



State of Tennessee
Health Services and Development Agency

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Date: October 14, 2019

To: HSDA Members

From: Logan Grant, Executive Director

Re: CONSENT CALENDAR JUSTIFICATION

**Extendicare Home Health of West Tennessee, Dyersburg (Dyer County), TN– CN1907-025
Relocation of home health agency principal office from 250 N. Parkway, Suite 30, Jackson,
(Madison County), TN to 620 Mall Blvd., Suite C1, Dyersburg (Dyer County), TN.**

As permitted by Statute and further explained by Agency Rule later in this memo, I have placed this application on the Consent Calendar based upon my determination that the application appears to meet the established criteria for granting a Certificate of Need.

Need, Economic Feasibility, Health Care that Meets Appropriate Quality Standards, and Contribution to the Orderly Development of Health Care appear to have been demonstrated as detailed below. If Agency Members determine the criteria have been met, a member may move to approve the application by adopting the criteria set forth in this justification or develop another motion for approval that addresses each of the criteria required for approval of a Certificate of Need.

If you find one or more of the criteria have not been met, then a motion to deny is in order.

At the time the application entered the review cycle, it was not opposed. If the application is opposed prior to it being heard, it will be moved to the bottom of the regular agenda and the applicant will make a full presentation.

Summary

Extendicare Home Health of West Tennessee, a licensed home care organization providing home health services in 21 west Tennessee counties, seeks approval to relocate its principal office from 250 N. Parkway, Suite 30, Jackson, (Madison County), TN to an existing branch office located at 620 Mall Blvd., Suite C1, Dyersburg (Dyer County), TN. If approved, the current Madison County principal office will be closed. There will be no change to the agency's 21 county service area.

Executive Director Justification

I recommend **approval** of Extendicare Home Health of West Tennessee, Dyersburg (Dyer County), TN– CN1907-025, for the relocation of its principal office from Madison County to Dyer County. My recommendation for approval is based upon my belief the following general criteria for a Certificate of Need have been met.

Need- *The relocation will place the principal office in a geographic location that is more centrally located within the service area.*

Economic Feasibility- *The project is economically feasible and will reduce administrative costs. After relocation, the former principal office will be closed reducing lease expense and administrative staff resulting in annual cost savings of \$44,500.*

Health Care that Meets Appropriate Quality Standards- *The applicant will maintain its licensure with the Department of Health, Medicare and Medicaid/TennCare certification, and Joint Commission accreditation.*

Contribution to the Orderly Development of Health Care- *The applicant is relocating its principal office adding no counties to its service area, so that there should be no impact on existing similar service area providers.*

Statutory Citation -TCA 68-11-1608. Review of applications -- Report

(d) The executive director may establish a date of less than sixty (60) days for reports on applications that are to be considered for a consent or emergency calendar established in accordance with agency rule. Any such rule shall provide that, in order to qualify for the consent calendar, an application must not be opposed by any person with legal standing to oppose and the application must appear to meet the established criteria for the issuance of a certificate of need. If opposition is stated in writing prior to the application being formally considered by the agency, it shall be taken off the consent calendar and placed on the next regular agenda, unless waived by the parties.

Rules of the Health Services and Development Agency-- 0720-10-.05 CONSENT CALENDAR

(1) Each monthly meeting's agenda will be available for both a consent calendar and a regular calendar.

(2) In order to be placed on the consent calendar, the application must not be opposed by anyone having legal standing to oppose the application, and the executive director must determine that the application appears to meet the established criteria for granting a certificate of need. Public notice of all applications intended to be placed on the consent calendar will be given.

(3) As to all applications which are placed on the consent calendar, the reviewing agency shall file its official report with The Agency within thirty (30) days of the beginning of the applicable review cycle.

(4) If opposition by anyone having legal standing to oppose the application is stated in writing prior to the application being formally considered by The Agency, it will be taken off the consent calendar and placed on the next regular agenda. Any member of The Agency may state opposition to the application being heard on the consent calendar, and if reasonable grounds for such opposition are given, the application will be removed from the consent calendar and placed on the next regular agenda.

(a) For purposes of this rule, the “next regular agenda” means the next regular calendar to be considered at the same monthly meeting.

(5) Any application which remains on the consent calendar will be individually considered and voted upon by The Agency.