



The Tennessee Open Meetings Act passed by the General Assembly in 1974 requires that meetings of state, city and county government bodies be open to the public and that any such governmental body give adequate public notice of such meeting.

**TENNESSEE DEPARTMENT OF HEALTH
MEMORANDUM
SECOND AMENDED**

Date: June 4, 2018

To: Shelley Walker, Director of Communication and Media Relations

From: Wanda E. Hines, Board Administrator

Name of Board or Committee: Board for Licensing Health Care Facilities Board Meeting
(Call-in Number: 1-888-757-2790 passcode: 152602#)

Date of Meeting: June 6, 2018

Time: 9:00 a.m.

Place: Iris Conference Room
665 Mainstream Drive, First Floor
Nashville, TN 37243

Major Item(s) on Agenda: See attachment.

LINK TO LIVE VIDEO STREAM:

June 6, 2018

<https://web.nowuseeit.tn.gov/Mediasite/Play/7be546b140ad4690a4ddcc4d575de18a1d>

This memo shall be forwarded from individual programs to the Public Information Office on the 15th day of the preceding month. The Public Information Office will prepare the monthly list of meetings within the Department and have ready for distribution to state media by the 28th day of the preceding month.

JOHN J. DREYZEHNER, MD, MPH
COMMISSIONER

BILL HASLAM
GOVERNOR

*THE MISSION OF THE TENNESSEE DEPARTMENT OF HEALTH IS TO PROTECT, PROMOTE AND
IMPROVE THE HEALTH AND PROSPERITY OF PEOPLE IN TENNESSEE*

BOARD FOR LICENSING HEALTH CARE FACILITIES

JUNE 6, 2018

IRIS CONFERENCE ROOM, FIRST FLOOR
9:00 a.m.

**PLEASE REMEMBER TO SILENCE YOUR ELECTRONIC DEVICES
WHEN THE BOARD IS IN SESSION**

- 1. CALL THE MEETING TO ORDER AND ESTABLISH A QUORUM.**
- 2. REPORTS.**
 - A. EMS REPORT – Robert Seesholtz**
 - B. NURSE AIDE REPORT – Wanda King**
 - C. OFFICE OF GENERAL COUNSEL REPORT – Caroline Tippens**
- 3. RULEMAKING HEARING-**Notice of Rulemaking Hearings can be viewed online at:
http://publications.tnsosfiles.com/rules_filings/04-11-18.pdf
 - A. 1200-08-01 Standards for Hospitals**
 - 1200-08-01 -.05 Admissions, Discharges and Transfers
 - 1200-08-10 Standards for Ambulatory Surgical Treatment**
 - 1200-08-.10-.06 Basic Services
 - 1200-08-29 Standards for Home Care Organizations Providing Home Medical Equipment**
 - 1200-08-29-.01 Definitions
 - 1200-08-29-.06 Basic Agency Functions
 - 1200-08-29-11 Records and Reports
 - 1200-08-34 Standards for Home Care Organizations Providing Professional Support Services**
 - 1200-08-34-.02 Licensing Procedures

4. **BOARD APPROVAL FOR THE FOLLOWING INTERPRETATIVE GUIDELINES**

- A. Interpretative Guidelines- Use of 'Physician' Term- ACLF 1200-08-25-.08(5)(a)(b) & 1200-08-25-.08(9)(a).

5. **LICENSE STATUS REQUESTS.**

NASHVILLE METRO CARE & REHABILITATION CENTER, NASHVILLE

This one hundred eleven (111) bed skilled nursing home facility is seeking to place their license on inactive status for a period of two (2) years.

REPRESENTATIVE(S):

SISKIN HOSPITAL'S SUBACUTE REHABILITATION PROGRAM, CHATTANOOGA

This twenty-nine (29) bed nursing home facility is requesting an extension waiver for their license to remain on inactive status through June 2019. Siskin continues to explore options for deployment of their beds, but a definitive plan has not yet been developed. Siskin Subacute place their license on inactive status for one (1) year on June 7, 2017 which expires on June 7, 2018.

REPRESENTATIVE(S): Travis Swearingen, Attorney

MEMORIAL/MISSION OUTPATIENT SURGERY CENTER, CHATTANOOGA

This ambulatory surgical treatment center is requesting a third extension waiver for their license to remain on inactive status. Leadership of Memorial/Mission continues to explore various options for reactivating the facility's license. Continuation of inactive status will allow opportunity to fully evaluate the circumstances under which it may be reactivated. This facility's license was placed on inactive status on May 6, 2015 for twelve (12) months; an extension waiver was granted on May 5, 2016 for additional twelve (12) months; and a second extension waiver was granted on June 7, 2017 which expires June 2018.

REPRESENTATIVE(S): Travis Swearingen, Attorney

CHRISTIAN CARE CENTER OF MEDINA, MILAN f/k/a MILAN HEALTH CARE CENTER, MILAN

This sixty-six (66) nursing home bed facility is requesting an extension waiver for their license to remain on inactive status through June 2019. A certificate of need (CON) application seeking authorization for its relocation and construction of a replacement facility has been filed with Health Services and Development Agency (HSDA). The CON application will be considered at the HSDA meeting on June 27, 2018.

REPRESENTATIVE(S): Jerry Taylor, Attorney

JACKSON PARK CHRISTIAN HOME, NASHVILLE

This twenty-eight (28) bed nursing home facility is seeking its sixth extension of their license to remain on inactive status for an additional twenty-four (24) months to June 2020. This facility ceased operations on February 29, 2012, because the operation of the twenty-eight (28) bed facility was economically unfeasible. Signature continued to evaluate the best options for the licensed facility going forward, and Signature has updated the Board during that period. Jackson Park Christian Home's license was placed on inactive status for twelve (12) months on May 2, 2012; an extension waiver for inactive status was granted for an additional twelve (12) months on May 1, 2013; a second extension was granted on May 8, 2014 for an additional twelve (12) months; a third extension was granted on May 6, 2015 for an additional twelve (12) months; a fourth extension was granted on May 4, 2016 for an additional twelve (12) months June 2017; and a fifth extension was granted June 7, 2017 for an additional twelve (12) months which will expire June 2018.

REPRESENTATIVE(S): Chris Puri, Attorney

BAPTIST TRINITY HOME CARE-PRIVATE PAY DIVISION, MEMPHIS

This home health agency is seeking to place their license on inactive status to allow time to consider the potential future operations of the agency. Baptist Trinity has not been requested to provide any patient care in several months and is uncertain if there will be a need for its services in the future.

REPRESENTATIVE(S): Travis Swearingen, Attorney

6. WAIVER REQUESTS.

A. THE FOLLOWING NURSING HOMES ARE REQUESTING TO WAIVE NURSING HOME REGULATIONS 1200-08-06-.04(1) FOR A TENNESSEE LICENSED NURSING HOME ADMINISTRATOR UNTIL A PERMANENT REPLACEMENT IS HIRED OR RECEIVES HIS/HER LICENSE IN TENNESSEE.

(1) Little Creek Sanitarium, Knoxville
- Pat Chapman, Temporary Administrator and Bruce Myers, President

(2) Lauderdale Community Living Center, Ripley
- Thomas Charles Isaak, Jr., Temporary Administrator

B. OTHER WAIVER REQUEST(S)

SOUTHERN TENNESSEE REGIONAL HEALTH SYSTEM-PULASKI, PULASKI

This ninety-five (95) bed hospital facility is seeking to waive building code 2.1-2.4.3 which requires a seclusion room for short-term occupancy. Their psychiatric unit is a geriatric unit where they do not use seclusion with this population of patients and never used the dedicated seclusion room since the unit opened in 1996. The intention of this waiver is to use this room to better meet the needs of the population served in the geriatric psychiatric setting.

REPRESENTATIVE(S): Sherry Sands, Chief Nursing Officer

JACKSON-MADISON COUNTY GENERAL HOSPITAL, JACKSON AND TENNOVA HEALTHCARE-REGIONAL HOSPITAL, JACKSON

Jackson-Madison, Jackson, a 642-bed acute care hospital owned and operated by Jackson-Madison County Hospital District and Tennova Healthcare-Regional Hospital, a 150-bed acute care hospital in Jackson, currently owned by Tennova, a division of Community Health Systems is seeking to become a satellite of Jackson-Madison County General Hospital according to hospital rule 1200-08-01-.01(37)(b) effective June 1, 2018.

REPRESENTATIVE(S): Dan Elrod, Attorney

VANDERBILT UNIVERSITY MEDICAL CENTER (VUMC), NASHVILLE

Vanderbilt University Medical Center, Nashville, is requesting an extension waiver to waive certain section of the 2010 Facility Guidelines Institute (FGI) guidelines regarding several rooms variance from the component project of 17-bed observation unit in the 7 South building. Fourteen (14) of the seventeen (17) rooms will be used for inpatients on a temporary basis. VUMC is requesting that the guidelines be waived for an additional two (2) years. A waiver was granted for two (2) years back in May 5, 2016 which will expire in June 2018.

REPRESENTATIVE(S): Dan Elrod, Attorney, Butler Snow, Mitch Edgeworth, CEO, Vanderbilt Hospital and Clinics, Ginna Felts, Vice President, Business Development and Jennifer McGugin.

VANDERBILT UNIVERSITY HOSPITAL, NASHVILLE

Vanderbilt University Hospital, Nashville, is requesting an extension waiver to allow the use of the area on the first floor temporarily as an observation unit and to waive the space requirements of the rooms and cubicles located in the observation unit; and must submit a report in two (2) years to update on the continued temporary usage of this area. Vanderbilt University Medical Center continues to use a portion of the first floor temporarily as an observation unit in accordance to the granted waiver and intends to continue such use for additional two (2) more years.

REPRESENTATIVE(S): Dan Elrod, Attorney, Butler Snow, Mitch Edgeworth, CEO, Vanderbilt Hospital and Clinics, Ginna Felts, Vice President, Business Development and Jennifer McGugin.

BIG SOUTH FORK MEDICAL CENTER, ONEIDA

This twenty-five (25) bed facility is seeking to waive Rule 1200-08-01-.06(9)(b) to have a Certified Dietary Manager at this facility. Their certified dietary manager resigned as of April 27, 2018. Regena Kannady, Dietary Employee, will be assuming this role until the position can be filled. They are working diligently to hire a Certified Dietary Manager on or before the date stated above.

REPRESENTATIVE(S): Tony Taylor, Chief Executive Officer

TRI-STAR CENTENNIAL MEDICAL CENTER, NASHVILLE

This six hundred eighty-six (686) bed hospital including five hundred fifty-four (554) general acute care beds is requesting to increase their general acute care beds count by fifty-five (55) beds. The total licensed bed complement will be 741 upon approval. This request is made pursuant to the Tennessee Health Services and Development Agency statute T.C.A. § 68-11-1607(g). These rooms will be used for acute bed expansion.

REPRESENTATIVE(S): Jerry Taylor, Attorney

THE UNIVERSITY OF TENNESSEE MEDICAL CENTER, KNOXVILLE

This six hundred twenty-five (625) bed hospital which are general acute care beds is requesting to increase their general acute care beds count by sixty-two (62) beds; 30 beds on 6th floor East Tower will be put into service upon approval and additional 32 beds will be put into service upon a build-out of 9th floor shell space of Heart Hospital Tower. The total licensed bed complement will be 687 upon approval. This request is made pursuant to the Tennessee Health Services and Development Agency statute T.C.A. § 68-11-1607(g).

REPRESENTATIVE(S): Jerry Taylor, Attorney

7. DISCUSSION(S).

- A. Department of Justice Initiatives on Elder Abuse.

REPRESENTATIVE(S): Caroline Tippens, OGC and AUSA Chris Sabis

- B. Legacy Assisted Living and Memory Care, Memphis (ACLF) Progress Report.

REPRESENTATIVE(S): Cedric Davis, Administrator and Peter Cawley, Managing Director, Senior Health Services

- C. Caring Estates, Arlington (RHA) Progress Report – Order to Appear.

REPRESENTATIVE(S): Louise Knight & Eshonishunetta Knight, Administrator

- D. **MAXIM HEALTHCARE SERVICES, BRENTWOOD**

This home health agency in Tennessee is seeking to revise Home Health Agency Rule 1200-08-26-.06(c) to make a supervisory visit to the patient's residence at least "once every sixty (60) days, "instead of monthly"". Maxim feels changing the frequency of the supervisory visit from thirty (30) days to sixty (60) days would make the state rule consistent with the applicable and corresponding federal rule, which is codified at 42 CFR § 484.36(d)(3).

REPRESENTATIVE(S): Jimmy Nichols, Area Vice President, Operations and Libby Boone, Director of Clinical Operations

E. **BALLAD HEALTH f/k/a MOUNTAIN STATES**

Ballad Health in the process of rolling out their new isolation signs and policies discovered discrepancies in how legacy Wellmont and Mountain States facilities handled trash from isolation rooms. In the past Mountain States has red bagged the PPE from isolation rooms according to Tennessee Department of Health state Rule Hospital Rule 1200-08-01-.10 where Wellmont just placed their PPE trash from isolation rooms in the regular trash which seems to be an acceptable practice throughout the state. Ballad Health is seeking the interpretation of the standard **under Hospitals Rule 1200-08-01-.10 Infectious Waste and Hazardous Waste.**

REPRESENTATIVE(S): Fabiola DeMuth, Communicable and Environmental Diseases and Emergency Preparedness and Jamie Swift, Corporate Director, Infection Prevention

F. CHOW Application/Process for Approval/Denial. – Ann R. Reed

G. **DETERMINATION OF HOME HEALTH AGENCY**

Fox Rehabilitation Services TN, LLC

Fox Rehabilitation Services, TN, LLC is seeking a determination from the Board to provide outpatient services to Assisted Care Living Facility residents in their own apartment (home) without seeking licensure as a home health agency. Fox is a provider of therapy services in sixteen (16) other states as a private practice provider of therapy services in the home or place of residence of its patients. For the purpose of this determination request, we also noted that all other laws would be complied with as a condition of this request.

REPRESENTATIVE(S): Chris Puri, Attorney

Genesis Rehab Services, Kennett Square, PA

Genesis Rehab Services (GRS) is seeking clarification on whether a home health license is required for the provision of therapy services in the home in Tennessee. GRS provides rehab services for the older adult population and has partnered with skilled nursing centers, assisted living facilities, independent living facilities, hospitals, home health companies, adult day care programs and outpatient clinics to provide comprehensive therapy services. Section 2300 of the State Operations Manual for CMS Regional Office provide guidance on permissible off premises activities at other locations. Per Section 2300, the OPT may provide therapy services in the patient's private residence or in a patient's room in a skilled nursing facility/nursing facility, in an ACLF, or in an independent living facility without qualifying as an extension location. Unlike Medicare certified home health agencies covered under Medicare Part A, patient does not need to be homebound to receive outpatient services through Vitality to You. This service is designed to increase access to care.

REPRESENTATIVE(S): Kelly Tripp, Associate General Counsel-Healthcare and Regulatory.

- H. Language Revision for Board Policy #81-Unexpected Loss of Nursing Home Administrator-Nursing Home Rule 1200-08-06-.04(1) – Ann R. Reed
- I. Create a Task Force Joint Commission with Board for Examiners Nursing Home Administrators and Board for Licensing Health Care Facilities.
– Juanita Honeycutt, Board Chair – BENHA Board
- J. Legislative Update 2018 – Lacy Blair and Patrick Powell, Legislation Liaison
- K. Approval of the Joint Annual Report on the Status of Emergency Medical Services for Children 2018.
– Rhonda Phillippi, Executive Director, TN EMS for Children

8. APPROVAL OF MINUTES.

- A. February 8, 2017 – Board Meeting
- B. October 4, 2017 – Board Meeting
- C. February 7, 2018 – Board Meeting
- D. March 15, 2018 – Emergency Called Disciplinary Hearing
- E. April 3, 2018 – Emergency Called Disciplinary Hearing
- F. April 17, 2018 – Performance Improvement Issue Standing Committee Meeting
- G. April 18, 2018 – Assisted Care Living Facility Standing Committee Meeting
- H. May 7, 2018-Facilities Construction Standing Committee Meeting

9. CONSIDERATION AND RATIFICATION OF LICENSURE APPLICATIONS (CHANGE OF OWNERSHIP (CHOWS) AND INITIALS).

A. SPECIAL CONSIDERATION

(INITIALS)

Medline Industries Holdings, LP, Memphis (HME)

(CHOWS)

MidSouth Health and Rehab, Memphis #248-Revisit

B. RATIFICATION.

1. QUALIFYING APPLICATIONS (Approval)

(INITIALS)

(a) Adult Care Home

Kinser Cottage, Limestone

(b) Ambulatory Surgical Treatment Centers

Eye Surgery Center of Knoxville, LLC, Powell

- (c) **Assisted Care Living Facility**
 BeeHive Homes of Powell, Powell
 The Pinnacle on Schaeffer, Knoxville
 The Reserve at Spring Hill, Spring Hill
 The Village of Murfreesboro, Murfreesboro
- (d) **End Stage Renal Disease Facility**
 Dialysis Care Center Tipton County, LLC, Covington
 River Oaks Dialysis, Memphis
 Vanderbilt Home Dialysis Clinic, Nashville
- (e) **Home Medical Equipment Facility**
 Breath of Life Medical, Lebanon
 CHG Solutions, LLC, Chattanooga
 Forward Healthcare, LLC, Lenoir City
 Gordian Medical, Inc., Nashville
 Jensen Little, LLC, Hendersonville
 Neurotech NA, Inc., Nashville
 The Jones Solution, LLC, Nashville
 Trust Home Medical, LLC, Hendersonville
- (f) **Outpatient Diagnostic Centers**
 Premier Radiology New Salem, Murfreesboro
- (g) **Professional Support Services**
 Healing Hearts, Inc., Mt. Juliet
 Mobility Rehab, Jamestown

(CHOWS)

- (a) **Ambulatory Surgical Treatment Center**
 Wartburg Surgery Center, LLC, Wartburg
- (b) **Home Health Services**
 Ascension at Home Saint Thomas, Nashville
- (c) **Home Medical Equipment Facility**
 DME Care, Nashville
 Hospice Source, LLC, Chattanooga
 National Seating & Mobility, Inc., Chattanooga
- (d) **Nursing Homes**
 Midtown Center for Health and Rehabilitation, LLC, Memphis
- (e) **Residential Home for the Aged**
 Loving Arms of Memphis, Inc., Memphis
 Patriot Hills Assisted Living, LLC, Oak Ridge

10. LICENSE STATUS UPDATES.

STARR REGIONAL MEDICAL CENTER-ETOWAH

Starr Regional Medical Center, Etowah was approved to allow acute care beds to be included in their license for a period of two (2) years so they can evaluate long-term plans and options for services provided at this facility. May 2016 Starr received additional two (2) years on these beds to continue. Star Regional Medical Center, Etowah is requesting to ask for an additional two years to continue to be included in their license for an additional period of two years through February 2020.

***FACILITY CLOSURES**

See attachment.

11. BOARD POLICY CONSENTS.

A. THE FOLLOWING NURSING HOMES ARE REQUESTING A WAIVER TO PROVIDE OUTPATIENT THERAPY SERVICES AS PROVIDED FOR BY BOARD POLICY #32:

Christian Care Center of Memphis, Memphis

12. ORDERS.

A. Consent Orders.

13. OTHER BUSINESS.

A. OHCF P& P 240 – Facility Plans of Correction (POC)

Department of State
Division of Publications
312 Rosa L. Parks Ave., 8th Floor, Snodgrass/TN Tower
Nashville, TN 37243
Phone: 615-741-2650
Email: publications.information@tn.gov

For Department of State Use Only

Sequence Number: 04-11-18
Notice ID(s): 2013-2816
File Date: 4/10/18

Notice of Rulemaking Hearing

Hearings will be conducted in the manner prescribed by the Uniform Administrative Procedures Act, T.C.A. § 4-5-204. For questions and copies of the notice, contact the person listed below.

Agency/Board/Commission: Board for Licensing Health Care Facilities
Division: Department of Health
Contact Person: Caroline Tippens, Assistant General Counsel
Address: 665 Mainstream Drive, Nashville, Tennessee 37243
Phone: (615) 741-1611
Email: Caroline.Tippens@tn.gov

Any Individuals with disabilities who wish to participate in these proceedings (to review these filings) and may require aid to facilitate such participation should contact the following at least 10 days prior to the hearing:

ADA Contact: ADA Coordinator
710 James Robertson Parkway,
Address: Andrew Johnson Building, 5th Floor, Nashville, Tennessee 37243
Phone: (615) 741-6350
Email: Tina.M.Harris2@tn.gov

Hearing Location(s) (for additional locations, copy and paste table)

Address 1: Metro Center
Address 2: 665 Mainstream Drive, ----- Conference Room
City: Nashville
Zip: 37228
Hearing Date: 06/06/18
Hearing Time: 9:00 A.M. CST/CDT EST/EDT

Additional Hearing Information:

Revision Type (check all that apply):

Amendment
 New
 Repeal

Rule(s) (ALL chapters and rules contained in filing must be listed. If needed, copy and paste additional tables to accommodate more than one chapter. Please enter only **ONE** Rule Number/Rule Title per row.)

Chapter Number	Chapter Title
1200-08-01	Standards for Hospitals
Rule Number	Rule Title
1200-08-01-.05	Admissions, Discharges, and Transfers

Chapter Number	Chapter Title
1200-08-10	Standards for Ambulatory Surgical Treatment Centers
Rule Number	Rule Title
1200-08-10-.06	Basic Services
Chapter Number	Chapter Title
1200-08-29	Standards for Home Care Organizations Providing Home Medical Equipment
Rule Number	Rule Title
1200-08-29-.01	Definitions
1200-08-29-.06	Basic Agency Functions
1200-08-29-.11	Records and Reports
Chapter Number	Chapter Title
1200-08-34	Standards for Home Care Organizations Providing Professional Support Services
Rule Number	Rule Title
1200-08-34-.02	Licensing Procedures

Place substance of rules and other info here. Statutory authority must be given for each rule change. For information on formatting rules go to http://sos-tn.gov/files.s3.amazonaws.com/forms/Rulemaking%20Guidelines_September2016.pdf.

Chapter 1200-08-01
Standards for Hospitals

Rule 1200-08-01-.05 Admissions, Discharges, and Transfers is amended by adding new paragraph (25) which shall read:

(25) Caregiver

- (a) The hospital shall give a patient admitted to the hospital the opportunity to designate a caregiver who will assist the patient with continuing care after discharge from the hospital.
 - 1. Caregiver means any individual designated as a caregiver by a patient who provides after-care assistance to a patient in a private residence. The term includes, but is not limited to, a relative, spouse, partner, friend or neighbor who has a significant relationship with the patient.
 - 2. The hospital shall document the designated caregiver in the patient record and include contact information; and
 - 3. If the patient declines to designate a caregiver, the hospital shall document the patient's choice in the medical record.
- (b) The hospital shall notify the designated caregiver as soon as practicable before the patient is discharged back to a private residence.
- (c) If the hospital is unable to contact the designated caregiver when changes occur, the lack of contact shall not interfere with, delay or otherwise affect the medical care provided to the patient or the transfer or discharge of the patient. Nothing in this [section/rule] shall interfere with, delay or otherwise affect the medical care provided to the patient or the transfer or discharge of the patient.
- (d) The hospital shall make reasonable efforts to contact the designated caregiver and document those efforts in the patient record, to include dates and times attempted.
- (e) The patient may give written consent to allow the hospital to release medical information to the designated caregiver, pursuant to the hospital's established procedures for the release of personal health information.
- (f) Prior to the patient being discharged, the hospital shall provide discharge instructions for continuing care needs to the patient and designated caregiver, which shall include:
 - 1. The name and contact information of the designated caregiver and relation to the patient;
 - 2. A description of continuing care tasks that the patient requires, communicated in a culturally competent manner; and
 - 3. Contact information for any health care, community resources, and long-term services and supports necessary to successfully carry out the patient's discharge instructions.
- (g) Prior to the patient being discharged, the hospital shall provide the designated caregiver with an opportunity for instruction in continuing care tasks outlined in the discharge instructions, which shall include:
 - 1. Demonstration of the continuing care tasks by hospital personnel; and

2. Opportunity for the patient and designated caregiver to ask questions and receive answers regarding the continuing care tasks; and
 3. Education and counseling about medications, including dosing and proper use of delivery devices.
- (h) The hospital shall document the instruction given to the patient and designated caregiver in the patient record, to include the date, time and contents of the instructions.
- (i) Nothing in this [section/rule] shall be construed to create a new private right of action not otherwise existing in law against a hospital or any of its directors, trustees, officers, employees or agents, or any contractors with whom a hospital has a contractual relationship. A hospital, any of its directors, trustees, officers, employees or agents, or any contractors with whom a hospital has a contractual relationship shall not be held liable, in any way, for the services rendered or not rendered by the caregiver to the patient at the patient's residence. A hospital is not required nor obligated to determine the ability of a caregiver to understand or perform any of the continuing care tasks outlined in this [section/rule].
- (j) Nothing in this [section/rule] shall be construed to impact, impede, or otherwise disrupt or reduce the reimbursement obligations of an insurance company, health service corporation, hospital service corporation, medical service corporation, health maintenance organization, or any other entity issuing health benefits plans.

Authority: T.C.A. §§ 68-11-202, 68-11-204, 68-11-209, and 68-11-255.

Chapter 1200-08-10
Standards for Ambulatory Surgical Treatment Centers
Amendments

Rule 1200-08-10-06 Basic Services is amended by deleting subparagraph (13)(a) and part (13)(a)6 in their entirety and substituting instead the following language, so that as amended, the new subparagraph and part shall read:

- (a) In each case of treatment of acute or chronic pain, only a medical doctor, licensed pursuant to T.C.A. § 63-6-101 et seq., or an osteopathic physician, licensed pursuant to T.C.A. § 63-9-101 et seq., who meet the following qualifications will be permitted to perform invasive procedures of the spine, spinal cord, sympathetic nerves of the spine or block of major peripheral nerves of the spine.

6. This section is only applicable to those who intended to treat acute or chronic pain.

Authority: T.C.A. §§ 4-5-202, 4-5-204, 68-11-201, 68-11-202, 68-11-204, 68-11-206, 68, 68-11-209, 68-11-216, 68-57-101, 68-57-102, 68-57-104, and 68-57-105.

Chapter 1200-08-29
Standards for Home Care Organizations Providing Home Medical Equipment
Amendments

Rule 1200-08-29-.01 Definitions is amended by adding new paragraph (31) and renumbering the remaining paragraphs accordingly, so that as amended, the new paragraph shall read:

- (31) Mail Order Company. A company which lists its products for consumers to buy, rent or lease via telephone, mailed check with order form, or Internet order and delivers such products directly to the consumer via a postal service, such as the U.S. Postal Service (USPS), UPS, FedEx or another courier service; provided, however, that a company that supplies respiratory care and oxygen equipment or any other home medical equipment necessary to avert an immediate threat to a consumer's health or safety, without which a consumer might be required to seek emergency medical treatment, shall not be considered to be a mail order company for purposes of this rule.

Authority: T.C.A. §§ 68-11-201, 68-11-202, 68-11-204, 68-11-207, 68-11-209, 68-11-210, 68-11-211, 68-11-213, 68-11-224, 68-11-226, 68-11-268, and 68-11-303.

Rule 1200-08-29-.06 Basic Agency Functions is amended by deleting subparagraph (4)(a) but not its parts and subparagraph (4)(b) in its entirety and substituting instead the following language, so that as amended, the new subparagraphs shall read:

- (a) Client-ready equipment shall be durable in nature, sanitized, and in proper working order. The agency shall have clearly defined guidelines for the cleaning, storage, and transportation of client-ready equipment. These guidelines shall include, but are not limited to:
- (b) Agency employees shall be qualified to deliver, perform environmental assessments, set up, and demonstrate safe and proper use of all home medical equipment according to manufacturer's guidelines, except for mail order companies.

Authority: T.C.A. §§ 68-11-202, 68-11-206, 68-11-209, 68-11-226, and 68-11-304.

Rule 1200-08-29-.11 Records and Reports is amended by deleting subparagraph (3)(a) in its entirety and substituting instead the following language, so that as amended, the new subparagraph shall read

- (a) Documentation of in-home patient education and instruction, except for mail order companies;

Authority: T.C.A. §§ 68-11-202, 68-11-209, 68-11-211, and 68-11-260.

Chapter 1200-08-34
Standards for Home Care Organizations Providing Professional Support Services
Amendments

Rule 1200-08-34-.02 Licensing Procedures is amended by inserting new subparagraph (2)(b) and re-lettering the remaining subparagraphs, so that amended the new paragraph shall read:

- (b) The home care organization must maintain a contract with the Department of Intellectual and Developmental Disabilities (DIDD). Failure to maintain this contract is a violation of this rule and will subject the license of the home care organization to disciplinary action.

Authority: T.C.A. §§ 68-11-201, 68-11-202, 68-11-204, 68-11-206, 68-11-209, § 68-11-209, 68-11-210, and 68-11-216.

I certify that the information included in this filing is an accurate and complete representation of the intent and scope of rulemaking proposed by the agency.

Date: April 10, 2018

Signature: Caroline R. Tippens

Name of Officer: Caroline Tippens
Assistant General Counsel

Title of Officer: Department of Health

Subscribed and sworn to before me on: _____

Notary Public Signature: Suzanne Meckow

My commission expires on: _____



Department of State Use Only

Filed with the Department of State on: _____

4/10/18

Tre Hargett

Tre Hargett
Secretary of State

2018 APR 10 PM 3:41
SECRETARY OF STATE

**MINUTES
BOARD FOR LICENSING HEALTH CARE FACILITIES
BOARD MEETING
JUNE 6, 2018**

The Board for Licensing Health Care Facilities Board meeting began June 6, 2018.

Dr. René Saunders, chairman, called the meeting to order. Ann Reed, Director of the Board for Licensing Health Care Facilities, conducted a roll call of attendance.

Dr. René Saunders, Chairman –here
Mr. Robert Breeden – here
Dr. Jennifer Gordon-Maloney – not here
Mr. Joshua Crisp – here
Ms. Carissa Lynch –here
Ms. Annette Marlar – not here
Mr. Thomas Gee – here
Mr. Chuck Griffin –here
Mr. Jim Shulman, Chairman Pro Tem – here
Mr. Bobby Wood – not here
Mr. Roger Mynatt – here
Dr. Sherry Robbins – here (arrived late)
Dr. Kenneth Robertson – not here
Ms. Janet Williford – here
Dr. Evelyn Brock – here
Mr. Paul Boyd – here (arrived late)
Ms. Gina Throneberry – here
Dr. Lisa Piercey – here (arrived late)
Ms. Patricia Ketterman - here

A quorum was established.

REPORTS:

EMS -

Robert Seesholtz, EMS Trauma System Manager, presented the following EMS report –

- February 9, 2018 Trauma Care Advisory Council (TCAC) meeting minutes were presented
- Summit Medical Center with Level III designation recommended following a follow-up site visit on May 11, 2018
- Hendersonville Medical Center with Level III provisional designation recommended following a site visit on May 14, 2018
- Erlanger Medical Center with Level I reverification recommended following a site visit on May 15, 2018

Mr. Shulman made a motion to accept above report; seconded by Ms. Ketterman. The motion was approved.

Board guidance was sought related to off campus emergency departments' (ED) designation as a trauma center specifically a Level IV Trauma Center. The TCAC addressed the issue voting that off campus EDs would not be allowed to designate as a trauma center.

Mr. Shulman made a motion to stand with TCAC's decision above; seconded by Mr. Gee. The motion was approved.

OGC -

Caroline Tippens, Office of General Counsel (OGC), presented the following report –

- Fourteen (14) open cases in OGC with four (4) Consent Orders to be presented at today's meeting
- Rule status
 - Combined rules still under review at the Attorney General's Office
 - Fee increase language before Government Operations Committee and stayed until June 20, 2018 for additional information
 - Six (6) sets of rule language are in internal review
 - Proposed rules for nursing home related to drug disposal will become effective July 18, 2018
 - Rulemaking hearing today for five (5) sets of rule language
- 110th General Assembly ended on April 25, 2018 and will convene January 8, 2019

RULEMAKING HEARING:

A rulemaking hearing for the following set of regulations was conducted at this Board meeting –

1200-08-01-.05 Standards for Hospitals Admissions, Discharges, and Transfers

1200-08-10-.06 Standards for Ambulatory Surgical Treatment Centers (ASTC) Basic Services

1200-08-29-.01, .06, & .11 Standards for Home Care Organizations Providing Home Medical Equipment (HME) Definitions, Basic Agency Functions, & Records and Reports

1200-08-34-.02 Standards for Home Care Organizations Providing Professional Support Services (PSS) Licensing Procedures

Public comment was received for the ASTC proposed rule language. The supporter of the rule language change, Medtronic, presented in coordination with the Tennessee Medical Association (TMA) and the Tennessee Association of Nurse Anesthetists (TANA) revised rule language for consideration by the Board. **Mr. Shulman made a motion to approve the suggested change to the rule presented at the rulemaking hearing; seconded by Mr. Griffin.** Further discussion ensued about some of the terminology in the proposed rule language, differences between interventional and surgical anesthesia, and CRNA practice in rural areas. **The motion was approved.** The Board desired to hear further public comments. Melanie Keller of Tennessee Community Organizations (TNCO) presented additional rule language for consideration in the PSS Standards. The presentation of this additional language was outside the scope of the rulemaking hearing and would need to be considered for a future rulemaking hearing by the Performance Improvement Issues (PI) Standing Committee. **Ms. Williford made a motion to move the suggested PSS rule language to the PI Standing Committee; seconded by Mr. Shulman. The motion was approved.**

Mr. Shulman made a motion to approve the rules as discussed with the ASTC suggested changes; seconded by Mr. Mynatt. The motion was approved.

BOARD APPROVAL INTERPRETATIVE GUIDELINES (IG):

IG for Assisted Care Living Facility (ACLF) rule 1200-08-25-.08(5)(a)(b) and 1200-08-25-.08(9)(a) was presented to the full Board for approval. Concern voiced on inclusion of advanced practice nurse (APN) and physician assistant (PA) to define physician in above rules. The matter was further discussed. **Dr. Piercy made a motion to send IG back to ACLF Standing Committee; seconded by Dr. Robbins. The motion was approved.**

LICENSE STATUS REQUEST(S):

The following licensure status requests were presented -

Nashville Metro Care & Rehabilitation Center, Nashville –

This one hundred and eleven (111) bed licensed nursing home sought to place its license on inactive status for two (2) years. No representative for/of the facility was present for the request. Chris Puri, attorney, addressed the Board related to receivership action being taken regarding the facility. The goal of the receivership is to allow authority to a receiver to renew the facility's license and work a change of ownership (CHOW). **Mr. Shulman made a motion to approve the inactive status for two (2) years with notice of a submitted CHOW; seconded by Mr. Breeden. The motion was approved.**

Siskin Hospital's Subacute Rehabilitation Program, Chattanooga –

This twenty-nine (29) bed licensed nursing home sought an extension of the inactive status of the facility's license for one (1) year. This is the facility's first extension request. **Mr. Shulman made a motion to approve the extension of the inactive status for one (1) year; seconded by Dr. Robbins. The motion was approved.**

Memorial/Mission Outpatient Surgery Center, Chattanooga –

This licensed ambulatory surgical treatment center (ASTC) sought a third extension of the inactive status of the facility's license. **Mr. Shulman made a motion to approve the third extension of the inactive status for one (1) year; seconded by Dr. Piercy. The motion was approved.**

Christian Care Center of Medina, Milan f/k/a Milan Health Care Center, Milan –

This sixty-six (66) bed licensed nursing home sought an extension of the inactive status of the facility's license for one (1) year. This is the facility's first extension request. There was discussion on the needed timeframe for the inactive status. **Mr. Shulman made a motion to approve the extension of the inactive status for one (1) year; seconded by Dr. Robbins. The motion was approved.**

Jackson Park Christian Home, Nashville –

This twenty-eight (28) bed licensed nursing home sought a sixth extension of the inactive status of the facility's license for twenty-four (24) months. Discussion occurred related to certificate of need (CON) and its implication to this request. **Mr. Shulman made a motion to approve the sixth extension of the inactive status for twenty-four (24) months; seconded by Dr. Brock. The motion was approved.**

Baptist Trinity Home Care-Private Pay Division, Memphis –

This home health agency sought to place its license on inactive status for one (1) year. **Dr. Piercy made a motion to approve the inactive status for one (1) year; seconded by Dr. Robbins. The motion was approved.**

WAIVER REQUEST(S):

Ms. Reed presented the following waiver requests for consideration by the Board.

Little Creek Sanitarium, Knoxville –

This licensed nursing home sought an extension to an approved waiver request of nursing home regulation 1200-08-06-.04(1) for a Tennessee licensed nursing home administrator at the October 2017 Board meeting. The facility established it was a licensed only facility and had in place an individual who is a candidate for Tennessee nursing home administrator licensure per 1200-08-06.04(d)3. **Mr. Breeden made a motion to grant the extension of the waiver request for one (1) year until the June 2019 Board meeting; seconded by Mr. Mynatt. The motion was approved.**

Lauderdale Community Living Center, Ripley –

This licensed nursing home sought to waive nursing home regulation 1200-08-06-.04(1) for a Tennessee licensed nursing home administrator until a permanent replacement could be hired. **Mr. Shulman made a motion to grant the waiver request for one (1) year until the February 2019 Board meeting; seconded by Dr. Brock. The motion was approved.**

OTHER WAIVER REQUEST(S):

Southern Tennessee Regional Health System-Pulaski, Pulaski –

This ninety-five (95) bed licensed hospital sought to waive building code 2-1-2.4.3 which requires a seclusion room for short-term occupancy if having a psychiatric unit. The facility provides service to the geriatric population and does not utilize the current seclusion room. This item came before the Facilities' Construction Standing Committee and was denied. **Dr. Robbins made a motion to deny the waiver request; seconded by Dr. Piercey. The motion was approved.**

Jackson-Madison County General Hospital, Jackson and Tennova Healthcare-Regional Hospital, Jackson -

Jackson-Madison is a 642 bed licensed hospital owned and operated by Jackson-Madison County Hospital District. Tennova Healthcare-Regional is a 150 bed licensed hospital which underwent a change of ownership effective June 1, 2018 to the Jackson-Madison County Hospital District. Jackson-Madison County General Hospital is seeking to have Tennova as satellite of its facility. Dr. Piercey recused from the vote. **Mr. Shulman made a motion to approve the satellite designation of Tennova to Jackson-Madison County General Hospital; seconded by Mr. Gee. The motion was approved.**

Vanderbilt University Medical Center (VUMC), Nashville –

VUMC requested an extension of their waiver of certain 2010 Facility Guidelines Institute (FGI) guidelines regarding room size. The proposed project is for a 17 bed observation unit. 14 of the 17 beds are to be used on a temporary basis for inpatients. VUMC is seeking an additional two (2) years for the waiver. Dr. Brock recused from the vote. **Mr. Shulman made a motion to grant the extension of the waiver request for an additional two (2) years; seconded by Dr. Piercey. The motion was approved.**

Vanderbilt University Medical Center (VUMC), Nashville –

VUMC requested an extension of their waiver to allow the use of an area temporarily as an observation unit. This waiver includes waiving space requirements. VUMC is seeking an additional two (2) years for the waiver. Dr. Brock remains recused from the vote. **Mr. Shulman made a motion to grant an additional two (2) years for the waiver; seconded by Mr. Gee. The motion was approved.**

Big South Fork Medical Center, Oneida –

This twenty-five bed licensed hospital sought to waive rule 1200-08-01-.06(9)(b) regarding a certified dietary manager. Tony Taylor was the representative for the facility and addressed the Board indicating that a current dietary employee of 20 years was currently filling the position. **Mr. Shulman made a motion to grant the waiver request until the June 2019 Board meeting; seconded by Mr. Breeden. The motion was approved.**

Tri-Star Centennial Medical Center, Nashville –

This 686 bed licensed hospital of which 554 of these beds are general acute beds requested to increase its licensed general acute bed count by 55. Upon approval of this, the total licensed bed number will be 741. This request is made pursuant to the Tennessee Health Services and Development Agency (HSDA) statute T.C.A. §68-11-1607(g). Approval was noted from HSDA. **Mr. Shulman made a motion to grant the increase in beds; seconded by Dr. Robbins. The motion was approved.**

The University of Tennessee Medical Center, Knoxville –

This 609 bed licensed hospital requested to increase its licensed general acute bed count by 60. Upon approval of this, the total licensed bed number will be 669. This request is made pursuant to the Tennessee Health Services and Development Agency (HSDA) statute T.C.A. §68-11-1607(g). Approval was noted from HSDA. Mr. Griffin recused from this vote. **Mr. Shulman made a motion to grant the increase in beds; seconded by Dr. Piercey. The motion was approved.**

DISCUSSION(S):

Department of Justice Initiatives on Elder Abuse-

AUSA Chris Sabis presented this topic to the Board. He discussed the development of the Elder Task Force and its focus on financial abuses. The task force provides training to the elderly, law enforcement, etc. Mr. Sabis asked how the task force can work with the Board. He indicated this work could include providing training, being a resource both for legal and regulatory questions, and being a resource for the elderly. Mr. Sabis stated the Board could provide training to the task force on licensed healthcare facilities. Training sites would include Senior Centers. Ms. Tippens referenced work with the Coordinated Community Response (CCR) workgroup and its efforts. She stated this is a combination of several agencies working to address elder abuse. Ms. Tippens further stated there is an upcoming statewide training to begin showcasing the CCR workgroup effort.

Legacy Assisted Living and Memory Care, Memphis, Progress Report-

Cedric Davis, Administrator, presented this report to the Board. He stated the facility has a new consultant, Shelly Morgan. She is the second consultant for the facility since the April 3, 2018 consent order. Mr. Davis stated improvements have been made, but that more work remains. He referenced the survey of 5/23/18 which was a follow-up/revisit to a previous survey. Per survey staff the survey results of 5/23/18 showed poor quality of care; detriment to patient health, safety, and welfare. Ms. Tippens directed the Board to the facility's consent order at #74. #74 indicates a suspension of

admissions based upon citation of deficiencies that rise to a level of detriment to the health, safety, and welfare of residents by administrative staff. This was brought to the full Board due to timing of the survey results and the requirement for the facility to give a progress report. Board members asked how many licensed beds were at the facility. Mr. Davis stated 99, but has a current census of 70. The facility is actively admitting patients. Mr. Davis was asked about his experience. He has had an ACLF/RHA administrator certification for one (1) month, previously was the receptionist at the facility, has CNA experience, and business office manager experience. **Mr. Shulman made a motion to move to a suspension of admissions (SOA) for the facility; seconded by Dr. Robbins. The motion was approved.**

The Board asked about ownership of the facility. Mr. Davis stated Peter Cawley is one of the owners and was aware of the need to be before the Board and did not give reason for not attending. Ms. Tippens directed the Board the SOA would be lifted administratively once the facility was in compliance. The Board would be made aware of such activity.

Caring Estates, Arlington, Progress Report-

Louise Knight presented the report for Caring Estates to the Board. This report is required based upon a Board consent order issued in October 2018. Ms. Knight reported the following –

- Medications are administered by a nurse (her daughter)
- Inappropriate residents have been removed from the facility
- Training has been provided to staff on medication administration (no documentation to affirm)
- Recent life safety survey on May 10, 2018 resulted in multiple deficiencies. Have submitted a Plan of Correction (POC) on May 24, 2018, but has not been reviewed

Board questioned number of licensed beds. Ms. Knight stated licensed for eight (8) beds, but have six (6) current residents. Mr. Shulman requested clarification that deficiencies cited in October Board order have been corrected. The West Tennessee Regional Office indicated yes and that the reported life safety survey results reflect some of the same deficiencies. The Board members requested Ms. Knight's daughter who is the owner to come before the Board in October of this year, to provide documentation of training provided to staff, and to verify the status of the facility's survey results. Dr. Saunders questioned if the May 10, 2018 citations are of a serious nature due to the SOA provision in the October 2018 order. Ms. Tippens stated this is a decision of the Board with life safety stating blocked exits cited in the recent survey are serious in nature. Ms. Knight stated this item was corrected while the surveyors were in the facility. Life safety verified this to be so. **Mr. Shulman made a motion to have Ms. Knight's daughter come to the October 2018 Board meeting with a full explanation of the facility's current status; to provide documentation of training required by consent order; and to have someone verify status of facility related to deficiencies/compliance; seconded by Dr. Brock. The motion was approved.**

Maxim Healthcare Services, Brentwood-

This licensed home health agency sought to revise Home Health Agency rule 1200-08-26-.06(c) regarding timeframe for supervisory visits from "...monthly..." to "...once every sixty (60) day..." The change would make the state licensure rules align with the federal requirements found at 42 CFR § 484.36(d)(3). Representative for the facility was Jimmy Nichols. He presented to the Board background information on Maxim and the services provided and the population served. Mr. Nichols stated the federal requirement is for unskilled supervisory visits to be made every 60 days thus the request to have the state rule to match. He further stated surrounding states such as Florida, Virginia allow for a 60 day window. Board members questioned the timeframe for skilled supervisory visits. That timeframe is 30 days. It was also noted during discussion the supervisory visit requirement is facility type specific and

may also be based upon the payer source for the patient. **Ms. Williford made a motion to approve the 60 day unskilled care supervisory visit language in the home health rules; seconded by Mr. Breedon. The motion was approved.**

Ballad Health f/k/a Mountain States & Wellmont-

Ballad Health is in the process of rolling out new isolation signs and policies. During this process, discrepancies were discovered between Wellmont's and Mountain States' processes related to isolation rooms and infection control. Based on Hospital rule 1200-08-01-.10, Infectious Waste and Hazardous Waste, Wellmont bags PPE from isolation rooms in red bags. Due to the opposing practices, Ballad Health sought an interpretation of the above section of the hospital regulations. Staff of the Communicable Disease section of the Tennessee Department of Health addressed the Board. It was stated that the CDC reference in the hospital regulations is outdated with the current standards being updated to 2003 per APIC requirements. Communicable Disease staff recommends the OSHA, EPA, and HICPAC (CDC regulated waste) guidelines be followed which contain a definition of regulated waste. Legal counsel cautioned the Board in adopting the above referenced documents in their entirety. A 2017 Public Chapter makes the adoption of a reference document to include the entire document not just a portion. **Mr. Shulman made a motion to move to the PI Standing Committee for further review; seconded by Dr. Robbins.** Board staff was directed to provide the current referenced documents for review before the meeting and to have Communicable Disease staff to attend the standing committee. **The motion was approved.**

CHOW Application/Process for Approval/Denial-

Ms. Reed presented the CHOW template application and instruction sheet with recommended changes to the full Board. She stated the changes noted on the presented documents were the result of the PI Standing Committee meeting. **Mr. Shulman made a motion to approved the document as presented; seconded by Mr. Crisp. The motion was approved.**

Determination of Home Health Agency:

Ms. Reed presented the two below requests simultaneously. The Board determined it would consider each independent of the other request.

Fox Rehabilitation Services TN, LLC-

Fox Rehabilitation Services TN, LLC sought determination from the Board for the need of a home health agency license in order to provide outpatient therapy services to assisted care living facility (ACLF) residents in their own apartments. This agency provides services in 16 other states as a private practice provider in individual's homes or place of residence. Representative for the entity was Chris Puri. Mr. Puri gave further background to Fox Rehabilitation Services scope of service. Dan Elrod addressed the Board on behalf of the Tennessee Association of Home Care (TAHC) stating a determination by the Board is out of the scope of the Board's authority. This would be a legislative change. Ms. Tippens clarified T.C.A. 68 defines home health service and supports the assertion of TAHC that home health services are being provided if following the proposed model. Dr. Saunders asked why Fox cannot be a home health agency. Mr. Puri stated it was a CON issue. Ms. Williford feels the proposed service model meets the home health agency requirement. Donna Smith, MTRO administrator, stated OPTs which are a certified agency are surveyed just as ACLFs, but a group of physical therapists in private practice are not. Fox stated that MD orders and referrals are received for services rendered. Some Board members supported what was being suggested because falls do occur most often in a resident's room. Ms. Williford made a motion to not allow Fox Rehabilitation Services TN, LLC to operate as suggested in

presentation, providing PT care in home, without home health agency licensure; seconded by Ms. Throneberry. The motion was approved by a vote of 8 yes, 3 no, and 3 abstention.

Genesis Rehab Services, Kennett Square, Pennsylvania-

Genesis Rehab Services (GSR) sought clarification on whether a home health agency license was required for the provision of therapy services in a patient's home in Tennessee. GRS provides rehab services for the older population and has partnered with skilled nursing facilities, assisted living facilities, independent living facilities, hospitals, home health agencies, adult day care programs and outpatient clinics to provide comprehensive services. Section 2300 of the State Operations Manual for CMS Regional Office provides guidance that off premise activities at other locations are permissible. Per this section, an OPT may provide therapy services in a patient's private residence or room in a skilled nursing facility, and ACLF, or an independent living facility without qualifying as an extension location. Unlike Medicare certified home health agencies that receive reimbursement under Medicare Part A, a patient is not required to be homebound to receive outpatient services. This service model is designed to increase access to care. Representation for the facility was Kelly Tripp who was to join by phone. Ms. Tripp was not available by phone. **Ms. Williford made a motion to move this request to the October 2018 Board meeting; seconded by Ms. Throneberry. The motion was approved.**

Language Revision for Board Policy #81-

Ms. Reed presented the latest draft Board Policy #81 to the Board. A draft was first presented at the February 2018 Board meeting then moved to the PI Standing Committee for further discussion. The Board of Examiners for Nursing Home Administrator's (BENHA) chairperson, Juanita Honeycutt, was present during this discussion. BENHA has issue with the proposed policy which included how a facility/administrator gets to this point, BENHA not aware of temporary administrators in the facility, and BENHA needs to know a Tennessee licensed administrator candidate is appropriate for licensure in this state. Ms. Reed explained the process for an unexpected loss of an administrator which is found in the nursing home regulations and that notice is provided to the BENHA Board administrative staff when a loss of an administrator occurs/temporary administrator is appointed. Mr. Puri offered that there is guidance on who can be appointed a temporary administrator. Ms. Honeycutt also requested a taskforce of the BENHA Board work with one of the standing committees of the board to develop policy/guidelines. **Mr. Shulman made a motion to adopt Board Policy #81; seconded by Dr. Brock. Discussion ensued at which time Dr. Brock made a friendly amendment to include in the 5th bullet of the policy 'must be eligible for Tennessee nursing home administrator licensure'. The amendment was accepted.** Ms. Ketterman stated nursing homes use the administrator license of corporate employees to satisfy the licensed nursing home administrator requirement, but these individuals are not physically present in the facility. With this occurring, how would a facility be made to have an administrator onsite? Ms. Reed pointed out the nursing home regulations require that a facility should have someone appointed to stand in place of the administrator in their absence. **The motion was approved with one no vote.**

Mr. Crisp made a motion to include working with the BENHA taskforce to the ACLF Standing Committee's agenda; seconded by Mr. Breeden. The motion was approved.

Legislative Update 2018-

Lacey Blair and Patrick Powell the legislative liaisons for the Department of Health presented various public chapters passed by the legislature which may have potential impact on the Board for Licensing Health Care Facilities. The public chapters included PC611, PC618, PC626, PC655, PC671, PC675, PC722, PC750, PC754, PC855, PC862, PC929, PC978, PC1015, PC1021, PC1054, and PC1055.

Approval of the Joint Annual Report on the Status of Emergency Medical Services for Children 2018-

Rhonda Phillippi, Executive Director, TN EMS for Children, presented this report. She provided a copy of the report to Board members. The report included key accomplishments for the year such as the strategic plan for years 2015-2018, National Performance Measures, educational outreach; publications; and presentations, recap of Star of Life Awards Ceremony and Dinner, and awards and the needs of the State Committee on Pediatric Emergency Care. **Mr. Shulman made a motion to approve the report; seconded by Dr. Piercey. The motion was approved.**

Ms. Phillippi sought the Board's preference for response from hospitals on questionnaire regarding transfer agreements. **Dr. Robbins made a motion to require a 100% response; seconded by Mr. Shulman. The motion was approved.**

APPROVAL OF MINUTE(S):

The following minutes were presented –

February 8, 2017 – Board meeting

October 4, 2017 – Board meeting

February 7, 2018 – Board meeting

March 15, 2018 – Emergency Called Disciplinary Hearing

April 3, 2018 – Emergency Called Disciplinary Hearing

April 17, 2018 – Performance Improvement Issue Standing Committee meeting

April 18, 2018 – Assisted Care Living Facility Standing Committee meeting

May 7, 2018 – Facilities Construction Standing Committee meeting

Mr. Breeden made a motion to accept the above meeting minutes; seconded by Dr. Piercy. Dr. Robbins identified several corrections and typos to the February 8 and October 4, 2017 meeting minutes. Mr. Breeden accepted as a friendly amendment to the motion. The motion was approved.

CONSIDERATION AND RATIFICATION OF LICENSURE APPLICATIONS (CHANGE OF OWNERSHIP (CHOWS) AND INITIALS):

The CHOW and initial licensure applications received by the Office of Health Care Facilities were presented as follows -

The following initial application was processed by the Board's administrative staff with concern – Medline Industries Holdings, LP; Memphis – Home Medical Equipment. This applicant reported disciplinary actions from other states. **Mr. Mynatt made a motion to ratify this initial application; seconded by Mr. Boyd. The motion was approved.**

The following initial applications were processed by the Board's administrative staff without concern –

Adult Care Home: Kinser Cottage, Limestone

Ambulatory Surgical Treatment Center: Eye Surgery Center of Knoxville, LLC; Powell

Assisted Care Living Facilities: BeeHive Homes of Powell, Powell; The Pinnacle on Schaeffer, Knoxville; The Reserve at Spring Hill, Spring Hill, and The Village of Murfreesboro, Murfreesboro

End Stage Renal Dialysis Clinics: Dialysis Care Center Tipton County, LLC, Covington; River Oaks Dialysis, Memphis; and Vanderbilt Home Dialysis Clinic, Nashville

Home Medical Equipment: Breath of Life Medical, Lebanon; CHG Solutions, LLC, Chattanooga; Forward Healthcare, LLC, Lenoir City; Gordian medical, Inc, Nashville; Jensen Little, LLC, Hendersonville; Neurotech NA, Inc, Nashville; The Jones Solution, LLC, Nashville; and Trust Home Medical, LLC, Hendersonville

Outpatient Diagnostic Center: Premier Radiology New Salem, Murfreesboro

Professional Support Services Agencies: Healing Hearts, Inc, Mt. Juliet and Mobility Rehab, Jamestown
Mr. Mynatt made a motion to approve; seconded by Ms. Williford. The motion was approved.

The following CHOW applications were presented to the Board for approval without staff concern –

Ambulatory Surgical Treatment Center: Wartburg Surgery Center, LLC, Wartburg

Home Health Services Agency: Ascension at Home Saint Thomas, Nashville

Home Medical Equipment: DME Care, Nashville; Hospice Source, LLC, Chattanooga; and National Seating & Mobility, Inc, Chattanooga

Nursing Home: Midtown Center for Health and Rehabilitation, LLC, Memphis

Residential Home for the Aged: Loving Arms of Memphis, Inc, Memphis and Patriot Hills Assisted Living, LLC, Oak Ridge

Mr. Boyd made a motion to approve; seconded by Mr. Breeden. The motion was approved.

The following special consideration of a CHOW application was tabled at the February 2018 Board meeting –

MidSouth Health and Rehabilitation, Memphis, license #248 based upon a survey conducted on May 2, 2018 deficiencies were cited rising to the level of detriment to the health, safety, and welfare of residents which resulted in a summary suspension of the license. Based upon the impending disciplinary action the Office of Health Care Facilities moved forward with changes to the ownership of the license #238 in the licensure system. As noted earlier in the minutes the building owner by actions of the lease of the space with the prior operator/owner signed a consent order and plans to move forward with the change of ownership (CHOW). This office has received the CHOW application and it is currently in process and under review. Further notice will be provided to the Board relative to this application.

LICENSURE STATUS UPDATE(S):

The following licensure status update was presented –

Starr Regional Medical Center, Etowah will continue to have acute care beds on the facility license for an additional two (2) years through February 2020.

FACILITY CLOSURES:

A listing of all facility closures during the time period of February 1, 2018 thru May 31, 2018 was provided to the Board. No discussion was held.

BOARD POLICY CONSENTS:

The following Board Policy Consent requests were presented –

Board Policy #32 request –

Christian Care Center of Memphis, Memphis

Mr. Mynatt made a motion to approve the request for a Board Policy #32 waiver to be issued to the above facility; seconded by Mr. Breeden. The motion was approved.

ORDER(S):

Consent Orders -

The following consent orders were presented -

MidSouth Health and Rehabilitation – Nursing Home - Survey conducted resulting in a summary suspension of the license. Legal representation for the building owner addressed the Board giving information on the terms of the lease agreement for the building. The lease agreement has 'clawback' provisions moving ownership of operations to the building owner. This resulted in the submission of a CHOW application and agreement to sign a consent order. **Mr. Breeden made a motion to approve the presented consent order; seconded by Mr. Mynatt. The motion was approved.**

Hearth at Hendersonville – Assisted Care Living Facility (ACLF) – Survey conducted resulting in a \$1000 Civil Monetary Penalty (CMP). **Mr. Mynatt made a motion to approve; seconded by Mr. Boyd. The motion was approved.**

The Gardens at Providence Place – ACLF (Mr. Crisp recused) - Survey conducted resulting in a \$500 CMP. **Mr. Mynatt made a motion to approve; seconded by Mr. Boyd. The motion was approved.**

Mr. Crisp rejoined the meeting.

RainTree Terrace – ACLF – Survey conducted resulting in a \$500 CMP. **Mr. Mynatt made a motion to approve; seconded by Mr. Boyd. The motion was approved.**

Creekside Villas 500 – ACLF – Survey conducted resulting in a \$1000 CMP. **Dr. Brock made a motion to approve; seconded by Mr. Boyd. The motion was approved.**

Family Ministries John M. Reed – Survey conducted resulting in a \$500 CMP. **Mr. Mynatt made a motion to approve; seconded by Mr. Boyd. The motion was approved.**

The Terrace at Mountain Creek – ACLF – Survey conducted resulting in a \$500 CMP. **Mr. Mynatt made a motion to approve; Mr. Boyd. The motion was approved.**

OTHER BUSINESS:

The OHCF P&P 240 list of facilities and status of plans of correction (POC) submissions was provided to the Board. No discussion was held.