Project Rural Recovery

Annual Report

Delivering Mobile Integrated Care Where Tennesseans Live, Work, and Recover

Year 6

July 1, 2025 - June 30, 2026

TN Department of Mental Health & Substance Abuse Services

Project Background

In early 2020, the Substance Abuse and Mental Health Services Administration (SAMHSA) awarded $10 million to the Tennessee Department of Mental Health and Substance Abuse Services (TDMHSAS) through their Promoting Integration of Primary and Behavioral Health Care five-year grant. In alignment with Governor Lee's Executive Order 1, PRR is a direct response to the critical need for rural health solutions: TDMHSAS chose to provide services in 10 **rural counties that were medically underserved, suffered the most from chronic conditions, and/or lacked the infrastructure to serve individuals in need**, and chose the mobile clinic model to make services in these areas **as accessible as possible**. In 2022, Governor Bill Lee and the members of the General Assembly appropriated $6.3 million in American Rescue Plan Act funds to expand the project in 10 additional counties beginning in 2023.

Purpose

Project Rural Recovery provides mental health, substance use, and physical health services to clients of any age in **20 rural Tennessee counties** using mobile health clinics. The purpose of this program is to:

- **Provide integrated care services** including diagnosis, prevention, and treatment of mental illness and substance use disorders and co-occurring physical health conditions
- **Promote integration** between primary and behavioral health care
- **Support the development of integrated care models** to improve the overall health and wellness of Tennesseans with mental illness and substance use disorders

Services Offered

Services are tailored to meet the needs of each client and include:

Physical Health Services

- Managing chronic illnesses
- Medication management
- Urgent care services
- Coordinating complex care with specialists
- Preventive health screenings for Tuberculosis, HIV, and Hepatitis

Mental Health Services

- Assessing, diagnosing, and treating mental illnesses
- Counseling/therapy services
- Psychiatric medication management

Substance Use Services

- Assessing, diagnosing, and treating substance use disorders
- Medication-assisted treatment
- Nicotine cessation management

Service Providers

Buffalo Valley, Inc.

Buffalo Valley, Inc. is a community-based agency that provides alcohol and substance abuse services including residential treatment, outpatient treatment, and detox as well as emergency shelter, transitional housing, and affordable permanent housing. The Buffalo Valley mobile clinic serves 5 counties in Middle Tennessee.

The McNabb Center

The McNabb Center is a regional system of care offering mental health, substance use, and social and victim services to children, adults, and families who reside in East Tennessee. The McNabb Center mobile clinic serves 5 counties in East Tennessee.

Pathways Behavioral Health

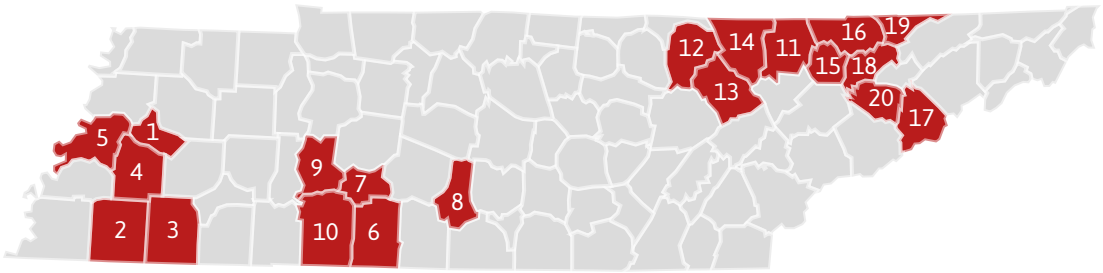
Pathways Behavioral Health is a community mental health center and the behavioral health component of West Tennessee Healthcare. Pathways offers mental health and substance use treatment in eight offices and three peer centers in seven counties via in-person and telehealth visits. The Pathways mobile clinic serves 5 counties in West Tennessee.

Ridgeview Behavioral Health Services

Ridgeview Behavioral Health Services has a 60-year history of providing mental health services in East Tennessee and provides a comprehensive array of services including traditional outpatient clinics. The Ridgeview mobile clinic serves 5 counties in East Tennessee.

Service Locations

Providing accessible integrated care across 20 rural Tennessee counties.



Number	Area	County	City	Provider
1	West	Crockett	Alamo	Pathways Behavioral Health
2	West	Fayette	Somerville	Pathways Behavioral Health
3	West	Hardeman	Bolivar	Pathways Behavioral Health
4	West	Haywood	Brownsville	Pathways Behavioral Health
5	West	Lauderdale	Ripley	Pathways Behavioral Health
6	Middle	Lawrence	Lawrenceburg	Buffalo Valley, Inc.
7	Middle	Lewis	Hohenwald	Buffalo Valley, Inc.
8	Middle	Marshall	Lewisburg	Buffalo Valley, Inc.
9	Middle	Perry	Lobelville	Buffalo Valley, Inc.
10	Middle	Wayne	Waynesboro	Buffalo Valley, Inc.
11	East	Campbell	Jacksboro	Ridgeview Behavioral Health
12	East	Fentress	Jamestown	Ridgeview Behavioral Health
13	East	Morgan	Deer Lodge	Ridgeview Behavioral Health
14	East	Scott	Oneida	Ridgeview Behavioral Health
15	East	Union	Maynardville	Ridgeview Behavioral Health
16	East	Claiborne	New Tazewell	The McNabb Center
17	East	Cocke	Newport	The McNabb Center
18	East	Grainger	Rutledge	The McNabb Center
19	East	Hancock	Sneedville	The McNabb Center
20	East	Jefferson	Dandridge	The McNabb Center

Year 6 Data

July 1, 2025 - June 30, 2026

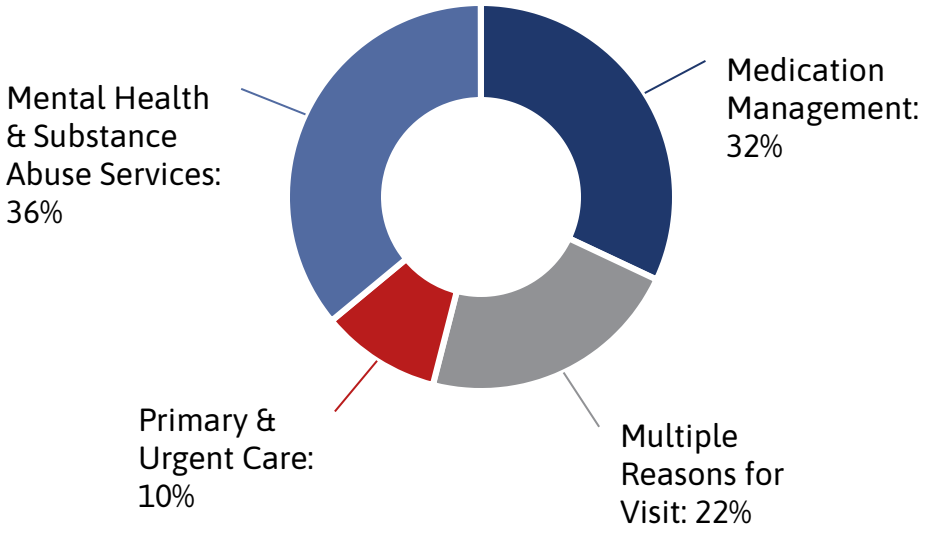
Year 6 Visit Overview

	**1,680** **clients served in year 6**	The mobile clinics have served **7,525 clients** across the entire project period.
	**5,550** **visits in year 6**	The mobile clinics have provided **23,286 visits** across the entire project period.
	**46%** **visited multiple times**	Clients who visit once may be using the clinic primarily for urgent care services.
	**15%** **visited more than 5 times**	Clients who visit many times are likely receiving ongoing mental health, substance use, or medication management services.

Year 6 Visit Overview Continued

Reason for Visit

Clients seek care for a wide range of reasons, including severe mental illness, substance use, and physical health issues. Many clients report multiple reasons for visit, such as both a physical and mental health concern.



Services Provided

Because Project Rural Recovery is focused on providing holistic, integrated care, a wide variety of services were provided during this period. The **most common** services include:

Individual therapy, psychopharmacology, and medication-assisted treatment

- Anxiety
- Depression
- PTSD
- ADHD
- Substance use
- Bipolar disorder

Primary care services for common ailments, chronic conditions, and infections

- Cold and flu
- Headaches
- Allergies
- Minor injuries
- Insect bites
- Insomnia
- Hypertension
- Diabetes
- Asthma
- Sinusitis
- Urinary tract infections
- Oral infections

Year 6 Client Overview

Baseline demographic, diagnosis, and health data are collected from all clients (n=1,680 in Year 6), whereas wellbeing, substance use, and functioning data are collected when a client chooses to participate in a survey (n=597).

94% over age 18

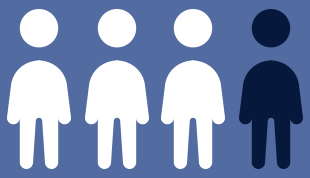
Most clients were between the ages of 25 and 54 (69%).

86% white

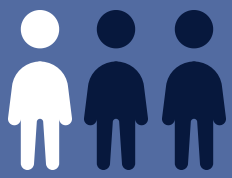
13% identified as black and 1% identified as either multiracial or other.

51% female

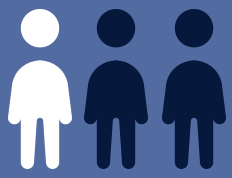
62% uninsured



3 in 4 (75%) had a mental health or substance use disorder

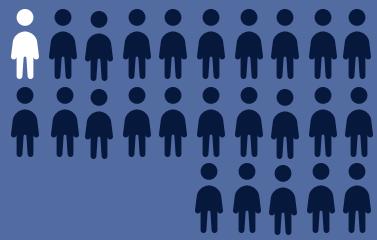


1 in 3 (33%) have experienced psychological trauma



1 in 3 (33%) said they are extremely or considerably bothered by psychological symptoms

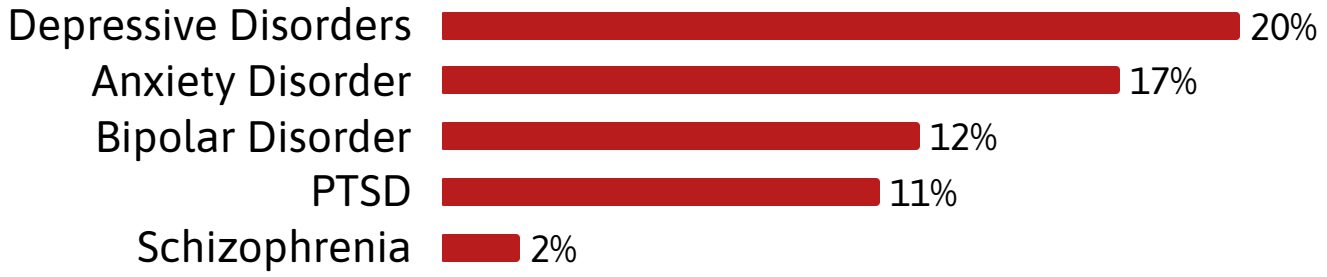
1 in 20 (5%) had co-occurring mental health and substance use disorders



1 in 25 (4%) had a positive suicide screen, indicating thoughts or plans of suicide

Year 6 Client Overview Continued

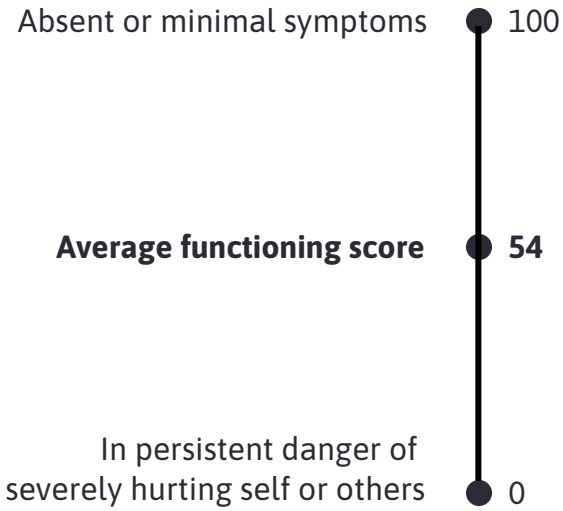
Top 5 Primary Diagnoses



Top 3 Substances Used Daily

Nearly half of adult clients use tobacco daily. In addition to the substances listed in the chart above, less than 5% of clients use methamphetamine, prescription or street opiates, cocaine, hallucinogens, inhalants, prescriptions stimulants, or sedatives every day.

Functioning



Clients' average functioning score at baseline (estimated from Daily Living Activities 20 scores) was **54**, indicating moderate symptoms or impairment in areas of functioning such as housing, time or money management, substance use, or relationships.

The lowest scoring areas, out of a maximum score of 7, are health practices (4.7), coping skills (4.8), and problem solving (4.9).

Year 6 Client Overview Continued

67%
have stage 1 or 2 hypertension

67%
are overweight or obese

25%
have high triglycerides

19%
are prediabetic

Physical Health

Based on health measures collected at baseline, two thirds of PRR clients (**67%**) have hypertension and **67%** are overweight or obese. 1 in 4 (**25%**) of clients have high triglycerides, **19%** are prediabetic, and many have borderline high total or LDL cholesterol or low HDL cholesterol.

In addition, we began asking about commonly diagnosed health conditions in March, 2026.

10% have asthma

6% have diabetes

4% have liver disease

4% have COPD

3% have heart disease

1% have kidney disease

Providing accessible and regular care to these clients through Project Rural Recovery may help them avoid disease progression.

Year 6 Accessibility

	11%	have not seen a primary care physician in **over 5 years**
	30%	said they **would not have received any care** if the mobile clinic was not available
	15%	said they would have **used the ER for care** if the mobile clinic had not been available
	81%	traveled to the mobile clinic in **under 30 minutes**
	43%	said it would have taken them **over 30 minutes** to travel to alternate care
	22%	of those with a mental health or substance use diagnosis had **not received mental healthcare before**

Year 6 Client Stories

Quotes from clients and stories from providers illustrating the impact the mobile clinic has had on clients' lives.

Since attending counseling at the Mobile Clinic, my entire life has improved in ways I could never imagine. Working with [the therapist] & [the nurse practitioner], I feel my future will be a lot more normal, & I will be able to have much better mental health.

- Client

Love the staff, especially my doctor.

- Client

We had a client who started services a little over a year ago who was just starting their recovery and a new part-time job. Now, they have gone full time at work *and* were just promoted to manager. They remain sober and are thriving.

- Provider

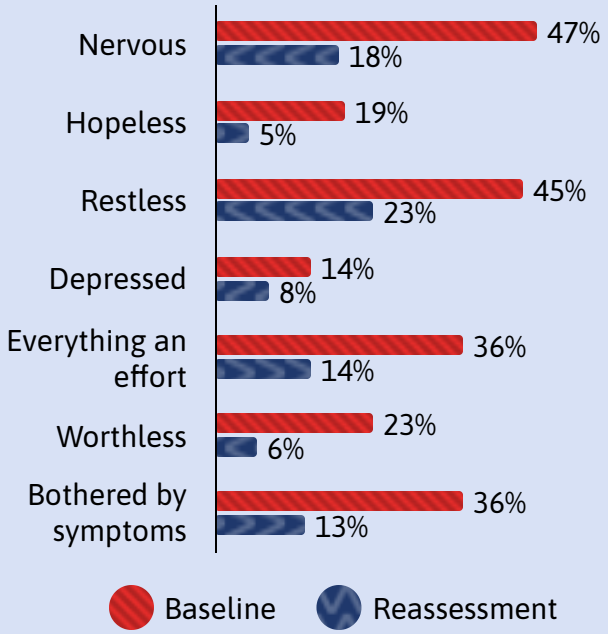
A client with severe anxiety has been visiting the mobile clinic for two years. They were living with extended family and had not been leaving the house on a regular basis. Now, they are enrolled in an employment program and looking forward to gaining employment, saving money, and moving out on their own.

- Provider

Year 6 Outcome Measures

To be included in the Year 6 Outcome Measures section, the reassessment must have been completed during the Year 6 timeframe.

Psychological Symptoms



The above percentages represent clients who felt a symptom **all or most of the time** or **extremely or considerably bothered** by their symptoms in the past 30 days. (n=140)

Health & Wellbeing

Of those rating Poor or Very Poor...

75%
Reported Better Quality of Life
(n=15)

77%
Reported Improved Mental Health
(n=71)

64%
Reported Improved Overall Health
(n=57)

Blood Pressure Reduction (n=29)

48%
of clients with hypertension had reduced systolic blood pressure

59%
of clients with hypertension had reduced diastolic blood pressure

Clients who presented with stage 1 or 2 hypertension at intake saw a **decrease in systolic** (average decreased from 142 mmHg to 138 mmHg) **and diastolic blood pressure** (average decreased from 91 mmHg to 86 mmHg) from baseline to most recent reassessment.

Year 6 Outcome Measures Continued

To be included in the Year 6 Outcome Measures section, the reassessment must have been completed during the Year 6 timeframe.

Suicide Risk Reduction

40%

Reduction in positive suicide screenings from baseline to reassessment (**15** at baseline, **9** at reassessment).

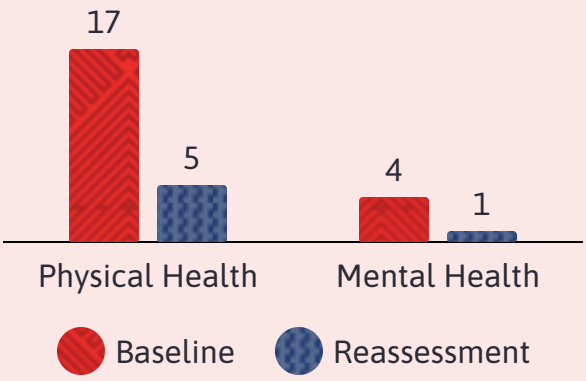
Substance Use Reduction*

39% of tobacco users (n=41)
58% of alcohol users (n=31)
76% of cannabis users (n=22)

*clients who were in residential substance use treatment at baseline were removed from analysis

ER Utilization

Visits to the ER in the Past 30 Days



Improved Functioning

+5

Average improvement in Daily Living Activities (DLA-20) score (baseline average of **51**, reassessment average of **56**) indicating better overall life functioning (n=145).

Cumulative Data

November, 2020 - June, 2026

Cumulative Client Overview

Baseline demographic, diagnosis, and health data are collected from all clients (n=7,525), whereas wellbeing, substance use, and functioning data are collected when a client chooses to participate in a survey (n=3,424).

95% over age 18

Most clients were between the ages of 25 and 54 (69%).

84% white

14% identified as black and 2% identified as either multiracial or other.

63% male

78% uninsured

Around 3 in 4 (77%) had a mental health or substance use disorder

Around 1 in 14 (7%) had co-occurring mental health and substance use disorders

72% have stage 1 or 2 hypertension

66% are overweight or obese

25% have high triglycerides

18% are prediabetic

Top 5 Primary Diagnoses

17%	Anxiety Disorders
14%	Depressive Disorders
9%	Bipolar Disorder
6%	Post-Traumatic Stress Disorder
6%	Opioid-Related Disorder or Use

Top 3 Substances Used Daily

69%	Tobacco
12%	Cannabis
11%	Methamphetamine

Cumulative Accessibility

	22%	have not seen a primary care physician in **over 5 years**
	36%	said they **would not have received any care** if the mobile clinic was not available
	13%	said they would have **used the ER for care** if the mobile clinic had not been available
	89%	traveled to the mobile clinic in **under 30 minutes**
	54%	said it would have taken them **over 30 minutes** to travel to alternate care
	21%	of those with a mental health or substance use diagnosis had **not received mental healthcare before**

Cumulative ER Diversion & Cost Savings

By providing accessible care, Project Rural Recovery reduces the burden on local emergency departments and generates significant healthcare savings.

Average Mobile Clinic Visit

$621

Uninsured Emergency Room Visit

$1,980

(Source: Fair Visit Health, 2026, https://fairvisithealth.com/guides/emergency-room-costs)

Project Rural Recovery significantly reduces healthcare costs by providing care at approximately $621 per visit, compared with $1,980 for an uninsured ER visit. Since we introduced the question in Year 3, 13% of clients surveyed reported they would have used the ER if the mobile clinic were not available. Applied to all clients served, an estimated 978 would have sought ER care. With 78% of PRR clients uninsured, approximately 763 uninsured clients avoided an ER visit, resulting in an estimated healthcare cost savings of more than $1 million. This is a conservative estimate, as it accounts for only one avoided ER visit per client; many PRR clients visit the mobile clinic multiple times, meaning the actual savings are likely higher.

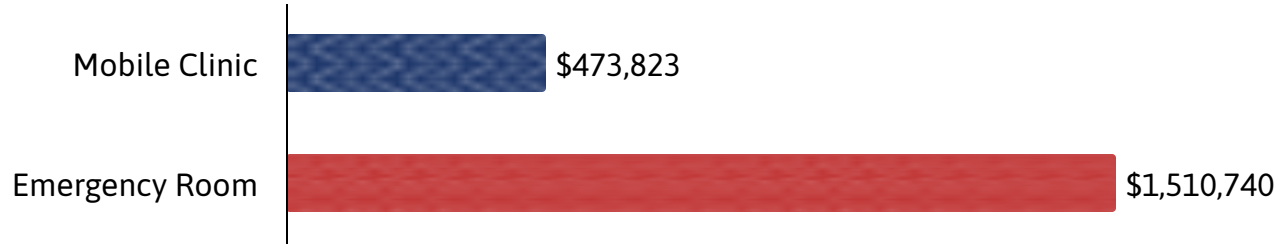
763

Estimated number of uninsured clients diverted from the ER

$1,037,000

Estimated total savings

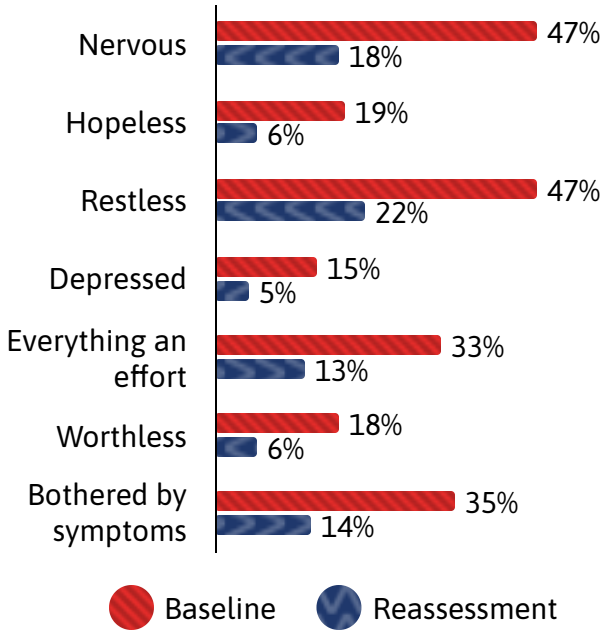
Cost of Providing Care to 763 Uninsured Clients



Cumulative Outcome Measures

This section includes all clients who have completed at least one reassessment, comparing their intake to their most recent reassessment.

Psychological Symptoms



The above percentages represent clients who felt a symptom **all or most of the time** or **extremely or considerably bothered** by their symptoms in the past 30 days. (n=512)

Health & Wellbeing

Of those rating Poor or Very Poor...

89%
Reported Better Quality of Life
(n=90)

76%
Reported Improved Mental Health
(n=214)

71%
Reported Improved Overall Health
(n=217)

Blood Pressure Reduction (n=120)

66%
of clients with hypertension had reduced systolic blood pressure

70%
of clients with hypertension had reduced diastolic blood pressure

Clients who presented with stage 1 or 2 hypertension at intake saw a **decrease in systolic** (average decreased from 142 mmHg to 134 mmHg) **and diastolic blood pressure** (average decreased from 92 mmHg to 85 mmHg) from baseline to most recent reassessment.

Cumulative Outcome Measures Continued

This section includes all clients who have completed at least one reassessment, comparing their intake to their most recent reassessment.

Suicide Risk Reduction

68%

Reduction in positive suicide screenings from baseline to reassessment (**41** at baseline, **13** at reassessment).

Substance Use Reduction*

28% of tobacco users (n=268)

77% of alcohol users (n=137)

76% of cannabis users (n=92)

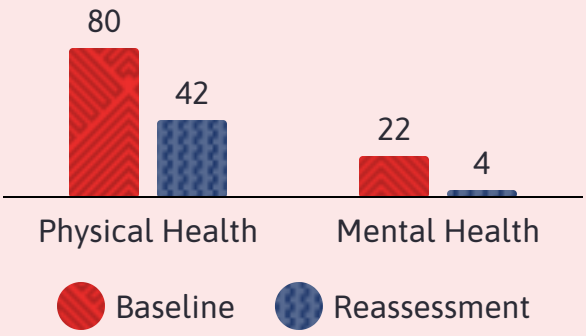
100% of methamphetamine users (n=36)

90% of prescription opioid users (n=30)

*clients who were in residential substance use treatment at baseline were removed from analysis

ER Utilization & Savings

Visits to the ER in the Past 30 Days



Potential Cost Savings, Based on Uninsured Clients: **Over $96,000**

Improved Functioning

+9

Average improvement in Daily Living Activities (DLA-20) scores (baseline average of **47**, reassessment average of **56**) indicating better overall life functioning (n=484).

Final Thoughts

Over the past six years, Project Rural Recovery has demonstrated the value of bringing care directly to rural communities. By reducing barriers to access and delivering integrated mental health, substance use, and physical health services, the program has helped **more than 7,500 Tennesseans** receive care they may not otherwise have been able to access.

As Project Rural Recovery moves forward, the program is poised to significantly expand its reach. Through funding from the Rural Health Transformation Program, **Project Rural Recovery will add (2) two additional mobile units to serve (10) ten more underserved counties**. With this expansion, Project Rural Recovery will operate in (30) thirty counties, nearly one-third of all Tennessee counties, bringing integrated care closer to even more rural Tennesseans.

Through our work with the Mobile Services Work Group, Project Rural Recovery is contributing to a stronger, more connected network of mobile healthcare providers across Tennessee. The workgroup brings providers together to share information about available services and new resources, exchange best practices, and learn from one another's experiences serving communities across the state. By strengthening these connections, the group supports greater awareness and coordination of mobile services for Tennesseans who face barriers to accessing care.

To learn more about Project Rural Recovery, including hours of operation and locations, please visit the **Project Rural Recovery website**. For additional information, contact Darren Layman at **Darren.Layman@tn.gov**.