



**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 hsda.staff@tn.gov

**INITIAL APPLICATION FOR LICENSE OF SERVICES
FOR PHYSICIAN OFFICES**

1. NAME AND PHYSICAL ADDRESS OF PHYSICIAN OFFICE OF SERVICE

Vanderbilt University Medical Center (Vanderbilt Orthopaedics Franklin)

Name

206 Bedford Way

Address

Franklin

TN

37064

City

State

ZIP

2. CEO/ADMINISTRATOR OF PROVIDER

Jane Freedman, M.D.

Deputy Chief Executive Officer, Chief Health System Officer

Name

Title

ginna.felts@vumc.org

Email Address

Vanderbilt University Medical Center

Company Name

1211 Medical Center Drive, Suite 3300

Address

Nashville

TN

37232

City

State

ZIP

615-322-3454

Phone Number

3. BILLING INFORMATION FOR FACILITY

Jane Freedman, M.D.

Deputy Chief Executive Officer, Chief Health System Officer

Name

Title

gina.felts@vumc.org or vumcdisbursements@vumc.org

Email Address

Vanderbilt University Medical Center

Company Name

1211 Medical Center Drive, Suite 3300

Address

Nashville

TN

37232

City

State

ZIP

615-322-3454

Phone Number

4. OWNERSHIP OF FACILITY

Vanderbilt University Medical Center

Name of Owner

11211 Medical Center Drive, Suite 3300

Address

Nashville

TN

37232

City

State

ZIP

615-322-3454

Phone Number

Legal Entity:

Individual

Limited Liability

Corporation
(For Profit)

Corporation
(Not for Profit)

Government

Limited Partnership

Joint Venture

Professional Limited
Liability Company

Other _____

List name(s) and addresses of individual owners, partners, directors of the corporation, or head of the government entity. (If more than two (2), please use ATTACHMENT – B.)

See attached

(1) Name

Address

City

State

ZIP

(2) Name

Address

City

State

ZIP

If a government/county owned facility, does the administrator have authority to act on behalf of the government/county as it relates to the operation of this facility? Yes No

If no, why:

Is this facility chain affiliated? Yes No

If a corporation, is there a holding company? Yes No

If yes, please complete the following information of the holding company.

Name of Owner

Address

City

State

ZIP

Phone Number

Are any owners of the disclosing entity also owners of other health care facilities in Tennessee and/or other states? Yes No

If yes, list their names and addresses of all facilities.:

See attached

Is there a contract with a management firm to operate this facility? Yes No

If yes, please specify the dates of the contract and complete the firm's information.

Start Date: _____ End Date: _____

Name of Firm

Address

City State ZIP

Phone Number

5. LEGAL

If any of the items within this section (LEGAL), please identify, explain, and provide documentation of the item(s) noted if response is "yes". Have either the licensed entity for any of the other health care facilities in Tennessee and/or other states listed, or the management firm listed been subjected to any of the following within the past five (5) years?

Licensure

- Denied a License Yes No
- Had a license suspended or revoked by any state licensure agency? Yes No
- Been subject to a final order or judgement in a state licensure action? Yes No

Convictions

- If convicted of a criminal offense related to that person's involvement in any program under any state or federal health care program – including Medicare, Medicaid, and TriCare? Yes No

Exclusion

- Excluded from participation in federal health care programs – Medicare, Medicaid, CHIP, or TriCare – in the past? Yes No
- (Excluded is defined as a provider or entity has been told by the Department of Health and Human Services, Office of the Inspector General (HHS-OIG) that they may no longer be a provider for any federally funded healthcare.) Yes No

Termination/Suspension

- Suspended or terminated from participation in Medicare or Medicaid/TennCare programs? Yes No

Fraud and Abuse

- Paid through settlement, or civil or criminal fines, any monies to the federal government or any state as a result of any administrative or judicial proceeding based on allegations of fraud or abuse involving claims related to the provision of health care items and services? Yes No

Corporate Integrity Agreement

- Is presently an entity covered by and subject the terms of a corporate integrity agreement? (If yes, please provide a copy of CIA.) Yes No

Bankruptcy

- Filed bankruptcy under any provision of the United States Bankruptcy Code: Yes No

Civil Monetary Penalty (CMP)

- Paid to the Centers for Medicare and Medicaid Services or any state Medicaid agency a civil money penalty equal to or greater than \$250,000 as a result of an enforcement action during a survey? Yes No

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

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

Physical Address of Service: 206 Bedford Way, Franklin, TN 37064

Name Brand of Unit Siemens Aera

Tesla 1.5

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

Unit's Serial Number 141076

Will the MRI Unit be Accredited?: Yes No

If MRI Unit will be Accredited, is it PENDING ACCREDITED

If ACCREDITED, What Organization? The Joint Commission
(Attach certificate or proof of accreditation.)

If no, why:

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

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

Physical Address of Service: _____

Name Brand of Unit _____

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

Unit's Serial Number _____

Will the PET Unit be Accredited?: Yes No

If PET Unit will be Accredited, is it PENDING ACCREDITED

If ACCREDITED, What Organization? _____
(Attach certificate or proof of accreditation.)

If no, why:

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

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.



11/21/2025

Signature

Date

Jane E. Freedman, MD, Deputy CEO and Chief Health System Officer

Printed Name

Vanderbilt University Medical Center

Nashville, TN

has been Accredited by



The Joint Commission

Which has surveyed this organization and found it to meet the requirements for the
Hospital Accreditation Program

August 10, 2024

Accreditation is customarily valid for up to 36 months.


Jane Englebright, PhD, RN, CENP, EAAN
Chair, Board of Commissioners

ID #7892
Print/Reprint Date: 11/21/2024


Jonathan B. Perlin, MD, PhD, MSHA, MACP, FACMI
President and Chief Executive Officer

The Joint Commission is an independent, not-for-profit national body that oversees the safety and quality of health care and other services provided in accredited organizations. Information about accredited organizations may be provided directly to The Joint Commission at 1-800-994-6610. Information regarding accreditation and the accreditation performance of individual organizations can be obtained through The Joint Commission's web site at www.jointcommission.org.



Vanderbilt University Medical Center Disclosure of Ownership

(List is comprised of facilities requiring licensure pursuant to Tenn. Code Ann. §§ 68-11-201, 204 (2015) and which Vanderbilt University Medical Center has direct or indirect ownership in.)

Ambulatory Surgical Treatment Center:

Ambulatory Surgery Center of Cool Springs LLC
2009 Mallory Lane, Suite 100
Franklin, TN 37067
Ownership: Partial

Spring Hill Surgery Center, LLC
1003 Reserve Boulevard, Suite 210
Spring Hill, TN 37174
Ownership: Partial

Vanderbilt-Ingram Cancer Center at Tenova Healthcare-Clarksville, GP
375 Alfred Thun Road
Clarksville, TN 37040
Ownership: Partial

Vanderbilt-Maury Radiation Oncology, LLC
1003 Reserve Boulevard, Suite 120
Spring Hill, TN 37174
Ownership: Partial

Vanderbilt-Ingram Cancer Center
2107 Edward Curd Lane
Franklin, TN 37067
Ownership: Full

Birth Center:

Vanderbilt Birth Center
3212 West End Ave, Suite 100
Nashville, TN 37203
Ownership: Full

Home Care Organization:

Vanderbilt Home Care Services, LLC
2120 Belcourt Avenue
Nashville, TN 37232-8600
Ownership: Full

Home Care Organization (cont):

Vanderbilt Home Care Services, LLC
(Vanderbilt Community and Home Services)
2120 Belcourt Avenue
Nashville, TN 37232-8600
Ownership: Full

Option Care Infusion Services, LLC
624 Grassmere Park Drive, Suite 22
Nashville, TN 37211
Ownership: Partial

Home Medical Equipment

Carefluent Connect, LLC
719 Thompson Lane, Suite 23210
Nashville, TN 37204
Ownership: Partial
**includes Carefluent Connect Mt. Juliet branch office*

Option Care Infusion Services, LLC
624 Grassmere Park Drive, Suite 22
Nashville, TN 37211
Ownership: Partial

Hospital:

Tennova Healthcare – Clarksville
**includes associated provider-based off campus locations*
651 Dunlop Lane
Clarksville, TN 37040
Ownership: Partial

Vanderbilt Bedford Hospital
**includes associated provider-based off campus locations*
2835 Highway 231 North
Shelbyville, TN 37160
Ownership: Full

Vanderbilt Tullahoma-Harton Hospital
**includes associated provider-based off campus locations*
1801 North Jackson Street
Tullahoma, TN 37388
Ownership: Full

Hospital (cont.):

Vanderbilt University Medical Center

**includes Vanderbilt University Hospital, Vanderbilt*

Psychiatric Hospital, Monroe Carell Jr. Children's Hospital at Vanderbilt, associated provider-based off campus locations

Medical Center North

1211 Medical Center Drive, D3300

Nashville, TN 37232

Ownership: Full

Vanderbilt Stallworth Rehabilitation Hospital, L.P.

2201 Children's Way

Nashville, TN 37212

Ownership: Partial

Vanderbilt Wilson County Hospital

**Includes Vanderbilt Wilson County Hospital – McFarland Campus and associated provider-based off campus location*

1411 W Baddour Parkway

Lebanon, TN 37087

Ownership: Full

Outpatient Diagnostic Center:

One Hundred Oaks Imaging, LLC

719 Thompson Lane, Suite 23300

Nashville, TN 37204

Ownership: Partial

**includes Vanderbilt Imaging Services One Hundred Oaks Imaging North*

Vanderbilt Imaging Services, LLC

337 22nd Avenue North

Nashville, TN 37203

Ownership: Partial

Spring Hill Imaging Center, LLC

5421 Main Street

Spring Hill, TN 37174

Ownership: Partial

Vanderbilt Imaging Services, LLC

1909 Acklen Avenue

Nashville, TN 37212

Ownership: Partial

Vanderbilt Imaging Services, LLC

8124 Sawyer Brown Road

Nashville, TN 37221

Ownership: Partial

Outpatient Diagnostic Center (cont.):

Williamson Imaging, LLC
2009 Mallory Lane, Suite 150
Franklin, TN 3706
Ownership: Partial

Renal Dialysis Clinic:

Vanderbilt Home Dialysis Clinic
2906 Foster Creighton Drive, Suite 100
Nashville, TN 37204
Ownership: Full

Vanderbilt Dialysis Clinic
2906 Foster Creighton Drive, Suite 200
Nashville, TN 37204
Ownership: Full

Vanderbilt University Medical Center Governing Board

Ownership of Business 1.d.

Name	Address
Lucinda M. Baier	Vanderbilt University Medical Center, Medical Center North, 1161 21 st Avenue South, D3300, Nashville, TN 37232
Jeff Balsler	Vanderbilt University Medical Center, Medical Center North, 1161 21 st Avenue South, D3300, Nashville, TN 37232
Daniel Diermeier	Vanderbilt University Medical Center, Medical Center North, 1161 21 st Avenue South, D3300, Nashville, TN 37232
Sara J. Finley	Vanderbilt University Medical Center, Medical Center North, 1161 21 st Avenue South, D3300, Nashville, TN 37232
John R. Ingram	Vanderbilt University Medical Center, Medical Center North, 1161 21 st Avenue South, D3300, Nashville, TN 37232
Colin Reed	Vanderbilt University Medical Center, Medical Center North, 1161 21 st Avenue South, D3300, Nashville, TN 37232
Edith Scott Carell Johnson	Vanderbilt University Medical Center, Medical Center North, 1161 21 st Avenue South, D3300, Nashville, TN 37232
Gail Carr Williams	Vanderbilt University Medical Center, Medical Center North, 1161 21 st Avenue South, D3300, Nashville, TN 37232
John Stein	Vanderbilt University Medical Center, Medical Center North, 1161 21 st Avenue South, D3300, Nashville, TN 37232
Bruce Evans	Vanderbilt University Medical Center, Medical Center North, 1161 21 st Avenue South, D3300, Nashville, TN 37232
Makeba Williams	Vanderbilt University Medical Center, Medical Center North, 1161 21 st Avenue South, D3300, Nashville, TN 37232
Bill Carpenter	Vanderbilt University Medical Center, Medical Center North, 1161 21 st Avenue South, D3300, Nashville, TN 37232



Connect/E-App

Electronic Application General

Vanderbilt University Medical Center
1211 Medical Center Drive
Nashville, TN 37232-2101
HCO ID:7892

- 1 Your Organization
- 2 Programs/ Services
- 3 Federal/ State
- 4 Initial/Early Survey
- 5 Site Information**
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Site Information



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Site Detail

Site 1 of 15

Select the description(s) that are appropriate for this site

- Hospital
- Behavioral Health Care and Human Services
- Laboratory
- Disease Management Certification
- Ventricular Assist Device

Site Description Hospital or Clinic

- This is a Hospital Site/Campus
- This is a Hospital owned or managed outpatient clinic or site
- Services are limited to Behavioral Health Care and Human Services

Site Name (Legal Business Name)

Franklin-Vanderbilt Orthopaedics Clinic

[View an example of the Site Certificate of Accreditation](#)

Doing Business As

Franklin - Vanderbilt Orthopaedics

[View an example of the Site Certificate of Accreditation with DBA](#)

Site Street Address

206 Bedford Way

Street Address Line 2

Country	Zip/Postal Code	City	State
USA <input type="button" value="v"/>	37064	Franklin <input type="button" value="v"/>	TN <input type="button" value="v"/>

Name of Additional Clinics/Practices located within this site

+ADD

Vanderbilt Rehabilitation Therapy
[View an example of the Site Certificate of Accreditation](#)

delete