NAME AND PHYSICAL ADDRESS OF FACILITY OF SERVICE

Provider Type (Check One): Hospital Outpatient Diagnostic Center (ODC)

University of Tennessee Medical Center

Name

1924 Alcoa Highway

Address

Knoxville

TN

37920

City

State

ZIP

00000046

License Number:

2. CEO/ADMINISTRATOR OF PROVIDER

Keith Gray, MD, MBA, FACS

President and CEO

Name

Title

kgray@utmck.edu

Email Address

University of Tennessee Medical Center

Company Name

1924 Alcoa Highway

Address

Knoxville

TN

37920

City

State

ZIP

865-305-6597

Phone Number

3. **BILLING INFORMATION FOR FACILITY** _____

John Durden **AP Specialist**

Name Title

Accounts-Payable@utmck.edu

Email Address

University of Tennessee Medical Center

Company Name

PO BOX 32849

Address

Knoxville **TN** **37930**

City State ZIP

865-251-4348

Phone Number

On the following items, check all appropriate services to be licensed.

Have any of the following services been changed since the last occupancy approval or have had a Plans Review related to that service since the last approval? Yes No

If yes, what were the changes and date of changes?:

ESTABLISHMENT OF A BURN UNIT:

Physical Address of Service: _____

Number of Beds _____

What Age Group Will Be Served/Licensed?: Pediatric Adult Both

Will the Burn Unit be Verified by ABA?: Yes No (Please attach documentation of verification.)

If no, why:

X **ESTABLISHING MRI UNIT/SERVICE:** *(If more than one unit, use ATTACHMENT – A.)*

Physical Address of Service: 1924 ALCOA HWY, KNOXVILLE, TN 37920

Name Brand of Unit SEE ATTACHMENT A

Tesla 1.5T x 3, 3.0T x 2
(see attachment A)

Type (i.e. Close, Short Bore, etc.)

Unit's Serial Number See attachment A

Will the MRI Unit be Accredited?: X Yes No

If MRI Unit will be Accredited, is it PENDING X ACCREDITED

If ACCREDITED, What Organization? ACR and TJC
(Attach certificate or proof of accreditation.)

If no, why:

The MRI unit will be registered with the Health Facilities Commission. X Yes No

X **ESTABLISHING PET UNIT/SERVICE:** *(If more than one unit, use ATTACHMENT – A.)*

Physical Address of Service: 1924 ALCOA HWY, KNOXVILLE, TN 37920

Name Brand of Unit See attachment A

Type (i.e. PET Only, PET/CT, PET/MRI) PET CT

Unit's Serial Number See attachment A

Will the PET Unit be Accredited?: X Yes No

If PET Unit will be Accredited, is it PENDING X ACCREDITED

If ACCREDITED, What Organization? ACR and TJC
(Attach certificate or proof of accreditation.)

If no, why:

The PET unit will be registered with the Health Facilities Commission. X Yes No

X ESTABLISHING NEONATAL INTENSIVE CARE UNIT (NICU):

Physical Address of Service: 1924 Alcoa Hwy Knoxville, TN 37920

Choose Designation Type: X First Time Self Designation/Initial NICU License

Designation at Different Level

What is the Current License
Level of Care? _____

What is the Requested Level? _____

Ownership/Physical Location Change

Number of Beds by Each Level

Level II	_____
Level III	<u>67</u>
Level III with Surgery	_____
Level IV	_____

Have you been evaluated by AAP?: Yes X No
If yes, please provide documentation.

Designate Expiration Date: _____

Neonatal Program Manager

<u>Rebecca Hartsell</u>	<u>Nurse Manager- Neonatal Intensive Care Unit</u>
Name	Title

Rhartsel@utmck.edu
Email Address

(865) 305-9824
Phone Number

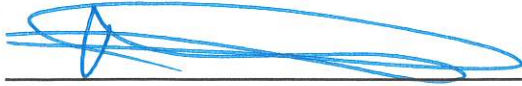
Neonatal Medical Director

<u>Keri Lattimore</u>	<u>Physician- Neonatal Medical Director</u>
Name	Title

KLattimore@utmck.edu
Email Address

(865) 548-9340
Phone Number

Pursuant to Tennessee Rule of Civil Procedure 72, I hereby declare under perjury that the information provided in this application is true and correct. Signee for this application certifies that he or she is of responsible character and able to comply with the minimum standards and regulations established by Tennessee pertaining to the type of facility or services for which application for licensure is made and with the rules promulgated under Tennessee Code Annotated §68-11-201 and Rules 0720-.14, 0720-36, and 0720-47 adopted by the Commission effective December 1, 2025. Signee also certifies that a policy has been implemented to inform all employees of their obligation under TCA §71-6-103 to report incidents of abuse or neglect.



11/20/2025

Signature

Date

Keith Gray, MD, MBA, FACS

Printed Name

ATTACHMENT - A

MEDICAL EQUIPMENT INFORMATION - MRI

Equipment Type (i.e. MRI or PET)	Physical Address of Service	Brand Name	Type (i.e. Tesla/Short Bore; PET/CT)	Serial Number	Accredited (Yes/No/Pending)	Accreditation Organization	Unit Registered with HFC (Yes/No)
MRI 1	UTMC 1924 ALCOA HWY	GE	1.5 70 CM BORE Artist	PM0436	YES	TJC	Y
MRI 2	UTMC 1924 ALCOA HWY	GE	1.5 60 CM BORE Excite	R3731	YES	TJC	Y
MRI 3	UTMC 1924 ALCOA HWY	SIEMENS	1.5 60 CM BORE Avanto	25198	YES	TJC	Y
MRI 4	UTMC 1924 ALCOA HWY	SIEMENS	3T 70 CM BORE Skyra Fit	170095	YES	TJC	Y
MRI 5	UTMC 1924 ALCOA HWY	SIEMENS	3T 70 CM BORE Skyra	145222	YES	TJC	Y



March 5, 2024

Keith D Gray
CEO
The University of Tennessee Medical Center
1924 Alcoa Highway
Knoxville, TN 37920

Re: # 7853
CCN: # 440015
Deemed Program: Hospital
Accreditation Expiration Date: December 9, 2026

Dear Dr. Gray:

This letter confirms that your December 4, 2023 - December 8, 2023 unannounced full resurvey was conducted for the purposes of assessing compliance with the Medicare conditions for hospitals through The Joint Commission's deemed status survey process.

Based upon the submission of your evidence of standards compliance on February 27, 2024 and February 29, 2024 and the successful unannounced Medicare Deficiency follow-up event conducted on January 19, 2024, the areas of deficiency listed below have been removed. The Joint Commission is granting your organization an accreditation decision of Accredited with an effective date of December 9, 2023. We congratulate you on your effective resolution of these deficiencies.

§482.23 Nursing Services
§482.41 Physical Environment
§482.42 Infection Control

The Joint Commission is also recommending your organization for continued Medicare certification effective December 9, 2023. Please note that the Centers for Medicare and Medicaid Services (CMS) Medicare Administrative Contractor (MAC) makes the final determination regarding your Medicare participation and the effective date of participation in accordance with the regulations at 42 CFR 489.13. Your organization is encouraged to share a copy of this Medicare recommendation letter with your State Survey Agency.

This recommendation applies to the following location(s):

The University of Tennessee Medical Center
1924 Alcoa Highway, Knoxville, TN, 37920

UT Regional Health Center - Halls
7326 Maynardville Pike Ste 1500, Knoxville, TN, 37938

Seymour PT Clinic
11606 Chapman Highway-Ste.1, Seymour, TN, 37865



Hardin Valley PT Clinic
2515 Willow Point Way, Knoxville, TN, 37931

UT Regional Health Center - Sevierville
1130 Middle Creek Road, Sevierville, TN, 37862

University Cancer Center Alcoa
270 Joule Street, Alcoa, TN, 37701

UT Regional Health Center - Lenoir City
5779 Creekwood Park Blvd Lenoir City, Lenoir City, TN, 37772

UT Parkside
11440 Parkside Drive, Knoxville, TN, 37934

Northshore PT Clinic
9625 Kroger Park Drive Ste. 100, Knoxville, TN, 37922

University Cancer Center Maryville
107 Gill Street, Alcoa, TN, 37701

UT Northshore Towne Center
1975 Towne Center Blvd., Knoxville, TN, 37922

UT Neurology
1128 Weisgarber Rd. Ste 250, Knoxville, TN, 37909

UT Regional Health Center - Morristown
6323 W ANDREW JOHNSON HWY, Talbott, TN, 37877

UT Emergency Department - Jamestown
208 Central Avenue West, Jamestown, TN, 38556

Please be assured that The Joint Commission will keep the report confidential, except as required by law or court order. To ensure that The Joint Commission's information about your organization is always accurate and current, our policy requires that you inform us of any changes in the name or ownership of your organization or the health care services you provide.

Sincerely,



Ken Grubbs, DNP, MBA, RN
Executive Vice President and Chief Nursing Officer
Division of Accreditation and Certification Operations

cc: CMS/Baltimore Office/Survey & Certification Group/Division of Acute Care Services
CMS/SOG Location 4 /Survey and Certification Staff

AMERICAN COLLEGE OF RADIOLOGY®

Certificate of Accreditation



University of Tennessee Medical Center

1920 Alcoa Highway
Knoxville, Tennessee 37920

was surveyed by the ACR® Committee on MRI
Accreditation of the Commission on Quality and Safety

The following magnet was approved

**General Electric Co. (GE Medical Systems)
Signa Artist 2021**

for

Body, Head, MRA, MSK, Spine

**Accredited from
December 05, 2024 through September 20, 2027**

A handwritten signature in black ink, appearing to be "K. A. H.", written over a horizontal line.

Chair, Committee ON
MRI Accreditation

A handwritten signature in black ink, appearing to be "David B. Fuson", written over a horizontal line.

Chair, Commission on
Quality and Safety

AMERICAN COLLEGE OF RADIOLOGY®

Certificate of Accreditation



University of Tennessee Medical Center

1920 Alcoa Highway
Knoxville, Tennessee 37920

was surveyed by the ACR® Committee on MRI
Accreditation of the Commission on Quality and Safety

The following magnet was approved

**General Electric Co. (GE Medical Systems)
SIGNA EXCITE 2004**

for

Head, Spine

Accredited from
September 20, 2024 through September 20, 2027

A stylized, handwritten signature in black ink, consisting of several loops and a long horizontal stroke at the end.

Chair, Committee ON
MRI Accreditation

A handwritten signature in black ink that reads "David B. Fuson".

Chair, Commission on
Quality and Safety

AMERICAN COLLEGE OF RADIOLOGY®

Certificate of Accreditation



University of Tennessee Medical Center

1920 Alcoa Highway
Knoxville, Tennessee 37920

was surveyed by the ACR® Committee on MRI
Accreditation of the Commission on Quality and Safety

The following magnet was approved

**Siemens Medical Systems
AVANTO 2004**

for

Cardiac, Head, MSK, Spine

**Accredited from
October 04, 2024 through September 20, 2027**

A handwritten signature in black ink, consisting of several stylized, overlapping strokes.

Chair, Committee ON
MRI Accreditation

A handwritten signature in black ink, reading "David B. Fuson" in a cursive style.

Chair, Commission on
Quality and Safety

AMERICAN COLLEGE OF RADIOLOGY®

Certificate of Accreditation



University of Tennessee Medical Center

1920 Alcoa Highway
Knoxville, Tennessee 37920

was surveyed by the ACR® Committee on MRI
Accreditation of the Commission on Quality and Safety

The following magnet was approved

**Siemens Medical Systems
MAGNETOM Skyra Fit 2020**

for

Body, Breast, Head, MRA, MSK, Spine

Accredited from
November 11, 2024 through September 20, 2027

A handwritten signature in black ink, appearing to be "K. A. H.", written over a horizontal line.

Chair, Committee ON
MRI Accreditation

A handwritten signature in black ink, reading "David B. Fuson", written over a horizontal line.

Chair, Commission on
Quality and Safety

AMERICAN COLLEGE OF RADIOLOGY®

Certificate of Accreditation



University of Tennessee Medical Center

1920 Alcoa Highway
Knoxville, Tennessee 37920

was surveyed by the ACR® Committee on MRI
Accreditation of the Commission on Quality and Safety

The following magnet was approved

**Siemens Medical Systems
MAGNETOM SKYRA 3T 2017**

for

Body, Breast, Head, MRA, MSK, Spine

Accredited from
November 04, 2024 through September 20, 2027

A stylized, handwritten signature in black ink, consisting of several horizontal strokes and a vertical line.

Chair, Committee ON
MRI Accreditation

A handwritten signature in black ink that reads "David B. Fuson".

Chair, Commission on
Quality and Safety

AMERICAN COLLEGE OF RADIOLOGY®

Certificate of Accreditation



University of Tennessee Medical Center

1920 Alcoa Highway
Knoxville, Tennessee 37920

was surveyed by the ACR® Committee on Nuclear Medicine
Accreditation of the Commission on Quality and Safety

The following unit was approved

**Siemens Medical Systems
BIOGRAPH VISION 2021**

for

Oncology

Accredited from

April 28, 2025 through August 28, 2028

A rectangular box containing a handwritten signature in black ink.

Chair, Committee ON
Nuclear Medicine Accreditation

A handwritten signature in black ink.

Chair, Commission on
Quality and Safety

Certificate of Accreditation



University of Tennessee Medical Center

1920 Alcoa Highway
Knoxville, Tennessee 37920

was surveyed by the ACR® Committee on Nuclear Medicine
Accreditation of the Commission on Quality and Safety

The following unit was approved

**Siemens Medical Systems
Biograph mCT 2012**

for

Brain, Cardiac, Oncology

**Accredited from
April 28, 2025 through August 28, 2028**

Chair, Committee ON
Nuclear Medicine Accreditation

Chair, Commission on
Quality and Safety