

LETTER OF INTENT



**State of Tennessee
Health Facilities Commission**

502 Deaderick Street, Andrew Jackson Building, 9th Floor, Nashville, TN 37243

www.tn.gov/hsda

Phone: 615-741-2364

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LETTER OF INTENT

The Publication of Intent is to be published in the Commercial Appeal which is a newspaper of general circulation in the Tennessee counties of Haywood, Shelby and Tipton; the Dyersburg State Gazette which is a newspaper of general circulation in the Tennessee counties of Dyer, Lake* (distressed county not subject to CON), Lauderdale and Obion; the Paris Post-Intelligencer which is a newspaper of general circulation in Henry County, Tennessee; The Fayette Falcon which is a newspaper of general circulation in Fayette County, Tennessee; and The Jackson Sun which is a newspaper of general circulation in the Tennessee counties of Carroll, Crockett, Gibson and Weakley, Tennessee, on or before 02/15/2024 for one day.

This is to provide official notice to the Health Facilities Commission and all interested parties, in accordance with T.C.A. §68-11-1601 et seq., and the Rules of the Health Facilities Commission, that Tennessee Valley Home Care, LLC, d/b/a Tennessee Quality Care – Home Health, a/an proposed home care organization owned by American Home Care, LLC with an ownership type of Limited Liability Company and to be managed by itself intends to file an application for a Certificate of Need for the establishment of a home care organization and the initiation of home health services in a 13-county service area that includes: Carroll, Crockett, Dyer, Fayette, Gibson, Haywood, Henry, Lauderdale, Obion, Shelby, Tipton and Weakley Counties, as well as Certificate of Need-exempt Lake County. Lake County meets the criteria under T.C.A. § 68-11-1607(q) for designation as an economically distressed county and is not subject to Certificate of Need review. Upon approval of this project, the 13 proposed service area counties will be removed from the 51-county licensed service area of Tennessee Valley Home Care, LLC, d/b/a Tennessee Quality Care – Home Health (License No. 221), an existing home care organization located at 580 Tennessee Avenue, North, Parsons, Decatur County, Tennessee that is also owned by American Home Care, LLC. The address of the project will be 115 Neal Street, Suite E&F, Martin, Weakley County, Tennessee, 38237. The estimated project cost will be \$261,969.

The anticipated date of filing the application is 03/01/2024

The contact person for this project is Mr. Jeff Stofko who may be reached at Ascendent Healthcare Advisors, Inc. - 1335 Environ Way, Chapel Hill, North Carolina, 27517 – Contact No. 919-403-3300.

Jeff Stofko

02/02/2024

jeffreystofko@ascendent.com

Signature of Contact

Date

Contact's Email Address

The Letter of Intent must be received between the first and the fifteenth day of the month. If the last day for filing is a Saturday, Sunday, or State Holiday, filing must occur on the next business day. Applicants seeking simultaneous review must publish between the sixteenth day and the last day of the month of publication by the original applicant.

The published Letter of Intent must contain the following statement pursuant to T.C.A. §68-11-1607 (c)(1). (A) Any healthcare institution wishing to oppose a Certificate of Need application must file a written notice with the Health Facilities Commission no later than fifteen (15) days before the regularly scheduled Health Facilities Commission meeting at which the application is originally scheduled; and (B) Any other person wishing to oppose the application may file a written objection with the Health Facilities Commission at or prior to the consideration of the application by the Commission, or may appear in person to express opposition. Written notice of opposition may be sent to: Health Facilities Commission, Andrew Jackson Building, 9th Floor, 502 Deaderick Street, Nashville, TN 37243 or email at hsda.staff@tn.gov .



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PUBLICATION OF INTENT

The following shall be published in the “Legal Notices” section of the newspaper in a space no smaller than two (2) columns by two (2) inches.

NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED

This is to provide official notice to the Health Facilities Commission and all interested parties, in accordance with T.C.A. §68-11-1601 et seq., and the Rules of the Health Facilities Commission, that Tennessee Valley Home Care, LLC, d/b/a Tennessee Quality Care – Home Health, a/an proposed home care organization owned by American Home Care, LLC with an ownership type of Limited Liability Company and to be managed by itself intends to file an application for a Certificate of Need for the establishment of a home care organization and the initiation of home health services in a 13-county service area that includes: Carroll, Crockett, Dyer, Fayette, Gibson, Haywood, Henry, Lauderdale, Obion, Shelby, Tipton and Weakley Counties, as well as Certificate of Need-exempt Lake County. Lake County meets the criteria under T.C.A. § 68-11-1607(q) for designation as an economically distressed county and is not subject to Certificate of Need review. Upon approval of this project, the 13 proposed service area counties will be removed from the 51-county licensed service area of Tennessee Valley Home Care, LLC, d/b/a Tennessee Quality Care – Home Health (License No. 221), an existing home care organization located at 580 Tennessee Avenue, North, Parsons, Decatur County, Tennessee that is also owned by American Home Care, LLC. The address of the project will be 115 Neal Street, Suite E&F, Martin, Weakley County, Tennessee, 38237. The estimated project cost will be \$261,969.

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CRITERION AND
STANDARDS

Original Application

NOTE: Supplemental responses to criterion and standards follows in the supplemental attachments.



STATE OF TENNESSEE

STATE HEALTH PLAN
CERTIFICATE OF NEED STANDARDS AND CRITERIA
FOR
HOME HEALTH SERVICES

1. **Determination of Need:** In a given county, 1.5 percent of the total population will be considered as the need estimate for home health services in that county. This 1.5 percent formula will be applied as a general guideline, as a means of comparison within the proposed Service Area.

Rationale: After much effort, the Division has determined that limitations of the data obtained from the current JAR form do not permit a revision of the Need formula, and that there are no more accurate data sources available. Consequently, it has at this time decided to retain the current Need formula from the Guidelines for Growth and has repeated it herein. The Division commits to working with stakeholders to assess the data needs of the HSDA, the TDH, and stakeholders and to revise the JAR form accordingly. Once sufficient data are collected, a review of the Need formula will be undertaken.

The existing Need formula is admittedly a conservative one. The Division's research regarding Medicare-Medicaid fraud and abuse in the home health services industry supports a conservative Need formula. In 2012, the Government Accountability Office reported that 40% of all fraud convictions initiated by a group of Medicaid fraud-control units were for home health services — the biggest category of providers convicted through the Medicaid units' efforts. The Centers for Medicare and Medicaid Services (CMS) states that home health agencies offer services and supplies "vulnerable to fraud."

Response: Because TQC merely seeks to remove the 13-county proposed service area from the 51-county service area of its existing licensed parent in Parsons, Tennessee (Decatur County) (License No. 221) to establish a new parent office in Martin, Tennessee (Weakley County) covering these same 13 counties, TQC believes that the 1.5 percent formula for estimating need for home health services is inapplicable. While, technically, a CON application is required for TQC to establish a new parent office location in Martin serving the 13-county service area, TQC Parsons is already licensed to serve these counties. Further, the proposed TQC West will be in the same location as TQC's current Martin branch office, which already oversees the delivery of home health services to

patients in the proposed service area. Thus, regardless of the results of the 1.5 percent formula, the need for TQC’s home health services in this region is well-established and is supported by the qualitative factors discussed in greater detail below, which include the medical needs of those over the age of 65, those in rural populations, and armed forces veterans. Approval of both the TQC West project and the concurrent TQC East project will ensure that TQC can more effectively serve patients across the state through three parent HHAs as opposed to one.

TQC has proudly offered home health services to patients in Tennessee since 1984. In addition to its nearly 40 years of home health experience in Tennessee, TQC is now part of Addus HomeCare (Addus), a national leader in comprehensive home care and support services, treating more than 49,000 patients through 221 locations across 22 states, including Tennessee. Drawing upon Addus’s established network of providers and operational resources, TQC is well-positioned to offer higher quality and more accessible care to patients in the proposed 13-county service area through TQC West.

As noted in Section E, following the approval of both TQC West and TQC East, TQC will operate three, regionally-based parent HHA offices: (1) Lebanon (Wilson County), serving 21 counties in the eastern region of Tennessee; (2) Parsons (Decatur County), serving 17 counties in the central region of Tennessee; and (3) Martin (Weakley County), serving 13 counties in the western region of Tennessee. All 51 of these counties are currently served by TQC’s existing, licensed parent office in Parsons. Neither the proposed TQC West project nor the TQC East project seeks to initiate home health services in any counties that are not already part of TQC’s licensed 51-county service area. Rather, through the establishment of two additional parent offices, TQC seeks to more optimally distribute its statewide service area to better serve its patients and improve convenience for TQC staff and providers. This trifurcation of TQC’s existing service area can be viewed in detail in Attachment 1E-1, which also lists the locations of TQC’s existing branch offices.

As an HHA that has operated in the proposed service area for over 40 years, the need for TQC’s ongoing operation is certain and is something that TQC understands directly. In fact, that is why TQC is pursuing these proposed projects—because it knows reorganization, including the addition of two dedicated Executive Directors, as described in Attachment 4C, to oversee operations in Martin and Lebanon, will allow TQC to deliver more specialized services that meet the unique healthcare needs of its existing patient population. Although TQC provides care to all service area patients in need of its services, it is particularly focused on caring for underserved and higher acuity patients that other HHAs struggle to treat, including patients over the age of 65, rural patients, veterans, and those in need of private duty nursing services. Many patients in these target populations reside in the 13-county service area.

As discussed in Question 3N.A and Question 4N, the primary patient population for the proposed services is those over the age of 65. This is largely because this cohort is in highest need of home health services. For example, a 2019 survey by Statista found that over 80 percent of those receiving long-term care services from home health agencies were over the age of 65.¹ Similarly, in a study examining long-term care providers and

¹ “Percentage of U.S users of long-term care services in 2015 and 2016, by provider and age group.” Statista. Updated November 30, 2023. Accessed at <https://www.statista.com/statistics/318577/long-term-care-services-in-the-us-by-type-and-age-group/>.

users, the CDC concluded that, nationally, the majority of home health patients were, and are expected to continue to be, patients age 65 and older.² In addition, the Alliance for Home Health Quality and Innovation estimates that 86.2 percent of home health patients are over the age of 65.³ These statistics largely coincide with the fact that older populations generally experience more healthcare needs than younger populations.⁴

Many counties within the proposed 13-county service area are also considered low-income, rural areas. Rural patient populations have more difficulty accessing healthcare and an overall greater need for healthcare services. Compared to patients in urban areas, rural patients are more likely to suffer from mental illness, chronic diseases, and, generally, worse health outcomes, which leads to elevated rates of morbidity and overall excess mortality.⁵ Residents in these areas also face multiple barriers to accessing vital medical care, including longer travel distances to healthcare providers, higher uninsured rates, and poorer health literacy.⁶ Importantly for this project, research also shows that rural areas are far less likely than urban areas to have adequate access to home health services. Findings from the Rural & Minority Health Research Center indicated that 10.3 percent of rural ZIP Code Tabulation Areas (ZCTAs)⁷ lack any home health services, compared to only 2.2 percent of urban ZCTAs.⁸ These disparities are evident in the data supporting this application.

Notably, as is highlighted in greater detail in Attachment 3N.B, compared to the state of Tennessee overall, 11 of the 13 counties in the proposed service area have a higher percentage of TennCare enrollees. Additionally, and as discussed elsewhere in this application, 11 of the 13 counties in the proposed service area have populations of less

² *Long-term Care Providers and Services Users in the United States, 2015-2016.* Centers for Disease Control and Prevention, National Center for Health and Human Services. February 2019, accessed at https://www.cdc.gov/nchs/data/series/sr_03/sr03_43-508.pdf.

³ *AHHQI Home Health Chartbook 2020.* Alliance for Home Health Quality and Innovation. 2020, accessed at https://ahhqi.org/images/uploads/AHHQI_2020_Home_Health_Chartbook_-_Final_09.30.2020.pdf.

⁴ National Center for Health Statistics (NCHS) available at <http://www.cdc.gov/nchs/data/nhsr/nhsr029.pdf> (noting that in 2007, those aged 65 years and above accounted for just 13 percent of the U.S. population, but 37 percent of the hospital discharges, and 43 percent of the days of care. In contrast, the 15–44 age cohort represented 42 percent of the population and 31 percent of the hospital discharges, but only 24 percent of the days of care. Children under age 15 years who accounted for 20 percent of the population were only six percent of the hospitalizations and represented only six percent of the days of care).

⁵ Cohen, Steven A and Greaney, Mary L. "Aging in Rural Communities." *Current Epidemiology Reports*, 2023, 10(1), pp. 1-16. Published online November 9, 2022. Accessed January 5, 2024, at <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9644394/>.

⁶ "Healthcare Access in Rural Communities." *Rural Health Information Hub*. Last updated November 9, 2023. Accessed at <https://www.ruralhealthinfo.org/topics/healthcare-access#barriers>.

⁷ "ZIP Code Tabulation Areas...are a geographic product of the U.S. Census Bureau created to allow mapping, display, and geographic analyses of the United States Postal Service (USPS) Zone Improvement Plan (ZIP) Codes dataset." Via "Zip Code Tabulation Areas (ZCTAs)." United States Census Bureau. Last revised August 10, 2023. Accessed at <https://www.census.gov/programs-surveys/geography/guidance/geo-areas/zctas.html>.

⁸ Probst, Janice C.; Benavidez, Gabriel; Yell, Nicholas; Eberth, Jan; and Merrell, Melinda. *August 2022 Findings Brief.* Rural & Minority Health Research Center. Accessed January 5, 2024, at https://sc.edu/study/colleges_schools/public_health/research/research_centers/sc_rural_health_research_center/documents/homehealthmrgprobst81922.pdf, p. 6.

than 50,000 residents.⁹ This is significant because 50,000 residents is the benchmark figure the Office of Budget and Management uses to evaluate whether an area qualifies as a “Metropolitan” or rural area.¹⁰ While TQC will continue providing care to patients in more urban parts of the proposed service area as it has done historically, the TQC West project will assist in addressing the tangible care deficiencies TQC has identified for patients located in rural parts of the proposed service area. TQC already furnishes care to these rural patient populations, but, with a new parent office in Martin, TQC can provide more centralized, accessible, and timely care to patients in these harder to reach areas.

On average, patients in rural areas are also older than those in more urban and densely populated areas.¹¹ The proposed service area’s population data reflect this trend. As shown in Attachment 3N.B, by 2027, nine of the 13 counties in TQC West’s proposed service area will have a higher percentage of residents over the age of 65 than Tennessee overall. Thus, a new parent office in Martin will better position TQC to provide accessible and timely care to this growing, aging population.

As detailed in response to Question 4N, rural areas also have a higher proportion of veterans – a service area patient population TQC has historically and will continue to prioritize. The Rural Health Information Hub notes that, of the 20 million veterans in the United States, approximately 4.4 million – 22 percent – live in rural areas.¹² Comparatively, and as noted above, the U.S. Census estimates that only 20 percent of the overall United States population lives in rural areas; and, since 2010, that percentage has remained relatively stagnant, primarily increasing from 19.3 percent due to changes in the way the Census denotes what census tracts are “rural.”¹³ Veterans, and especially older veterans, are more likely to suffer from chronic conditions requiring healthcare services. According to the Veterans Benefits Administration 2022 Annual Benefits Report, the most prevalent military service-related disabilities include: tinnitus, hearing loss, post-traumatic stress disorder, and various physical limitations of limbs.¹⁴ Generally, veterans are also more susceptible to long-term and acute conditions independent of their military service. Compared to civilians, veterans have poorer health behaviors and outcomes, including overall higher rates of smoking, diabetes, cardiovascular disease, and mental health

⁹ “Urban and Rural Classification Press Kit.” United States Census Bureau. December 29, 2022. Accessed at <https://www.census.gov/newsroom/press-kits/2022/urban-rural-classification.html>.

¹⁰ <https://www.census.gov/programs-surveys/metro-micro/about.html>. As noted by the United States Census Bureau, a metropolitan statistical area contains more than 50,000 residents.

¹¹ According to an American Community Survey Reports (ACS) survey, 17.5 percent of the population in rural areas was age 65 and older from 2012 to 2016, compared to only 13.8 percent of the population in urban areas. See Smith, Amy Symens and Trevelyan, Edward. “The Older Population in Rural America: 2012-2016.” American Consumer Survey Reports, United States Census Bureau. September 2019. Accessed January 5, 2024, at <https://www.census.gov/content/dam/Census/library/publications/2019/acs/acs-41.pdf>.

¹² “Rural Veterans and Access to Healthcare.” *Rural Health Information Hub*. Last updated December 11, 2023. Accessed at <https://www.ruralhealthinfo.org/topics/returning-soldier-and-veteran-health#health-concerns>.

¹³ “Nation’s Urban and Rural Populations Shift Following 2020 Census.” United States Census Bureau. December 29, 2022. Accessed at <https://www.census.gov/newsroom/press-releases/2022/urban-rural-populations.html>.

¹⁴ *Annual Benefits Report: Fiscal Year 2022*. Veterans Benefits Administration, U.S. Department of Veterans Affairs. Accessed January 4, 2024, at <https://www.benefits.va.gov/REPORTS/abr/docs/2022-abr.pdf>.

conditions.¹⁵ Given these unique healthcare needs, TQC recognizes the importance of continuing to ensure its armed forces veterans have necessary access to its home health services; TQC's concurrent and complementary applications will promote greater accessibility for this critical demographic.

Based on the qualitative factors discussed above and the fact that TQC West would merely remove the 13-county proposed service area from TQC Parsons's 51-county service area, there is a clear need for TQC West independent of the need estimate that may be suggested by applying the state's 1.5 percent home health need standard. Through a new parent office in Martin, TQC West will be able to serve TQC's existing patient population. More importantly, with more localized and regionally-focused parent offices, TQC can offer even more accessible and high-quality care to patients.

2. The need for home health services should be projected three years from the latest available year of final JAR data.

Note: The Division recognizes that a home care organization can be established within a 12-15 month period of time, and that ideally a one year planning horizon would be used. However, in this instance a three-year planning horizon is used because final JAR data lags significantly behind the current date. Final 2012 JAR data became available in May 2014, thus providing data for need to be projected in 2015 but not for any other future full calendar year. Should a change occur that enables TDH to provide final JAR data significantly earlier, the Division would propose a change in the planning horizon.

Response: Please see Table 1N-2 below for the current and projected estimated need in each of the 13 service area counties using the 1.5 percent formula. Additionally, please see Attachment 1N-2 for the population data used in this table.

While TQC has included the data below in accordance with the Standards and Criteria for Home Health Services, TQC believes that estimated need is not relevant to its TQC West project or its concurrent TQC East project. Neither project seeks to provide home health services in counties that TQC Parsons is not already licensed to serve. For additional discussion, see the response to #1, above.

¹⁵ Hoerster, Katherine D.; Lehavot, Keren; Simpson, Tracy; McFall, Miles; Reiber, Gayle; and Nelson, Karin M. "Health and health behavior differences: U.S. Military, veteran, and civilian men." *American Journal of Preventative Medicine*, November 2012, 43(5), pp. 483-9. Accessed at <https://pubmed.ncbi.nlm.nih.gov/23079170/>. Also see Haltom, Trenton M; Tiong, Joyce; Evens, Tracy L; Kamdar, Nipa; True, Gale; and Kunik, Mark E. "Unmet Needs and Coping Strategies of Older Underserved Veterans During the COVID-19 Pandemic." *Journal of Primary Care & Community Health*, January 2023, 14. Published online July 2, 2023, accessed at <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10315790/>.

Table 1N-2

County	Population		Estimated Need (at 1.5%)	
	2023	2026	2023	2026
Carroll	27,601	27,417	414	411
Crockett	14,161	14,231	212	213
Dyer	36,796	37,520	552	563
Fayette	43,097	44,364	646	665
Gibson	49,485	49,737	742	746
Haywood	16,660	16,451	250	247
Henry	32,143	32,794	482	492
Lauderdale	25,397	25,734	381	386
Obion	29,916	29,577	449	444
Shelby	941,637	950,748	14,125	14,261
Tipton	62,909	64,016	944	960
Weakley	33,249	32,977	499	495
Total for CON-Reviewable Counties	1,313,051	1,325,566	19,696	19,883
Lake County (CON-Exempt)	6,907	7,239	104	109
Grand Total	1,319,958	1,332,805	19,800	19,992

Source (2023 data): Tennessee Department of Health, "Population Projections 2023-2025," at <https://www.tn.gov/content/dam/tn/health/documents/population/CON-Population-Estimates-4-reports-2023-2025.pdf>.

Source: (2026 data): Tennessee Department of Health, "Population Projections 2022-2026," at <https://www.tn.gov/content/dam/tn/health/documents/population/CON-Population-Estimates-2022-2026.pdf>.

- The use rate of existing home health agencies in each county of the Service Area will be determined by examining the latest utilization rate as calculated from the JARs of existing home health agencies in the Service Area. Based on the number of patients served by home health agencies in the Service Area, an estimation will be made as to how many patients could be served in the future.

Rationale: This Standard is carried over from the Guidelines for Growth.

Response: Please see Table 1N-3 below for the home health patient utilization rate by county for 2023, as well as the use rate per 1,000 patients. Additionally, please see Attachment 1N-3 for supplemental use rate data, including the number of agencies reporting patients served in 2023 and projections for each county's home health capacities in 2026.

As noted above, TQC believes that the home health surpluses noted in Attachment 1N-3 are not reflective of the need for the TQC West project, as its approval will merely remove the 13-county proposed service area from the 51-county licensed service area of TQC Parsons. Thus, while TQC West will be a newly established parent office, it will not alter the number of licensed HHAs in the service area. In fact, the data reflected in Table 1N-3 and Attachment 1N-3 are inclusive of the home health services that TQC Parsons

currently delivers to service area patients. The trifurcation of TQC's current service area into three regions, in other words, will not affect the surpluses that already exist in the counties in TQC West's proposed service area.

Table 1N-3

County	Population (2023)	Home Health Patients (2023)	Use Rate / 1,000 Patients (2023)
Carroll	27,601	1,167	42.3
Crockett	14,161	393	27.8
Dyer	36,796	1,237	33.6
Fayette	43,097	623	14.5
Gibson	49,485	1,809	36.6
Haywood	16,660	479	28.8
Henry	32,143	1,192	37.1
Lauderdale	25,397	769	30.3
Obion	29,916	1,160	38.8
Shelby	941,637	16,868	17.9
Tipton	62,909	1,329	21.1
Weakley	33,249	1,042	31.3
Total for CON-Reviewable Counties	1,313,051	28,068	21.4
Lake County (CON-Exempt)	6,907	268	38.8
Grand Total	1,319,958	28,336	21.5

Source (2023 data): Tennessee Department of Health, "Population Projections 2023-2025," at <https://www.tn.gov/content/dam/tn/health/documents/population/CON-Population-Estimates-4-reports-2023-2025.pdf>.

Source (Home Health Patient Data): Tennessee Department of Health, Joint Annual Reports (JARs), 2023, at <https://apps.health.tn.gov/publicjars/default.aspx>.

4. **County Need Standard:** The applicant should demonstrate that there is a need for home health services in each county in the proposed Service Area by providing documentation (e.g., letters) where: a) health care providers had difficulty or were unable successfully to refer a patient to a home care organization and/or were dissatisfied with the quality of services provided by existing home care organizations based on Medicare's system Home Health Compare and/or similar data; b) potential patients or providers in the proposed Service Area attempted to find appropriate home health services but were not able to secure such services; c) providers supply an estimate of the potential number of patients that they might refer to the applicant.

Rationale: This Standard seeks to promote State Health Plan Principle 2 concerning Access to Care. The Division believes that if the Need formula is not met, a pattern of problems with referring patients successfully to home care organizations should be

demonstrated by the applicant. If no such pattern can be established, there is likely not a need for a new home care organization.

Response: As noted in TQC's response to #1 above, neither the TQC West project nor the concurrent TQC East project is driven by a shortage of home health services in the proposed service area counties. Rather, the projects are primarily premised upon the qualitative rationales outlined in #1, which TQC is acutely aware of as a well-established, licensed Tennessee HHA. Therefore, again, TQC urges that its TQC West and TQC East projects should not be evaluated based on a technical application of the state's need formula. Nonetheless, letters of support from service area healthcare providers, which will be provided at a later date as Attachment 1N-4, evidence the clear need for TQC West and the essential role TQC and its current branch offices, including the Martin office, have in the service area's healthcare infrastructure.

Through the TQC West and TQC East projects, TQC seeks to redistribute its parent office operations throughout its 51-county licensed service area to deliver care that is better aligned with the needs of its patients and the comprehensive array of home health services it can now offer as part of Addus. This reorganization will ease administrative burdens in the 13-county proposed service area, allowing the new TQC West to deliver care to TQC's existing patient base in western Tennessee in a more timely and quality-focused manner, which will ultimately improve both access and treatment efficacy. Importantly, as discussed in response to 2N, following approval of the TQC West and TQC East projects, TQC, overall, will continue serving the same 51-county licensed service area. However, rather than doing so through its single Parsons parent, TQC will do so through three, more regionally-based parent offices: (1) Lebanon (Wilson County), (2) Martin (Weakley County), and (3) Parsons (Decatur County).

As detailed in its response to #1 above, TQC has proudly offered home health services to patients in Tennessee since 1984. In late 2023, TQC became part of Addus's robust network of home care providers. TQC wants to better position itself operationally to ensure its existing patients can access Addus's comprehensive resources for delivering high quality, patient-centered home health care. As noted in response to Question 2E, TQC's current single parent office structure makes this challenging. Although TQC has ten branch offices operating throughout the 51-county service area, it can be difficult for a single administrator to ensure TQC is consistently implementing many of the care advantages available through Addus's infrastructure. These challenges are exacerbated by the rural nature of TQC's existing service area.

The creation of a Martin parent office, which is centrally located in the 13-county proposed service area, will ease existing operational burdens and permit greater administrative oversight in TQC's western region. As detailed in the job description for the Executive Director of a TQC parent office, shown in Attachment 4C, Executive Directors are responsible for a wide range of day-to-day tasks in addition to, and largely separate from, providing patient care. These include, among others: assisting with budgeting; evaluating staff performance; maintaining clinical records; and coordinating compliance with local, state and federal laws. Through the proposed TQC West and TQC East projects, administrative responsibilities would be shared among three Executive Directors – one for each parent office. As a result, each parent office would have greater flexibility to deliver care that is more tailored to the specific needs of the local market, to improve staff clinical competencies, and to enhance the overall quality of care and customer service. In

addition, TQC would have more resources available to invest in the communities it serves through more localized outreach efforts.

All of these factors ultimately demonstrate the need for TQC's proposed project. Both TQC West and TQC East will improve TQC existing patients' access to individualized home health services while also maximizing care quality.

- 5. Current Service Area Utilization:** The applicant should document by county: a) all existing providers of home health services within the proposed Service Area; and b) the number of patients served during the most recent 12-month period for which data are available. To characterize existing providers located within Tennessee, the applicant should use final data provided by the JARs maintained by the Tennessee Department of Health. In each county of the proposed Service Area, the applicant should identify home health agencies that have reported serving 5 or fewer patients for each of the last three years based on final and available JAR data. If an agency in the proposed Service Area who serves few or no patients is opposing the application, that opponent agency should provide evidence as to why it does not serve a larger number of patients.

Rationale: From comments expressed by many stakeholders, the Division is aware that a home care organization may be licensed to provide services in a county/Service Area but may serve few or no patients there. The Division believes this situation may unreasonably impede the expansion of home health services in a county/Service Area and that any such home care organization that is opposing an application should provide evidence that supports its low market penetration.

Response: Please see Attachment 5N. Home health agencies that reported serving five or fewer patients for each of the last three years are highlighted in yellow. Please note that TQC is an existing service area provider, and that the utilization projections for TQC West, detailed in TQC's response to Question 6N, largely account for TQC's status as an existing service area provider.

- 6. Adequate Staffing:** Using TDH Licensure data, the applicant should document a plan demonstrating the intent and ability to recruit, hire, train, assess competencies of, supervise, and retain the appropriate numbers of qualified personnel to provide the services described in the application and document that such personnel are available to work in the proposed Service Area. The applicant should state the percentage of qualified personnel directly employed or employed through a third party staffing agency.

Rationale: This Standard seeks to promote State Health Plan Principle 5 concerning a sufficient and quality health care work force. Home care organization workers do not necessarily need to live in the county in which they work. However, in the short term, the number of possible workers in a general area is unlikely to change quickly. In order to promote economic efficiencies and access to health care through reduced personnel cost, applicants should demonstrate that they have a plan to recruit sufficient workforce in the general area within reasonable commuting distance of the proposed Service Area. Moreover, the applicant should present its long-term plans to ensure an adequate supply of quality home care workers is available to meet future needs.

Response: Please see Question 8Q for a detailed outline of the staffing needs of the proposed project. As noted in this response, TQC will add 6.0 FTEs of staffing, including both clinical and administrative staff, to support the proposed project, which will allow TQC

to more effectively deliver services in the 13-county proposed service area. To fill the projected new FTEs, TQC will draw upon Addus's robust hiring and recruitment resources to recruit and train qualified candidates. Overall, however, the majority of staffing changes associated with the TQC West project will only involve repositioning current staff. Relatedly, because TQC West will be predominantly staffed by existing TQC employees, there will be minimal additional training efforts required as a result of the parent office reorganization. Rather, the reorganization is expected to improve clinical competencies, supervision, and the retention of qualified staff.

TQC already has rigorous procedures and processes in place for the training and ongoing education of both its clinical and administrative staff. These human resource procedures and processes have been further enhanced by Addus's infrastructure and experience operating HHAs nationally, including training that ensures all TQC employees, clinical and non-clinical, are equipped to deliver high quality care. For example, TQC has numerous policies, such as its "Home Health Aide Training" policy, focused on ensuring staff are properly educated on their role. Additionally, TQC adheres to a "Staffing and Scheduling" policy and an "On-Call/Weekend Staffing" policy to denote procedures for the scheduling of available staff and the possible on-call responsibilities for those staff. TQC also operates under numerous guidelines focused on management, administration, processes for hiring, and overall organizational improvement and development as noted in detail in its "Supervision," "Competency Assessment," "Recruitment, Retention, Development, and Continuing Education" policies, as well as its "Improving Organization Performance" policy.

The policies referenced above and other sample staffing policies are available in Attachment 5C. Like TQC Parsons, TQC West will also adhere to these policies.

- 7. Community Linkage Plan:** The applicant should provide a community linkage plan that demonstrates factors such as, but not limited to, referral arrangements with appropriate health care system providers/services (that comply with CMS patient choice protections) and working agreements with other related community services assuring continuity of care focusing on coordinated, integrated systems. A new provider may submit a proposed community linkage plan.

Rationale: This Standard seeks to promote State Health Plan Principles 3 and 4 concerning Economic Efficiencies and Quality of Care, respectively. In order to promote economic efficiencies and the quality of health care provided in Tennessee, applicants should demonstrate that they have established relationships with other health care providers that will ensure a continuity of care for their patients.

Response: As an existing, licensed HHA in Tennessee serving patients statewide, TQC has extensive relationships with the healthcare community in the areas it serves. These include relationships with local hospitals, physician practices, post-acute care providers, and other specialty home health agencies. For example, TQC is a go-to resource for American Health Communities (AHC) and its 28 long-term care and rehabilitation communities in Tennessee operating in many of TQC's 51-county service area. Collaborative relationships like these further evidence the important home health services TQC delivers across care settings and demonstrate the trust healthcare providers have for TQC's clinical care teams.

In short, as an integral part of the healthcare network in the proposed service area, TQC is well-equipped to deliver coordinated, continuous care that promotes optimal health outcomes as patients transition from various settings. The letters that will be provided as Attachment 1N-4 evidence the important relationships TQC has with local primary care providers and long-term care facilities in the proposed service area. Access to this collaborative network of healthcare providers and services will be no different upon the establishment of a new Martin parent office. Again, because the new Martin parent office will be in the same location as TQC's current Martin branch office, TQC West will seamlessly assume these same connections. Further, with more localized administration and management, TQC West can provide patients greater access to Addus's continuum of care in Tennessee.

Please see Attachment 1N-7 for a list of providers that frequently collaborate with TQC in the proposed western region.

8. **TennCare Managed Care Organizations (MCOs) and Financial Viability:** Given the time frame required to obtain Medicare certification, an applicant proposing to contract with the Bureau of TennCare's MCOs should provide evidence of financial viability during the time period necessary to receive such certification. Applicants should be aware that MCOs are under no obligation to contract with home care organizations, even if Medicare certification is obtained, and that Private Duty Services are not Medicare certifiable services. Applicants who believe there is a need to serve TennCare patients should contact the TennCare MCOs in the region of the proposed Service Area and inquire whether their panels are open for home health services, as advised in the notice posted on the HSDA website, to determine whether at any given point there is a need for a provider in a particular area of the state; letters from the TennCare MCOs should be provided to document such need. See Note 2 for additional information.

Applicants should also provide information on projected revenue sources, including non-TennCare revenue sources.

Rationale: This Standard seeks to promote State Health Plan Principle 3 concerning Economic Efficiencies. This Standard further seeks to promote the orderly development of the health care system by bringing to the forefront issues concerning Medicaid/Medicare certification.

Response: First, TQC's existing licensed HHA (License No. 221) currently contracts with Medicare and Medicaid/TennCare and will do so in the future, as projected in its response to Question 9C. TQC projects that nearly 92 percent of its gross operating revenue in the second full year of the proposed project will come from Medicare/Medicare Managed Care and TennCare/Medicaid. TQC's committed participation in these programs is also noted in the 2023 JARs. Thus, not only is TQC aware of the financial viability needed to ensure its proposed Martin parent office receives necessary Medicare and TennCare certification, it also understands the requirements it must comply with to receive these certifications. In addition, TQC has communicated with each of the TennCare MCOs, including United Healthcare, BlueCross BlueShield and Wellpoint, and confirmed that they are open to new providers of home health services.

For additional payor-related information, please see Question 4Q for a list of the MCOs with which TQC is currently contracted and Question 10C for the projected payor mix of TQC West.

9. **Proposed Charges:** The applicant's proposed charges should be reasonable in comparison with those of other similar agencies in the Service Area or in adjoining service areas. The applicant should list:

Rationale: This Standard seeks to promote State Health Plan Principle 3 concerning Economic Efficiencies through greater marketplace transparency.

- a. The average charge per visit and/or episode of care by service category, if available in the JAR data.

Response: Please see Attachment 8C, which lists the charge per visit from the 2023 JARs for HHAs in the proposed service area. The charges are segmented by each type of home health service listed on TQC's HHA license, which is available in Attachment 3Q. As reiterated in the response to Question 9C, while the charge per visit for each service TQC offers is slightly higher than the average charge per visit across providers in the service area, it should be noted that, compared to TQC, multiple service area providers did not report either some or all charges per visit to the Tennessee Department of Health. Thus, the average charge per visit for some service area providers may be underestimated. For example, 20 out of the 48 licensed providers listed did not report charges for home health aide services; further, 21 out of the 48 providers listed did not report charges for Medical Social Services. Importantly, TQC is focused on delivering patient-centered, comprehensive care that is both cost-effective and high quality.

- b. The average charge per patient based upon the projected number of visits and/or episodes of care and/or hours per patient, if available in the JAR data.

Response: Please also see Attachment 8C for the total visits, hours, gross revenue, average revenue per patient, and average revenue per visit from the JARs for HHAs in the proposed service area. TQC has categorized visits and hours by each type of home health service it provides as noted on its license (viewable in Attachment 3Q). The JARs do not provide data for average charges per patient. Of note, the JARs also do not segment the type of home health service provided by visits or hours or by county for any given licensed home health provider.

10. **Access:** In concert with the factors set forth in HSDA Rule 0720-11-.01(1)(which lists those factors concerning need on which an application may be evaluated), the HSDA may choose to give special consideration to an applicant that is able to show that there is limited access in the proposed Service Area for groups with special medical needs such as, but not limited to, medically fragile children, newborns and their mothers, and HIV/AIDS patients. Pediatrics is a special medical needs population, and therefore any provider applying to provide these services should demonstrate documentation of adequately trained staff specific to this population's needs with a plan to provide ongoing best practice education. For purposes of this Standard, an applicant should document need using population, service, special needs, and/or disease incidence rates. If granted, the Certificate of Need should be restricted on condition, and thus in its licensure, to serving the special group or groups identified in the application. The restricting language should be as follows: **CONDITION:** Home health agency services are limited to (identified specialty service group); the expansion of service beyond (identified specialty service

group) will require the filing of a new Certificate of Need application. Please see Note 3 regarding federal law prohibitions on discrimination in the provision of health care services.

Rationale: This Standard seeks to promote State Health Plan Principle 2 concerning Access to Care.

Response: As discussed in its responses to #1 above and Questions 3N and 4N, TQC West will promote greater access to care in the proposed service area for various patient populations with special medical needs, including those over age 65, those living in rural areas, armed forces veterans, and pediatric and adult patients with conditions qualifying for private duty nursing services. TQC has historically provided high quality, patient-centered care to these groups with special medical needs and will continue to do so following the approval and development of its concurrent and complementary TQC West and TQC East projects. Specifically, as discussed in response to #4 above, a new parent office location in Martin with a dedicated Executive Director overseeing TQC's operations in the 13-county western Tennessee region will allow TQC West to deliver care that is even more tailored to service area patients' needs. In addition, the project will facilitate greater access to home health services in the proposed service area, which, as previously noted, is concentrated with a more vulnerable patient population. Of note, while the proposed TQC West and TQC East projects will allow TQC to provide more targeted care to these special need populations, both projects intend to serve all patients who are in need of home health services. Thus, it is not necessary to restrict its licensure to these special medical groups. This is also consistent with TQC's existing Tennessee HHA license (No. 221), which is not subject to any patient population restrictions.

11. **Quality Control and Monitoring:** The applicant should identify and document its existing or proposed plan for data reporting (including data on patient re-admission to hospitals), quality improvement, and an outcome and process monitoring system (including continuum of care and transitions of care from acute care facilities). If applicable, the applicant should provide documentation that it is, or that it intends to be, fully accredited by the Joint Commission, the Community Health Accreditation Program, Inc., the Accreditation Commission for Health Care, and/or other accrediting body with deeming authority for home health services from CMS.

Rationale: This Standard seeks to promote the State Health Plan Principle 4 concerning Quality of Care. The Division recognizes that certain home care organizations are certified by CMS but are not necessarily accredited by the entities listed above.

Response: TQC Parsons is fully accredited by The Joint Commission (TJC) and will seek the same accreditation for TQC West. The current TJC certification is valid until 2026. Because TQC is committed to continuous quality improvement, it may evaluate other home health accrediting bodies, including The Community Health Accreditation Program (CHAP) and the Accreditation Commission for Health Care (ACHC), in the future.

TQC, through Addus's management and operational infrastructure, has also invested significant resources into software and technology that improves overall patient care. These resources include, but are not limited to:

- Homecare Homebase (HCHB), an electronic medical records (EMR) platform that allows clinicians to spend less time on backend tasks and more time actively caring for patients.

- Strategic Healthcare Programs (SHP), an analytical platform that provides extensive visibility into patient outcomes, patient satisfaction, and field clinician performance.
- Medalogix, an algorithmic software program that provides predictive analytics for identifying the appropriate level of care, risk of hospitalization, and clinical frequencies to promote positive patient outcomes. This program also works to quickly and efficiently pull data from the EMR, which allows clinicians to access relevant patient records more efficiently.
- Forcura, a healthcare workflow management platform that interfaces between outside healthcare providers and staff to ensure rapid and accurate communication.
- Medbridge, an industry-standard learning platform that promotes professional development and provides the most current education to staff.

TQC also adheres to Addus's rigorous quality criteria and standards, which, as a nationally-recognized leader in home health care, ensure TQC carefully engages in ongoing organizational improvement to provide higher quality care to Tennessee patients.

Please see Attachment 3Q for TQC's TJC accreditation. Also see Attachment 5C for TQC's relevant quality policies.

12. **Data Requirements:** Applicants should agree to provide the Department of Health and/or the Health Services and Development Agency with all reasonably requested information and statistical data related to the operation and provision of services and to report that data in the time and format requested. As a standard of practice, existing data reporting streams will be relied upon and adapted over time to collect all needed information.

Rationale: This Standard seeks to promote accurate health planning through the availability of accurate and timely data.

Response: TQC agrees to provide the Department of Health and/or the Agency with such information and data as reasonably requested.

ORIGINAL
APPLICATION



**State of Tennessee
Health Facilities Commission**

502 Deaderick Street, Andrew Jackson Building, 9th Floor, Nashville, TN 37243

www.tn.gov/hsda

Phone: 615-741-2364

hsda.staff@tn.gov

CERTIFICATE OF NEED APPLICATION

1A. Name of Facility, Agency, or Institution

Tennessee Valley Home Care, LLC, d/b/a Tennessee Quality Care – Home Health

Name

115 Neal Street, Suite E&F

Weakley County

Street or Route

County

Martin

Tennessee

38237

City

State

Zip

www.tnquality.com/homehealth

Website Address

Note: The facility's name and address **must be** the name and address of the project and **must be** consistent with the Publication of Intent.

2A. Contact Person Available for Responses to Questions

Jeff Stofko

Manager

Name

Title

Ascendient Healthcare Advisors, Inc.

jeffreystofko@ascendient.com

Company Name

Email Address

1335 Environ Way

Street or Route

Chapel Hill

North Carolina

27517

City

State

Zip

Consultant

919-403-3300

Association with Owner

Phone Number

3A. Proof of Publication

Attach the full page of newspaper in which the notice of intent appeared with the mast and dateline intact or submit a publication affidavit from the newspaper that includes a copy of the publication as proof of the publication of the letter of intent. (Attachment 3A)

Date LOI was Submitted: 02/02/24

Date LOI was Published: 02/15/24

RESPONSE: The LOI was published in newspapers of general circulation that cover each county in the service area on or before February 15, 2024. Please see Attachment 3A.

4A. Purpose of Review (*Check appropriate box(es) – more than one response may apply*)

- Establish New Health Care Institution
- Relocation
- Change in Bed Complement
- Addition of a Specialty to an Ambulatory Surgical Treatment Center (ASTC)
- Initiation of MRI Service
- MRI Unit Increase
- Satellite Emergency Department
- Addition of Therapeutic Catheterization
- Positron Emission Tomography (PET) Service
- Initiation of Health Care Service as Defined in §TCA 68-11-1607(3)

Initiation of HealthCare services

- Burn Unit
- Neonatal Intensive Care Unit
- Open Heart Surgery
- Organ Transplantation
- Cardiac Catheterization
- Linear Accelerator
- Home Health
- Hospice
- Opiate Addiction Treatment Provided through a Non-Residential Substitution-Based Treatment Section for Opiate Addiction

Please answer all questions on letter size, white paper, clearly typed and spaced, single sided, in order and sequentially numbered. In answering, please type the question and the response. All questions must be answered. If an item does not apply, please indicate “N/A” (not applicable). Attach appropriate documentation as an Appendix at the end of the application and reference the applicable item Number on the attachment, i.e. Attachment 1A, 2A, etc. The last page of the application should be a completed signed and notarized affidavit.

5A. Type of Institution (*Check all appropriate boxes – more than one response may apply*)

- Hospital
- Ambulatory Surgical Treatment Center (ASTC) – Multi-Specialty
- Ambulatory Surgical Treatment Center (ASTC) – Single Specialty
- Home Health
- Hospice
- Intellectual Disability Institutional Habilitation Facility (ICF/IID)
- Nursing Home
- Outpatient Diagnostic Center
- Rehabilitation Facility
- Residential Hospice
-

Nonresidential Substitution Based Treatment Center of Opiate Addiction

Other

Other -

Hospital -

6A. Name of Owner of the Facility, Agency, or Institution

American Home Care, LLC

Name

115 Neal Street Suite E and F

731-587-0072

Street or Route

Phone Number

Martin

Tennessee

38237

City

State

Zip

7A. Type of Ownership of Control (Check One)

- Sole Proprietorship
- Partnership
- Limited Partnership
- Corporation (For Profit)
- Corporation (Not-for-Profit)
- Government (State of TN or Political Subdivision)
- Joint Venture
- Limited Liability Company
- Other (Specify)

Attach a copy of the partnership agreement, or corporate charter and certificate of corporate existence. Please provide documentation of the active status of the entity from the Tennessee Secretary of State's website at <https://tnbear.tn.gov/ECommerce/FilingSearch.aspx> If the proposed owner of the facility is government owned must attach the relevant enabling legislation that established the facility. (Attachment 7A)

Describe the existing or proposed ownership structure of the applicant, including an ownership structure organizational chart. Explain the corporate structure and the manner in which all entities of the ownership structure relate to the applicant. As applicable, identify the members of the ownership entity and each member's percentage of ownership, for those members with 5% ownership (direct or indirect) interest.

RESPONSE: Please see Attachment 7A for a copy of the certificate of corporate existence and documentation of the active status of the applicant from the Tennessee Secretary of State website. Please also see Attachment 8A for a copy of Tennessee Valley Home Care, LLC's organizational chart, which shows the existing ownership structure and each entity's relationship to the applicant. Tennessee Valley Home Care, LLC does business as Tennessee Quality Care – Home Health, hereafter referred to throughout the application as TQC or TQC West. TQC is 100 percent owned by American Home Care, LLC, which is 100 percent owned by Addus HealthCare, Inc., which is 100 percent owned by Addus HomeCare Corporation.

8A. Name of Management/Operating Entity (If Applicable)

Name

Street or Route

County

City

State

Zip

Website Address

For new facilities or existing facilities without a current management agreement, attach a copy of a draft management agreement that at least includes the anticipated scope of management services to be provided, the anticipated term of the agreement, and the anticipated management fee payment schedule. For facilities with existing management agreements, attach a copy of the fully executed final contract. (Attachment 8A)

9A. Legal Interest in the Site

Check the appropriate box and submit the following documentation. (Attachment 9A)

The legal interest described below must be valid on the date of the Agency consideration of the Certificate of Need application.

- Ownership (Applicant or applicant’s parent company/owner) – Attach a copy of the title/deed.
 - Lease (Applicant or applicant’s parent company/owner) – Attach a fully executed lease that includes the terms of the lease and the actual lease expense.
 - Option to Purchase - Attach a fully executed Option that includes the anticipated purchase price.
 - Option to Lease - Attach a fully executed Option that includes the anticipated terms of the Option and anticipated lease expense.
 - Letter of Intent, or other document showing a commitment to lease the property - attach reference document
 - Other (Specify)
-

RESPONSE: Please see Attachment 9A for a copy of the fully executed lease and all applicable amendments. The lease covers TQC’s existing branch office location in Martin. Upon approval of the CON application, TQC’s new Martin parent office will occupy the same space as its current branch office.

10A. Floor Plan

If the facility has multiple floors, submit one page per floor. If more than one page is needed, label each page. (Attachment 10A)

- Patient care rooms (Private or Semi-private)
- Ancillary areas
- Other (Specify)

RESPONSE: Please see Attachment 10A for the floor plan of TQC’s proposed Martin parent office, which currently serves as the location for TQC’s existing Martin branch office.

11A. Public Transportation Route

Describe the relationship of the site to public transportation routes, if any, and to any highway or major road developments in the area. Describe the accessibility of the proposed site to patients/clients. (Attachment 11A)

RESPONSE: Not applicable. The proposed project involves providing home health services. As such, TQC will bring the service directly to the patient. Therefore, the home health service itself, not public transportation routes, will ensure accessibility for patients.

12A. **Plot Plan**

Unless relating to home care organization, briefly describe the following and attach the requested documentation on a letter size sheet of white paper, legibly labeling all requested information. It **must** include:

- Size of site (in acres);
- Location of structure on the site;
- Location of the proposed construction/renovation; and
- Names of streets, roads, or highways that cross or border the site.

(Attachment 12A)

RESPONSE: Not applicable. The proposed project involves a home care organization.

13A. **Notification Requirements**

- TCA §68-11-1607(c)(9)(B) states that “... If an application involves a healthcare facility in which a county or municipality is the lessor of the facility or real property on which it sits, then within ten (10) days of filing the application, the applicant shall notify the chief executive officer of the county or municipality of the filing, by certified mail, return receipt requested.” Failure to provide the notifications described above within the required statutory timeframe will result in the voiding of the CON application.
 - Notification Attached (Provide signed USPS green-certified mail receipt card for each official notified.)
 - Notification in process, attached at a later date
 - Notification not in process, contact HFC Staff
 - Not Applicable
- TCA §68-11-1607(c)(9)(A) states that “... Within ten (10) days of the filing of an application for a nonresidential substitution based treatment center for opiate addiction with the agency, the applicant shall send a notice to the county mayor of the county in which the facility is proposed to be located, the state representative and senator representing the house district and senate district in which the facility is proposed to be located, and to the mayor of the municipality, if the facility is proposed to be located within the corporate boundaries of the municipality, by certified mail, return receipt requested, informing such officials that an application for a nonresidential substitution based treatment center for opiate addiction has been filed with the agency by the applicant.
 - Notification Attached (Provide signed USPS green-certified mail receipt card for each official notified.)
 - Notification in process, attached at a later date
 - Notification not in process, contact HFC Staff
 - Not Applicable

EXECUTIVE SUMMARY

1E. Overview

Please provide an overview not to exceed **ONE PAGE** (for 1E only) in total explaining each item point below.

- Description: Address the establishment of a health care institution, initiation of health services, and/or bed complement changes.

RESPONSE:

The applicant, Tennessee Valley Home Care, LLC d/b/a Tennessee Quality Care – Home Health (TQC) is a licensed Tennessee homecare organization (HHA) (License No. 221) serving 51 counties across Tennessee. TQC has provided home health and private duty nursing services to Tennessee patients since 1984, recently extending its footprint beyond western and central Tennessee to more eastern parts of the state. In addition to its longtime experience statewide, in 2023, TQC became part of Addus HomeCare Corporation (Addus), a national leader in home health and related services operating in 22 states, including Tennessee. While this enhanced TQC’s capability to deliver its high quality services statewide, TQC currently only has a single parent office in Parsons (Decatur County) and 10 branch offices (see Attachment 1E-1). Thus, to better serve its patients in the 51-county service area and ensure its structure is more aligned with state licensure surveyor preferences, TQC is submitting two complementary and concurrent CON applications for the establishment of two additional parent offices in Lebanon (Wilson County) and Martin (Weakley County), where it currently operates two branch office. This application addresses the proposed Martin parent office (TQC West), which will serve a 13-county service area in the western Tennessee region; the other application addresses the proposed Lebanon parent office (TQC East), which will serve a 21-county service area in the eastern Tennessee region. Upon approval of the projects, these 34 counties will be removed from the licensed service area of TQC Parsons, leaving the Parsons parent office with a 17-county service area in the central Tennessee region. Thus, neither the TQC West nor TQC East projects will alter TQC’s existing 51-county service area. Rather, with three parent HHAs, TQC seeks to achieve more geographically balanced oversight of its current service area. This will improve operational efficiencies and allow TQC to further enhance the quality home health care it provides to patients, particularly those in underserved rural areas.

- Ownership structure

RESPONSE: TQC is 100 percent owned by American Home Care LLC, which is 100 percent owned by Addus HealthCare, Inc., which is 100 percent owned by Addus HomeCare Corporation.

- Service Area

RESPONSE: The service area includes the following 13 western Tennessee counties: Carroll, Crockett, Dyer, Fayette, Gibson, Haywood, Henry, Lake, Lauderdale, Obion, Shelby, Tipton, and Weakley. Lake County is CON-exempt.

- Existing similar service providers

RESPONSE: According to 2023 Joint Annual Reports (JARs), there are 48 HHAs licensed to provide home health services in the proposed service area, including TQC. For additional discussion of existing service area providers, see the response to Question 3C and Attachment 5N.

- Project Cost

RESPONSE: Project costs are approximately \$261,969. Of note, \$154,049 of these costs (approximately 60 percent) represent the estimated FMV for the property that TQC will lease. TQC has calculated costs per application instructions but notes that the lease covering the project is an existing lease. Thus, all costs reflected in Section 4E are not new to the proposed project. Please see Attachment 1E-2 for the FMV worksheet for the proposed project.

- Staffing

RESPONSE: Because TQC West is primarily an internal reorganization of existing operations, minimal staffing changes are necessary. TQC West will add 6.0 FTEs; see Question 8Q for additional information.

2E. Rationale for Approval

A Certificate of Need can only be granted when a project is necessary to provide needed health care in the area to be served, will provide health care that meets appropriate quality standards, and the effects attributed to competition or duplication would be positive for consumers

Provide a brief description not to exceed ONE PAGE (for 2E only) of how the project meets the criteria necessary for granting a CON using the data and information points provided in criteria sections that follow.

- Need

RESPONSE: The strong need for this project is clear as TQC has been delivering high quality home health services in this 13-county service area for nearly 40 years. TQC is pursuing its concurrent CON projects to establish parent offices in Martin and Lebanon to ensure, consistent with state surveyor feedback, it has centrally-located parent offices in each region of its service area to improve patient care and increase convenience for TQC staff and providers. TQC currently manages its 51-county statewide service area via one parent office (Parsons) and ten branch offices located across the state, including in Martin and Lebanon. TQC currently serves a significant volume of patients in the proposed service area, including 1,727 patients in 2022. TQC is particularly committed to delivering home health services to patients located in rural parts of the service area, patients over age 65, patients with a military history, and patients needing private duty nursing services. Maintaining adequate access for these patient populations can be administratively challenging; however, TQC has the resources and experience necessary to continue overseeing the entirety of the 51-county service area. With three parent offices each focused on serving a single region, it can more optimally meet the healthcare needs of its patients.

- Quality Standards

RESPONSE: The creation of two additional parent offices demonstrates TQC's commitment to quality and ongoing quality improvement. TQC Parsons is already fully accredited by The Joint Commission (TJC) and has earned its Gold Seal of Approval; TQC will seek TJC accreditation for its Martin parent office and ensure that it operates under the same quality standards as TQC Parsons, including Addus's robust quality-focused policies and procedures. With fewer administrative burdens, administrators and staff can focus more acutely on clinical operations and staff competency, which will improve the quality of care delivered to patients.

- Consumer Advantage

- Choice

RESPONSE: Because TQC is an existing licensed HHA in the service area, and because a significant number of patients and providers already rely on TQC for home health services, the proposed project is critical to maintaining patient choice. With greater operational flexibility, TQC will further enhance patient choice through targeted outreach to underserved and higher acuity patient populations, including those in rural areas, veterans, and certain pediatric patients. Patients will have more options for accessing the specialized care that meets their medical needs.

- Improved access/availability to health care service(s)

RESPONSE: TQC already offers service area patients critical access to home health services. Through a new Martin parent office, TQC can focus greater efforts and resources on furnishing targeted outreach and more coordinated care to service area patients. TQC is dedicated to providing home health services to higher acuity patients who experience more significant healthcare disparities and who often struggle to find home health care providers capable of meeting their healthcare needs.

- Affordability

RESPONSE: TQC's patient charges are, and will remain, comparable to other service area HHAs. Cumulatively, as outlined in 3C, the higher quality and more accessible home health services will decrease costs for patients and payors alike.

3E. Consent Calendar Justification

- Letter to Executive Director Requesting Consent Calendar (Attach Rationale that includes addressing the 3 criteria)
- Consent Calendar NOT Requested

If Consent Calendar is requested, please attach the rationale for an expedited review in terms of Need, Quality Standards, and Consumer Advantage as a written communication to the Agency's Executive Director at the time the application is filed.

4E. PROJECT COST CHART

A. Construction and equipment acquired by purchase:		
1. Architectural and Engineering Fees		
2. Legal, Administrative (Excluding CON Filing Fee), Consultant Fees		\$98,000
3. Acquisition of Site		
4. Preparation of Site		
5. Total Construction Costs		
6. Contingency Fund		\$3,000
7. Fixed Equipment (Not included in Construction Contract)		
8. Moveable Equipment (List all equipment over \$50,000 as separate attachments)		\$3,920
9. Other (Specify): _____		
B. Acquisition by gift, donation, or lease:		
1. Facility (inclusive of building and land)		\$154,049
2. Building only		
3. Land only		
4. Equipment (Specify): _____		
5. Other (Specify): _____		
C. Financing Costs and Fees:		
1. Interim Financing		
2. Underwriting Costs		
3. Reserve for One Year's Debt Service		
4. Other (Specify): _____		
D. Estimated Project Cost (A+B+C)		\$258,969
E. CON Filing Fee		\$3,000
F. Total Estimated Project Cost (D+E)	TOTAL	\$261,969

GENERAL CRITERIA FOR CERTIFICATE OF NEED

In accordance with TCA §68-11-1609(b), “no Certificate of Need shall be granted unless the action proposed in the application for such Certificate is necessary to provide needed health care in the area to be served, will provide health care that meets appropriate quality standards, and the effect attributed to completion or duplication would be positive for consumers.” In making determinations, the Agency uses as guidelines the goals, objectives, criteria, and standards adopted to guide the agency in issuing certificates of need. Until the agency adopts its own criteria and standards by rule, those in the state health plan apply.

Additional criteria for review are prescribed in Chapter 11 of the Agency Rules, Tennessee Rules and Regulations 01730-11.

The following questions are listed according to the three criteria: (1) Need, (2) the effects attributed to competition or duplication would be positive for consumers (Consumer Advantage), and (3) Quality Standards.

NEED

The responses to this section of the application will help determine whether the project will provide needed health care facilities or services in the area to be served.

- 1N.** Provide responses as an attachment to the applicable criteria and standards for the type of institution or service requested. A word version and pdf version for each reviewable type of institution or service are located at the following website. <https://www.tn.gov/hsda/hsda-criteria-and-standards.html> (Attachment 1N)

RESPONSE:

Please see Attachment 1N.

- 2N.** Identify the proposed service area and provide justification for its reasonable ness. Submit a county level map for the Tennessee portion and counties boarding the state of the service area using the supplemental map, clearly marked, and shaded to reflect the service area as it relates to meeting the requirements for CON criteria and standards that may apply to the project. Please include a discussion of the inclusion of counties in the border states, if applicable. (Attachment 2N)

RESPONSE:

Please see the map in Attachment 2N with the proposed service area counties shaded. The project does not involve counties in border states.

TQC is a licensed Tennessee HHA (License No. 221) serving 51 counties statewide. Currently, TQC has one parent office location in Parsons (Decatur County) and 10 branch offices in the following locations: Camden (Benton County), Clarksville (Montgomery County), Columbia (Maury County), Covington (Tipton County), Dover (Stewart County), Jackson (Madison County), Lebanon (Wilson County), Martin (Weakley County), Paris (Henry County), and Waynesboro (Wayne County). In order to better provide accessible care to its existing patient base, as well as ensure its operational structure is more aligned with state licensure surveyor preferences, the proposed TQC West project seeks to establish a new HHA parent office in Martin (Weakley County) to initiate home health services in the following 13 counties in the western Tennessee region: Carroll, Crockett, Dyer, Fayette, Gibson, Haywood, Henry, Lake, Lauderdale, Obion, Shelby, Tipton, and Weakley. Of note, Lake County is an economically distressed, CON-exempt county. TQC West will operate in the same location as TQC’s existing Martin branch office. The 13-county proposed service area is currently part of the licensed service area of TQC Parsons (License No. 221). Upon approval of the TQC West project, the 13-county service area will be removed from License No. 221.

Concurrently with and complementary to the TQC West project, TQC has also filed a TQC East project, which seeks to establish a new HHA parent office in Lebanon (Wilson County) to cover a proposed 21-county service area in the eastern region of Tennessee. This 21-county proposed service area is currently part of the licensed service area of TQC Parsons (License No. 221). Upon approval of the TQC East project, the 21-county service area will be removed from License No. 221.

Upon approval of both the TQC West and TQC East projects, TQC will have three parent HHA offices, each serving a regional subset of TQC's current 51-county statewide service area: (1) Lebanon (Wilson County), serving 21 counties in the eastern region of Tennessee; (2) Parsons (Decatur County), serving 17 counties in the central region of Tennessee; and (3) Martin (Weakley County), serving 13 counties in the western region of Tennessee. Thus, while TQC seeks to establish two new parent offices, it will ultimately continue to serve the same 51-county service area as the licensed TQC Parsons. See Attachment 1E-1 for a diagram of the trifurcation of TQC's existing service area through the TQC West and TQC East projects.

For reasons discussed herein, the proposed 13-county service area is reasonable. TQC Parsons has been licensed to serve patients in the proposed service area for nearly 40 years. During this time, it has relied upon its Martin and other proximately located branch offices to deliver home health services in the 13-county service area. TQC West will be located in the same location as TQC's current Martin branch office, and TQC will simply remove the 13-county western region from TQC Parsons License (No. 221). The project does not seek to add any counties outside of those that TQC is already licensed to serve. Ultimately, as a result of the reorganization efforts and the newly established Martin parent, TQC will provide more accessible and higher quality home health services to patients in the proposed 13-county service area, particularly those in more rural areas. For additional explanation of the proposed service area, see Attachment 1N.

Lastly, for the tables below, please note that historical utilization is taken from the 2023 JARs, which utilizes data from fiscal year 2022 associated with TQC Parsons (License No. 221). Projected utilization is provided for 2025, the first full calendar year following TQC West's anticipated July 2024 issuance of service date. Please also note that, while included in the tables below, Lake County is a CON-exempt, economically distressed county. For a detailed discussion of the methodology and assumptions used to provide the projected utilization below, see the response to Question 6N.

Complete the following utilization tables for each county in the service area, if applicable.

HISTORICAL UTILIZATION

Unit Type: <input type="checkbox"/> Procedures <input type="checkbox"/> Cases <input checked="" type="checkbox"/> Patients <input type="checkbox"/> Other _____		
Service Area Counties	Historical Utilization Most Recent Year (Year = 2022)	% of Total
Lauderdale	61	3.53%
Tipton	118	6.83%
Lake	22	1.27%
Carroll	140	8.11%
Crockett	21	1.22%
Dyer	41	2.37%
Fayette	49	2.84%
Henry	246	14.24%
Gibson	148	8.57%
Haywood	43	2.49%
Obion	124	7.18%
Shelby	469	27.16%
Weakley	245	14.19%
Total	1,727	100%

PROJECTED UTILIZATION

Unit Type: <input type="checkbox"/> Procedures <input type="checkbox"/> Cases <input checked="" type="checkbox"/> Patients <input type="checkbox"/> Other _____		
Service Area Counties	Projected Utilization Recent Year 1 (Year = 2025)	% of Total
Lauderdale	65	3.47%
Gibson	158	8.43%
Crockett	23	1.23%
Carroll	145	7.74%
Dyer	47	2.51%
Henry	253	13.50%
Fayette	54	2.88%
Haywood	45	2.40%
Obion	129	6.88%

Shelby	557	29.72%
Tipton	126	6.72%
Weakley	249	13.29%
Lake	23	1.23%
Total	1,874	100%

3N. A. Describe the demographics of the population to be served by the proposal.

RESPONSE:

Based on TQC’s historic utilization and research, TQC anticipates that the majority of its patient population will be those over age 65. This is in line with the overall trend in home health usage by age. For example, a 2019 survey by Statista found that over 80 percent of those receiving long-term care services from home health agencies were over the age of 65 (see Endnote 1). Similarly, in a study examining long-term care providers and users, the CDC concluded that, nationally, the majority of home health patients were, and are expected to continue to be, patients age 65 and older (see Endnote 2). In addition, the Alliance for Home Health Quality and Innovation estimates that 86.2 percent of home health patients are over the age of 65 (see Endnote 3). As such, and consistent with its experience in Tennessee, TQC has assumed the majority of TQC West’s patients will be persons over the age of 65.

Of note, and as explained further below in its response to Question 4N, TQC anticipates providing care to other demographics and populations through its proposed projects, including rural residents, armed forces residents, and private duty nursing patients. As such, the data presented in Attachment 3N.B likely understates the target population, both historical and projected, for TQC’s services. Consistent with its current experience, however, TQC believes that patients older than age 65 will represent the majority of its patients. Please see Questions 1N and 4N for a detailed description of the populations that TQC currently serves and will continue to serve, as well as Question 6N for a discussion of the methodology and assumptions used to project utilization through the second full year of TQC West.

B. Provide the following data for each county in the service area:

- Using current and projected population data from the Department of Health. (www.tn.gov/health/health-program-areas/statistics/health-data/population.html);
- the most recent enrollee data from the Division of TennCare (<https://www.tn.gov/tenncare/information-statistics/enrollment-data.html>),
- and US Census Bureau demographic information (<https://www.census.gov/quickfacts/fact/table/US/PST045219>).

RESPONSE:

Please see Attachment 3N.B. As detailed in the response to Question 3N.A above, the primary target population for the proposed project is those in the service area over the age of 65. TQC will also provide care to other target populations. These demographics are detailed further in Question 4N.

Please note that to calculate the Median Age, Median Household Income, and Person Below Poverty Level as % of Total of the proposed service area, a weighted average was calculated using county populations as listed on 2020 Census information (accessible via <https://data.census.gov/cedsci/>). This allowed for the consistent calculation of weights.

For the source data used to complete Attachment 3N.B, please see Attachment 3N-1 (for Tennessee Department of Health Population Data), Attachment 3N-2 (for U.S. Census Data), and Attachment 3N-3 (for the detailed TennCare Enrollment Report for January 2024, which is the most recent data available at the time this application was completed.)

- 4N. Describe the special needs of the service area population, including health disparities, the accessibility to consumers, particularly those who are uninsured or underinsured, the elderly, women, racial and ethnic minorities, TennCare or Medicaid recipients, and low income groups. Document how the business plans of the facility will take into consideration the special needs of the service area population.

RESPONSE:

As detailed above, TQC’s target population will primarily be patients age 65 and above. However, TQC’s patient population is and will continue to be comprised of those in rural areas, armed forces veterans, and those requiring private duty nursing care. Although TQC has successfully served these patients through its existing operation in Tennessee, by establishing a parent office in Martin, TQC will have greater flexibility and capacity to offer higher quality, patient-focused care to service area patients. The needs of each of these populations are discussed in further detail below, as well as in response to 1N above.

First, TQC West will primarily serve those over the age of 65. As explained in the response to Questions 1N and 3N.A, older patients have a greater overall need for health care services and, particularly, home health services. And, as shown in Attachment 3N.B, a particularly large portion of the proposed service area of TQC West is expected to be comprised of those over 65. In fact, by 2027, nine of the 13 proposed service area counties will have a higher percentage of persons age 65 and older than the state of Tennessee overall. Through its proposed Martin parent office, TQC can ensure aging patients have greater access to TQC’s comprehensive services and closer care management across a variety of care settings.

Second, a large portion of the population that TQC will serve in its proposed western region resides in rural areas. This is particularly noteworthy given the state of Tennessee’s overall rurality compared to the rest of the United States. According to the United States Census Bureau, “metropolitan statistical area[s] . . . have at least one urban area of 50,000 or more inhabitants,” while “micropolitan statistical area[s] . . . have at least one urban area of at least 10,000 but less than 50,000 population.” Any population below 10,000 residents is, therefore, classified as “rural.” (see Endnote 4) According to 2020 Census data, nearly 34 percent of Tennessee is considered rural, in contrast to 20 percent of the United States overall (see Endnote 5). Further, even those areas in Tennessee classified as “Census Urban Areas,” or those with populations between 10,000 and 50,000 residents, are relatively low in population. The 2020 U.S. Census noted that, of the 70 “Census Urban Areas” within Tennessee, 57, or 81 percent, had populations of fewer than 50,000 residents (see Endnote 6). Within TQC West’s proposed service area, only one (Memphis/Shelby County) of the 13 “Urban Areas” has more than 50,000 residents.

As explained in response to #1 in the attached Standards and Criteria, rural patient populations often have more difficulty accessing healthcare and an overall greater need for healthcare services; indeed, compared to patients in urban areas, rural patients are more likely to suffer from mental illness, chronic diseases, and, generally, worse health outcomes, which leads to elevated rates of morbidity and overall excess mortality (see Endnote 7). Residents in these areas also face multiple barriers to accessing vital medical care, including longer travel distances to healthcare providers, higher uninsured rates, and poorer health literacy (see Endnote 8). Importantly for this project, research also shows that rural areas are far less likely than urban areas to have adequate access to home health services. Findings from the Rural & Minority Health Research Center indicated that 10.3 percent of rural ZIP Code Tabulation Areas (ZCTAs) (see Endnote 9) lack any home health services, compared to only 2.2 percent of urban ZCTAs (see Endnote 10). These disparities are evident in the data supporting this application. Given these needs and the many rural counties in TQC West’s proposed service area, TQC believes that its parent office reorganization will allow it to more efficiently care for patients in these hard-to-reach rural areas.

Third, TQC is committed to providing home health services to patients who have served in the military, and to working closely with local Veterans Affairs (VA) clinics and hospitals to coordinate care for these patients. As discussed in #1 in the attached Standards and Criteria, compared to the average American population, veterans, and especially older veterans, are more likely to suffer from long-term, acute and chronic conditions requiring healthcare services, as well as negative health behaviors, like higher rates of smoking, that lead to poor health outcomes (see Endnote 11). In addition to chronic conditions, veterans also suffer from military service-related disabilities, like tinnitus, hearing loss, post-traumatic stress disorder, and various physical limitations of limbs (see Endnote 12).

Importantly for TQC’s proposed project, a higher proportion of veterans also live in rural areas. The Rural Health Information Hub notes that, of the 20 million veterans in the United States, approximately 4.4 million – 22 percent – live in rural areas (see Endnote 13). Comparatively, and as noted above, the U.S. Census estimates that only 20 percent of the overall United States population lives in rural areas (see Endnote 14). Again, this is important for TQC given that, on average, Tennessee is more rural than other states. The Tennessee Department of Veterans Services estimates that there are currently nearly 78,000 veterans living in the 13-county proposed service area. These figures are detailed in Attachment 4N.

Many of these patients would benefit from TQC West or already benefit from TQC's home health services. In fact, TQC currently partners with the VA Medical Center in Memphis to provide critical follow-up home health services for veterans in the greater Memphis area who comprise the largest portion of TQC's patient population in the western region. The establishment of a parent office in Martin, therefore, will allow TQC to strengthen and further develop relationships with VA clinics and hospitals in the service area to ensure these patients have access to home health services tailored to meet their unique needs. Ultimately, TQC West will facilitate greater access to high quality home health services for veterans.

Lastly, TQC, particularly through its existing Martin branch office, provides private duty nursing care to pediatric and adult patients whose complex medical needs require one-on-one skilled nursing and supportive care. For example, TQC has the nursing staff necessary to enable certain high needs pediatric patients to attend school under the supervision of a TQC nurse. The patient populations discussed above are also more susceptible to health conditions that qualify for private duty nursing care and are more likely to face difficulties in accessing the specialized care needed to manage their conditions. Through the TQC West and TQC East projects, TQC will be better positioned to allocate resources to these medically vulnerable private duty patients.

The patient groups described above, therefore, will all be served through TQC's proposed project. While TQC serves these groups today, it believes it will be able to serve them even more effectively through the establishment of an additional parent office in Martin. See the attached Standards and Criteria for further detail, as well as TQC's response to Question 6N below for a projection of its utilization through the second full year of the proposed project.

- 5N.** Describe the existing and approved but unimplemented services of similar healthcare providers in the service area. Include utilization and/or occupancy trends for each of the most recent three years of data available for this type of project. List each provider and its utilization and/or occupancy individually. Inpatient bed projects must include the following data: Admissions or discharges, patient days. Average length of stay, and occupancy. Other projects should use the most appropriate measures, e.g. cases, procedures, visits, admissions, etc. This does not apply to projects that are solely relocating a service.

RESPONSE:

The following Tennessee CON project to implement the home health services in the proposed service area as proposed in TQC's application is approved but unimplemented:

- CN 2309-023: 901 Home Health Care, LLC, for the establishment of a home health care organization and the initiation of home health services. The service area for the approved project will consist of Shelby, Fayette, and Tipton counties.

Please see Attachment 1N for further discussion of the need for the proposed project. For information on existing licensed HHAs in the service area, see Attachment 5N.

- 6N.** Provide applicable utilization and/or occupancy statistics for your institution services for each of the past three years and the project annual utilization for each of the two years following completion of the project. Additionally, provide the details regarding the methodology used to project utilization. The methodology must include detailed calculations or documentation from referral sources, and identification of all assumptions.

RESPONSE:

The historical and projected utilization statistics for TQC West, as well as a description of the methodology and assumptions used for those projections, are detailed below. While TQC has provided projected utilization for its TQC West project, it would again note that this project ultimately only seeks to remove the proposed 13 service area counties from the existing 51-county service area of its licensed Parsons parent (License No. 221) and add them to the service area of the newly established Martin parent office. Therefore, the new TQC West parent office intends to serve the same patient population that TQC Parsons has been licensed to serve since 1984.

Throughout this section, some table figures may not equate due to computer rounding.

Historical Utilization

In order to project its utilization through calendar year 2026 – the second full calendar year after the proposed TQC West’s anticipated July 2024 issuance of service date – TQC utilized its home health patient data from the JARs for the past three years for its licensed Parsons parent (License No. 221). The most recent JAR data available is for the year 2022. As such, the historical utilization shown below is for the years 2020-2022, using the JARs from 2021-2023, respectively.

TQC’s historical home health patient data for the 13 counties in TQC West’s proposed service area is shown in Table 6N-1, below.

Table 6N-1: Historical Home Health Utilization: TQC West Counties 2020-2022

<i>County</i>	2020	2021	2022	CAGR*
Carroll	124	167	140	6.3%
Crockett	0	11	21	
Dyer	0	10	41	
Fayette	50	67	49	-1.0%
Gibson	113	166	148	14.4%
Haywood	14	32	43	75.3%
Henry	265	289	246	-3.7%
Lauderdale	34	64	61	33.9%
Obion	105	113	124	8.7%
Shelby	167	506	469	67.6%
Tipton	52	114	118	50.6%
Weakley	204	316	245	9.6%
Total for CON-Reviewable Counties	1,128	1,855	1,705	22.9%
Lake County (CON-Exempt)	0	10	22	
Grand Total	1,128	1,865	1,727	23.7%

Source: Tennessee Department of Health, Joint Annual Reports (JARs), 2021-2023, <https://apps.health.tn.gov/publicjars/default.aspx>.
 * Compound annual growth rate.

From 2020-2022, TQC experienced an overall growth of patients in the proposed 13-county service area, and a majority of counties saw significant increases in the total number of patients over that time period. Total patients served grew at a compound annual growth rate (CAGR) of 23.7 percent.

Projected Utilization

As noted in the “Projected Completion Forecast Chart,” TQC West’s projected issuance of service date for the proposed project is July 2024. As such, the first two full calendar years for the proposed project are 2025 and 2026. Therefore, TQC’s utilization projections for TQC West extend through 2026, accounting for two full years of service.

Using the Tennessee Department of Health’s official population projections, Table 6N-2 shows the projected population CAGR for each of the 13 proposed service area counties from 2022 to 2024.

**Table 6N-2: Projected Population Growth: TQC West Counties
2022-2024**

<i>County</i>	<i>2022</i>	<i>2024</i>	<i>CAGR</i>
Carroll	27,767	27,602	-0.3%
Crockett	14,300	14,269	-0.1%
Dyer	37,465	37,505	0.1%
Fayette	42,567	43,500	1.1%
Gibson	49,445	49,606	0.2%
Haywood	16,899	16,681	-0.6%
Henry	32,644	32,734	0.1%
Lauderdale	25,815	25,783	-0.1%
Obion	29,967	29,782	-0.3%
Shelby	944,036	947,551	0.2%
Tipton	62,919	63,496	0.5%
Weakley	33,169	33,087	-0.1%
Total for CON-Reviewable Counties	1,316,993	1,321,596	0.2%
Lake County (CON-Exempt)	7,321	7,280	-0.3%
Grand Total	1,324,314	1,328,876	0.2%

Source (Population growth rate): Tennessee Department of Health, "General Health Data: Population." See Attachment 6N-2.

TQC believes that an appropriate and conservative first step in projecting future utilization is to grow its 2022 utilization data as reported in the 2023 JARs at the projected population CAGRs for 2022 to 2024 for each county in its proposed service area through 2026, the second full year of TQC West’s operation. This projected growth is shown in Table 6N-3, below. TQC has chosen to use the 2022 to 2024 CAGR to project potential home health service utilization up to July 2024, TQC West’s expected issuance of service date. TQC believes the use of this growth rate is reasonable because, at minimum, it is consistent with the historical growth in utilization that TQC has experienced in the proposed service area. See Attachment 6N for the detailed Tennessee Department of Health data used to estimate the above growth rates.

**Table 6N-3: Projected Home Health Utilization: TQC West Counties
(Based on Population Growth Only)
2022-2026**

<i>County</i>	2022	2023	2024	2025	2026	CAGR
Carroll	140	140	139	139	138	-0.3%
Crockett	21	21	21	21	21	-0.1%
Dyer	41	41	41	41	41	0.1%
Fayette	49	50	50	51	51	1.1%
Gibson	148	148	148	149	149	0.2%
Haywood	43	43	42	42	42	-0.6%
Henry	246	246	247	247	247	0.1%
Lauderdale	61	61	61	61	61	-0.1%
Obion	124	124	123	123	122	-0.3%
Shelby	469	470	471	472	472	0.2%
Tipton	118	119	119	120	120	0.5%
Weakley	245	245	244	244	244	-0.1%
Total for CON-Reviewable Counties	1,705	1,706	1,707	1,708	1,710	1,705
Lake County (CON-Exempt)	22	22	22	22	22	-0.3%
Grand Total	1,727	1,728	1,729	1,730	1,731	0.1%

Source (2022 data): Tennessee Department of Health, Joint Annual Reports (JARs), 2023, at <https://apps.health.tn.gov/publicjars/default.aspx>.

Source (Population growth rate): Tennessee Department of Health, "General Health Data: Population." See Attachment 6N-2.

As noted in its response to Question 3N above, the majority of patients who use home health services are over the age of 65. Nonetheless, TQC has opted to use the total population CAGR to estimate utilization through 2026 rather than the 2022 to 2024 CAGR of persons age 65 and older, which, as shown in Table 6N-4, is *significantly* higher than total population growth in all 13 counties. Because TQC has selected the lower of these two growth rates, TQC is confident that its baseline utilization projections are reasonable and appropriately conservative.

**Table 6N-4: Projected 65+ Population Growth: TQC West Counties
2022-2024**

<i>County</i>	<i>2022</i>	<i>2024</i>	<i>CAGR, 65+</i>	<i>CAGR, Total Population*</i>
Carroll	6,094	6,259	1.3%	-0.3%
Crockett	2,926	3,027	1.7%	-0.1%
Dyer	7,151	7,392	1.7%	0.1%
Fayette	10,177	10,868	3.3%	1.1%
Gibson	9,575	9,879	1.6%	0.2%
Haywood	3,647	3,779	1.8%	-0.6%
Henry	8,207	8,501	1.8%	0.1%
Lauderdale	4,458	4,597	1.5%	-0.1%
Obion	6,675	6,838	1.2%	-0.3%
Shelby	142,579	148,831	2.2%	0.2%
Tipton	10,275	10,899	3.0%	0.5%
Weakley	6,754	6,970	1.6%	-0.1%
Total for CON-Reviewable Counties	218,518	227,840	2.1%	0.2%
Lake County (CON-Exempt)	1,204	1,211	0.3%	-0.6%
Grand Total	219,722	229,051	2.1%	0.2%

Source (Population growth rate): Tennessee Department of Health, "General Health Data: Population." See Attachment 6N.

*As shown in Table 6N-2.

To project the total home health utilization for each of the 13 proposed service area counties from 2023-2026, TQC analyzed the total number of home health patients served in each county by all licensed home health providers in 2022, as reported in the 2023 JARs. Then, it grew the total patients served in 2022 by the projected 2022-2024 total population CAGR (see Table 6N-2 above). Again, given that most home health patients are over the age of 65, and given that the projected population growth rate for those over the age of 65 is higher than the total projected population growth rate for all 13 counties in the proposed service area, TQC believes this projection of the total home health market volume through 2026 is both reasonable and conservative. Please also note that, as detailed in its responses to Question 3N.A and Question 4N above, TQC will treat other categories of patients. However, TQC believes that its use of the total population growth rate of each proposed service area county likely undercounts the possible patients it will serve, thereby making its projections conservative. This service area's projected total home health market volume is shown in Table 6N-5 below.

**Table 6N-5R: Projected Market Home Health Utilization: TQC West Counties
2022-2026**

County	2022	2023	2024	2025	2026	CAGR
Carroll	1,168	1,165	1,161	1,158	1,154	-0.3%
Crockett	393	393	392	392	391	-0.1%
Dyer	1,237	1,238	1,238	1,239	1,240	0.1%
Fayette	623	630	637	644	651	1.1%
Gibson	1,809	1,812	1,815	1,818	1,821	0.2%
Haywood	479	476	473	470	467	-0.6%
Henry	1,192	1,194	1,195	1,197	1,199	0.1%
Lauderdale	769	769	768	768	767	-0.1%
Obion	1,160	1,156	1,153	1,149	1,146	-0.3%
Shelby	16,970	17,002	17,033	17,065	17,097	0.2%
Tipton	1,330	1,336	1,342	1,348	1,355	0.5%
Weakley	1,042	1,041	1,039	1,038	1,037	-0.1%
Total for CON-Reviewable Counties	28,172	28,209	28,247	28,285	28,323	0.1%
Lake County (CON-Exempt)	268	267	266	266	265	-0.3%
Grand Total	28,440	28,477	28,513	28,550	28,588	0.1%

Source (2022 data): Tennessee Department of Health, Joint Annual Reports (JARs), 2023, at <https://apps.health.tn.gov/publicjars/default.aspx>.

Source (Population growth rate): Tennessee Department of Health, "General Health Data: Population." See Attachment 6N-2.

TQC then projects that, starting in 2025, it will gain 0.5 percent of the projected growth in home health utilization in the proposed service area. Cumulatively, this would result in the addition of 143 home health patients in both 2025 and 2026. This increase is shown in Table 6N-6, below.

**Table 6N-6R: Projected Home Health Market Share Growth: TQC West
2025-2026**

<i>County</i>	<i>Total Home Health Utilization, 2025</i>	<i>Total Home Health Utilization, 2026</i>	<i>Projected Market Share Growth Rate</i>	<i>TQC Patients via Market Share Growth, 2025*</i>	<i>TQC Patients via Market Share Growth, 2026*</i>
Carroll	1,158	1,154	0.5%	6	6
Crockett	392	391	0.5%	2	2
Dyer	1,239	1,240	0.5%	6	6
Fayette	644	651	0.5%	3	3
Gibson	1,818	1,821	0.5%	9	9
Haywood	470	467	0.5%	2	2
Henry	1,197	1,199	0.5%	6	6
Lauderdale	768	767	0.5%	4	4
Obion	1,149	1,146	0.5%	6	6
Shelby	17,065	17,097	0.5%	85	85
Tipton	1,348	1,355	0.5%	7	7
Weakley	1,038	1,037	0.5%	5	5
Total for CON-Reviewable Counties	28,285	28,323	0.5%	142	142
Lake County (CON-Exempt)	266	265	0.5%	1	1
Grand Total	28,550	28,588	0.5%	143	143

* TQC Patients via Market Share Growth = Projected Market Share Growth Rate \times Total Home Health Utilization

TQC believes the use of 0.5 percent as a market share growth rate is particularly conservative. As discussed in detail in Question 3C, based on 2023 JAR data, TQC’s existing licensed HHA (License No. 221) accounted for approximately six percent of all home health visits in the proposed service area in 2022. Further, by adding two parent offices via both the TQC West and TQC East projects, TQC will be able to operate more efficiently in each of its three regions, including expanding its ability to perform more targeted community outreach with existing patients and healthcare providers. Thus, TQC believes that the establishment of a Martin parent office will result in improved accessibility that will result in a very modest increase in total home health patients in 2025 and 2026.

Applying the 0.5 percent estimate to the growth in service area home health utilization in 2025 and 2026, Table 6N-7 below shows TQC’s projected home health patients for 2025 and 2026. As noted above, some figures in the table below may not equate due to computer rounding.

**Table 6N-7R: Projected Home Health Market Growth: TQC West Counties
With Market Share Growth
2025-2026**

<i>County</i>	<i>Home Health Patients with Population Growth, 2025</i>	<i>Additional TQC Patients with Market Share Growth, 2025</i>	<i>Home Health Patients with Population Growth 2026</i>	<i>Additional TQC Patients with Market Share Growth, 2026</i>	<i>TQC Home Health Patients, 2025</i>	<i>TQC Home Health Patients, 2026</i>
Carroll	139	6	138	6	145	150
Crockett	21	2	21	2	23	25
Dyer	41	6	41	6	47	53
Fayette	51	3	51	3	54	58
Gibson	149	9	149	9	158	167
Haywood	42	2	42	2	45	47
Henry	247	6	247	6	253	259
Lauderdale	61	4	61	4	65	69
Obion	123	6	122	6	129	134
Shelby	472	85	472	85	557	643
Tipton	120	7	120	7	126	134
Weakley	244	5	244	5	249	254
Total for CON-Reviewable Counties	1,708	142	1,710	142	1,873	2,017
Lake County (CON-	22	1	22	1	23	24
Grand Total	1,730	143	1,731	143	1,874	2,017

Based on these projections, the final total home health patient population for TQC West from 2022 to 2026, the proposed project's second full calendar year of service, is shown in Table 6N-8, below. It is replicated in Attachment 6N.

**Table 6N-8R: Projected Home Health Utilization: TQC Western Region Counties
2022-2026**

<i>County</i>	2022	2023	2024	2025	2026
Carroll	140	140	139	145	150
Crockett	21	21	21	23	25
Dyer	41	41	41	47	53
Fayette	49	50	50	54	58
Gibson	148	148	148	158	167
Haywood	43	43	42	45	47
Henry	246	246	247	253	259
Lauderdale	61	61	61	65	69
Obion	124	124	123	129	134
Shelby	469	470	471	557	643
Tipton	118	119	119	126	134
Weakley	245	245	244	249	254
Total for CON- Reviewable Counties	1,705	1,706	1,707	1,850	1,993
Lake County (CON-Exempt)	22	22	22	23	24
Grand Total	1,727	1,728	1,729	1,874	2,017

Source (2022 data): Tennessee Department of Health, Joint Annual Reports (JARs), 2023, at <https://apps.health.tn.gov/publicjars/default.aspx>.

7N. Complete the chart below by entering information for each applicable outstanding CON by applicant or share common ownership; and describe the current progress and status of each applicable outstanding CON and how the project relates to the applicant, and the percentage of ownership that is shared with the applicant's owners.

RESPONSE:

Not applicable. Neither the applicant nor an entity with which it shares common ownership has an outstanding CON in Tennessee.

CONSUMER ADVANTAGE ATTRIBUTED TO COMPETITION

The responses to this section of the application helps determine whether the effects attributed to competition or duplication would be positive for consumers within the service area.

1C. List all transfer agreements relevant to the proposed project.

RESPONSE: Not applicable. TQC does not have any formal transfer agreements in place with existing facilities. However, because TQC has operated a licensed HHA in the service area for nearly 40 years, it has established relationships with physicians and other healthcare providers in the proposed 13-county service area. Please see Attachment 1N-7 for a detailed list of healthcare institutions with which TQC works in collaboration.

2C. List all commercial private insurance plans contracted or plan to be contracted by the applicant.

- Aetna Health Insurance Company
- Ambetter of Tennessee Ambetter
- Blue Cross Blue Shield of Tennessee
- Blue Cross Blue Shield of Tennessee Network S
- Blue Cross Blue Shiled of Tennessee Network P
- BlueAdvantage
- Bright HealthCare
- Cigna PPO
- Cigna Local Plus
- Cigna HMO - Nashville Network
- Cigna HMO - Tennessee Select
- Cigna HMO - Nashville HMO
- Cigna HMO - Tennessee POS
- Cigna HMO - Tennessee Network
- Golden Rule Insurance Company
- HealthSpring Life and Health Insurance Company, Inc.
- Humana Health Plan, Inc.
- Humana Insurance Company
- John Hancock Life & Health Insurance Company
- Omaha Health Insurance Company
- Omaha Supplemental Insurance Company
- State Farm Health Insurance Company
- United Healthcare UHC

- UnitedHealthcare Community Plan East Tennessee
- UnitedHealthcare Community Plan Middle Tennessee
- UnitedHealthcare Community Plan West Tennessee
- WellCare Health Insurance of Tennessee, Inc.
- Others

RESPONSE: Please see Attachment 2C for a list of commercial payors with which TQC currently contracts, which includes some of the above. TQC may contract with additional private insurance plans in the future.

- 3C. Describe the effects of competition and/or duplication of the proposal on the health care system, including the impact upon consumer charges and consumer choice of services.

RESPONSE:

The proposed project will not have a negative effect on competition and will not result in duplication. As noted in Attachment 5N, out of the 28,440 home health patients reported in 2023 JARs for the 13-county proposed service area, TQC’s licensed Parsons parent (License No. 221) is one of 48 providers and accounts for 1,727 of those visits, or approximately six percent ($1,727 \div 28,440 = 0.06 = 6$ percent). Further, among the 48 HHAs in the proposed service area in 2022 listed in Attachment 5N, only one accounted for more than 10 percent of service area HHA utilization: Functional Independence Home Care, Inc., which provided 3,030 home health visits in 2022, or 10.7 percent of all home health utilization in the 13-county service area ($3,030 \div 28,440 = .107 = 10.7$ percent). In other words, no single provider in the proposed service area controls a majority of the utilization of home health services, including TQC. Approval of TQC West will have no impact on this plurality of providers, as TQC projects its service area market share will remain approximately seven percent of visits. Patients in the proposed service area have a wide range of home health providers from which they can receive care; TQC will not affect that wide range of patient choice.

Additionally, and as mentioned throughout the application, TQC West does not propose to initiate services in any counties that TQC Parsons is not already licensed to serve. Rather, the 13-county proposed service area will be removed from TQC Parsons’s license (No. 221) upon approval of TQC West. The same is true for TQC’s complimentary TQC East project, which will remove a 21-county region in eastern Tennessee from TQC Parsons’s license. Cumulatively, these changes have no impact on existing home health providers in either of the proposed service areas; rather, they will benefit TQC’s existing patients. With more localized administrative oversight, each of TQC’s parent agencies can offer its patients, especially those in underserved rural areas, greater access to more specialized and higher quality home health services.

Because TQC West and TQC East are primarily internal reorganization projects, they will not alter the competitive landscape of home health services in their respective proposed service areas or in any way duplicate home health services in their respective proposed service areas. With respect to the impact of TQC West on consumer charges, both TQC West and TQC East will decrease overall healthcare costs for patients and payors alike. By serving a narrower service area, TQC West can provide more timely treatment to patients, such as admitting all new referrals within 24 hours. Long-term, this reduces the risks and costs of re-hospitalization or treatment in higher acuity settings. Similarly, as part of Addus, TQC patients can draw upon a continuum of healthcare services, permitting improved care management and decreasing the costs associated with negative health outcomes. Moreover, because this project is an internal reorganization, it can be implemented with limited to no additional costs.

- 4C. Discuss the availability of and accessibility to human resources required by the proposal, including clinical leadership and adequate professional staff, as per the State of Tennessee licensing requirements, CMS, and/or accrediting agencies requirements, such as the Joint Commission and Commission on Accreditation of Rehabilitation Facilities.

RESPONSE:

As a well-established HHA operating in Tennessee and as part of Addus’s national network, TQC West has both the existing human resources necessary to implement the project, as well as ready access to other qualified staff. For more details on TQC’s staffing and positions, please see its response to Question 8Q, below. Attachment 4C contains the job descriptions for all positions that will be staffed at TQC West.

As discussed in response to #6 in the attached Standards and Criteria, TQC maintains internal standards and policies that facilitate the development and training of its staff. Many of these quality-focused policies can be found in Attachment

5C. At baseline, TQC’s comprehensive “Licensure/Certification/Registration” policy requires that “all organization staff [are] properly licensed, certified, registered and/or trained to meet specific job requirements.” TQC strongly adheres to Joint Commission accreditation standards as evidenced by its current licensed and accredited status and its receipt of TJC’s Gold Seal of Approval, recognizing TQC’s commitment to continuous improvement and delivery of safe, high quality care (see Endnote 15). Please see Attachment 3Q for proof of TQC’s TJC accreditation.

Drawing upon Addus’s quality improvement initiatives and oversight, TQC has rigorous procedures and processes in place for the training and ongoing education of its clinical and administrative staff. For example, TQC has numerous policies, such as its “Home Health Aide Training” policy, that ensure staff are properly educated on their roles. Additionally, TQC adheres to a “Staffing and Scheduling” policy and an “On-Call/Weekend Staffing” policy to denote procedures for the scheduling of available staff and the possible on-call responsibilities for those staff. TQC also follows numerous guidelines addressing management, administration, processes for hiring, and overall organizational improvement and development as noted in detail in its “Supervision,” “Competency Assessment,” “Recruitment, Retention, Development, and Continuing Education” policies, as well as its “Improving Organization Performance” policy.

By distributing administrative responsibilities across three parent offices, each with an Executive Director, TQC will strengthen its performance improvement framework across all three regions. Ultimately, these efforts will improve and maintain the quality and safety of care delivered to patients.

-
- 5C. Document the category of license/certification that is applicable to the project and why. These include, without limitation, regulations concerning clinical leadership, physician supervision, quality assurance policies and programs, utilization review policies and programs, record keeping, clinical staffing requirements, and staff education.

RESPONSE:

Upon approval of the proposed project, TQC will seek licensure from the Tennessee Health Facilities Commission, Board for Licensing Health Care Facilities as a home care organization providing home health services in the proposed 13-county service area. After TQC receives its license, these 13 counties will be removed from the 51-county service area of TQC Parsons (License No. 221). As a longstanding home health provider in Tennessee and as part of Addus, TQC operates under rigorous policies and programs to ensure the quality of its home health services.

Please see Attachment 3Q for documentation of TQC’s licensure, and Attachment 5C for examples of the policies that TQC West will implement. These policies are described in TQC’s response to Question 4C above as well as its response to #6 in the attached Standards and Criteria.

HISTORICAL DATA CHART

- Total Facility
 Project Only

Give information for the last *three (3)* years for which complete data are available for the facility or agency.

	Year 1	Year 2	Year 3
	2020	2021	2022
A. Utilization Data			
Specify Unit of Measure <u>Patients</u>	1128	1865	1727
B. Revenue from Services to Patients			
1. Inpatient Services	\$0.00	\$0.00	\$0.00
2. Outpatient Services	\$4,853,726.00	\$9,518,060.00	\$11,147,698.00
3. Emergency Services	\$0.00	\$0.00	\$0.00
4. Other Operating Revenue (Specify) _____	\$0.00	\$0.00	\$0.00
Gross Operating Revenue	\$4,853,726.00	\$9,518,060.00	\$11,147,698.00
C. Deductions from Gross Operating Revenue			
1. Contractual Adjustments	\$836,237.00	\$1,639,844.00	\$1,920,610.00
2. Provision for Charity Care	\$0.00	\$0.00	\$0.00
3. Provisions for Bad Debt	\$6,622.00	\$12,986.00	\$15,210.00
Total Deductions	\$842,859.00	\$1,652,830.00	\$1,935,820.00
NET OPERATING REVENUE	\$4,010,867.00	\$7,865,230.00	\$9,211,878.00

PROJECTED DATA CHART

- Project Only
 Total Facility

Give information for the *two (2)* years following the completion of this proposal.

	Year 1	Year 2
	2025	2026
A. Utilization Data		
Specify Unit of Measure <u>Patients</u>	1874	2017
B. Revenue from Services to Patients		
1. Inpatient Services	\$0.00	\$0.00
2. Outpatient Services	\$12,089,678.00	\$13,019,380.00
3. Emergency Services	\$0.00	\$0.00
4. Other Operating Revenue (Specify) _____	\$0.00	\$0.00
Gross Operating Revenue	\$12,089,678.00	\$13,019,380.00
C. Deductions from Gross Operating Revenue		
1. Contractual Adjustments	\$2,082,902.00	\$2,243,078.00
2. Provision for Charity Care	\$0.00	\$0.00
3. Provisions for Bad Debt	\$16,495.00	\$17,764.00
Total Deductions	\$2,099,397.00	\$2,260,842.00

NET OPERATING REVENUE

\$9,990,281.00

\$10,758,538.00

PROJECTED DATA CHART

- Total Facility
 Project Only

Give information for the *two (2)* years following the completion of this proposal.

	Year 1	Year 2
	<u>2025</u>	<u>2026</u>
A. Utilization Data		
Specify Unit of Measure <u>Patients</u>	<u>1874</u>	<u>2017</u>
B. Revenue from Services to Patients		
1. Inpatient Services	<u>\$0.00</u>	<u>\$0.00</u>
2. Outpatient Services	<u>\$12,089,678.00</u>	<u>\$13,019,380.00</u>
3. Emergency Services	<u>\$0.00</u>	<u>\$0.00</u>
4. Other Operating Revenue (Specify) _____	<u>\$0.00</u>	<u>\$0.00</u>
	Gross Operating Revenue	
	<u>\$12,089,678.00</u>	<u>\$13,019,380.00</u>
C. Deductions from Gross Operating Revenue		
1. Contractual Adjustments	<u>\$2,082,902.00</u>	<u>\$2,243,078.00</u>
2. Provision for Charity Care	<u>\$0.00</u>	<u>\$0.00</u>
3. Provisions for Bad Debt	<u>\$16,495.00</u>	<u>\$17,764.00</u>
	Total Deductions	
	<u>\$2,099,397.00</u>	<u>\$2,260,842.00</u>
NET OPERATING REVENUE	<u>\$9,990,281.00</u>	<u>\$10,758,538.00</u>

7C. Please identify the project’s average gross charge, average deduction from operating revenue, and average net charge using information from the Historical and Projected Data Charts of the proposed project.

Project Only Chart

	Previous Year to Most Recent Year	Most Recent Year	Year One	Year Two	% Change (Current Year to Year 2)
Gross Charge (<i>Gross Operating Revenue/Utilization Data</i>)	\$0.00	\$0.00	\$6,451.27	\$6,454.82	0.00
Deduction from Revenue (<i>Total Deductions/Utilization Data</i>)	\$0.00	\$0.00	\$1,120.28	\$1,120.89	0.00
Average Net Charge (<i>Net Operating Revenue/Utilization Data</i>)	\$0.00	\$0.00	\$5,330.99	\$5,333.93	0.00

8C. Provide the proposed charges for the project and discuss any adjustment to current charges that will result from the implementation of the proposal. Additionally, describe the anticipated revenue from the project and the impact on existing patient charges.

RESPONSE:

TQC does not anticipate any adjustments to its current charges due to the implementation of its proposed project.

9C. Compare the proposed project charges to those of similar facilities/services in the service area/adjoining services areas, or to proposed charges of recently approved Certificates of Need.

If applicable, compare the proposed charges of the project to the current Medicare allowable fee schedule by common procedure terminology (CPT) code(s).

RESPONSE:

Please see Attachment 8C, which lists the charge per visit from 2023 JARs for HHAs in the proposed service area. The charges are segmented by each type of home health service listed on TQC’s HHA license, which is available in Attachment 5C-1. While the charge per visit for each service TQC offers is slightly higher than the average charge per visit across providers in the service area, it should be noted that, compared to TQC, multiple service area providers did not report either some or all charges per visit to the Tennessee Department of Health. Thus, the average charge per visit for some service area providers may be underestimated. For example, 20 out of the 48 licensed providers listed did not report charges for home health aide services; further, 21 out of the 48 providers listed did not report charges for Medical Social Services. Importantly, TQC is focused on delivering patient-centered, comprehensive care that is both cost-effective and high quality.

10C. Report the estimated gross operating revenue dollar amount and percentage of project gross operating revenue anticipated by payor classification for the first and second year of the project by completing the table below.

If applicable, compare the proposed charges of the project to the current Medicare allowable fee schedule by common procedure terminology (CPT) code(s).

**Applicant’s Projected Payor Mix
Project Only Chart**

Payor Source	Year-2025		Year-2026	
	Gross Operating Revenue	% of Total	Gross Operating Revenue	% of Total
Medicare/Medicare Managed Care	\$7,899,068.00	65.34	\$8,506,509.00	65.34
TennCare/Medicaid	\$3,173,245.00	26.25	\$3,417,269.00	26.25
Commercial/Other Managed Care	\$602,745.00	4.99	\$649,097.00	4.99
Self-Pay	\$18,514.00	0.15	\$19,938.00	0.15
Other(Specify)	\$396,106.00	3.28	\$426,567.00	3.28
Total	\$12,089,678.00	100%	\$13,019,380.00	100%
Charity Care	\$0.00		\$0.00	

**Needs to match Gross Operating Revenue Year One and Year Two on Projected Data Chart*

Discuss the project’s participation in state and federal revenue programs, including a description of the extent to which Medicare, TennCare/Medicaid, and medically indigent patients will be served by the project.

RESPONSE: Like TQC’s existing licensed Parsons parent office, TQC West will serve Medicare, TennCare/Medicaid, and medically indigent patients and will pursue all necessary certifications for doing so. TQC is committed to caring for patients in need of home health services regardless of their ability to pay. TQC is committed to caring for patients in need of home health services regardless of their ability to pay and, like Addus, is willing to dedicate a portion of its total revenue to furnish charity care to patients as needed.

QUALITY STANDARDS

1Q. Per PC 1043, Acts of 2016, any receiving a CON after July 1, 2016, must report annually using forms prescribed by the Agency concerning appropriate quality measures. Please attest that the applicant will submit an annual Quality Measure report when due.

- Yes
- No

2Q. The proposal shall provide health care that meets appropriate quality standards. Please address each of the following questions.

- Does the applicant commit to maintaining the staffing comparable to the staffing chart presented in its CON application?
 - Yes
 - No

- Does the applicant commit to obtaining and maintaining all applicable state licenses in good 3standing?
 - Yes
 - No

- Does the applicant commit to obtaining and maintaining TennCare and Medicare certification(s), if participation in such programs are indicated in the application?
 - Yes
 - No

3Q. Please complete the chart below on accreditation, certification, and licensure plans. Note: if the applicant does not plan to participate in these type of assessments, explain why since quality healthcare must be demonstrated.

Credential	Agency	Status (Active or Will Apply)	Provider Number or Certification Type
Licensure	<input checked="" type="checkbox"/> Health Facilities Commission/Licensure Division <input type="checkbox"/> Intellectual & Developmental Disabilities <input type="checkbox"/> Mental Health & Substance Abuse Services	Will Apply	Not applicable.
Certification	<input checked="" type="checkbox"/> Medicare <input checked="" type="checkbox"/> TennCare/Medicaid <input type="checkbox"/> Other _____	Will Apply Will Apply	Not applicable. Not applicable.
Accreditation(s)	TJC - The Joint Commission	Will Apply	Not applicable.

4Q. If checked “TennCare/Medicaid” box, please list all Managed Care Organization’s currently or will be contracted.

- AMERIGROUP COMMUNITY CARE- East Tennessee
- AMERIGROUP COMMUNITY CARE - Middle Tennessee
- AMERIGROUP COMMUNITY CARE - West Tennessee
- BLUECARE - East Tennessee
- BLUECARE - Middle Tennessee
- BLUECARE - West Tennessee
- UnitedHealthcare Community Plan - East Tennessee
- UnitedHealthcare Community Plan - Middle Tennessee
- UnitedHealthcare Community Plan - West Tennessee
- TENNCARE SELECT HIGH - All
- TENNCARE SELECT LOW - All
- PACE
- KBB under DIDD waiver
- Others

Please Explain

RESPONSE: TQC is contracted with all applicable Managed Care Organizations that participate in TennCare, including Wellpoint (f/k/a Amerigroup), BlueCare, United Healthcare Community Plan, and TennCare Select. TQC has engaged in discussions with these MCOs regarding the proposed TQC West and TQC East projects and will work with these organizations during the transition to the proposed regional parent office structure.

5Q. Do you attest that you will submit a Quality Measure Report annually to verify the license, certification, and/or accreditation status of the applicant, if approved?

- Yes
- No

6Q. For an existing healthcare institution applying for a CON:

- Has it maintained substantial compliance with applicable federal and state regulation for the three years prior to the CON application. In the event of non-compliance, the nature of non-compliance and corrective action should be

discussed to include any of the following: suspension of admissions, civil monetary penalties, notice of 23-day or 90-day termination proceedings from Medicare/Medicaid/TennCare, revocation/denial of accreditation, or other similar actions and what measures the applicant has or will put into place to avoid similar findings in the future.

- Yes
- No
- N/A

- Has the entity been decertified within the prior three years? If yes, please explain in detail. (This provision shall not apply if a new, unrelated owner applies for a CON related to a previously decertified facility.)

- Yes
- No
- N/A

7Q. Respond to all of the following and for such occurrences, identify, explain, and provide documentation if occurred in last five (5) years.

Has any of the following:

- Any person(s) or entity with more than 5% ownership (direct or indirect) in the applicant (to include any entity in the chain of ownership for applicant);
- Any entity in which any person(s) or entity with more than 5% ownership (direct or indirect) in the applicant (to include any entity in the chain of ownership for applicant) has an ownership interest of more than 5%; and/or.

Been subject to any of the following:

- Final Order or Judgement in a state licensure action;
 - Yes
 - No
- Criminal fines in cases involving a Federal or State health care offense;
 - Yes
 - No
- Civil monetary penalties in cases involving a Federal or State health care offense;
 - Yes
 - No
- Administrative monetary penalties in cases involving a Federal or State health care offense;
 - Yes
 - No
- Agreement to pay civil or administrative monetary penalties to the federal government or any state in cases involving claims related to the provision of health care items and services;
 - Yes
 - No
- Suspension or termination of participation in Medicare or TennCare/Medicaid programs; and/or
 - Yes
 - No

- Is presently subject of/to an investigation, or party in any regulatory or criminal action of which you are aware.

Yes

No

8Q. Provide the project staffing for the project in Year 1 and compare to the current staffing for the most recent 12-month period, as appropriate. This can be reported using full-time equivalent (FTEs) positions for these positions.

Existing FTE not applicable (Enter year)

Position Classification	Existing FTEs(enter year)	Projected FTEs Year 1
A. Direct Patient Care Positions		
Registered Nurse	3.00	3.00
Licensed Practical Nurse	13.00	14.00
Physical Therapist	7.00	8.00
Physical Therapy Assistant	6.00	6.00
Home Health Aide	9.00	9.00
Social Worker	1.00	2.00
Occupational Therapist	1.00	1.00
Occupational Therapist Assistant	3.00	3.00
Speech Therapist	2.00	2.00
Total Direct Patient Care Positions	45	48

B. Non-Patient Care Positions		
Clinical Service Manager	0.00	1.00
Care Coordinator LPN	3.00	3.00
Care Coordinator RN	2.00	2.00
Office Manager	2.00	4.00
Executive Director	1.00	1.00
Total Non-Patient Care Positions	8	11
Total Employees (A+B)	53	59

C. Contractual Staff		
Contractual Staff Position	0.00	0.00
Total Staff (A+B+C)	53	59

DEVELOPMENT SCHEDULE

TCA §68-11-1609(c) provides that activity authorized by a Certificate of Need is valid for a period not to exceed three (3) years (for hospital and nursing home projects) or two (2) years (for all other projects) from the date of its issuance and after such time authorization expires; provided, that the Agency may, in granting the Certificate of Need, allow longer periods of validity for Certificate of Need for good cause shown. Subsequent to granting the Certificate of Need, the Agency may extend a Certificate of Need for a period upon application and good cause shown, accompanied by a non-refundable reasonable filing fee, as prescribed by rule. A Certificate of Need authorization which has been extended shall expire at the end of the extended time period. The decision whether to grant an extension is within the sole discretion of the Commission, and is not subject to review, reconsideration, or appeal.

- Complete the Project Completion Forecast Chart below. If the project will be completed in multiple phases, please identify the anticipated completion date for each phase.
- If the CON is granted and the project cannot be completed within the standard completion time period (3 years for hospital and nursing home projects and 2 years for all others), please document why an extended period should be approved and document the “good cause” for such an extension.

PROJECT COMPLETION FORECAST CHART

Assuming the Certificate of Need (CON) approval becomes the final HFC action on the date listed in Item 1 below, indicate the number of days from the HFC decision date to each phase of the completion forecast.

Phase	Days Required	Anticipated Date (Month/Year)
1. Initial HFC Decision Date		04/24/24
2. Building Construction Commenced		04/23/24
3. Construction 100% Complete (Approval for Occupancy)		04/23/24
4. Issuance of License	60	06/22/24
5. Issuance of Service	90	07/22/24
6. Final Project Report Form Submitted (Form HR0055)	180	10/20/24

Note: If litigation occurs, the completion forecast will be adjusted at the time of the final determination to reflect the actual issue date.

PROOF OF PUBLICATION

Laura Bilbrey
Bass Berry Sims Plc
150 Third Avenue South 2800
Nashville TN 37201

STATE OF WISCONSIN, COUNTY OF BROWN

The Commercial Appeal, a newspaper published in the city of Memphis, Shelby County, State of Tennessee, and personal knowledge of the facts herein state and that the notice hereto annexed was Published in said newspapers in the issue:

02/08/2024

and that the fees charged are legal.
Sworn to and subscribed before on 02/08/2024

Legal Clerk

Nancy Heyrman

Notary, State of WI, County of Brown

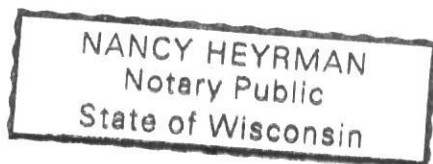
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Please do not use this form for payment remittance.



NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED

This is to provide official notice to the Health Facilities Commission and all interested parties, in accordance with T.C.A. §68-11-1601 et seq. and the Rules of the Health Facilities Commission, that Tennessee Valley Home Care, LLC, d/b/a Tennessee Quality Care – Home Health, a/an proposed home care organization owned by American Home Care, LLC with an ownership type of Limited Liability Company and to be managed by itself intends to file an application for a Certificate of Need for the establishment of a home care organization and the initiation of home health services in a 13-county service area that includes: Carroll, Crockett, Dyer, Fayette, Gibson, Haywood, Henry, Lauderdale, Obion, Shelby, Tipton and Weakley Counties, as well as Certificate of Need-exempt Lake County. Lake County meets the criteria under T.C.A. § 68-11 1607(q) for designation as an economically distressed county and is not subject to Certificate of Need review. Upon approval of this project, the 13 proposed service area counties will be removed from the 51-county licensed service area of Tennessee Valley Home Care, LLC, d/b/a Tennessee Quality Care – Home Health (License No. 221), an existing home care organization located at 580 Tennessee Avenue, North, Parsons, Decatur County, Tennessee that is also owned by American Home Care, LLC. The address of the project will be 115 Neal Street, Suite E&F, Martin, Weakley County, Tennessee, 38237. The estimated project cost will be \$261,969.

The anticipated date of filing the application is 03/01/2024.

The contact person for this project is Mr. Jeff Stofko who may be reached at Ascendient Healthcare Advisors, Inc. – 1335 Environ Way, Chapel Hill, North Carolina 27517 – Contact No. 919-403-3300.

The published Letter of Intent must contain the following statement pursuant to T.C.A. §68-11-1607 (c)(1). (A) Any healthcare institution wishing to oppose a Certificate of Need application must file a written notice with the Health Facilities Commission no later than fifteen (15) days before the regularly scheduled Health Facilities Commission meeting at which the application is originally scheduled; and (B) Any other person wishing to oppose the application may file a written objection with the Health Facilities Commission at or prior to the consideration of the application by the Commission, or may appear in person to express opposition. Written notice of opposition may be sent to: Health Facilities Commission, Andrew Jackson Building, 9th Floor, 502 Deaderick Street, Nashville, TN 37243 or email at hsda.staff@tn.gov.

MC-38666486

The STATE GAZETTE

731.285.4091

P.O. Box 808
Dyersburg, TN 38025
731-285-4091
Fax: 731-286-6183

I, Bryant Tate, accounting clerk of the State Gazette, a newspaper published in Dyersburg, Tennessee, hereby certify that the annexed advertisement has been published 1 consecutive non-consecutive days weeks in said paper on the following dates: 2/8/24 and that the fee of \$ 163.00 has has not been paid.

Bryant Tate

This 8 day of February, 2024

Cecily Simpson, Notary Public

Commission expires: August 16th, 2025



Classifieds

Phone: 285-4091 Fax: 286-6183

DEADLINES:

Tuesday, Friday 3pm

Thursday, Tuesday 3pm

Saturday, Thursday 3pm

We reserve the right to reject any advertisement. We are responsible only for the first insertion of an advertisement. Advertisers are advised to check their ad immediately after appears in the paper and report at once any errors found.

Legals

Legal 01-5231

NOTICE OF TRUSTEE'S SALE

WHEREAS, default has occurred in the performance of the covenants, terms, and conditions of a Deed of Trust Note dated August 14, 2006, and the Deed of Trust of even date securing the same, recorded October 6, 2006, in Book No. 626, at Page 1, in Office of the Register of Deeds for Dyer County, Tennessee, executed by Billy J Sisk and Betty J Sisk, conveying certain property therein described to Tracey P. Malone as Trustee for U.S. Small Business Administration, an agency of the Government of the United States of America; and the undersigned, Wilson & Associates, P.L.L.C., having been appointed Successor Trustee by Administrator, U.S. Small Business Administration, an agency of the United States Government. NOW, THEREFORE, notice is hereby given that the entire indebtedness has been declared due and payable; and that an agent of Wilson & Associates, P.L.L.C., as Successor Trustee, by virtue of the power, duty, and authority vested in and imposed upon said Successor Trustee, by Administrator, U.S. Small Business Administration, an agency of the United States Government, will, on February 20, 2024 on or about 11:15 AM, at the Front Door of the Dyer County Courthouse 101 W Court St., Dyersburg, TN 38024, offer for sale certain property hereinafter described to the highest bidder FOR certified funds paid at the conclusion of the sale, or credit bid from a bank or other lending entity pre-approved by the successor trustee. The sale is free from

all exemptions, which are expressly waived in the Deed of Trust, said property being real estate situated in Dyer County, Tennessee, and being more particularly described as follows: LYING AND BEING SITUATED IN THE 6TH CIVIL DISTRICT OF DYER COUNTY, TENNESSEE AND BEING MORE PARTICULARLY DESCRIBED AS LOT 11 IN THE SECOND REVISION-SECTION 2 OF THE HAROLD L. CALDWELLS BIFFLE ROAD SUBDIVISION A PLAT OF WHICH IS RECORDED IN MINI PLAT BOOK 1, PAGE 271 IN THE REGISTER'S OFFICE FOR DYER COUNTY, TENNESSEE, AND BEING DESCRIBED AS FOLLOWS: BEGINNING AT AN IRON PIN ON THE WEST RIGHT-OF-WAY OF BIFFLE ROAD, THE NORTHEAST CORNER OF THIS HEREIN DESCRIBED PARCEL (LOT 11) THE SOUTHEAST CORNER OF THE ANITA GRAVES PROPERTY AS SHOWN BY DEED IN DEED BOOK 2323, PAGE 337 RECORDED IN THE REGISTER'S OFFICE FOR DYER COUNTY, TENNESSEE, AND THE ORIGINAL NORTHEAST CORNER OF SAID SUBDIVISION; RUNS THENCE SOUTH 02 DEGREES 27 MINUTES EAST 217.70 FEET ALONG THE EAST LINE OF THE PARCEL AND THE AFOREMENTIONED WEST RIGHT-OF-WAY BIFFLE ROAD TO AN IRON PIN, THE NORTHEAST CORNER OF LOT 10 AND BEING THE SOUTHEAST CORNER OF THIS HEREIN DESCRIBED PARCEL (LOT 11); RUNS THENCE SOUTH 88 DEGREES 06 MINUTES 05 SECONDS WEST 299.84 FEET ALONG THE SOUTH LINE OF THIS PARCEL AND

THE NORTH LINE OF SAID LOT 10 TO AN IRON PIN IN THE ORIGINAL WEST LINE OF SAID SUBDIVISION, THE NORTHWEST CORNER OF SAID LOT 10 AND W&A No. 358057 2 BEING THE SOUTHWEST CORNER OF THIS HEREIN DESCRIBED PARCEL (LOT 11); RUNS THENCE NORTH 13 DEGREES 18 MINUTES 15 SECONDS EAST 241.93 FEET ALONG THE WEST LINE OF THIS PARCEL AND THE ORIGINAL WEST LINE OF SAID SUBDIVISION TO AN IRON PIN, THE SOUTHWEST CORNER OF SAID GRAVES PROPERTY AND BEING THE NORTHWEST CORNER OF THIS HEREIN DESCRIBED PARCEL (LOT 11); RUNS THENCE SOUTH 88 DEGREES 02 MINUTES 45 SECONDS EAST 234.80 FEET ALONG THE NORTH LINE OF THIS PARCEL AND THE SOUTH LINE OF SAID GRAVES PROPERTY TO THE POINT OF BEGINNING BEING FURTHER IDENTIFIED AS MAP 41, PARCEL 11 05 AS SHOWN IN THE TAX ASSESSOR'S OFFICE FOR DYER COUNTY, TENNESSEE. ALSO KNOWN AS: 1607 Biffle Road, Newbern, TN 38059 This sale is subject to all matters shown on any applicable recorded plat; any unpaid taxes; any restrictive covenants, easements, or setback lines that may be applicable; any statutory rights of redemption of any governmental agency, state or federal; any prior liens or encumbrances as well as any priority created by a fixture filing; and to any matter that an accurate survey of the premises might disclose. In addition, the following parties may claim an interest in the above referenced property: BILLY J SISK BETTY J SISK TENANTS OF

ESTATE OF BILLY SISK HEIR(S) OF BILLY SISK The sale held pursuant to this Notice may be rescinded at the Successor Trustee's option at any time. The right is reserved to adjourn the day of the sale to another day, time, and place certain without further publication, upon announcement at the time and place for the sale set forth above. In the event of inclement weather, the trustee hereby announces that the sale will be postponed and that notices of said postponement for inclement weather will be mailed to interested parties of record. W&A No. 358057 DATED January 16, 2024 WILSON & ASSOCIATES, P.L.L.C., Successor Trustee

Publication: January 25, 2024 February 1, 2024 February 8, 2024 February 15, 2024

Legal 01-5232

NOTICE OF TRUSTEE'S SALE

WHEREAS, default has occurred in the performance of the covenants, terms, and conditions of a Deed of Trust Note dated October 27, 2014, and the Deed of Trust of even date securing the same, recorded October 28, 2014, in Book No. 818, at Page 567, in Office of the Register of Deeds for Dyer County, Tennessee, executed by Kimberly S Ashley, conveying certain property therein described to Sherrell Armstrong as Trustee for Mortgage Electronic Registration Systems, Inc., as beneficiary, as nominee for First Citizens National Bank, its successors and assigns; and the undersigned, Wilson & Associates, P.L.L.C., having been appointed Successor Trustee by Lakeview Loan Servicing, LLC. NOW, THEREFORE, notice is hereby given that the entire in-

debtedness has been declared due and payable; and that an agent of Wilson & Associates, P.L.L.C., as Successor Trustee, by virtue of the power, duty, and authority vested in and imposed upon said Successor Trustee, by Lakeview Loan Servicing, LLC, will, on February 21, 2024 on or about 11:00 AM, at the Dyer County Courthouse 101 W Court Street, Dyersburg, TN 38024, offer for sale certain property hereinafter described to the highest bidder FOR certified funds paid at the conclusion of the sale, or credit bid from a bank or other lending entity pre-approved by the successor trustee. The sale is free from all exemptions, which are expressly waived in the Deed of Trust, said property being real estate situated in Dyer County, Tennessee, and being more particularly described as follows: Lying and being situated in the Fifth (5th) Civil District of Dyer County, Tennessee and being Lot No. 1 of the W. Slaughter Highway 78 Minor Subdivision, as shown by minor subdivision plat recorded in Mini-Plat Book 2, page 342 in the Register's Office for Dyer County, Tennessee, containing 1.01 acres, more or less. ALSO KNOWN AS: 6539 Highway 78, Dyersburg, TN 38024 This sale is subject to all matters shown on any applicable recorded plat; any unpaid taxes; any restrictive covenants, easements, or setback lines that may be applicable; any statutory rights of redemption of any governmental agency, state or federal; any prior liens or encumbrances as well as any priority created by a fixture filing; and to any matter that an accu-

rate survey of the premises might disclose. In addition, the following parties may claim an interest in the above referenced property: KIMBERLY S ASHLEY TENANTS OF The sale held pursuant to this Notice may be rescinded at the Successor Trustee's option at any time. The right is reserved to adjourn the day of the sale to another day, time, and place certain without further publication, upon announcement at the time and place for the sale set forth above. In the event of inclement weather, the trustee hereby announces that the sale will be postponed and that notices of said postponement for inclement weather will be mailed to interested parties of record. W&A No. 358222 DATED January 16, 2024 WILSON & ASSOCIATES, P.L.L.C., Successor Trustee

Publication: January 25, 2024 February 1, 2024 February 8, 2024

LEGAL 02-5242

CHANCERY COURT TONY CHILDRESS CHANCERY JUDGE DYER COUNTY

NOTICE TO CREDITORS

Civil Action No. 23-CV-626

Estate of Robert Odell DeShields Notice is hereby given that on this 28th day of December 2023 Letters of testamentary (or of administration as the case may be) in respect of the estate of Robert Odell DeShields who died on November 30th, 2023 were issued to the undersigned by the Chancery Court of Dyer County,

Tennessee. All persons, resident and nonresident, having claims, matured or unmatured, against the estate are required to file the same with the clerk of the above named court on or before the earlier of the dates prescribed in (1) or (2) otherwise their claims will be forever barred: (1) (A) Four (4) months from the date of the first publication (or posting, as the case may be) of this notice if the creditor received an actual copy of this notice to creditors at least sixty (60) days before the date that is four (4) months from the date of the first publication (or posting); or (B) Sixty (60) days from the date the creditor received an actual copy of the notice to creditors if the creditor received the copy of the notice less than sixty (60) days prior to the date that is four (4) months from the date of first publication (or posting) as described in (1) (A); or (2) Twelve (12) months from the descendants date of death. This 28th day of December 2023 Administrator or Executor: Alma Jean DeShields Attorney for the Estate Mark D. Johnston 217 Market St. W., PO Box 1326 Dyersburg, TN 38024 Clerk/Deputy: Cindy Rose Publication: February 08, 2024 February 15, 2024

Super Savers

For Sale 13 Old Time Country Records size 33's \$50. Call: 731-285-7375 Leave message if no answer.

LEGAL 5240

NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED

This is to provide official notice to the Health Facilities Commission and all interested parties, in accordance with T.C.A. §68-11-1601 et seq., and the Rules of the Health Facilities Commission, that Tennessee Valley Home Care, LLC, d/b/a Tennessee Quality Care – Home Health, a/an proposed home care organization owned by American Home Care, LLC with an ownership type of Limited Liability Company and to be managed by itself intends to file an application for a Certificate of Need for the establishment of a home care organization and the initiation of home health services in a 13-county service area that includes: Carroll, Crockett, Dyer, Fayette, Gibson, Haywood, Henry, Lauderdale, Obion, Shelby, Tipton and Weakley Counties, as well as Certificate of Need-exempt Lake County. Lake County meets the criteria under T.C.A. § 68-11 1607(q) for designation as an economically distressed county and is not subject to Certificate of Need review. Upon approval of this project, the 13 proposed service area counties will be removed from the 51-county licensed service area of Tennessee Valley Home Care, LLC, d/b/a Tennessee Quality Care – Home Health (License No. 221), an existing home care organization located at 580 Tennessee Avenue, North, Parsons, Decatur County, Tennessee that is also owned by American Home Care, LLC. The address of the project will be 115 Neal Street, Suite E&F, Martin, Weakley County, Tennessee, 38237. The estimated project cost will be \$261,969.

The anticipated date of filing the application is 03/01/2024.

The contact person for this project is Mr. Jeff Stofko who may be reached at Ascendant Healthcare Advisors, Inc. – 1335 Environ Way, Chapel Hill, North Carolina, 27517 – Contact No. 919-403-3300.

The published Letter of Intent must contain the following statement pursuant to T.C.A. §68-11-1607 (c)(1). (A) Any healthcare institution wishing to oppose a Certificate of Need application must file a written notice with the Health Facilities Commission no later than fifteen (15) days before the regularly scheduled Health Facilities Commission meeting at which the application is originally scheduled; and (B) Any other person wishing to oppose the application may file a written objection with the Health Facilities Commission at or prior to the consideration of the application by the Commission, or may appear in person to express opposition. Written notice of opposition may be sent to: Health Facilities Commission, Andrew Jackson Building, 9th Floor, 502 Deaderick Street, Nashville, TN 37243 or email at hsd.a.staff@tn.gov.

Invitation to Bid

Davis Farms of Newbern, TN will be accepting bids for construction of grain handling equipment to include Architectural Renderings and Engineering of steel bins, a grain dryer, motors, blowers overhead handling systems and subsequent electrical and concrete work. The guidelines to bid for the construction work must be in accordance with all applicable Federal Regulations listed under Title 2 of the Code of Federal Regulations Part 200 sections 200.317-200.327. The Invitation to Bid is open from February 1, 2024 through midnight on February 21, 2024 CST. Davis Farms does not discriminate based on age race color or nationality and minorities are encouraged to bid. More information regarding the project may be obtained by calling 800-738-4622 or email to dianberryman@charter.net. Electronic submittal or written proposal of bids shall be sent to dianberryman@charter.net or Dian Berryman 26 South Broad Street, Lexington, TN 38351 and received prior to the bid ending time.

Join our team at State Gazette

NOW HIRING

Part-time Advertising Sales Associate

We are looking for a highly motivated and goal-oriented employee with exceptional communication skills.

- Sales experience preferred
- Self-motivated, goal-oriented
- High school diploma required
- Must be 18+ years or older
- Must pass drug test
- Must have valid drivers license and proof of insurance

To apply send resumes to our Advertising Director, Cecily Simpson.

csimpson@stategazette.com (731)285-4091 ext. 116

State Gazette is an equal opportunity employer.



Northwest Correctional Complex

TN Department of Correction

NOW HIRING

731-253-5120 Scan to Apply →



The
Paris

Post-Intelligencer

PROOF OF PUBLICATION

State of Tennessee --- Henry County:

This day personally before me the undersigned came **Michael B.**

Williams, Proprietor of *The Paris Post-Intelligencer*, a daily newspaper

published in Paris, Tennessee, who makes oath in due form of law that the

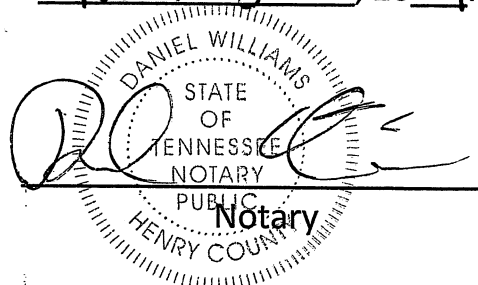
advertisement for BAGG Berry + Sims, a copy of which has been provided,

was published in said paper 2/8/24 and the printer's fee

for same is \$ 140.28.

Michael B. Williams

Sworn and subscribed to me this 9 day of February, 2024.



My commission expires: September 23, 2025



NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED

This is to provide official notice to the Health Facilities Commission and all interested parties, in accordance with T.C.A. §68-11-1601 et seq., and the Rules of the Health Facilities Commission, that Tennessee Valley Home Care, LLC, d/b/a Tennessee Quality Care – Home Health, a/an proposed home care organization owned by American Home Care, LLC with an ownership type of Limited Liability Company and to be managed by itself intends to file an application for a Certificate of Need for the establishment of a home care organization and the initiation of home health services in a 13-county service area that includes: Carroll, Crockett, Dyer, Fayette, Gibson, Haywood, Henry, Lauderdale, Obion, Shelby, Tipton and Weakley Counties, as well as Certificate of Need-exempt Lake County. Lake County meets the criteria under T.C.A. § 68-11 1607(q) for designation as an economically distressed county and is not subject to Certificate of Need review. Upon approval of this project, the 13 proposed service area counties will be removed from the 51-county licensed service area of Tennessee Valley Home Care, LLC, d/b/a Tennessee Quality Care – Home Health (License No. 221), an existing home care organization located at 580 Tennessee Avenue, North, Parsons, Decatur County, Tennessee that is also owned by American Home Care, LLC. The address of the project will be 115 Neal Street, Suite E&F, Martin, Weakley County, Tennessee, 38237. The estimated project cost will be \$261,969.

The anticipated date of filing the application is 03/01/2024.

The contact person for this project is Mr. Jeff Stofko who may be reached at Ascendant Healthcare Advisors, Inc. – 1335 Environ Way, Chapel Hill, North Carolina, 27517 – Contact No. 919-403-3300.

The published Letter of Intent must contain the following statement pursuant to T.C.A. §68-11-1607 (c)(1). (A) Any healthcare institution wishing to oppose a Certificate of Need application must file a written notice with the Health Facilities Commission no later than fifteen (15) days before the regularly scheduled Health Facilities Commission meeting at which the application is originally scheduled; and (B) Any other person wishing to oppose the application may file a written objection with the Health Facilities Commission at or prior to the consideration of the application by the Commission, or may appear in person to express opposition. Written notice of opposition may be sent to: Health Facilities Commission, Andrew Jackson Building, 9th Floor, 502 Deaderick Street, Nashville, TN 37243 or email at hsda.staff@tn.gov.

NOTICE OF SUBSTITUTE TRUSTEE'S SALE OF REAL ESTATE

WHEREAS, on May 19, 1999, ADAM R. CRAIG, et. ux., by an Open-End Deed of Trust of record in Trust Book 320, at Page 394, as modified by a Modification Agreement-Deed of Trust dated May 9, 2018, filed of record in Record Book 490, at Page 524, in the Register's Office of Henry County, Tennessee, conveyed the following described property in trust to secure the payment of a Promissory Note in the original principal amount of Fifty-Two Thousand One Hundred Two and 85/100 Dollars (\$52,102.85), payable to SECURITY BANK & TRUST COMPANY; and WHEREAS, the undersigned was appointed Substitute Trustee by SECURITY BANK & TRUST COMPANY, which appointment will be recorded in the Register's Office of Henry County, Tennessee prior to the deed evidencing this sale; and WHEREAS, default has been made in the payment of said indebtedness and other provisions of the Deed of Trust have been violated, and SECURITY BANK & TRUST COMPANY, the lawful owner and holder of the said indebtedness, has declared the entire amount due and payable as provided by the Deed of Trust in accordance with the terms thereof, and instructed the undersigned to foreclose. NOW, THEREFORE, the public is hereby notified that the undersigned Substitute Trustee will sell the herein-after described real estate at public auction, to the highest and best bidder, for cash in hand paid in certified funds paid at the conclusion of the sale, or upon a credit bid from a bank or other lending entity pre-approved by the Substitute Trustee. The auction shall occur at the north door of the Courthouse at Paris, Henry County, Tennessee, on Friday, March 1, 2024, at 2:00 o'clock p.m., said property to be sold in bar of the equity of redemption and subject to the lien of all special assessments against it. Lying, and being situate in the 8th Civil District of Henry County, Tennessee, bounded and described as follows: to-wit: BEGINNING at a point in the southern margin of Freeland-Buchanan Road, said point being the northeast corner of the property herein conveyed; thence South 310 feet with the western boundary line of Jessie Bevil to a point; thence West 689 feet with the northern boundary line of Melvin Chadwick to a point in the western margin of the Freeland-Buchanan Road; thence North 358 feet with the eastern boundary line of Chadwick to a point in the southern margin of Freeland-Buchanan Road; thence East 680 feet with the south margin of the Freeland-Buchanan Road to the point of beginning. (Description taken from prior deed of record). It being the same property as that described in a Warranty Deed from Norma Faye Capps and husband, Roy W. Capps, to Adam R. Craig and wife, Tabitha D. Craig, dated May 19, 1999, and of record in Deed Book 265, page 279, Register's Office of Henry County, Tennessee. It being the same property as that described in a Quitclaim Deed from Tabitha D. Craig to Adam R. Craig, dated October 11, 2011 and recorded on May 3, 2013, and of record in Record Book 373, Page 815, in the Register's Office of Henry County, Tennessee. Map 020, Parcel 015.03 The street address of the above-described property is believed to be 1060 Dale Cemetery Rd., Buchanan, TN, but such address is not part of the legal

description of the property sold herein and in the event of any discrepancy, the legal description herein shall control. SALE IS SUBJECT TO TENANT(S) RIGHTS IN POSSESSION. This sale is subject to all matters shown on any applicable recorded plat; any unpaid taxes; any restrictive covenants, easements, or setback lines that may be applicable; any statutory rights of redemption of any governmental agency, state or federal; any prior liens or encumbrances as well as any priority created by a fixture filing; and to any matter that an accurate survey of the premises might disclose. Other interested parties: None. Title to said property is believed to be good, but the undersigned will sell as Substitute Trustee only and will assign to the purchaser all covenants of warranty contained in said Deed of Trust. The sale held pursuant to this Notice may be rescinded at the Successor Trustee's option at any time. Said sale may be adjourned to another time or may be postponed to another date by public announcement at the appointed time of sale without readvertisement. This office is a debt collector. This is an attempt to collect a debt and any information obtained will be used for that purpose. WITNESS my signature, this the 8th day of February, 2024. KIZER, BONDS, HUGHES & BOWEN, LLC

BY: STEPHEN L. HUGHES
Substitute Trustee

P. O. Box 320
Milan, TN 38358
(731) 686-1198
INSERTION DATES:
February 8, 2024,
February 15, 2024,
February 22, 2024

NOTICE TO CREDITORS Estate of Joseph Walter Drechney Henry County, Tennessee

Notice is hereby given that on February 2, 2024 letters testamentary (or of administration as the case may be) in respect of the estate of Joseph Walter Drechney who died November 21, 2023 were issued to the undersigned by the Clerk and Master of Henry County, Tennessee. All persons, resident and non-resident, having claims, matured or unmatured, against the estate are required to file the same with the Clerk of the above-named Court on or before the earlier of the dates prescribed in (1) or (2) otherwise their claims will be forever barred:

- (1) (A) Four (4) months from the date of the first publication (or posting, as the case may be) of this notice if the creditor received an actual copy of this notice to creditors at least sixty (60) days before date that is four (4) months from the date of the first publication (or posting); or (B) Sixty (60) days from the date the creditor received an actual copy of the notice to creditors, if the creditor received the copy of the notice less than sixty (60) days prior to the date that is four (4) months from the date of the first publication (or posting) as described in (1)(A); or (2) Twelve (12) months from the decedent's date of death. All persons indebted to the above Estate must come forward and make proper settlement with the undersigned at once. This 2nd day of February 2024

BID NOTICE CONDUCTED ENERGY DEVICE

The Henry County Sheriff's Office is seeking bids on 50 Conducted Energy Devices with the following specifications:
· Single shot unit · 5 second cycle duration
· Molded plastic that is weather and environment resistant
· Contain a flashlight · Center aiming · Rubber molded grip
· Yellow in color · Include holster and three cartridges · Rechargeable battery

All sealed bids must be marked

with Henry County Sheriff's Office Conducted Energy Device and mailed to the Henry County Mayor P.O. Box 7 Paris, Tn 38242.

Bids must be received no later than **Feb. 20th, 2024 at 10 am** at which time the bids will be opened and read aloud.

Henry County reserves the right to reject any and all bids. If anyone has pre bid questions please contact Sheriff Josh Frey at 731-642-1672.

INVITATION TO BID

Henry County School System is seeking quotes for

MOWING OF SCHOOL GROUNDS

Bids must be received in "sealed" form before **February 22, 2024 @ 11:00am** at the Henry County Board of Education office.

Specific information can be obtained by visiting our website at <https://www.henryk12.net/page/district-bids> or by contacting Crisha Brinkley at brinkleyc@henryk12.net

Misty Marie Drechney
Executrix

This 31st day of January, 2024

Kimberley Ann McKinney
Executrix

Attorney:
Ira L. Greer
ESTATE OF:
Joseph Walter Drechney
Albert Wade, Jr.
Clerk and Master

NOTICE TO CREDITORS Estate of Pauline Elizabeth Powers Henry County, Tennessee

Notice is hereby given that on January 23, 2024 letters testamentary (or of administration as the case may be) in respect of the estate of Pauline Elizabeth Powers who died December 15, 2023 were issued to the undersigned by the Clerk and Master of Henry County, Tennessee. All persons, resident and non-resident, having claims, matured or unmatured, against the estate are required to file the same with the Clerk of the above-named Court on or before the earlier of the dates prescribed in (1) or (2) otherwise their claims will be forever barred:

- (1) (A) Four (4) months from the date of the first publication (or posting, as the case may be) of this notice if the creditor received an actual copy of this notice to creditors at least sixty (60) days before date that is four (4) months from the date of the first publication (or posting); or (B) Sixty (60) days from the date the creditor received an actual copy of the notice to creditors, if the creditor received the copy of the notice less than sixty (60) days prior to the date that is four (4) months from the date of the first publication (or posting) as described in (1)(A); or (2) Twelve (12) months from the decedent's date of death. All persons indebted to the above Estate must come forward and make proper settlement with the undersigned at once. This 23rd day of January 2024

Carmen A. Odum
Executrix

NOTICE TO CREDITORS Estate of Ray L. Miller Henry County, Tennessee

Notice is hereby given that on January 31, 2024 letters testamentary (or of administration as the case may be) in respect of the estate of Ray L. Miller who died December 7, 2023 were issued to the undersigned by the Clerk and Master of Henry County, Tennessee. All persons, resident and non-resident, having claims, matured or unmatured, against the estate are required to file the same with the Clerk of the above-named Court on or before the earlier of the dates prescribed in (1) or (2) otherwise their claims will be forever barred:

- (1) (A) Four (4) months from the date of the first publication (or posting, as the case may be) of this notice if the creditor received an actual copy of this notice to creditors at least sixty (60) days before date that is four (4) months from the date of the first publication (or posting); or (B) Sixty (60) days from the date the creditor received an actual copy of the notice to creditors, if the creditor received the copy of the notice less than sixty (60) days prior to the date that is four (4) months from the date of the first publication (or posting) as described in (1)(A); or (2) Twelve (12) months from the decedent's date of death. All persons indebted to the above Estate must come forward and make proper settlement with the undersigned at once.

NOTICE TO CREDITORS Estate of Paula Grimes Henry County, Tennessee

Notice is hereby given that on January 23, 2024 letters testamentary (or of administration as the case may be) in respect of the estate of Paula Grimes who died October 13, 2023 were issued to the undersigned by the Clerk and Master of Henry County, Tennessee. All persons, resident and non-resident, having claims, matured or unmatured, against the estate are required to file the same with the Clerk of the above-named Court on or before the earlier of the dates prescribed in (1) or (2) otherwise their claims will be forever barred:

- (1) (A) Four (4) months from the date of the first publication (or posting, as the case may be) of this notice if the creditor received an actual copy of this notice to creditors at least sixty (60) days before date that is four (4) months from the date of the first publication (or posting); or (B) Sixty (60) days from the date the creditor received an actual copy of the notice to creditors, if the creditor received the copy of the notice less than sixty (60) days prior to the date that is four (4) months from the date of the first publication (or posting) as described in (1)(A); or (2) Twelve (12) months from the decedent's date of death. All persons indebted to the above Estate must come forward and make proper settlement with the undersigned at once. This 23rd day of January 2024.

Scarlett Kelly
Administratrix

Attorney: William T. Looney
ESTATE OF: Paula Grimes
Albert Wade, Jr.
Clerk and Master

NOTICE TO CREDITORS Estate of Benny Whitnel Phillips Henry County, Tennessee

Notice is hereby given that on January 30, 2024 letters testamentary (or of administration as the case may be) in respect of the estate of Benny Whitnel Phillips who died November 30, 2023 were issued to the undersigned by the Clerk and Master of Henry County, Tennessee. All persons, resident and non-resident, having claims, matured or unmatured, against the estate are required to file the same with the Clerk of the above-named Court on or before the earlier of the dates prescribed in (1) or (2) otherwise their claims will be forever barred:

- (1) (A) Four (4) months from the date of the first publication (or posting, as the case may be) of this notice if the creditor received an actual copy of this notice to creditors at least sixty (60) days before date that is four (4) months from the date of the first publication (or posting); or (B) Sixty (60) days from the date the creditor received an actual copy of the notice to creditors, if the creditor received the copy of the notice less than sixty (60) days prior to the date that is four (4) months from the date of the first publication (or posting) as described in (1)(A); or (2) Twelve (12) months from the decedent's date of death. All persons indebted to the above Estate must come forward and make proper settlement with the undersigned at once.

PUBLIC NOTICE PROJECT CLOSE OUT

Paris, TN

2023 SDG Project #33007-50623
Site Development Improvements

Notice is hereby given that the contractor, Delta Contracting Co, 1815 E. Wood St., Paris, TN 38242 has requested final payment and project close-out for the 2023 SDG Project #33007-50623 Site Development Improvements. Said project is located in the City of Paris, Henry County, Tennessee. Any local resident, subcontractor, or supplier who has claim against this contractor regarding said project has 10 days from the date of this notice to file his/her claim with Rob Goad, 206 N Poplar, Paris, TN 38242, Phone: 731/407-7071.

NOTICE TO FURNISHERS OF LABOR AND MATERIALS TO: Delta Contracting Company, LLC PROJECT NO.: 40S069-F3-002. 40S069-F8-002 CONTRACT NO.: CNX215 COUNTY: Henry

The Tennessee Department of Transportation is about to make final settlement with the contractor for construction of the above numbered project. All persons wishing to file claims pursuant to Section 54-5-122, T.C.A. must file same with the Director of Construction, Tennessee Department of Transportation, Suite 700 James K. Polk Bldg., Nashville, Tennessee 37243-0326, on or before 3/8/2024.

This 30th day of January 2024

Terra Jade Whitnel
Executrix

Attorney: William T. Looney
ESTATE OF: Benny Whitnel Phillips
Albert Wade, Jr.
Clerk and Master

NOTICE TO CREDITORS Estate of Carol Ray Barker Henry County, Tennessee

Notice is hereby given that on January 23, 2024 letters testamentary (or of administration as the case may be) in respect of the estate of Carol Ray Barker who died December 5, 2023 were issued to the undersigned by the Clerk and Master of Henry County, Tennessee. All persons, resident and non-resident, having claims, matured or unmatured, against the estate are required to file the same with the Clerk of the above-named Court on or before the earlier of the dates prescribed in (1) or (2) otherwise their claims will be forever barred:

- (1) (A) Four (4) months from the date of the first publication (or posting, as the case may be) of this notice if the creditor received an actual copy of this notice to creditors at least sixty (60) days before date that is four (4) months from the date of the first publication (or posting); or (B) Sixty (60) days from the date the creditor received an actual copy of the notice to creditors, if the creditor received the copy of the notice less than sixty (60) days prior to the date that is four (4) months from the date of the first publication (or posting) as described in (1)(A); or (2) Twelve (12) months from the decedent's date of death. All persons indebted to the above Estate must come forward and make proper settlement with the undersigned at once. This 23rd day of January, 2024.

Stephen Eugene Underwood
Administrator C.T.A.

Attorney: W. Brown Hawley, II
ESTATE OF: Carol Ray Barker
Albert Wade, Jr.
Clerk and Master

NOTICE TO CREDITORS Estate of Jonathan Michael Graves Henry County, Tennessee

Notice is hereby given that on February 02, 2024 letters testamentary (or of administration as the case may be) in respect of the estate of Jonathan Michael Graves who died November 04, 2023 were issued to the undersigned by the Clerk and Master of Henry County, Tennessee. All persons, resident and non-resident, having claims, matured or unmatured, against the estate are required to file the same with the Clerk of the above-named Court on or before the earlier of the dates prescribed in (1) or (2) otherwise their claims will be forever barred:

- (1) (A) Four (4) months from the date of the first publication (or posting, as the case may be) of this notice if the creditor received an actual copy of this notice to creditors at least sixty (60) days before date that is four (4) months from the date of the first publication (or posting); or (B) Sixty (60) days from the date the creditor received an actual copy of the notice to creditors, if the creditor received the copy of the notice less than sixty (60) days prior to the date that is four (4) months from the date of the first publication (or posting) as described in (1)(A); or (2) Twelve (12) months from the decedent's date of death. All persons indebted to the above Estate must come forward and make proper settlement with the undersigned at once. This 2nd day of February, 2024.

James Christopher Graves
Administrator

Attorney: G. Robert Whitfield III

ESTATE OF: Jonathan Michael Graves
Albert Wade, Jr.
Clerk and Master

SUBSTITUTE TRUSTEE'S SALE

Sale at public auction will be on February 22, 2024 on or about 11:00AM local time, at the Henry County Courthouse, Paris, Tennessee, conducted by the Substitute Trustee as identified and set forth herein below, pursuant to Deed of Trust executed by REBECCA S. HAYSLETT, to Attorneys Title & Escrow, A Division of Ainley, Hoover and Hoover, PLLC, Trustee, on December 27, 2022, at Record Book 611, Page 402-418 as Instrument No. 168444 in the real property records of Henry County Register's Office, Tennessee. Owner of Debt: Cardinal Financial Company, Limited Partnership The following real estate located in Henry County, Tennessee, will be sold to the highest call bidder subject to all unpaid taxes, prior liens and encumbrances of record: First Civil District of Henry County, Tennessee Being Lot No. 4 of Valleywood Development, plat of which is of record in Plat Cabinet A, Slide 75, in the Register's Office of Henry County, Tennessee. This being the same real estate conveyed to Robert L. Shaw, Trustee of the Robert L. Shaw Living Trust by Warranty Deed of Rose M. Prealar, dated May 8, 2020 and of record in Record Book 535, page 742, in the Register's Office of Henry County, Tennessee. Parcel ID: 106C.00600.000 Commonly Known As: 1608 Valleywood Drive, Paris, Tennessee 38242 Tax ID: 106C-G-006.00 Current Owner(s) of Property: REBECCA S. HAYSLETT The street address of the above described property is believed to be 1608 Valleywood Drive, Paris, TN 38242, but such address is not part of the legal description of the property sold herein and in the event of any discrepancy, the legal description referenced herein shall control.

SALE IS SUBJECT TO OCCUPANT(S) RIGHTS IN POSSESSION. THE RIGHT IS RESERVED TO ADJOURN THE DAY OF THE SALE TO ANOTHER DAY, TIME AND PLACE CERTAIN WITHOUT FURTHER PUBLICATION, UPON ANNOUNCEMENT AT THE TIME AND PLACE FOR THE SALE SET FORTH ABOVE. THE TERMS OF SALE ARE CASH. ANY TAXES OR FEES WILL BE THE RESPONSIBILITY OF THE PURCHASER. IF THE SALE IS SET ASIDE FOR ANY REASON, THE PURCHASER AT THE SALE SHALL BE ENTITLED ONLY TO A RETURN OF THE PURCHASE PRICE. THE PURCHASER SHALL HAVE NO FURTHER RECOURSE AGAINST THE GRANTOR, THE GRANTEE, OR THE TRUSTEE. OTHER INTERESTED PARTIES: SECRETARY OF HOUSING & URBAN DEVELOPMENT AND ESTATE OF REBECCA S HAYSLETT AND UNKNOWN HEIRS OF REBECCA S HAYSLETT THIS IS AN ATTEMPT TO COLLECT A DEBT AND ANY INFORMATION OBTAINED WILL BE USED FOR THAT PURPOSE.

If applicable, the notice requirements of T.C.A. 35-5-101 have been met. All right of equity of redemption, statutory and otherwise, and homestead are expressly waived in said Deed of Trust, but the undersigned will sell and convey only as Substitute Trustee. If the U.S. Department of Treasury/ IRS, the State of Tennessee Department of Revenue, or the State of Tennessee Department of Labor or Workforce Development are listed as Interested Parties in the advertisement, then the Notice of this foreclosure is being given to them and the Sale will be subject to the applicable governmental entities' right to redeem the property as required by 26 U.S.C. 7425 and T.C.A. §67-1-1433. This property is being sold with the express reservation that the sale is subject to confirmation by the lender or trustee. If the sale is set aside for any reason, the Purchaser at the sale shall be entitled only to a return of the purchase price. The Purchaser shall have no further recourse against the Mortgagor, the Mortgagee or the Mortgagee's attorney. MWZM File No. 23-000314-391-1

Mackie Wolf Zientz & Mann, P.C.,
Substitute Trustee(s)

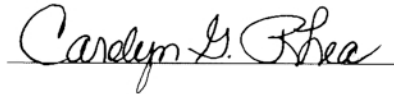
Cool Springs Commons, Suite 273
7100 Commerce Way
Brentwood, TN 37027
TN INVESTORS PAGE: [HTTP://MWZM-LAW.COM/TN_NOTICE_OF](http://MWZM-LAW.COM/TN_NOTICE_OF)

PROOF OF PUBLICATION

STATE OF TENNESSEE
FAYETTE COUNTY

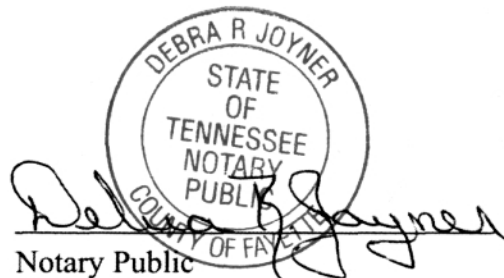
Personally appeared before me, the undersigned official of said county and state, Carolyn G. Rhea who makes oath in due form of law that she is the General Manager of The Fayette Falcon, a weekly newspaper published in Somerville, Fayette County, Tenn., and that the publication notice which is hereto attached was published in said paper to-wit:

February 7, 2024



Sworn to and subscribed before me this

8 day of February 2024.



Notary Public

My commission expires November 30, 2025.

NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED

This is to provide official notice to the Health Facilities Commission and all interested parties, in accordance with T.C.A. §68-11-1601 et seq., and the Rules of the Health Facilities Commission, that Tennessee Valley Home Care, LLC, d/b/a Tennessee Quality Care - Home Health, a/an proposed home care organization owned by American Home Care, LLC with an ownership type of Limited Liability Company and to be managed by itself intends to file an application for a Certificate of Need for the establishment of a home care organization and the initiation of home health services in a 13-county service area that includes: Carroll, Crockett, Dyer, Fayette, Gibson, Haywood, Henry, Lauderdale, Obion, Shelby, Tipton and Weakley Counties, as well as Certificate of Need-exempt Lake County. Lake County meets the criteria under T.C.A. § 68-11 1607(q) for designation as an economically distressed county and is not subject to Certificate of Need review. Upon approval of this project, the 13 proposed service area counties will be removed from the 51-county licensed service area of Tennessee Valley Home Care, LLC, d/b/a Tennessee Quality Care - Home Health (License No. 221), an existing home care organization located at 580 Tennessee Avenue, North, Parsons, Decatur County, Tennessee that is also owned by American Home Care, LLC. The address of the project will be 115 Neal Street, Suite E&F, Martin, Weakley County, Tennessee, 38237. The estimated project cost will be \$261,969.

The anticipated date of filing the application is 03/01/2024.

The contact person for this project is Mr. Jeff Stofko who may be reached at Ascendant Healthcare Advisors, Inc. - 1335 Environ Way, Chapel Hill, North Carolina, 27517 - Contact No. 919-403-3300.

The published Letter of Intent must contain the following statement pursuant to T.C.A. §68-11-1607 (c)(1). (A) Any healthcare institution wishing to oppose a Certificate of Need application must file a written notice with the Health Facilities Commission no later than fifteen (15) days before the regularly scheduled Health Facilities Commission meeting at which the application is originally scheduled; and (B) Any other person wishing to oppose the application may file a written objection with the Health Facilities Commission at or prior to the consideration of the application by the Commission, or may appear in person to express opposition. Written notice of opposition may be sent to: Health Facilities Commission, Andrew Jackson Building, 9th Floor, 502 Deaderick Street, Nashville, TN 37243 or email at hsda.staff@tn.gov. *Published February 7, 2024*

SAMPLE BALLOTS

STATE OF TENNESSEE

FAYETTE COUNTY MARCH 5, 2024 PRIMARY ELECTION

OFFICIAL BALLOT
STATE OF TENNESSEE

FAYETTE COUNTY
MARCH 5, 2024
PRESIDENTIAL PREFERENCE
PRIMARY
REPUBLICAN BALLOT

Candidates of the Republican Party for President of the United States
Vote For One (1)
0 selected, incomplete

"I declare my preference for candidate for the office of President of the United States to be:"

Precinct Name will go here
Ballot Name will go here

RYAN BINKLEY
CHRIS CHRISTIE
RON DESANTIS
NIKKI HALEY
ASA HUTCHINSON
VIVEK RAMASWAMY
DAVID STUCKENBERG
DONALD J. TRUMP
UNCOMMITTED
WRITE-IN

FAYETTE COUNTY REPUBLICAN
PRIMARY ELECTION

ASSESSOR OF PROPERTY
Vote For One (1)
0 selected, incomplete

SCHOOL BOARD
DISTRICT 2
Vote For Two (2)
0 selected, incomplete

MARK WARD
WRITE-IN
MIKE BROWN
DAVID M. REEVES
WRITE-IN
WRITE-IN

SCHOOL BOARD
DISTRICT 1
Vote For Two (2)
0 selected, incomplete

SCHOOL BOARD
DISTRICT 3
Vote For One (1)
0 selected, incomplete

MERREL MILLER
BECKY TRIMM
WRITE-IN
WRITE-IN
HAL ROUNDS
WRITE-IN

Committed and Uncommitted Delegates
At-Large
Delegate candidates are listed in alphabetical order by Presidential candidate
Vote For Fourteen (14)
0 selected, incomplete

MARILYN HUTCHINSON
Committed to Ron DeSantis
SHERRI P. LEE
Committed to Ron DeSantis
SONDRA MORRIS
Committed to Ron DeSantis
MONICA MOUNTAIN
Committed to Ron DeSantis
LAYNE PROVINE
Committed to Ron DeSantis
JOHN R. ROBERTS
Committed to Ron DeSantis
SCOTT SMITH
Committed to Ron DeSantis
BILLY J. STOKES
Committed to Ron DeSantis
CHAD STORY
Committed to Ron DeSantis
CHRIS WALKER
Committed to Ron DeSantis
DEBRA MAGGART BRESKE
Committed to Nikki Haley
TODD R. CRUSE
Committed to Nikki Haley
KEVIN DESMOND
Committed to Nikki Haley
JANE G. FERRELL
Committed to Nikki Haley
SANDI FIGG
Committed to Nikki Haley

CHARLES E. ALLEN JR.
Committed to Ron DeSantis
TINA BENKISER
Committed to Ron DeSantis
MARY KATE BROWN
Committed to Ron DeSantis
DERRICK CALCOTE
Committed to Ron DeSantis
BILL CAMPBELL
Committed to Ron DeSantis
CHARLIE CATO
Committed to Ron DeSantis
TERESA DIX
Committed to Ron DeSantis
JASON EMERT
Committed to Ron DeSantis
BRAD GRANTHAM
Committed to Ron DeSantis
FORREST B. HUTCHINSON
Committed to Ron DeSantis

MASON FOLEY
Committed to Nikki Haley
MICHAEL FULBRIGHT
Committed to Nikki Haley
BETSY FUNK
Committed to Nikki Haley
SAMUEL FUNK
Committed to Nikki Haley
PRESTON GEORGE
Committed to Nikki Haley
CHERYL S. HARVEY
Committed to Nikki Haley
ERIC JOE MAYO
Committed to Nikki Haley
JONATHAN MERKH
Committed to Nikki Haley
DON ALAN MILLER
Committed to Nikki Haley
EMILY PEARSE
Committed to Nikki Haley
JAMES C. PHILLIPS, JR.
Committed to Nikki Haley
ARCHIE PIERCE
Committed to Nikki Haley
NEIL RADER
Committed to Nikki Haley
PAUL VAN HOESEN
Committed to Nikki Haley
BILL YOUNG
Committed to Nikki Haley

SHARON B. ANDERSON
Committed to Donald J. Trump
ABIGAIL ARPIN
Committed to Donald J. Trump
JULIA ATCHLEY-PACE
Committed to Donald J. Trump
KELLY BARGER
Committed to Donald J. Trump
DENNIS H. BEAVERS
Committed to Donald J. Trump
MARILYN BETZ
Committed to Donald J. Trump
CHAD BLACKBURN
Committed to Donald J. Trump
MAX BONNER
Committed to Donald J. Trump
BARBARA BOSWELL
Committed to Donald J. Trump
CALVIN ROGERS CLAYTON
Committed to Donald J. Trump
JACLYN COLBETH
Committed to Donald J. Trump
MYA CONRAD
Committed to Donald J. Trump
GLORIA A. GIORNO
Committed to Donald J. Trump
STEVEN TYLER GIORNO
Committed to Donald J. Trump
LUCAS HEATON
Committed to Donald J. Trump

ZACHARY LAMBERT
Committed to Donald J. Trump
ROBBYN MAYLOTT
Committed to Donald J. Trump
CHARLOTTE MYERS
Committed to Donald J. Trump
STEPHANIE NASH
Committed to Donald J. Trump
TERRI NICHOLSON
Committed to Donald J. Trump
JOHN ROSE
Committed to Donald J. Trump
HARRISON VINETT
Committed to Donald J. Trump
RICK WILLIAMS
Committed to Donald J. Trump
PATRICIA WOODARD
Committed to Donald J. Trump
LISA ANN FLOWERS
Uncommitted
DIA HART
Uncommitted
WRITE-IN
WRITE-IN
WRITE-IN
WRITE-IN
WRITE-IN

Committed and Uncommitted Delegates
8th Congressional District
Delegate candidates are listed in alphabetical order by Presidential candidate
Vote For Three (3)
0 selected, incomplete

JOHNNY BELLIS
Committed to Ron DeSantis
KATHRYN BRYSON
Committed to Ron DeSantis
LUKE CYMBAL
Committed to Ron DeSantis
JIMMY HARRIS
Committed to Ron DeSantis
MISSY MARSHALL
Committed to Ron DeSantis
PAM PROCTOR
Committed to Ron DeSantis
LAUREN W. DOUGLASS
Committed to Nikki Haley
SCOTT DOUGLASS
Committed to Nikki Haley
KIMBERLY ANN PERRY
Committed to Nikki Haley
NICHOLAS PERRY
Committed to Nikki Haley

JOSEPH GLENN BUTLER
Committed to Donald J. Trump
JOSEPH COURY
Committed to Donald J. Trump
RON M. GANT
Committed to Donald J. Trump
KIMBERLY LAX
Committed to Donald J. Trump
KEVIN J. POWERS
Committed to Donald J. Trump
TESS ROBBINS
Committed to Donald J. Trump
WRITE-IN
WRITE-IN
WRITE-IN

OFFICIAL BALLOT
STATE OF TENNESSEE

FAYETTE COUNTY
MARCH 5, 2024
PRESIDENTIAL PREFERENCE
PRIMARY
DEMOCRATIC BALLOT

Candidates of the Democratic Party for President of the United States
Vote For One (1)
0 selected, incomplete

"I declare my preference for candidate for the office of President of the United States to be:"

Precinct Name will go here
Ballot Name will go here

JOSEPH R. BIDEN
UNCOMMITTED
WRITE-IN

FAYETTE COUNTY DEMOCRATIC
PRIMARY ELECTION

ASSESSOR OF PROPERTY
Vote For One (1)
0 selected, incomplete

SCHOOL BOARD
DISTRICT 2
Vote For Two (2)
0 selected, incomplete

ANGELA L. JENKINS-HINES
WRITE-IN
FRANCINE JOHNSON
CHARLES WATKINS
WRITE-IN
WRITE-IN

SCHOOL BOARD
DISTRICT 1
Vote For Two (2)
0 selected, incomplete

SCHOOL BOARD
DISTRICT 3
Vote For One (1)
0 selected, incomplete

ANDRE DEVON MARSHALL
WRITE-IN
CHRISTOPHER GRIGGS
REGINALD U. SAINÉ
WRITE-IN

My Seams Possible

Meeting All Your Sewing Needs

RITA GIPSON
115 Lakewood Dr.
Oakland, TN 38060
2-7-1tc

465-6809

NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED

This is to provide official notice to the Health Facilities Commission and all interested parties, in accordance with T.C.A. §68-11-1601 et seq., and the Rules of the Health Facilities Commission, that Tennessee Valley Home Care, LLC, d/b/a Tennessee Quality Care - Home Health, a/an proposed home care organization owned by American Home Care, LLC with an ownership type of Limited Liability Company and to be managed by itself intends to file an application for a Certificate of Need for the establishment of a home care organization and the initiation of home health services in a 13-county service area that includes: Carroll, Crockett, Dyer, Fayette, Gibson, Haywood, Henry, Lauderdale, Obion, Shelby, Tipton and Weakley Counties, as well as Certificate of Need-exempt Lake County. Lake County meets the criteria under T.C.A. § 68-11 1607(q) for designation as an economically distressed county and is not subject to Certificate of Need review. Upon approval of this project, the 13 proposed service area counties will be removed from the 51-county licensed service area of Tennessee Valley Home Care, LLC, d/b/a Tennessee Quality Care - Home Health (License No. 221), an existing home care organization located at 580 Tennessee Avenue, North, Parsons, Decatur County, Tennessee that is also owned by American Home Care, LLC. The address of the project will be 115 Neal Street, Suite E&F, Martin, Weakley County, Tennessee, 38237. The estimated project cost will be \$261,969.

The anticipated date of filing the application is 03/01/2024.

The contact person for this project is Mr. Jeff Stofko who may be reached at Ascendient Healthcare Advisors, Inc. - 1335 Environ Way, Chapel Hill, North Carolina, 27517 - Contact No. 919-403-3300.

The published Letter of Intent must contain the following statement pursuant to T.C.A. §68-11-1607 (c)(1). (A) Any healthcare institution wishing to oppose a Certificate of Need application must file a written notice with the Health Facilities Commission no later than fifteen (15) days before the regularly scheduled Health Facilities Commission meeting at which the application is originally scheduled; and (B) Any other person wishing to oppose the application may file a written objection with the Health Facilities Commission at or prior to the consideration of the application by the Commission, or may appear in person to express opposition. Written notice of opposition may be sent to: Health Facilities Commission, Andrew Jackson Building, 9th Floor, 502 Deaderick Street, Nashville, TN 37243 or email at hsda.staff@tn.gov.

Published February 7, 2024

TOWN OF OAKLAND

ADVERTISEMENT FOR QUOTES MOSQUITO ABATEMENT PROGRAM

Sealed quotes for Mosquito Abatement for the Town Oakland will be received at Oakland Town Hall, 170 Doss Circle, Oakland, TN 38060. Quotes can be hand delivered, mailed or emailed to hellis@oaklandtn.gov.

Quotes will be received until **4:00 p.m., Wednesday February 14, 2024**. Specifications for this project are available at Oakland Town Hall or at www.oaklandtennessee.org.

Published February 7, 2024

CHALK UP REAL SAVINGS

NOTICE
IF YOU SMELL GAS, HERE IS WHAT TO DO:

- Do not operate any electrical switches, or strike matches, or activate any ignition source.
- If inside, open door and windows.
- Telephone the gas company at its emergency number **877-6535**.
- If strong gas odor persists, alert other occupants and get clear of premises.
- Stand by until gas company personnel arrive.

THIS NOTICE IS REQUIRED BY FEDERAL LAW.

HARDEMAN-FAYETTE UTILITY DISTRICT

PROOF OF PUBLICATION

Accounts Payable
 Bass Berry Sims Plc
 150 3 Rd Ave South Suite 2800
 Nashville TN 37201

STATE OF WISCONSIN, COUNTY OF BROWN

The Jackson Sun, a newspaper published in the city of Jackson, Madison County, State of Tennessee, and personal knowledge of the facts herein state and that the notice hereto annexed was Published in said newspapers in the issue:

02/08/2024

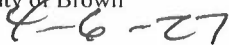
and that the fees charged are legal.
 Sworn to and subscribed before on 02/08/2024



Legal Clerk



Notary, State of WI, County of Brown



My commision expires

Publication Cost: \$453.40
 Order No: 9823437 # of Copies:
 Customer No: 1331673 0
 PO #: Tennessee Quality Ca

THIS IS NOT AN INVOICE!

Please do not use this form for payment remittance.

DENISE ROBERTS
 Notary Public
 State of Wisconsin

9823437

**NOTIFICATION OF INTENT TO APPLY FOR A
 CERTIFICATE OF NEED**

This is to provide official notice to the Health Facilities Commission and all interested parties, in accordance with T.C.A. §68-11-1601 et seq., and the Rules of the Health Facilities Commission, that Tennessee Valley Home Care, LLC, d/b/a Tennessee Quality Care - Home Health, a/an proposed home care organization owned by American Home Care, LLC with an ownership type of Limited Liability Company and to be managed by itself intends to file an application for a Certificate of Need for the establishment of a home care organization and the initiation of home health services in a 13-county service area that includes: Carroll, Crockett, Dyer, Fayette, Gibson, Haywood, Henry, Lauderdale, Obion, Shelby, Tipton and Weakley Counties, as well as Certificate of Need-exempt Lake County. Lake County meets the criteria under T.C.A. § 68-11 1607(a) for designation as an economically distressed county and is not subject to Certificate of Need review. Upon approval of this project, the 13 proposed service area counties will be removed from the 51-county licensed service area of Tennessee Valley Home Care, LLC, d/b/a Tennessee Quality Care - Home Health (License No. 221), an existing home care organization located at 580 Tennessee Avenue, North, Parsons, Decatur County, Tennessee that is also owned by American Home Care, LLC. The address of the project will be 115 Neal Street, Suite E&F, Martin, Weakley County, Tennessee, 38237. The estimated project cost will be \$261,969.

The anticipated date of filing the application is 03/01/2024. The contact person for this project is Mr. Jeff Stofko who may be reached at Ascendent Healthcare Advisors, Inc. - 1335 Environ Way, Chapel Hill, North Carolina, 27517 - Contact No. 919-403-3300.

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Attachment - Home Care Organizations

Home Health Agency, Hospice Agency (excluding Residential Hospice), identify the following by checking all that apply:

	Existing Licensed County	Parent Office County	Proposed Licensed County		Existing Licensed County	Parent Office County	Proposed Licensed County
Anderson	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lauderdale	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Bedford	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lawrence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Benton	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lewis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bledsoe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lincoln	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Blount	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Loudon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bradley	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	McMinn	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Campbell	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	McNairy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cannon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Macon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Carroll	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Madison	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Carter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Marion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cheatham	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Marshall	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chester	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Mauzy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Claiborne	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meigs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clay	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Monroe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cocke	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Montgomery	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Coffee	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Moore	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Crockett	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Morgan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cumberland	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Obion	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Davidson	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Overton	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Decatur	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Perry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DeKalb	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pickett	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dickson	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Polk	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dyer	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Putnam	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fayette	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Rhea	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fentress	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Roane	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Franklin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Robertson	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gibson	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Rutherford	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Giles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Scott	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grainger	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sequatchie	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Greene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sevier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grundy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Shelby	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Hamblen	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Smith	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hamilton	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Stewart	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hancock	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sullivan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hardeman	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sumner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hardin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tipton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Hawkins	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Trousdale	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Haywood	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Unicoi	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Henderson	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Union	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Henry	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Van Buren	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hickman	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warren	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Houston	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washington	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Humphreys	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wayne	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jackson	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Weakley	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Jefferson	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	White	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Johnson	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Williamson	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Knox	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wilson	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lake	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>				



Tre Hargett
Secretary of State

Division of Business Services
Department of State
State of Tennessee
312 Rosa L. Parks AVE, 6th FL
Nashville, TN 37243-1102

January 8, 2024

CAITLIN DALE
6303 COWBOYS WAY, SUITE 600
FRISCO, TX 75034

Request Type: Certificate of Existence/Authorization

Request #: 0563394

Issuance Date: 01/08/2024

Copies Requested: 1

Document Receipt

Receipt #: 008543689

Filing Fee: \$20.00

Payment-Credit Card - State Payment Center - CC #: 3865404389

\$20.00

Regarding: TENNESSEE VALLEY HOME CARE, LLC

Filing Type: Limited Liability Company - Domestic

Control #: 220256

Formation/Qualification Date: 09/18/1989

Date Formed: 09/18/1989

Status: Active

Formation Locale: TENNESSEE

Duration Term: Perpetual

Inactive Date:

Business County: WILLIAMSON COUNTY

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

TENNESSEE VALLEY HOME CARE, LLC

* is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above;

* has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;

* has filed the most recent annual report required with this office;

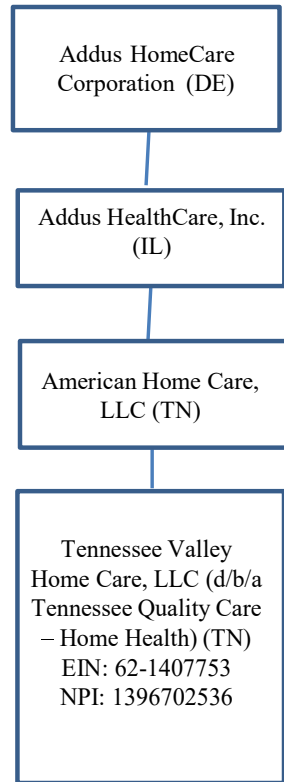
* has appointed a registered agent and registered office in this State;

* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Tre Hargett
Secretary of State

Processed By: Cert Web User

Verification #: 064996129



COMMERCIAL LEASE AMENDMENT

This Commercial Lease Amendment (“**Amendment**”) is made effective as of December 1, 2021 by and between SSL Properties, LLC, a Tennessee limited liability company (“**Landlord**”), and Tennessee Valley Home Care, LLC d/b/a Tennessee Quality Care – Home Health, a Tennessee limited liability company (formerly Tennessee Valley Home Care, Inc. d/b/a Tennessee Quality Care – Home Health, a Tennessee corporation) (“**Tenant**”). All capitalized terms not expressly defined in this Amendment shall have the meanings attributed to them in the Lease (as defined below).

RECITALS

- A. Landlord and Tenant entered into that certain Commercial Lease dated July 1, 2020 (“**Lease**”) for the Premises located at 115 Neal St. Suites E, F, and G, Martin, TN 38237 (“**Property**”).
- B. Landlord and Tenant have agreed for Tenant to lease additional office space on the Premises, specifically Suite G which adjoins the other suites at the Property, and which would increase the Premises’ square footage from approximately 3,600 square feet to approximately 4,800 square feet with possession to take place as set forth in this Amendment.
- C. Landlord and Tenant have agreed to modify the monthly lease payment to account for such increased square footage leased by Tenant from Landlord pursuant to the terms set forth in this Amendment.
- D. Landlord and Tenant have also agreed to extend the Term of the Lease through November 30, 2024 with the option for a three year lease extension pursuant to the terms set forth in this Amendment.

NOW, THEREFORE, for good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, Landlord and Tenant covenant and agree as follows:

1. Recitals. The foregoing Recitals are true and correct, and are incorporated herein by this reference.
2. Premises. The Premises paragraph in the Lease is hereby deleted in its entirety and replaced with the following:

PREMISES. Landlord, in consideration of the lease payments provided in this Lease, leases to Tenant four (4) separate, but adjoining, units consisting of approximately 4,800 square feet (the “Premises”) located at 115 Neal Street, Suites D, E, F and G, Martin, Tennessee 38237.

3. Lease Payments. The Lease Payments paragraph in the Lease is hereby deleted in its entirety and replaced with the following:

LEASE PAYMENTS. Tenant shall pay to Landlord monthly installments of \$3,700.00, payable in advance on the first day of each month starting on December 1, 2021. Tenant shall pay to Landlord monthly installment of \$2,950.00 for month of November 2021. Lease payments shall be made to the Landlord at 317 S. Lindell St, Martin, Tennessee 38237. The payment address may be changed from time to time by Landlord upon proper notice to Tenant pursuant to the term of this Lease.

4. Term. The Term paragraph in the Lease is hereby deleted in its entirety and replaced with the following:

TERM. The Lease Term will begin on December 1, 2021 and will terminate on November 30, 2024. There is one three-year renewal option available to extend the Lease Term at a rental rate increase of 5% which would increase the monthly installment of lease payments to \$3,885.00 per month for the period of December 1, 2024 through November 30, 2027 (Renewal Option).

5. Possession. The Possession paragraph in the Lease is hereby deleted in its entirety and replaced with the following:

POSSESSION. Tenant is currently in possession of units E, F, and G of the Property. Tenant will pay existing Lease payment amount of \$2,950.00 for month of November 2021, but will have access to unit D during the month of November 2021 to move in. During the month of November 2021, Landlord will run conduit over the roof of units D, E, F, and G to have approximately thirty (30) Cat 6 lines run to the new unit D. This work will be completed before November 15, 2021 and Tenant will be entitled to possession of new unit D immediately upon signing of this Amendment. Tenant shall yield possession of the Premises to the Landlord on the last day of the Term of this Lease unless otherwise agreed by both parties in writing. At the expiration of the Term or any renewal term, Tenant shall remove its good and effects and peaceably yield up the Premises to Landlord in good condition, ordinary wear and tear excepted.

6. Binding Effect. This Amendment shall be binding upon and inure to the benefit of Landlord and Tenant and their respective heirs, personal representatives, successors and assigns.

7. Ratification. Except as modified and amended by this Amendment, the Lease has not been modified or amended, is hereby ratified and confirmed on and subject to each of the terms, provisions and conditions thereof, as amended by this Amendment, and is hereby declared by the undersigned to be in full force and effect.

8. Counterparts. This Amendment may be executed in multiple counterparts, each of which shall be deemed an original, and all of which shall be one and the same instrument.

9. Governing Law. This Amendment shall be governed by and construed and enforced in accordance with the laws of the State in which the Property is located.

IN WITNESS WHEREOF, Landlord and Tenant hereby enter into this Amendment by signature of their duly authorized representatives, such Amendment to take effect as of the date first above written.

LANDLORD:
SSL Properties, LLC
a Tennessee limited liability company

By: Tracy Nassar, LLC/MTSP
Tracy Nassar, Owner

Date: **11/8/21**

TENANT:

Tennessee Valley Home Care, LLC d/b/a

Tennessee Quality Care – Home Health

a Tennessee limited liability company

BY: Kelly R. Nichols, Esq., BS

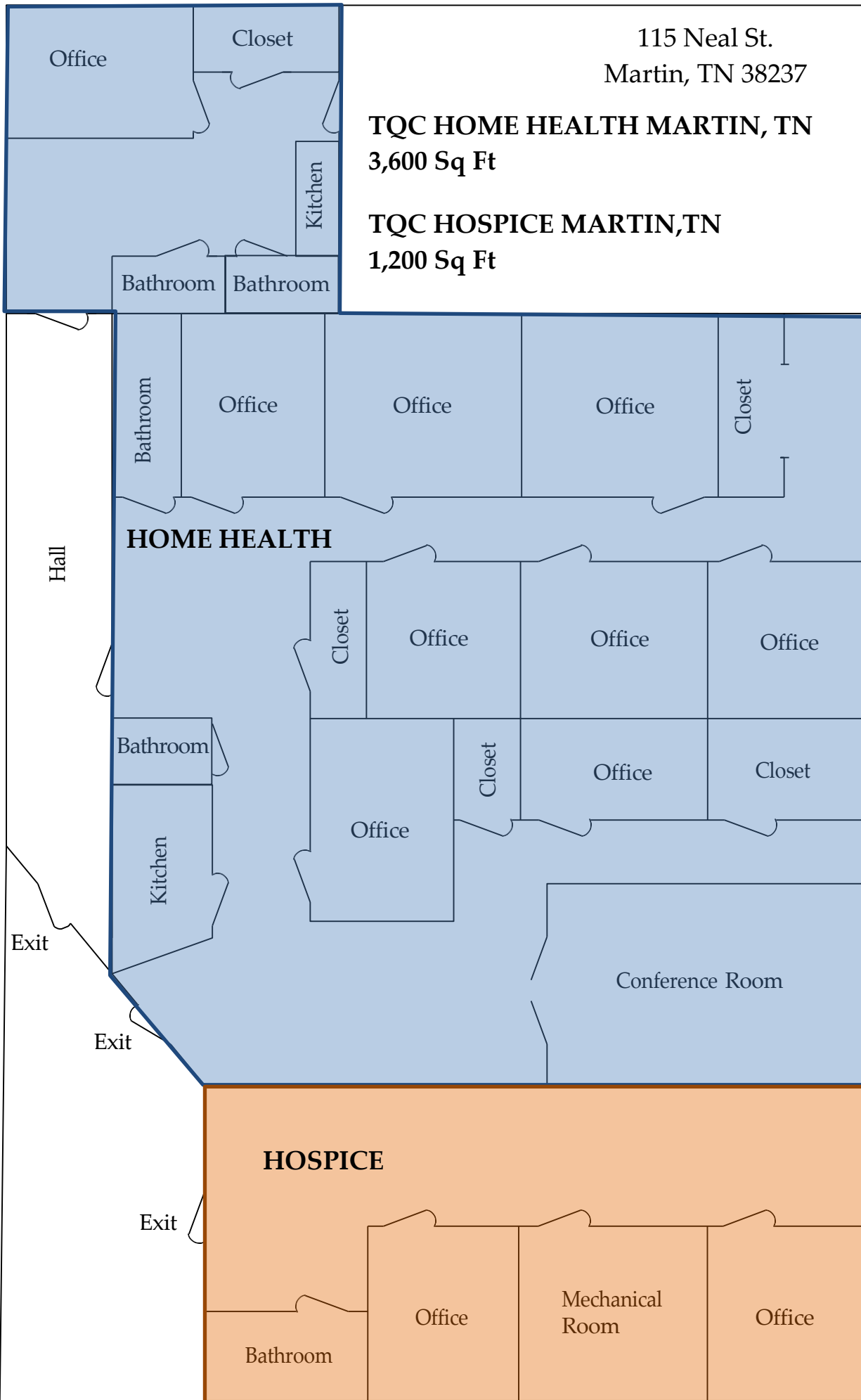
Kelly R. Nichols, Vice President

Date: 11/5/2021

115 Neal St.
Martin, TN 38237

TQC HOME HEALTH MARTIN, TN
3,600 Sq Ft

TQC HOSPICE MARTIN, TN
1,200 Sq Ft



Exit

Exit

Hall

HOME HEALTH

Exit

Exit

Exit

HOSPICE

Exit

Exit

South



March 4th, 2024

Mr. Logan Grant
Executive Director
Tennessee Health Facilities Commission
502 Deaderick St., Andrew Jackson Building, 9th Floor
Nashville, TN 37243

Re: Tennessee Valley Home Care, LLC d/b/a Tennessee Quality Care – Martin Certificate of Need Project

Dear Mr. Grant:

As Administrator of Unity Psychiatric Care (“UPC”) in Martin, I write on behalf of our patients and staff to express our strong support for Tennessee Valley Home Care’s (“Tennessee Quality Care’s”) certificate of need application to establish a parent home health agency in Martin, Tennessee.

UPC is a 16-bed inpatient mental health facility providing short-term treatment to older patients struggling with serious mental health symptoms and behavioral health issues linked to dementia. Our patients have a wide range of complex care needs, and we strive to deliver care that allows patients to transition back to their daily lives as quickly as possible. This requires specialized treatment plans that offer an effective combination of health services, medication and other types of therapy. We cannot provide this high level of care without partners like Tennessee Quality Care. I know this not only as someone who has worked alongside Tennessee Quality Care for over 18 years in my role at UPC but also as a resident of our community.

Across the country, access to mental health services is inadequate. This is especially true in the rural parts of West Tennessee that our facility serves. Tennessee Quality Care is one of the few home health providers in our region with the staff and resources necessary to provide quality psychiatric care to our patients. A new parent location in Martin will only enhance this proven ability, and I urge the approval of Tennessee Quality Care’s proposed project.

Sincerely,

A handwritten signature in black ink that reads "Carrie Brawley". The signature is fluid and cursive, with the first name "Carrie" and last name "Brawley" clearly distinguishable.

Carrie Brawley
Administrator



March 4, 2024

Mr. Logan Grant
Executive Director
Tennessee Health Facilities Commission
502 Deaderick St., Andrew Jackson Building, 9th Floor
Nashville, TN 37243

Re: Tennessee Valley Home Care, LLC d/b/a Tennessee Quality Care – Martin Home Care CON Project

Dear Mr. Grant,

I am Jennifer Conner, and I currently serve as Administrator at Weakley County Rehabilitation & Nursing Center in Dresden, Tennessee. Our facility and our patients have long relied upon Tennessee Valley Home Care (“TQC”), and we write to express our support for its proposed certificate of need project to establish a parent home health office location in Martin, Weakley County.

Our organization has been a healthcare provider in Weakley County and the surrounding Northwest Tennessee region since the mid-1800s. Today, our mission remains being a positive partner to elderly patients in our community who need comprehensive long-term care and rehabilitation services, including physical, occupational and speech therapy. TQC and its caring staff are critical to this mission, delivering high quality home health services, as well as private duty nursing services to our patients.

At Weakley County Rehabilitation & Nursing Center, we want patients to receive the care they need to maintain their dignity and a sense of independent living for as long as possible. We could not do this as effectively without TQC, and we urge the Health Facilities Commission to approve its project to better serve patients in Weakley and the surrounding counties.

Sincerely,

A handwritten signature in black ink that reads 'Jennifer Conner'. The signature is written in a cursive style with a large initial 'J'.

Jennifer Conner
Administrator



Anna Kristine Hopla, M.D., F.A.C.P.

• INTERNAL MEDICINE • NEPHROLOGY • HYPERTENSION •
148 Mount Pelia Road Phone (731) 200-0365
Martin, TN 38237 Fax (731) 200-0366



March 4, 2024

Mr. Logan Grant
Executive Director
Tennessee Health Facilities Commission
502 Deaderick St., Andrew Jackson Building, 9th Floor
Nashville, TN 37243

**Re: Tennessee Valley Home Care, LLC d/b/a Tennessee Quality Care – Martin
CON Project**

Dear Mr. Grant:

As a longtime nephrologist practicing in many of the counties Tennessee Valley Home Care (“TQC”) seeks to serve, I write this letter in strong support of its certificate of need application to establish a parent home care organization in Martin, Weakley County.

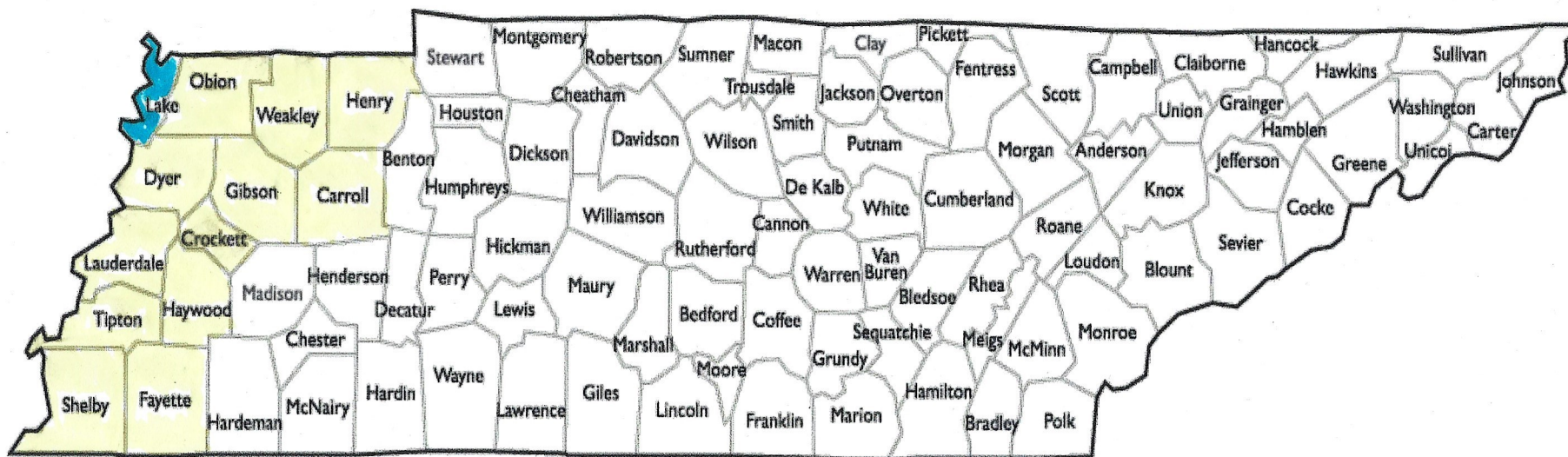
I have worked as a physician in the greater Martin area for over 44 years, and I currently operate three clinics in Martin, Union City and Paris. My patients suffer from debilitating and complex health care conditions, and I am frequently coordinating with local healthcare providers to ensure my patients receive the care management and oversight they need. In a rural region like ours, this can be very challenging, frequently leaving patients with few options outside of inpatient settings.

Access to comprehensive home health services like those TQC offers helps patients not only avoid unnecessary, costly trips to the hospital but also improves their day-to-day quality of life. Patients and healthcare providers in our region already depend on TQC and are certain to benefit from its proposed Martin parent office. I urge the Commission to approve TQC’s certificate of need, allowing it to fulfill its ongoing mission to serve patients in our region.

Sincerely,

Anna Hopla, MD

TENNESSEE COUNTY MAP



Demographic Variable/ Geographic Area	Department of Health/Health Statistics							Census Bureau				TennCare	
	Total Population Current Year (2023)*	Total Population Projected Year (2027)	Total Population % Change	Target Population** Current Year (2023)	Target Population Projected Year (2027)	Target Population % Change	Target Population Projected Year as % of Total	Median Age^	Median Household Income	Person Below Poverty Level	Person Below Poverty Level as % of Total	TennCare Enrollees^^	TennCare Enrollees as % of Total
Carroll	27,601	27,274	-1.2%	6,072	6,381	5.1%	23.4%	41.7	\$49,700	4,541	16.0%	7,798	28.3%
Crockett	14,161	14,111	-0.4%	2,904	3,096	6.6%	21.9%	40.2	\$59,136	2,317	16.6%	3,961	28.0%
Dyer	36,796	36,862	0.2%	7,096	7,549	6.4%	20.5%	40.5	\$53,150	6,296	17.1%	11,549	31.4%
Fayette	43,097	44,833	4.0%	10,584	11,929	12.7%	26.6%	46.8	\$81,074	4,392	10.4%	7,446	17.3%
Gibson	49,485	49,806	0.6%	9,587	10,178	6.2%	20.4%	39.8	\$55,455	7,518	14.9%	13,995	28.3%
Haywood	16,660	16,203	-2.7%	3,660	3,866	5.6%	23.9%	43.1	\$44,890	3,686	20.7%	5,608	33.7%
Henry	32,143	32,155	0.0%	8,203	8,680	5.8%	27.0%	45.7	\$48,025	5,007	15.5%	8,517	26.5%
Lauderdale	25,397	25,274	-0.5%	4,475	4,723	5.5%	18.7%	38.9	\$46,702	4,908	19.5%	8,071	31.8%
Obion	29,916	29,546	-1.2%	6,759	6,988	3.4%	23.7%	42.3	\$50,638	5,183	16.9%	8,489	28.4%
Shelby	941,637	947,491	0.6%	146,215	156,519	7.0%	16.5%	35.9	\$59,621	153,789	16.6%	273,938	29.1%
Tipton	62,909	63,997	1.7%	10,592	11,743	10.9%	18.3%	38.4	\$70,674	8,495	13.9%	13,824	22.0%
Weakley	33,249	33,245	0.0%	6,810	7,228	6.1%	21.7%	37.9	\$47,769	5,930	18.0%	7,936	23.9%
Service Area Total	1,313,051	1,320,797	0.6%	222,957	238,880	7.1%	18.1%	37.4	\$59,018	212,062	16.3%	371,132	28.3%
State of TN Total	7,071,060	7,282,134	3.0%	1,290,989	1,413,040	9.5%	19.4%	38.9	\$64,035	920,862	13.3%	1,611,680	22.8%
Lake	6,907	6,848	-0.9%	1,191	1,199	0.7%	17.5%	41.8	\$32,064	2,359	34.2%	2,145	31.1%
Service Area Total with Lake	1,319,958	1,327,645	0.6%	224,148	240,079	7.1%	18.1%	37.5	\$58,875	214,421	16.4%	373,277	28.3%

* Most recent data set at time of proposal for current and projected Tennessee county estimates is for 2023 through 2027

** As noted in 3N-A, the target population of the proposed project is the service area population over the age of 65.

^ Median age information was gathered via American Consumer Survey (ACS) 5-Year Estimates Subject Tables, 2017-2022, accessed via <https://data.census.gov/>

^^ Most recent data set at time of drafting of proposal is from January 2024.

Item 5N - Service Area Historical Utilization

Home Health Agency (Service Area)*	Home County	State ID	2021	2022	2023	Total	% Change 2021-2023
AccentCare Home Health of West Tennessee	Shelby	79886	N/A	N/A	13	13	N/A
Accredo Health Group, Inc.	Shelby	79456	48	53	50	151	4.0%
Adoration Home Health Brownsville	Haywood	38015	418	395	412	1,225	-1.5%
Adoration Home Health Care of West Tennessee	Shelby	79486	1,213	1,252	1,497	3,962	19.0%
Adoration Home Health Martin	Weakley	92025	1,136	1,083	1,104	3,323	-2.9%
Advanced Nursing Solutions	Davidson	19754	21	30	26	77	19.2%
Amedisys Home Care	Shelby	79146	967	978	935	2,880	-3.4%
Amedisys Home Health	Shelby	79386	1,562	1,538	1,339	4,439	-16.7%
Amedisys Home Health Care	Madison	57075	2,372	2,497	1,404	6,273	-68.9%
Amedisys Home Health Care	Shelby	79246	1,060	1,012	715	2,787	-48.3%
Americare Home Health Agency, Inc	Shelby	79256	436	646	646	1,728	32.5%
Baptist Memorial Home Care and Hospice	Carroll	09065	474	613	438	1,525	-8.2%
Baptist Trinity Home Care and Hospice	Shelby	79276	2,980	3,220	2,389	8,589	-24.7%
Best Nurses, Inc.	Shelby	79546	90	92	95	277	5.3%
Clinch River Home Health	Anderson	01032	0	1	1	2	100.0%
Coram CVS Specialty Infusion Service	Shelby	79556	116	74	26	216	-346.2%
Deaconess Homecare	Hardin	36025	0	0	0	0	N/A
Elk Valley Health Services Inc	Davidson	19494	122	123	83	328	-47.0%
Extencare Home Health of West Tennessee	Dyer	57095	2,197	2,502	2,194	6,893	-0.1%
Extencare Home Health of Western Tennessee	Obion	66035	441	616	566	1,623	22.1%
Functional Independence Home Care, Inc.	Shelby	79496	3,464	3,261	3,030	9,755	-14.3%
Hemophilia Preferred Care of Memphis, Inc.	Shelby	79566	1	1	1	3	0.0%
Henry County Medical Center Home Health	Henry	40075	382	310	400	1,092	4.5%
Home Care Solutions	Davidson	19544	0	0	0	0	N/A
Homechoice Health Services	Shelby	79376	742	646	572	1,960	-29.7%
Implanted Pump Management, LLC	Knox	47452	4	5	4	13	0.0%
Intrepid USA Healthcare Services	Madison	57165	406	374	255	1,035	-59.2%
Intrepid USA Healthcare Services	Shelby	79226	589	491	300	1,380	-96.3%
Maxim Healthcare Services Inc.	Shelby	79536	184	173	160	517	-15.0%
Medical Center Home Health, LLC	Madison	57055	892	1,196	1,193	3,281	25.2%
Meritan, Inc.	Shelby	79106	519	435	470	1,424	-10.4%
Methodist Alliance Home Care	Shelby	79316	2,821	2,386	2,110	7,317	-33.7%
NHC Homecare	Gibson	27025	315	386	344	1,045	8.4%
NHC Homecare	Fayette	24026	154	157	111	422	-38.7%
NHC Homecare	Rutherford	75024	1	1	0	2	N/A
NHC Homecare Springfield	Robertson	74054	0	0	0	0	N/A
No Place Like Home, Inc	Shelby	79506	61	66	55	182	-10.9%
Optum Infusion Services	Shelby	79856	12	14	28	54	57.1%
Optum Women's and Children's Health, LLC	Shelby	79466	248	148	62	458	-300.0%
Pentec Health, Inc.	Davidson	19744	11	4	4	19	-175.0%
Quality Home Health Services	Shelby	79136	231	118	87	436	-165.5%
St Jude Childrens Research Hospital Homecare LLC	Shelby	79866	N/A	20	90	110	N/A
Still Waters Home Health Agency	Shelby	79526	803	813	988	2,604	18.7%
Tennessee Quality Care - Home Health	Decatur	20045	1,128	1,865	1,727	4,720	34.7%
Vanderbilt HC w/Option Care IV Services	Davidson	19994	4	99	76	179	94.7%
Volunteer Home Care, Inc	Gibson	27085	1,785	1,391	1,423	4,599	-25.4%
Volunteer Homecare of West Tennessee, Inc.	Decatur	20055	0	1	3	4	100.0%
Where The Heart Is, Inc.	Fayette	24036	619	588	1,014	2,221	39.0%
TOTAL			31,029	31,674	28,440	91,143	-9.1%

Source: Tennessee Department of Health, Joint Annual Reports (JARs), 2023-2021, accessed <https://apps.health.tn.gov/publicjars/default.aspx>.

*All agency names are listed as they appear in the 2023 JARs, which may be different than the name(s) displayed for the corresponding State ID for 2022 and/or 2021.

**Table 6N-8R: Projected Home Health Utilization: TQC Western Region Counties
2022-2026**

County	2022	2023	2024	2025	2026
Carroll	140	140	139	145	150
Crockett	21	21	21	23	25
Dyer	41	41	41	47	53
Fayette	49	50	50	54	58
Gibson	148	148	148	158	167
Haywood	43	43	42	45	47
Henry	246	246	247	253	259
Lauderdale	61	61	61	65	69
Obion	124	124	123	129	134
Shelby	469	470	471	557	643
Tipton	118	119	119	126	134
Weakley	245	245	244	249	254
Total for CON-Reviewable Counties	1,705	1,706	1,707	1,850	1,993
Lake County (CON-Exempt)	22	22	22	23	24
Grand Total	1,727	1,728	1,729	1,874	2,017

Source (2022 data): Tennessee Department of Health, Joint Annual Reports (JARs), 2023, at <https://apps.health.tn.gov/publicjars/default.aspx>.

Home Health Agency	Home County	State ID	Home Health Aid Services (Charge Per Visit - Direct Only)	Medical Social Services (Charge Per Visit - Direct Only)	Occupational Therapy (Charge Per Visit - Direct Only)	Physical Therapy (Charge Per Visit - Direct Only)	Skilled Nursing Care (Charge Per Visit - Direct Only)	Speech Therapy (Charge Per Visit - Direct Only)
AccentCare Home Health of West Tennessee	Shelby	79886	N/A	N/A	N/A	N/A	N/A	N/A
Accredo Health Group, Inc.	Shelby	79456	N/A	N/A	N/A	N/A	N/A	N/A
Adoration Home Health Brownsville	Haywood	38015	\$95	\$225	\$195	\$195	\$180	N/A
Adoration Home Health Care of West Tennessee	Shelby	79486	\$95	\$225	\$195	\$195	\$180	\$195
Adoration Home Health Martin	Weakley	92025	\$95	\$225	\$195	\$195	\$180	\$195
Advanced Nursing Solutions	Davidson	19754	N/A	N/A	N/A	N/A	N/A	N/A
Amedisys Home Care	Shelby	79146	N/A	N/A	N/A	N/A	N/A	N/A
Amedisys Home Health	Shelby	79386	N/A	N/A	N/A	N/A	N/A	N/A
Amedisys Home Health Care	Madison	57075	N/A	N/A	N/A	N/A	N/A	N/A
Amedisys Home Health Care	Shelby	79246	N/A	N/A	N/A	N/A	N/A	N/A
Americare Home Health Agency, Inc.	Shelby	79256	\$71	\$0	\$173	\$171	\$157	\$186
Baptist Memorial Home Care and Hospice	Carroll	09065	\$24	\$85	\$77	\$81	\$56	\$138
Baptist Trinity Home Care and Hospice	Shelby	79276	\$40	\$209	\$79	\$104	\$109	\$114
Best Nurses, Inc.	Shelby	79546	N/A	N/A	N/A	N/A	N/A	N/A
Clinch River Home Health	Anderson	01032	N/A	N/A	N/A	N/A	N/A	N/A
Coram CVS Specialty Infusion Service	Shelby	79556	N/A	N/A	N/A	N/A	N/A	N/A
Deaconess Homecare	Hardin	36025	\$61	\$134	\$60	\$82	\$90	\$177
Elk Valley Health Services, LLC	Davidson	19494	N/A	N/A	N/A	N/A	N/A	N/A
Extendicare Home Health of West Tennessee	Dyer	57095	\$28	\$78	\$88	\$84	\$66	\$127
Extendicare Home Health of Western Tennessee	Obion	66035	\$27	\$89	\$97	\$80	\$61	\$148
Functional Independence Home Care, Inc.	Shelby	79496	N/A	N/A	N/A	N/A	N/A	N/A
Hemophilia Preferred Care of Memphis, Inc.	Shelby	79566	\$0	\$0	\$0	\$0	\$0	\$0
Henry County Medical Center Home Health	Henry	40075	\$110	\$253	\$215	\$235	\$205	\$176
Home Care Solutions	Davidson	19544	N/A	\$81	\$86	\$91	\$76	\$100
Homechoice Health Services	Shelby	79376	\$28	\$94	\$86	\$95	\$82	\$49
Implanted Pump Management LLC	Knox	47452	N/A	N/A	N/A	N/A	N/A	N/A
Intrepid USA Healthcare Services	Madison	57165	\$22	\$125	\$105	\$107	\$46	\$106
Intrepid USA Healthcare Services	Shelby	79226	\$22	\$125	\$105	\$107	\$46	\$106
Maxim Healthcare Services Inc.	Shelby	79536	N/A	N/A	N/A	N/A	N/A	N/A
Medical Center Home Health, LLC	Madison	57055	\$34	\$213	\$86	\$82	\$68	\$150
Meritan INC	Shelby	79106	\$100	\$250	\$250	\$250	\$200	\$250
Methodist Alliance Home Care	Shelby	79316	\$125	\$400	\$325	\$325	\$300	\$350
NHC Homecare	Fayette	24026	\$95	\$195	\$225	\$225	\$175	\$225
NHC Homecare	Gibson	27025	\$95	N/A	\$225	\$225	\$175	N/A
NHC Homecare	Rutherford	75024	\$95	\$195	\$225	\$225	\$175	\$225
NHC Homecare Springfield	Robertson	74054	\$95	\$195	\$225	\$225	\$175	\$225
No Place Like Home, Inc.	Shelby	79506	N/A	N/A	N/A	N/A	N/A	N/A
Optum Infusion Services LLC	Williamson	79856	N/A	N/A	N/A	N/A	N/A	N/A
Optum Womens and Childrens Health LLC	Shelby	79466	N/A	N/A	N/A	N/A	N/A	N/A
Pentec Health, Inc.	Hamilton	19744	N/A	N/A	N/A	N/A	\$271	N/A
Quality Home Health Services	Shelby	79136	\$65	N/A	N/A	\$157	\$145	N/A
St Jude Childrens Research Hospital Homecare LLC	Shelby	79866	\$17		\$91	\$80	N/A	N/A
Still Waters Home Health Agency	Shelby	79526	\$75	\$250	\$155	\$155	\$150	N/A
Tennessee Quality Care - Home Health	Decatur	20045	\$100	\$250	\$220	\$210	\$170	\$230
Vanderbilt HC Option Care IV Services	Davidson	19994	N/A	N/A	N/A	N/A	N/A	N/A
Volunteer Home Care, Inc.	Gibson	27085	\$75	\$150	\$150	\$150	\$150	\$150
Volunteer Homecare of West Tennessee, Inc.	Decatur	20055	\$75	\$150	\$150	\$150	\$150	\$150
Where The Heart Is, Inc.	Fayette	24036	\$66	\$0	\$161	\$160	\$147	\$174
Average			\$65	\$161	\$152	\$153	\$137	\$164

Source: Tennessee Department of Health, Joint Annual Reports (JARs), 2023, accessed <https://apps.health.tn.gov/publicjars/default.aspx>.

Home Health Agency	Home County	State ID	Home Health Aide Services		Medical Social Services		Occupational Therapy		Physical Therapy		Skilled Nursing Care		Speech Therapy		Totals			Gross Revenue	Revenue Per Patient	Revenue Per Visit
			Visits	Hours	Visits	Hours	Visits	Hours	Visits	Hours	Visits	Hours	Visits	Hours	Patients	Visits	Hours			
AccentCare Home Health of West Tennessee	Shelby	79886	0	0	0	0	0	0	274	0	72	0	0	0	13	346	0	1	\$0.08	\$0.00
Accredo Health Group, Inc.	Shelby	79456	0	0	0	0	0	0	0	0	0	0	0	0	233	741	0	275872	\$1,184.00	\$372.30
Adoration Home Health Brownsville	Haywood	38015	928	30905	44	0	1069	0	7656	0	7095	65276	0	0	795	16792	96181	9382441	\$11,801.81	\$558.74
Adoration Home Health Care of West Tennessee	Shelby	79486	1201	30835	81	0	7703	0	12886	0	8388	94860	341	0	1583	30600	125695	17511949	\$11,062.51	\$572.29
Adoration Home Health Martin	Weakley	92025	2	38567	46	0	631	0	11704	0	14316	107414	609	0	1337	27308	145981	15162355	\$11,340.58	\$555.23
Advanced Nursing Solutions	Davidson	19754	0	0	0	0	0	0	0	0	0	0	0	204	1119	2941	173479	\$850.39	\$155.03	
Amedisys Home Care	Shelby	79146	994	0	195	0	2212	0	7511	0	8361	0	368	0	917	19581	0	4672879	\$5,095.83	\$238.64
Amedisys Home Health	Shelby	79386	1596	0	1099	0	3966	0	12185	0	13139	0	356	0	1306	32343	0	6246760	\$4,783.12	\$193.14
Amedisys Home Health Care	Madison	57075	1522	0	1016	0	6883	0	27567	0	26671	0	1148	0	2028	64807	0	14161024	\$6,982.75	\$218.51
Amedisys Home Health Care	Shelby	79246	480	0	340	0	2853	0	7969	0	6845	0	220	0	689	18707	0	4005617	\$5,813.67	\$214.12
Americare Home Health Agency, Inc.	Shelby	79256	2279	2277	0	0	1592	1613	3614	3794	5274	5972	3	3	662	12798	13791	2514157	\$3,797.82	\$196.45
Baptist Memorial Home Care and Hospice	Carroll	09065	73	52	232	199	3974	3516	9456	8804	12215	10957	254	245	623	26204	23773	2155224	\$3,459.43	\$82.25
Baptist Trinity Home Care and Hospice	Shelby	79276	1649	1589	553	845	8477	7700	26883	30099	31406	40576	1025	823	2584	69993	81632	8315884	\$3,218.22	\$118.81
Best Nurses, Inc.	Shelby	79546	0	25571	0	0	0	0	0	0	0	0	0	0	117	0	105111	1897770	\$16,220.26	
Clinch River Home Health	Anderson	01032	0	421639	0	0	0	0	0	2104	0	51247	0	0	404	0	474990	16794242	\$41,569.91	N/A
Coram CV5 Speciality Infusion Service	Shelby	79556	0	0	0	0	0	0	0	0	0	0	0	28	221	971	129090	\$4,610.36	\$584.12	
Deaconess Homecare	Hardin	36025	94	83	265	376	3679	3187	11135	11192	7505	8173	821	817	627	23499	23828	2154400	\$3,436.04	\$91.68
Elk Valley Health Services, LLC	Davidson	19494	33722	22914	0	0	0	0	0	0	96486	975742	0	0	269	134317	1213823	25683094	\$95,476.19	\$191.21
Extendicare Home Health of West Tennessee	Dyer	57095	3410	2622	1746	1797	7928	7226	35112	34149	45183	43907	1390	1269	2623	94769	90970	7374952	\$2,811.65	\$77.82
Extendicare Home Health of Western Tennessee	Obion	66035	428	325	319	269	1119	870	8339	8396	11165	11007	266	260	657	21636	21127	1702817	\$2,591.81	\$78.70
Functional Independence Home Care, Inc.	Shelby	79496	13	11415	3561	0	24132	0	33923	0	16827	11502	1747	0	4821	80203	22917	8467654	\$1,756.41	\$105.58
Hemophilia Preferred Care of Memphis, Inc.	Shelby	79566	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	N/A	N/A
Henry County Medical Center Home Health	Henry	40075	111	0	48	0	978	0	2971	0	3508	0	3	0	471	7619	0	1212074	\$2,573.41	\$159.09
Home Care Solutions	Davidson	19544	0	0	2324	2436	10851	10338	44056	43302	38854	39466	2486	2574	2476	98571	98116	7908876	\$3,194.21	\$80.24
Homechoice Health Services	Shelby	79376	365	348	164	121	1135	1016	11094	11956	6348	6725	7	4	628	19113	20170	2063381	\$3,285.64	\$107.96
Implanted Pump Management LLC	Knox	47452	0	0	0	0	0	0	0	0	0	0	0	46	115	115	17250	\$375.00	\$150.00	
Intrepid USA Healthcare Services	Madison	57165	407	0	19	0	1248	0	4370	0	5298	0	78	0	11451	11420	0	861935	\$75.27	\$75.48
Intrepid USA Healthcare Services	Shelby	79226	611	0	13	0	796	0	3739	0	2334	0	37	0	7530	7530	0	727790	\$96.65	\$96.65
Maxim Healthcare Services Inc.	Shelby	79536	152	74269	0	0	0	0	0	245	308829	0	0	240	397	383098	17646638	\$73,527.66	\$44,449.97	
Medical Center Home Health, LLC	Madison	57055	2465	1795	689	591	8382	8501	44656	43416	69474	65305	2514	2450	3932	128180	122058	10345037	\$2,630.99	\$80.71
Meritan INC	Shelby	79106	2083	0	28	0	2078	0	4334	0	4165	0	188	0	873	12876	0	3147569	\$3,605.46	\$244.45
Methodist Alliance Home Care	Shelby	79316	1294	0	495	0	4475	0	12508	0	6781	0	831	0	2545	26384	0	5188119	\$2,038.55	\$196.64
NHC Homecare	Fayette	24026	223	0	122	0	1823	0	3275	0	4572	0	27	0	358	10042	0	1853279	\$5,176.76	\$184.55
NHC Homecare	Gibson	27025	38	0	0	0	125	0	1898	0	2301	0	0	0	151	4362	0	789732	\$5,230.01	\$181.05
NHC Homecare	Rutherford	75024	129	0	125	0	4887	0	26001	0	21800	0	257	0	1958	53199	0	10035324	\$5,125.29	\$188.64
NHC Homecare Springfield	Robertson	74054	1094	1094	647	647	7662	7662	24706	24706	22667	22667	568	568	2086	57344	57344	9319009	\$4,467.41	\$162.51
No Place Like Home, Inc.	Shelby	79506	0	6529	0	0	0	0	0	0	0	1004	0	56	0	116431	6425239	\$114,736.41	N/A	N/A
Optum Infusion Services LLC	Williamson	79856	0	0	0	0	0	0	0	0	0	0	0	219	1599	6047	289089	\$1,320.04	\$180.79	
Optum Womens and Childrens Health LLC	Shelby	79466	0	0	0	0	0	0	0	520	781	0	0	166	520	781	1251259	\$7,537.70	\$2,406.27	
Pentec Health, Inc.	Hamilton	19744	0	0	0	0	0	0	0	834	3545	0	0	191	834	3545	664488	\$3,478.99	\$796.75	
Quality Home Health Services	Shelby	79136	5547	33489	0	0	0	0	345	294	4036	18661	0	0	885	10261	52755	1440576	\$1,627.77	\$140.39
St Jude Childrens Research Hospital Homecare LLC	Shelby	79866	168	133	0	0	64	50	0	2434	1393	0	0	104	2666	1576	486450	\$4,677.40	\$182.46	
Still Waters Home Health Agency	Shelby	79526	2668	10500	124	0	6221	0	8632	0	7906	23623	0	0	988	25551	34123	4322740	\$4,375.24	\$169.18
Tennessee Quality Care - Home Health	Decatur	20045	9306	88792	1022	0	8857	0	49989	0	73220	47892	2150	0	4239	144544	137830	31624989	\$7,460.48	\$218.79
Vanderbilt HC Option Care IV Services	Davidson	19994	0	0	0	0	0	0	0	0	0	0	0	333	2521	5938	593665	\$1,782.78	\$235.49	
Volunteer Home Care, Inc.	Gibson	27085	3710	83531	873	0	2191	0	24047	0	33865	49105	434	0	2658	65120	134021	13497540	\$5,078.08	\$207.27
Volunteer Homecare of West Tennessee, Inc.	Decatur	20055	7471	84105	379	0	967	0	18738	0	33035	68141	288	0	2195	60878	152656	13432552	\$6,119.61	\$220.65
Where The Heart Is, Inc.	Fayette	24036	3640	31203	0	0	4427	0	7522	0	8533	28455	230	0	1116	24514	59658	4054792	\$3,633.33	\$165.41
Average																			\$10,874.32	\$1,270.14



[Skip to main content](#)

Organizations that have achieved
The Gold Seal of Approval® from
The Joint Commission®



Quality Report



Tennessee Valley Home Care, LLC



DBA: Tennessee Quality Care
HCO ID: 677161
580 Tennessee Avenue North
Parsons, TN, 38363
(731) 847-9228
tnquality.com

Summary of Quality Information

Accreditation Programs

[View Accreditation History](#)



[Home
Care](#)

**Accreditation
Decision**
[Accredited](#)

**Effective
Date**
9/8/2023

**Last Full Survey
Date**
6/30/2023

**Last On-Site Survey
Date**
6/30/2023

Sites

Tennessee Valley Home Care, LLC

DBA: Tennessee Quality Care
322 Church Street
Dover, TN, 37058

Available Services

- Home Health Aides
- Home Health, Non-Hospice Services
- Medical Social Services
- Occupational Therapy
- Physical Therapy
- Skilled Nursing Services
- Speech Language Pathology

Tennessee Valley Home Care, LLC

DBA: Tennessee Quality Care
115 Neal Street Ste E and F
Martin, TN, 38237

Available Services

- Home Health Aides
- Home Health, Non-Hospice Services
- Medical Social Services
- Occupational Therapy
- Physical Therapy
- Skilled Nursing Services

- Speech Language Pathology

Tennessee Valley Home Care, LLC

DBA: Tennessee Quality Care
128 Hwy 641 Suite A
Camden, TN, 38320

Available Services

- Home Health Aides
- Home Health, Non-Hospice Services
- Medical Social Services
- Occupational Therapy
- Physical Therapy
- Skilled Nursing Services
- Speech Language Pathology

Tennessee Valley Home Care, LLC

DBA: Tennessee Quality Care
118 Public Square East, P.O. Box 976
Waynesboro, TN, 38485

Available Services

- Home Health Aides
- Home Health, Non-Hospice Services
- Medical Social Services
- Occupational Therapy
- Physical Therapy
- Skilled Nursing Services
- Speech Language Pathology

Tennessee Valley Home Care, LLC

DBA: Tennessee Quality Care
2879 Hwy 45 Bypass Suite B
Jackson, TN, 38305

Available Services

- Home Health Aides
- Home Health, Non-Hospice Services
- Medical Social Services
- Occupational Therapy
- Physical Therapy
- Skilled Nursing Services
- Speech Language Pathology

Tennessee Valley Home Care, LLC

DBA: Tennessee Quality Care
161 Hatcher Lane
Clarksville, TN, 37043

Available Services

- Home Health Aides
- Home Health, Non-Hospice Services
- Medical Social Services
- Occupational Therapy

- Physical Therapy
- Skilled Nursing Services
- Speech Language Pathology

Tennessee Valley Home Care, LLC

DBA: Tennessee Quality Care
95 Signature Place
Lebanon, TN, 37087

Available Services

- Home Health Aides
- Home Health, Non-Hospice Services
- Medical Social Services
- Occupational Therapy
- Physical Therapy
- Skilled Nursing Services
- Speech Language Pathology

Tennessee Valley Home Care, LLC

DBA: Tennessee Quality Care
899C Highway 51
Covington, TN, 38019

Available Services

- Home Health Aides
- Home Health, Non-Hospice Services
- Medical Social Services
- Occupational Therapy
- Physical Therapy
- Skilled Nursing Services
- Speech Language Pathology

Tennessee Valley Home Care, LLC

DBA: Tennessee Quality Care
580 Tennessee Ave N.
Parsons, TN, 38363

Available Services

- Home Health Aides
- Home Health, Non-Hospice Services
- Medical Social Services
- Occupational Therapy
- Physical Therapy
- Skilled Nursing Services
- Speech Language Pathology

Tennessee Valley Home Care, LLC

DBA: Tennessee Quality Care
2835 East Wood St Ste E
Paris, TN, 38242

Available Services

- Home Health Aides
- Home Health, Non-Hospice Services

- Medical Social Services
- Occupational Therapy
- Physical Therapy
- Skilled Nursing Services
- Speech Language Pathology

Tennessee Valley Home Care, LLC

DBA: Tennessee Quality Care

201 Jordan Rd

Franklin, TN, 37067

Available Services

- Home Health Aides
- Home Health, Non-Hospice Services
- Medical Social Services
- Occupational Therapy
- Physical Therapy
- Skilled Nursing Services
- Speech Language Pathology

Tri-County Home Health and Hospice, Inc

DBA: Tennessee Quality Care

161 Hatcher Lane

Clarksville, TN, 37043

Available Services

- Hospice Care

Tri-County Home Health and Hospice, Inc

DBA: Tennessee Quality Care

201 Jordan Rd

Franklin, TN, 37067

Available Services

- Hospice Care

Tri-County Home Health and Hospice, Inc

DBA: Tennessee Quality Care

118 Public Square East, PO Box 444

Waynesboro, TN, 38485

Available Services

- Hospice Care

Tri-County Home Health and Hospice, Inc

DBA: Tennessee Quality Care

128 Highway 641 Suite B

Camden, TN, 38320

Available Services

- Hospice Care

Tri-County Home Health and Hospice, Inc

DBA: Tennessee Quality Care
2879 Hwy 45 Bypass Suite A
Jackson, TN, 38305

Available Services

- Hospice Care

Tri-County Home Health and Hospice, Inc

DBA: Tennessee Quality Care
115 Neal St. Suite G
Martin, TN, 38237

Available Services

- Hospice Care

National Patient Safety Goals and National Quality Improvement Goals

Symbol Key

- 🌟 This organization achieved the best possible results
- 🟢 This organization's performance is better than the target range/value
- ✅ This organization's performance is similar to the target range/value
- 🚫 This organization's performance is worse than the target range/value
- 🚫 N/A This measure is not applicable for this organization
- 🚫 N/D Not displayed

Measures Footnote Key

1. The measure or measure set was not reported.
2. The measure set does not have an overall result.
3. The number is not enough for comparison purposes.
4. The measure meets the Privacy Disclosure Threshold rule.
5. The organization scored above 90% but was below most other organizations.
6. The measure results are not statistically valid.
7. The measure results are based on a sample of patients.
8. The number of months with measure data is below the reporting requirement.
9. The measure results are temporarily suppressed pending resubmission of updated data.
10. Test Measure: a measure being evaluated for reliability of the individual data elements or awaiting National Quality Forum Endorsement.
11. There were no eligible patients that met the denominator criteria.

* This information can also be viewed at [Hospital Compare](#).

** Indicates per 1000 hours of patient care.

*** The measure was not in effect for this quarter.

---- Null value or data not displayed.

Home
Care

[2023 National Patient Safety
Goals](#)

Nationwide Comparison:
✅

Statewide Comparison:
🚫 N/A

[New Changes to Quarterly Measure](#)

[Download Quarterly Measure Results](#)

* State results are not calculated for the National Patient Safety Goals.



State of Tennessee
Health Facilities Commission
Board for Licensing Health Care Facilities

License No. 000000221

This is to certify that a license is hereby granted by the Health Facilities Commission to TENNESSEE QUALITY CARE- HOME HEALTH to conduct and maintain a Home Health Agency TENNESSEE QUALITY CARE-HOME HEALTH

Located at 580 TENNESSEE AVENUE, NORTH, PARSONS

County of DECATUR, Tennessee.

The license shall expire JANUARY 06, 2025 and is subject to the provisions of Chapter 11, Tennessee Code Annotated. This license shall not be assignable or transferable and shall be subject to revocation at any time by the Health Facilities Commission, for failure to comply with the laws of the State of Tennessee or the rules and regulations of the Health Facilities Commission issued thereunder.

In Witness Whereof, we have hereunto set our hand and seal of the State
this 20TH day DECEMBER, 2023.



HFC

SKILLED NURSING
PHYSICAL THERAPY
OCCUPATIONAL THERAPY
SPEECH THERAPY
MEDICAL SOCIAL SERVICES
HOME HEALTH AID SERVICES
MEDICAL SUPPLIES & APPLIANCES
HOMEMAKERS SERVICES
HOME HEALTH AGENCY

By Caroline R. Pyper, Esq., C.H.C.
Director, Licensure & Regulation

By [Signature]
Executive Director

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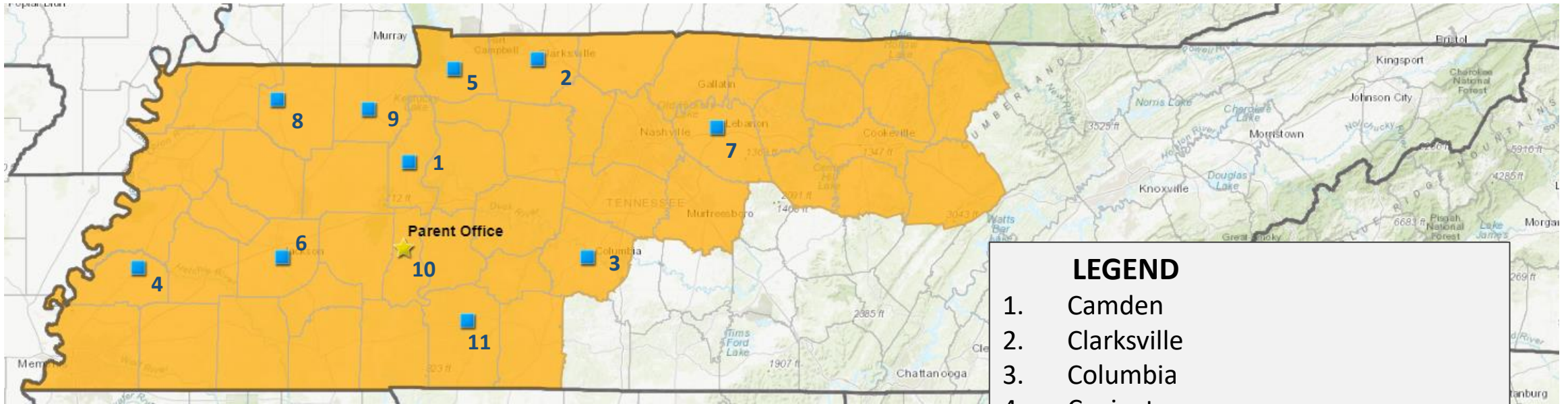
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Map of Current and Proposed TQC Service
Area Distribution

TQC – Existing Service Area



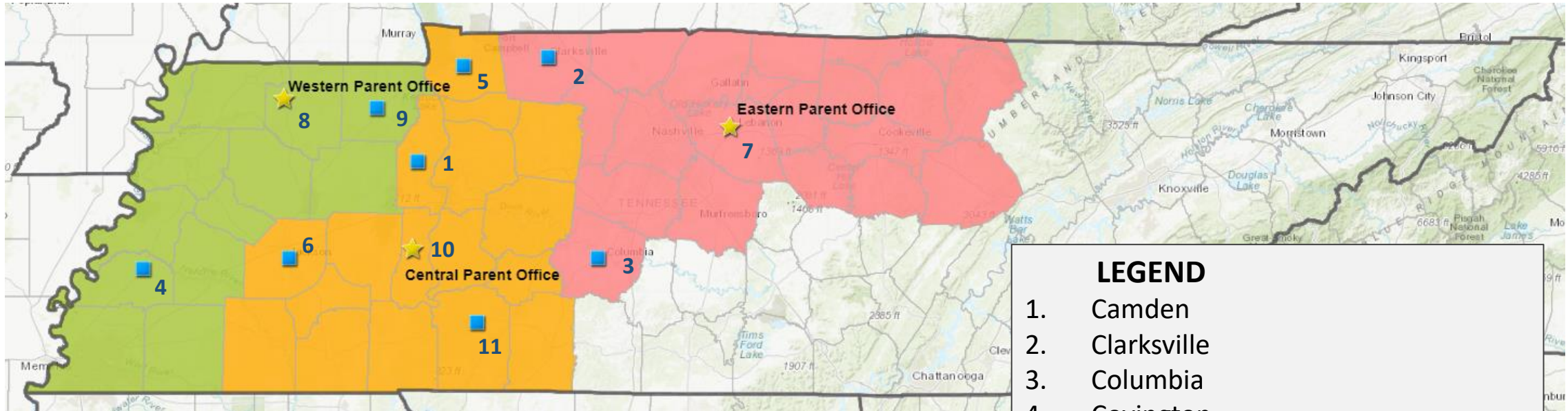
Please note that the identified locations of branch and parent offices are approximations and do not represent exact locations of each office in each county.

LEGEND

1. Camden
2. Clarksville
3. Columbia
4. Covington
5. Dover
6. Jackson
7. Lebanon
8. Martin
9. Paris
10. Parsons
11. Waynesboro

■ = Branch Office
★ = Parent Office

TQC – Proposed Service Area



Please note that the identified locations of branch and parent offices are approximations and do not represent exact locations of each office in each county.

LEGEND

1. Camden
2. Clarksville
3. Columbia
4. Covington
5. Dover
6. Jackson
7. Lebanon
8. Martin
9. Paris
10. Parsons
11. Waynesboro

■ = Branch Office
★ = Parent Office

Attachment 1E-2
Fair Market Value Comparison

Building Amount Calculation - Martin Office

Formula	Description	Amount
A	Building Appraisal - 2024	\$631,000
B	Building Total Square Footage	14,746
$C = (A \div B)$	Appraisal Value per Square Foot	\$42.79
D	Leased Square Footage	3,600
$E = (D \times C)$	Building Amount for Project Cost	\$154,049

Lease Term	3 years
Base Rent	\$44,400
CAM	\$1,770
Annual Total	\$46,170
3-year Total	\$138,510
Cost per Square Foot	\$38.48

<https://assessment.cot.tn.gov/>
115 Neal St, Martin, TN 38237

Attachment 1N-2
Current and Projected Population Data

Tennessee Population Estimates 2023 and 2025 *

	Population Estimate 2023			Population Estimate 2025			% Increase	
	Total	0-17	% 0-17	Total	0-17	% 0-17	0-17	Total
Tennessee	7,071,060	1,550,759	21.9%	7,179,307	1,569,369	21.9%	1.2%	1.5%
Anderson	78,595	16,109	20.5%	79,165	16,111	20.4%	0.0%	0.7%
Bedford	51,992	12,798	24.6%	53,144	13,033	24.5%	1.8%	2.2%
Benton	16,170	3,069	19.0%	16,187	3,031	18.7%	-1.2%	0.1%
Bledsoe	15,573	2,187	14.0%	15,778	2,196	13.9%	0.4%	1.3%
Blount	138,918	26,942	19.4%	141,468	27,300	19.3%	1.3%	1.8%
Bradley	111,877	24,081	21.5%	113,639	24,299	21.4%	0.9%	1.6%
Campbell	39,640	7,834	19.8%	39,464	7,754	19.6%	-1.0%	-0.4%
Cannon	15,125	3,133	20.7%	15,286	3,120	20.4%	-0.4%	1.1%
Carroll	27,601	6,056	21.9%	27,449	5,966	21.7%	-1.5%	-0.5%
Carter	56,052	9,608	17.1%	55,711	9,408	16.9%	-2.1%	-0.6%
Cheatham	41,692	8,654	20.8%	42,025	8,611	20.5%	-0.5%	0.8%
Chester	17,518	3,940	22.5%	17,587	3,913	22.2%	-0.7%	0.4%
Claiborne	32,342	5,940	18.4%	32,518	5,822	17.9%	-2.0%	0.5%
Clay	7,655	1,474	19.3%	7,662	1,457	19.0%	-1.2%	0.1%
Cocke	36,597	6,984	19.1%	36,772	6,876	18.7%	-1.6%	0.5%
Coffee	58,883	13,794	23.4%	59,674	13,892	23.3%	0.7%	1.3%
Crockett	14,161	3,267	23.1%	14,140	3,249	23.0%	-0.6%	-0.1%
Cumberland	63,803	10,420	16.3%	65,090	10,482	16.1%	0.6%	2.0%
Davidson	722,445	158,613	22.0%	732,649	161,965	22.1%	2.1%	1.4%
Decatur	11,607	2,269	19.5%	11,594	2,234	19.3%	-1.5%	-0.1%
DeKalb	21,305	4,398	20.6%	21,596	4,412	20.4%	0.3%	1.4%
Dickson	56,005	12,254	21.9%	57,015	12,386	21.7%	1.1%	1.8%
Dyer	36,796	8,549	23.2%	36,844	8,552	23.2%	0.0%	0.1%
Fayette	43,097	7,628	17.7%	44,001	7,815	17.8%	2.4%	2.1%
Fentress	18,982	3,779	19.9%	19,073	3,760	19.7%	-0.5%	0.5%
Franklin	42,819	8,555	20.0%	43,008	8,534	19.8%	-0.2%	0.4%
Gibson	49,485	11,705	23.7%	49,662	11,685	23.5%	-0.2%	0.4%
Giles	29,506	6,052	20.5%	29,451	5,992	20.3%	-1.0%	-0.2%
Grainger	23,871	4,519	18.9%	24,031	4,487	18.7%	-0.7%	0.7%
Greene	70,100	13,088	18.7%	70,339	13,014	18.5%	-0.6%	0.3%
Grundy	13,286	2,655	20.0%	13,141	2,574	19.6%	-3.1%	-1.1%
Hamblen	66,054	14,935	22.6%	66,647	15,025	22.5%	0.6%	0.9%
Hamilton	380,381	79,429	20.9%	385,749	80,622	20.9%	1.5%	1.4%
Hancock	6,381	1,264	19.8%	6,309	1,223	19.4%	-3.3%	-1.1%
Hardeman	24,635	4,536	18.4%	24,487	4,433	18.1%	-2.3%	-0.6%
Hardin	25,594	4,897	19.1%	25,569	4,802	18.8%	-1.9%	-0.1%
Hawkins	56,935	10,427	18.3%	56,935	10,271	18.0%	-1.5%	0.0%
Haywood	16,660	3,584	21.5%	16,437	3,497	21.3%	-2.4%	-1.3%
Henderson	28,316	6,199	21.9%	28,454	6,165	21.7%	-0.5%	0.5%
Henry	32,143	6,174	19.2%	32,163	6,087	18.9%	-1.4%	0.1%
Hickman	25,808	5,088	19.7%	26,044	5,049	19.4%	-0.8%	0.9%
Houston	8,364	1,731	20.7%	8,411	1,725	20.5%	-0.4%	0.6%
Humphreys	18,656	3,884	20.8%	18,704	3,863	20.7%	-0.5%	0.3%
Jackson	12,013	2,107	17.5%	12,092	2,113	17.5%	0.3%	0.7%
Jefferson	56,597	10,741	19.0%	57,360	10,793	18.8%	0.5%	1.3%
Johnson	17,780	2,841	16.0%	17,720	2,780	15.7%	-2.1%	-0.3%
Knox	489,230	103,803	21.2%	497,923	105,868	21.3%	2.0%	1.8%
Lake	6,907	949	13.7%	6,877	918	13.3%	-3.3%	-0.4%
Lauderdale	25,397	5,419	21.3%	25,343	5,351	21.1%	-1.3%	-0.2%
Lawrence	44,865	10,541	23.5%	45,085	10,335	22.9%	-2.0%	0.5%

Tennessee Population Estimates 2023 and 2025 *

	Population Estimate 2023			Population Estimate 2025			% Increase	
	Total	0-17	% 0-17	Total	0-17	% 0-17	0-17	Total
Lewis	12,394	2,586	20.9%	12,401	2,545	20.5%	-1.6%	0.1%
Lincoln	34,943	7,309	20.9%	35,185	7,213	20.5%	-1.3%	0.7%
Loudon	57,186	10,471	18.3%	58,579	10,585	18.1%	1.1%	2.4%
McMinn	54,986	11,293	20.5%	55,439	11,327	20.4%	0.3%	0.8%
McNairy	25,942	5,361	20.7%	26,070	5,326	20.4%	-0.7%	0.5%
Macon	25,655	6,204	24.2%	26,190	6,324	24.1%	1.9%	2.1%
Madison	98,718	22,253	22.5%	98,902	22,166	22.4%	-0.4%	0.2%
Marion	28,904	5,822	20.1%	28,860	5,748	19.9%	-1.3%	-0.2%
Marshall	36,191	8,217	22.7%	36,917	8,359	22.6%	1.7%	2.0%
Mauzy	104,474	23,609	22.6%	107,574	24,287	22.6%	2.9%	3.0%
Meigs	12,753	2,511	19.7%	12,889	2,514	19.5%	0.1%	1.1%
Monroe	48,151	9,496	19.7%	48,700	9,412	19.3%	-0.9%	1.1%
Montgomery	227,061	61,055	26.9%	235,518	63,547	27.0%	4.1%	3.7%
Moore	6,487	1,202	18.5%	6,518	1,203	18.5%	0.0%	0.5%
Morgan	21,659	3,947	18.2%	21,788	3,937	18.1%	-0.3%	0.6%
Obion	29,916	6,391	21.4%	29,742	6,368	21.4%	-0.3%	-0.6%
Overton	22,968	4,728	20.6%	23,203	4,748	20.5%	0.4%	1.0%
Perry	8,194	1,787	21.8%	8,251	1,786	21.6%	-0.1%	0.7%
Pickett	5,005	806	16.1%	4,972	792	15.9%	-1.8%	-0.7%
Polk	17,083	3,170	18.6%	17,230	3,163	18.4%	-0.2%	0.9%
Putnam	83,834	18,165	21.7%	85,705	18,561	21.7%	2.2%	2.2%
Rhea	34,052	7,340	21.6%	34,426	7,293	21.2%	-0.6%	1.1%
Roane	53,994	9,700	18.0%	54,003	9,617	17.8%	-0.9%	0.0%
Robertson	74,699	17,056	22.8%	76,233	17,314	22.7%	1.5%	2.1%
Rutherford	363,690	88,632	24.4%	380,052	92,298	24.3%	4.1%	4.5%
Scott	22,143	5,033	22.7%	22,156	4,981	22.5%	-1.0%	0.1%
Sequatchie	15,614	3,096	19.8%	15,888	3,123	19.7%	0.9%	1.8%
Sevier	103,232	20,414	19.8%	105,733	20,767	19.6%	1.7%	2.4%
Shelby	941,637	232,242	24.7%	944,754	232,445	24.6%	0.1%	0.3%
Smith	20,651	4,527	21.9%	20,871	4,541	21.8%	0.3%	1.1%
Stewart	14,003	2,810	20.1%	14,085	2,780	19.7%	-1.1%	0.6%
Sullivan	159,811	29,857	18.7%	160,263	29,878	18.6%	0.1%	0.3%
Sumner	205,092	46,499	22.7%	211,252	47,688	22.6%	2.6%	3.0%
Tipton	62,909	14,615	23.2%	63,486	14,632	23.0%	0.1%	0.9%
Trousdale	11,742	2,240	19.1%	11,912	2,235	18.8%	-0.2%	1.4%
Unicoi	17,847	3,156	17.7%	17,886	3,168	17.7%	0.4%	0.2%
Union	20,296	4,114	20.3%	20,341	4,047	19.9%	-1.6%	0.2%
Van Buren	5,916	1,141	19.3%	5,889	1,115	18.9%	-2.3%	-0.4%
Warren	41,908	9,372	22.4%	42,067	9,299	22.1%	-0.8%	0.4%
Washington	133,361	25,643	19.2%	135,157	25,945	19.2%	1.2%	1.3%
Wayne	16,377	2,542	15.5%	16,269	2,474	15.2%	-2.7%	-0.7%
Weakley	33,249	6,772	20.4%	33,263	6,770	20.4%	0.0%	0.0%
White	28,385	5,867	20.7%	28,806	5,872	20.4%	0.1%	1.5%
Williamson	264,071	66,969	25.4%	276,546	69,328	25.1%	3.5%	4.7%
Wilson	157,668	35,836	22.7%	163,867	37,003	22.6%	3.3%	3.9%

* TN_CoPopProj_2021 UTCBER Population Projection Series.

Source: Boyd Center for Business and Economic Research, University of Tennessee, Knoxville
 Reassembled by the Tennessee Department of Health, Division of Population Health Assessment
 Note: These projections may not match Boyd Center projections precisely due to rounding.

Tennessee Population Estimates 2023 and 2025 *

	Population Estimate 2023			Population Estimate 2025			% Increase	
	Total	18+	%18+	Total	18+	%18+	18+	Total
Tennessee	7,071,060	5,520,300	78.1%	7,179,307	5,609,938	78.1%	1.6%	1.5%
Anderson	78,595	62,487	79.5%	79,165	63,055	79.6%	0.9%	0.7%
Bedford	51,992	39,194	75.4%	53,144	40,111	75.5%	2.3%	2.2%
Benton	16,170	13,101	81.0%	16,187	13,156	81.3%	0.4%	0.1%
Bledsoe	15,573	13,386	86.0%	15,778	13,582	86.1%	1.5%	1.3%
Blount	138,918	111,975	80.6%	141,468	114,168	80.7%	2.0%	1.8%
Bradley	111,877	87,796	78.5%	113,639	89,340	78.6%	1.8%	1.6%
Campbell	39,640	31,805	80.2%	39,464	31,711	80.4%	-0.3%	-0.4%
Cannon	15,125	11,992	79.3%	15,286	12,166	79.6%	1.5%	1.1%
Carroll	27,601	21,545	78.1%	27,449	21,483	78.3%	-0.3%	-0.5%
Carter	56,052	46,444	82.9%	55,711	46,303	83.1%	-0.3%	-0.6%
Cheatham	41,692	33,037	79.2%	42,025	33,415	79.5%	1.1%	0.8%
Chester	17,518	13,578	77.5%	17,587	13,674	77.8%	0.7%	0.4%
Claiborne	32,342	26,402	81.6%	32,518	26,696	82.1%	1.1%	0.5%
Clay	7,655	6,181	80.7%	7,662	6,206	81.0%	0.4%	0.1%
Cocke	36,597	29,612	80.9%	36,772	29,896	81.3%	1.0%	0.5%
Coffee	58,883	45,089	76.6%	59,674	45,782	76.7%	1.5%	1.3%
Crockett	14,161	10,894	76.9%	14,140	10,891	77.0%	0.0%	-0.1%
Cumberland	63,803	53,383	83.7%	65,090	54,608	83.9%	2.3%	2.0%
Davidson	722,445	563,833	78.0%	732,649	570,684	77.9%	1.2%	1.4%
Decatur	11,607	9,338	80.5%	11,594	9,360	80.7%	0.2%	-0.1%
DeKalb	21,305	16,908	79.4%	21,596	17,184	79.6%	1.6%	1.4%
Dickson	56,005	43,752	78.1%	57,015	44,629	78.3%	2.0%	1.8%
Dyer	36,796	28,247	76.8%	36,844	28,292	76.8%	0.2%	0.1%
Fayette	43,097	35,469	82.3%	44,001	36,185	82.2%	2.0%	2.1%
Fentress	18,982	15,203	80.1%	19,073	15,313	80.3%	0.7%	0.5%
Franklin	42,819	34,264	80.0%	43,008	34,475	80.2%	0.6%	0.4%
Gibson	49,485	37,780	76.3%	49,662	37,977	76.5%	0.5%	0.4%
Giles	29,506	23,454	79.5%	29,451	23,459	79.7%	0.0%	-0.2%
Grainger	23,871	19,352	81.1%	24,031	19,544	81.3%	1.0%	0.7%
Greene	70,100	57,012	81.3%	70,339	57,325	81.5%	0.5%	0.3%
Grundy	13,286	10,630	80.0%	13,141	10,567	80.4%	-0.6%	-1.1%
Hamblen	66,054	51,119	77.4%	66,647	51,622	77.5%	1.0%	0.9%
Hamilton	380,381	300,952	79.1%	385,749	305,127	79.1%	1.4%	1.4%
Hancock	6,381	5,116	80.2%	6,309	5,086	80.6%	-0.6%	-1.1%
Hardeman	24,635	20,099	81.6%	24,487	20,054	81.9%	-0.2%	-0.6%
Hardin	25,594	20,697	80.9%	25,569	20,766	81.2%	0.3%	-0.1%
Hawkins	56,935	46,508	81.7%	56,935	46,664	82.0%	0.3%	0.0%
Haywood	16,660	13,075	78.5%	16,437	12,940	78.7%	-1.0%	-1.3%
Henderson	28,316	22,117	78.1%	28,454	22,289	78.3%	0.8%	0.5%
Henry	32,143	25,969	80.8%	32,163	26,076	81.1%	0.4%	0.1%
Hickman	25,808	20,720	80.3%	26,044	20,996	80.6%	1.3%	0.9%
Houston	8,364	6,633	79.3%	8,411	6,686	79.5%	0.8%	0.6%
Humphreys	18,656	14,771	79.2%	18,704	14,842	79.3%	0.5%	0.3%
Jackson	12,013	9,906	82.5%	12,092	9,979	82.5%	0.7%	0.7%
Jefferson	56,597	45,856	81.0%	57,360	46,567	81.2%	1.6%	1.3%
Johnson	17,780	14,939	84.0%	17,720	14,940	84.3%	0.0%	-0.3%
Knox	489,230	385,427	78.8%	497,923	392,055	78.7%	1.7%	1.8%
Lake	6,907	5,958	86.3%	6,877	5,959	86.7%	0.0%	-0.4%
Lauderdale	25,397	19,977	78.7%	25,343	19,992	78.9%	0.1%	-0.2%
Lawrence	44,865	34,324	76.5%	45,085	34,751	77.1%	1.2%	0.5%

Tennessee Population Estimates 2023 and 2025 *

	Population Estimate 2023			Population Estimate 2025			% Increase	
	Total	18+	%18+	Total	18+	%18+	18+	Total
Lewis	12,394	9,808	79.1%	12,401	9,856	79.5%	0.5%	0.1%
Lincoln	34,943	27,633	79.1%	35,185	27,971	79.5%	1.2%	0.7%
Loudon	57,186	46,715	81.7%	58,579	47,994	81.9%	2.7%	2.4%
McMinn	54,986	43,693	79.5%	55,439	44,112	79.6%	1.0%	0.8%
McNairy	25,942	20,581	79.3%	26,070	20,744	79.6%	0.8%	0.5%
Macon	25,655	19,451	75.8%	26,190	19,866	75.9%	2.1%	2.1%
Madison	98,718	76,465	77.5%	98,902	76,736	77.6%	0.4%	0.2%
Marion	28,904	23,082	79.9%	28,860	23,113	80.1%	0.1%	-0.2%
Marshall	36,191	27,974	77.3%	36,917	28,558	77.4%	2.1%	2.0%
Maury	104,474	80,866	77.4%	107,574	83,287	77.4%	3.0%	3.0%
Meigs	12,753	10,241	80.3%	12,889	10,375	80.5%	1.3%	1.1%
Monroe	48,151	38,655	80.3%	48,700	39,288	80.7%	1.6%	1.1%
Montgomery	227,061	166,005	73.1%	235,518	171,971	73.0%	3.6%	3.7%
Moore	6,487	5,285	81.5%	6,518	5,315	81.5%	0.6%	0.5%
Morgan	21,659	17,712	81.8%	21,788	17,851	81.9%	0.8%	0.6%
Obion	29,916	23,525	78.6%	29,742	23,373	78.6%	-0.6%	-0.6%
Overton	22,968	18,240	79.4%	23,203	18,456	79.5%	1.2%	1.0%
Perry	8,194	6,406	78.2%	8,251	6,466	78.4%	0.9%	0.7%
Pickett	5,005	4,199	83.9%	4,972	4,180	84.1%	-0.5%	-0.7%
Polk	17,083	13,913	81.4%	17,230	14,066	81.6%	1.1%	0.9%
Putnam	83,834	65,669	78.3%	85,705	67,144	78.3%	2.2%	2.2%
Rhea	34,052	26,712	78.4%	34,426	27,133	78.8%	1.6%	1.1%
Roane	53,994	44,294	82.0%	54,003	44,385	82.2%	0.2%	0.0%
Robertson	74,699	57,644	77.2%	76,233	58,920	77.3%	2.2%	2.1%
Rutherford	363,690	275,058	75.6%	380,052	287,754	75.7%	4.6%	4.5%
Scott	22,143	17,110	77.3%	22,156	17,175	77.5%	0.4%	0.1%
Sequatchie	15,614	12,519	80.2%	15,888	12,765	80.3%	2.0%	1.8%
Sevier	103,232	82,818	80.2%	105,733	84,966	80.4%	2.6%	2.4%
Shelby	941,637	709,395	75.3%	944,754	712,309	75.4%	0.4%	0.3%
Smith	20,651	16,124	78.1%	20,871	16,330	78.2%	1.3%	1.1%
Stewart	14,003	11,193	79.9%	14,085	11,305	80.3%	1.0%	0.6%
Sullivan	159,811	129,954	81.3%	160,263	130,384	81.4%	0.3%	0.3%
Sumner	205,092	158,593	77.3%	211,252	163,564	77.4%	3.1%	3.0%
Tipton	62,909	48,294	76.8%	63,486	48,854	77.0%	1.2%	0.9%
Trousdale	11,742	9,502	80.9%	11,912	9,677	81.2%	1.8%	1.4%
Unicoi	17,847	14,691	82.3%	17,886	14,718	82.3%	0.2%	0.2%
Union	20,296	16,182	79.7%	20,341	16,295	80.1%	0.7%	0.2%
Van Buren	5,916	4,775	80.7%	5,889	4,774	81.1%	0.0%	-0.4%
Warren	41,908	32,536	77.6%	42,067	32,767	77.9%	0.7%	0.4%
Washington	133,361	107,718	80.8%	135,157	109,211	80.8%	1.4%	1.3%
Wayne	16,377	13,835	84.5%	16,269	13,795	84.8%	-0.3%	-0.7%
Weakley	33,249	26,477	79.6%	33,263	26,493	79.6%	0.1%	0.0%
White	28,385	22,518	79.3%	28,806	22,933	79.6%	1.8%	1.5%
Williamson	264,071	197,102	74.6%	276,546	207,219	74.9%	5.1%	4.7%
Wilson	157,668	121,832	77.3%	163,867	126,863	77.4%	4.1%	3.9%

* TN_CoPopProj_2021 UTCBER Population Projection Series.

Source: Boyd Center for Business and Economic Research, University of Tennessee, Knoxville
 Reassembled by the Tennessee Department of Health, Division of Population Health Assessment
 Note: These projections may not match Boyd Center projections precisely due to rounding.

Tennessee Population Estimates 2023 and 2025 *

	Population Estimate 2023			Population Estimate 2025			% Increase	
	Total	65+	%65+	Total	65+	%65+	65+	Total
Tennessee	7,071,060	1,290,989	18.3%	7,179,307	1,355,845	18.9%	5.0%	1.5%
Anderson	78,595	17,287	22.0%	79,165	17,978	22.7%	4.0%	0.7%
Bedford	51,992	8,591	16.5%	53,144	9,109	17.1%	6.0%	2.2%
Benton	16,170	4,202	26.0%	16,187	4,348	26.9%	3.5%	0.1%
Bledsoe	15,573	3,185	20.5%	15,778	3,361	21.3%	5.5%	1.3%
Blount	138,918	31,447	22.6%	141,468	33,156	23.4%	5.4%	1.8%
Bradley	111,877	21,166	18.9%	113,639	22,290	19.6%	5.3%	1.6%
Campbell	39,640	8,790	22.2%	39,464	9,031	22.9%	2.7%	-0.4%
Cannon	15,125	3,023	20.0%	15,286	3,204	21.0%	6.0%	1.1%
Carroll	27,601	6,072	22.0%	27,449	6,243	22.7%	2.8%	-0.5%
Carter	56,052	13,834	24.7%	55,711	14,312	25.7%	3.5%	-0.6%
Cheatham	41,692	7,365	17.7%	42,025	7,861	18.7%	6.7%	0.8%
Chester	17,518	3,331	19.0%	17,587	3,480	19.8%	4.5%	0.4%
Claiborne	32,342	7,192	22.2%	32,518	7,520	23.1%	4.6%	0.5%
Clay	7,655	2,097	27.4%	7,662	2,184	28.5%	4.1%	0.1%
Cocke	36,597	8,724	23.8%	36,772	9,127	24.8%	4.6%	0.5%
Coffee	58,883	10,985	18.7%	59,674	11,514	19.3%	4.8%	1.3%
Crockett	14,161	2,904	20.5%	14,140	3,011	21.3%	3.7%	-0.1%
Cumberland	63,803	21,874	34.3%	65,090	23,020	35.4%	5.2%	2.0%
Davidson	722,445	98,327	13.6%	732,649	102,822	14.0%	4.6%	1.4%
Decatur	11,607	3,001	25.9%	11,594	3,109	26.8%	3.6%	-0.1%
DeKalb	21,305	4,391	20.6%	21,596	4,631	21.4%	5.5%	1.4%
Dickson	56,005	10,268	18.3%	57,015	10,900	19.1%	6.2%	1.8%
Dyer	36,796	7,096	19.3%	36,844	7,345	19.9%	3.5%	0.1%
Fayette	43,097	10,584	24.6%	44,001	11,298	25.7%	6.7%	2.1%
Fentress	18,982	4,636	24.4%	19,073	4,845	25.4%	4.5%	0.5%
Franklin	42,819	9,582	22.4%	43,008	9,959	23.2%	3.9%	0.4%
Gibson	49,485	9,587	19.4%	49,662	9,912	20.0%	3.4%	0.4%
Giles	29,506	6,644	22.5%	29,451	6,917	23.5%	4.1%	-0.2%
Grainger	23,871	5,530	23.2%	24,031	5,808	24.2%	5.0%	0.7%
Greene	70,100	16,743	23.9%	70,339	17,378	24.7%	3.8%	0.3%
Grundy	13,286	3,041	22.9%	13,141	3,141	23.9%	3.3%	-1.1%
Hamblen	66,054	13,098	19.8%	66,647	13,628	20.4%	4.0%	0.9%
Hamilton	380,381	73,546	19.3%	385,749	76,765	19.9%	4.4%	1.4%
Hancock	6,381	1,542	24.2%	6,309	1,583	25.1%	2.6%	-1.1%
Hardeman	24,635	4,899	19.9%	24,487	5,000	20.4%	2.1%	-0.6%
Hardin	25,594	6,505	25.4%	25,569	6,742	26.4%	3.7%	-0.1%
Hawkins	56,935	13,456	23.6%	56,935	14,015	24.6%	4.2%	0.0%
Haywood	16,660	3,660	22.0%	16,437	3,779	23.0%	3.2%	-1.3%
Henderson	28,316	5,676	20.0%	28,454	5,886	20.7%	3.7%	0.5%
Henry	32,143	8,203	25.5%	32,163	8,466	26.3%	3.2%	0.1%
Hickman	25,808	5,020	19.5%	26,044	5,267	20.2%	4.9%	0.9%
Houston	8,364	1,891	22.6%	8,411	1,964	23.3%	3.9%	0.6%
Humphreys	18,656	4,097	22.0%	18,704	4,249	22.7%	3.7%	0.3%
Jackson	12,013	3,066	25.5%	12,092	3,221	26.6%	5.1%	0.7%
Jefferson	56,597	12,783	22.6%	57,360	13,561	23.6%	6.1%	1.3%
Johnson	17,780	4,497	25.3%	17,720	4,611	26.0%	2.5%	-0.3%
Knox	489,230	85,740	17.5%	497,923	89,864	18.0%	4.8%	1.8%
Lake	6,907	1,191	17.2%	6,877	1,198	17.4%	0.5%	-0.4%
Lauderdale	25,397	4,475	17.6%	25,343	4,620	18.2%	3.2%	-0.2%
Lawrence	44,865	8,781	19.6%	45,085	9,195	20.4%	4.7%	0.5%

Tennessee Population Estimates 2023 and 2025 *

	Population Estimate 2023			Population Estimate 2025			% Increase	
	Total	65+	%65+	Total	65+	%65+	65+	Total
Lewis	12,394	2,887	23.3%	12,401	2,996	24.2%	3.8%	0.1%
Lincoln	34,943	7,592	21.7%	35,185	7,939	22.6%	4.6%	0.7%
Loudon	57,186	16,756	29.3%	58,579	17,679	30.2%	5.5%	2.4%
McMinn	54,986	12,074	22.0%	55,439	12,618	22.8%	4.5%	0.8%
McNairy	25,942	5,787	22.3%	26,070	5,987	23.0%	3.5%	0.5%
Macon	25,655	4,450	17.3%	26,190	4,684	17.9%	5.3%	2.1%
Madison	98,718	19,352	19.6%	98,902	20,221	20.4%	4.5%	0.2%
Marion	28,904	6,407	22.2%	28,860	6,620	22.9%	3.3%	-0.2%
Marshall	36,191	6,445	17.8%	36,917	6,839	18.5%	6.1%	2.0%
Maury	104,474	19,156	18.3%	107,574	20,433	19.0%	6.7%	3.0%
Meigs	12,753	2,873	22.5%	12,889	3,019	23.4%	5.1%	1.1%
Monroe	48,151	11,385	23.6%	48,700	11,979	24.6%	5.2%	1.1%
Montgomery	227,061	23,975	10.6%	235,518	25,837	11.0%	7.8%	3.7%
Moore	6,487	1,562	24.1%	6,518	1,621	24.9%	3.7%	0.5%
Morgan	21,659	4,315	19.9%	21,788	4,477	20.5%	3.8%	0.6%
Obion	29,916	6,759	22.6%	29,742	6,896	23.2%	2.0%	-0.6%
Overton	22,968	5,086	22.1%	23,203	5,294	22.8%	4.1%	1.0%
Perry	8,194	1,850	22.6%	8,251	1,904	23.1%	2.9%	0.7%
Pickett	5,005	1,525	30.5%	4,972	1,569	31.5%	2.8%	-0.7%
Polk	17,083	3,890	22.8%	17,230	4,077	23.7%	4.8%	0.9%
Putnam	83,834	15,307	18.3%	85,705	16,178	18.9%	5.7%	2.2%
Rhea	34,052	7,042	20.7%	34,426	7,372	21.4%	4.7%	1.1%
Roane	53,994	13,727	25.4%	54,003	14,216	26.3%	3.6%	0.0%
Robertson	74,699	12,672	17.0%	76,233	13,580	17.8%	7.2%	2.1%
Rutherford	363,690	44,100	12.1%	380,052	48,251	12.7%	9.4%	4.5%
Scott	22,143	4,175	18.9%	22,156	4,329	19.5%	3.7%	0.1%
Sequatchie	15,614	3,652	23.4%	15,888	3,854	24.3%	5.5%	1.8%
Sevier	103,232	22,761	22.0%	105,733	24,119	22.8%	6.0%	2.4%
Shelby	941,637	146,215	15.5%	944,754	151,944	16.1%	3.9%	0.3%
Smith	20,651	3,879	18.8%	20,871	4,120	19.7%	6.2%	1.1%
Stewart	14,003	3,134	22.4%	14,085	3,279	23.3%	4.6%	0.6%
Sullivan	159,811	38,117	23.9%	160,263	39,401	24.6%	3.4%	0.3%
Sumner	205,092	36,251	17.7%	211,252	38,705	18.3%	6.8%	3.0%
Tipton	62,909	10,592	16.8%	63,486	11,209	17.7%	5.8%	0.9%
Trousdale	11,742	1,611	13.7%	11,912	1,680	14.1%	4.2%	1.4%
Unicoi	17,847	4,605	25.8%	17,886	4,767	26.7%	3.5%	0.2%
Union	20,296	4,226	20.8%	20,341	4,478	22.0%	5.9%	0.2%
Van Buren	5,916	1,510	25.5%	5,889	1,555	26.4%	3.0%	-0.4%
Warren	41,908	8,201	19.6%	42,067	8,526	20.3%	4.0%	0.4%
Washington	133,361	27,332	20.5%	135,157	28,578	21.1%	4.6%	1.3%
Wayne	16,377	3,471	21.2%	16,269	3,565	21.9%	2.7%	-0.7%
Weakley	33,249	6,810	20.5%	33,263	7,039	21.2%	3.4%	0.0%
White	28,385	6,319	22.3%	28,806	6,626	23.0%	4.8%	1.5%
Williamson	264,071	40,172	15.2%	276,546	43,823	15.8%	9.1%	4.7%
Wilson	157,668	27,360	17.4%	163,867	29,541	18.0%	8.0%	3.9%

* TN_CoPopProj_2021 UTCBER Population Projection Series.

Source: Boyd Center for Business and Economic Research, University of Tennessee, Knoxville
 Reassembled by the Tennessee Department of Health, Division of Population Health Assessment
 Note: These projections may not match Boyd Center projections precisely due to rounding.

Tennessee Female Population Estimates 2023 and 2025 *

	Population Estimate 2023			Population Estimate 2025			% Increase	
	Total	15-44	%15-44	Total	15-44	%15-44	15-44	Total
Tennessee	3,625,723	1,364,507	37.6%	3,683,044	1,376,312	37.4%	0.9%	1.6%
Anderson	40,329	13,528	33.5%	40,614	13,549	33.4%	0.2%	0.7%
Bedford	26,416	9,764	37.0%	27,044	9,963	36.8%	2.0%	2.4%
Benton	8,213	2,389	29.1%	8,217	2,363	28.8%	-1.1%	0.0%
Bledsoe	6,224	1,871	30.1%	6,250	1,832	29.3%	-2.1%	0.4%
Blount	71,505	23,888	33.4%	72,897	24,187	33.2%	1.3%	1.9%
Bradley	57,623	21,226	36.8%	58,571	21,470	36.7%	1.1%	1.6%
Campbell	20,168	6,626	32.9%	20,074	6,534	32.5%	-1.4%	-0.5%
Cannon	7,580	2,559	33.8%	7,663	2,558	33.4%	0.0%	1.1%
Carroll	14,045	4,726	33.6%	13,973	4,690	33.6%	-0.8%	-0.5%
Carter	28,671	9,267	32.3%	28,529	9,133	32.0%	-1.5%	-0.5%
Cheatham	21,012	7,520	35.8%	21,207	7,531	35.5%	0.1%	0.9%
Chester	9,176	3,583	39.1%	9,236	3,599	39.0%	0.4%	0.7%
Claiborne	16,538	5,778	34.9%	16,633	5,801	34.9%	0.4%	0.6%
Clay	3,905	1,123	28.7%	3,897	1,106	28.4%	-1.5%	-0.2%
Cocke	18,844	5,967	31.7%	18,965	5,964	31.4%	-0.1%	0.6%
Coffee	30,076	10,723	35.7%	30,493	10,850	35.6%	1.2%	1.4%
Crockett	7,433	2,562	34.5%	7,441	2,552	34.3%	-0.4%	0.1%
Cumberland	32,741	8,498	26.0%	33,397	8,593	25.7%	1.1%	2.0%
Davidson	373,661	168,077	45.0%	378,952	168,262	44.4%	0.1%	1.4%
Decatur	5,884	1,786	30.4%	5,883	1,764	30.0%	-1.3%	0.0%
DeKalb	10,631	3,583	33.7%	10,790	3,606	33.4%	0.7%	1.5%
Dickson	28,560	10,209	35.7%	29,097	10,306	35.4%	1.0%	1.9%
Dyer	19,055	6,830	35.8%	19,100	6,800	35.6%	-0.4%	0.2%
Fayette	21,920	6,716	30.6%	22,388	6,759	30.2%	0.6%	2.1%
Fentress	9,638	2,889	30.0%	9,698	2,886	29.8%	-0.1%	0.6%
Franklin	21,947	7,798	35.5%	22,061	7,822	35.5%	0.3%	0.5%
Gibson	25,684	9,107	35.5%	25,772	9,086	35.3%	-0.2%	0.3%
Giles	15,251	5,086	33.3%	15,244	5,055	33.2%	-0.6%	0.0%
Grainger	11,872	3,719	31.3%	11,952	3,708	31.0%	-0.3%	0.7%
Greene	35,679	11,518	32.3%	35,821	11,492	32.1%	-0.2%	0.4%
Grundy	6,679	2,178	32.6%	6,606	2,113	32.0%	-3.0%	-1.1%
Hamblen	33,799	11,628	34.4%	34,163	11,740	34.4%	1.0%	1.1%
Hamilton	197,051	74,691	37.9%	199,872	75,158	37.6%	0.6%	1.4%
Hancock	3,242	1,008	31.1%	3,205	998	31.1%	-1.0%	-1.1%
Hardeman	11,005	3,558	32.3%	10,880	3,479	32.0%	-2.2%	-1.1%
Hardin	13,202	4,079	30.9%	13,214	4,051	30.7%	-0.7%	0.1%
Hawkins	28,932	9,231	31.9%	28,958	9,153	31.6%	-0.8%	0.1%
Haywood	8,881	2,941	33.1%	8,765	2,831	32.3%	-3.7%	-1.3%
Henderson	14,464	5,028	34.8%	14,548	5,023	34.5%	-0.1%	0.6%
Henry	16,596	5,057	30.5%	16,630	5,043	30.3%	-0.3%	0.2%
Hickman	12,372	4,227	34.2%	12,498	4,252	34.0%	0.6%	1.0%
Houston	4,287	1,419	33.1%	4,323	1,418	32.8%	-0.1%	0.9%
Humphreys	9,348	3,085	33.0%	9,370	3,061	32.7%	-0.8%	0.2%
Jackson	5,989	1,799	30.0%	6,038	1,792	29.7%	-0.4%	0.8%
Jefferson	28,797	9,499	33.0%	29,214	9,582	32.8%	0.9%	1.4%
Johnson	8,272	2,371	28.7%	8,206	2,334	28.4%	-1.6%	-0.8%
Knox	251,678	101,769	40.4%	256,251	102,956	40.2%	1.2%	1.8%
Lake	2,475	733	29.6%	2,409	703	29.2%	-4.2%	-2.6%
Lauderdale	12,208	4,218	34.6%	12,169	4,171	34.3%	-1.1%	-0.3%
Lawrence	22,816	7,924	34.7%	22,947	7,955	34.7%	0.4%	0.6%

Tennessee Female Population Estimates 2023 and 2025 *

	Population Estimate 2023			Population Estimate 2025			% Increase	
	Total	15-44	%15-44	Total	15-44	%15-44	15-44	Total
Lewis	6,396	2,060	32.2%	6,412	2,050	32.0%	-0.5%	0.3%
Lincoln	17,827	5,814	32.6%	17,952	5,835	32.5%	0.4%	0.7%
Loudon	29,076	8,203	28.2%	29,807	8,413	28.2%	2.6%	2.5%
McMinn	28,183	9,544	33.9%	28,428	9,539	33.6%	-0.1%	0.9%
McNairy	13,263	4,332	32.7%	13,318	4,318	32.4%	-0.3%	0.4%
Macon	13,145	4,811	36.6%	13,448	4,905	36.5%	2.0%	2.3%
Madison	52,189	19,569	37.5%	52,384	19,511	37.2%	-0.3%	0.4%
Marion	14,764	4,821	32.7%	14,757	4,788	32.4%	-0.7%	0.0%
Marshall	18,471	6,758	36.6%	18,858	6,848	36.3%	1.3%	2.1%
Maury	54,144	19,951	36.8%	55,836	20,338	36.4%	1.9%	3.1%
Meigs	6,437	2,036	31.6%	6,512	2,032	31.2%	-0.2%	1.2%
Monroe	24,331	7,710	31.7%	24,616	7,757	31.5%	0.6%	1.2%
Montgomery	114,142	51,589	45.2%	118,453	53,081	44.8%	2.9%	3.8%
Moore	3,267	1,042	31.9%	3,287	1,036	31.5%	-0.6%	0.6%
Morgan	9,761	3,167	32.4%	9,784	3,148	32.2%	-0.6%	0.2%
Obion	15,477	5,163	33.4%	15,408	5,092	33.0%	-1.4%	-0.4%
Overton	11,573	3,820	33.0%	11,696	3,841	32.8%	0.6%	1.1%
Perry	4,067	1,319	32.4%	4,098	1,327	32.4%	0.6%	0.7%
Pickett	2,550	673	26.4%	2,537	664	26.2%	-1.4%	-0.5%
Polk	8,677	2,746	31.6%	8,763	2,748	31.4%	0.1%	1.0%
Putnam	42,313	16,686	39.4%	43,303	17,047	39.4%	2.2%	2.3%
Rhea	17,199	5,985	34.8%	17,382	6,045	34.8%	1.0%	1.1%
Roane	27,453	8,417	30.7%	27,471	8,333	30.3%	-1.0%	0.1%
Robertson	37,894	13,879	36.6%	38,732	14,066	36.3%	1.4%	2.2%
Rutherford	185,464	81,433	43.9%	193,849	84,240	43.5%	3.4%	4.5%
Scott	11,263	4,036	35.8%	11,288	3,996	35.4%	-1.0%	0.2%
Sequatchie	7,889	2,502	31.7%	8,041	2,527	31.4%	1.0%	1.9%
Sevier	52,437	17,475	33.3%	53,737	17,892	33.3%	2.4%	2.5%
Shelby	496,301	195,842	39.5%	498,248	195,477	39.2%	-0.2%	0.4%
Smith	10,363	3,663	35.3%	10,495	3,678	35.1%	0.4%	1.3%
Stewart	7,033	2,225	31.6%	7,072	2,230	31.5%	0.2%	0.6%
Sullivan	82,093	26,650	32.5%	82,355	26,577	32.3%	-0.3%	0.3%
Sumner	105,330	38,548	36.6%	108,562	39,452	36.3%	2.3%	3.1%
Tipton	32,070	11,900	37.1%	32,389	11,901	36.7%	0.0%	1.0%
Trousdale	4,877	1,891	38.8%	4,957	1,922	38.8%	1.6%	1.6%
Unicoi	9,046	2,763	30.5%	9,077	2,747	30.3%	-0.6%	0.3%
Union	10,264	3,425	33.4%	10,304	3,402	33.0%	-0.7%	0.4%
Van Buren	2,922	823	28.2%	2,908	808	27.8%	-1.8%	-0.5%
Warren	21,172	7,421	35.1%	21,272	7,409	34.8%	-0.2%	0.5%
Washington	68,318	26,339	38.6%	69,287	26,618	38.4%	1.1%	1.4%
Wayne	7,259	2,251	31.0%	7,197	2,200	30.6%	-2.3%	-0.9%
Weakley	17,097	6,757	39.5%	17,119	6,753	39.4%	-0.1%	0.1%
White	14,516	4,800	33.1%	14,744	4,856	32.9%	1.2%	1.6%
Williamson	134,713	48,993	36.4%	141,218	50,991	36.1%	4.1%	4.8%
Wilson	80,326	29,315	36.5%	83,564	30,240	36.2%	3.2%	4.0%

* TN_CoPopProj_2021 UTCBER Population Projection Series.

Source: Boyd Center for Business and Economic Research, University of Tennessee, Knoxville
 Reassembled by the Tennessee Department of Health, Division of Population Health Assessment
 Note: These projections may not match Boyd Center projections precisely due to rounding.

Tennessee Population Estimates 2023 and 2027 *

	Population Estimate 2023			Population Estimate 2027			% Increase	
	Total	0-17	% 0-17	Total	0-17	% 0-17	0-17	Total
Tennessee	7,071,060	1,550,759	21.9%	7,282,134	1,586,614	21.8%	2.3%	3.0%
Anderson	78,595	16,109	20.5%	79,648	16,113	20.2%	0.0%	1.3%
Bedford	51,992	12,798	24.6%	54,262	13,277	24.5%	3.7%	4.4%
Benton	16,170	3,069	19.0%	16,184	2,990	18.5%	-2.6%	0.1%
Bledsoe	15,573	2,187	14.0%	15,958	2,195	13.8%	0.3%	2.5%
Blount	138,918	26,942	19.4%	143,850	27,642	19.2%	2.6%	3.6%
Bradley	111,877	24,081	21.5%	115,338	24,507	21.2%	1.8%	3.1%
Campbell	39,640	7,834	19.8%	39,250	7,666	19.5%	-2.1%	-1.0%
Cannon	15,125	3,133	20.7%	15,426	3,096	20.1%	-1.2%	2.0%
Carroll	27,601	6,056	21.9%	27,274	5,875	21.5%	-3.0%	-1.2%
Carter	56,052	9,608	17.1%	55,304	9,211	16.7%	-4.1%	-1.3%
Cheatham	41,692	8,654	20.8%	42,304	8,565	20.2%	-1.0%	1.5%
Chester	17,518	3,940	22.5%	17,648	3,874	22.0%	-1.7%	0.7%
Claiborne	32,342	5,940	18.4%	32,653	5,697	17.4%	-4.1%	1.0%
Clay	7,655	1,474	19.3%	7,659	1,441	18.8%	-2.2%	0.1%
Cocke	36,597	6,984	19.1%	36,897	6,774	18.4%	-3.0%	0.8%
Coffee	58,883	13,794	23.4%	60,425	13,985	23.1%	1.4%	2.6%
Crockett	14,161	3,267	23.1%	14,111	3,234	22.9%	-1.0%	-0.4%
Cumberland	63,803	10,420	16.3%	66,236	10,536	15.9%	1.1%	3.8%
Davidson	722,445	158,613	22.0%	742,241	164,736	22.2%	3.9%	2.7%
Decatur	11,607	2,269	19.5%	11,569	2,205	19.1%	-2.8%	-0.3%
DeKalb	21,305	4,398	20.6%	21,862	4,423	20.2%	0.6%	2.6%
Dickson	56,005	12,254	21.9%	57,965	12,512	21.6%	2.1%	3.5%
Dyer	36,796	8,549	23.2%	36,862	8,550	23.2%	0.0%	0.2%
Fayette	43,097	7,628	17.7%	44,833	8,001	17.8%	4.9%	4.0%
Fentress	18,982	3,779	19.9%	19,135	3,734	19.5%	-1.2%	0.8%
Franklin	42,819	8,555	20.0%	43,162	8,511	19.7%	-0.5%	0.8%
Gibson	49,485	11,705	23.7%	49,806	11,660	23.4%	-0.4%	0.6%
Giles	29,506	6,052	20.5%	29,368	5,935	20.2%	-1.9%	-0.5%
Grainger	23,871	4,519	18.9%	24,156	4,459	18.5%	-1.3%	1.2%
Greene	70,100	13,088	18.7%	70,498	12,942	18.4%	-1.1%	0.6%
Grundy	13,286	2,655	20.0%	12,981	2,493	19.2%	-6.1%	-2.3%
Hamblen	66,054	14,935	22.6%	67,218	15,140	22.5%	1.4%	1.8%
Hamilton	380,381	79,429	20.9%	390,799	81,631	20.9%	2.8%	2.7%
Hancock	6,381	1,264	19.8%	6,234	1,183	19.0%	-6.4%	-2.3%
Hardeman	24,635	4,536	18.4%	24,329	4,337	17.8%	-4.4%	-1.2%
Hardin	25,594	4,897	19.1%	25,522	4,711	18.5%	-3.8%	-0.3%
Hawkins	56,935	10,427	18.3%	56,860	10,132	17.8%	-2.8%	-0.1%
Haywood	16,660	3,584	21.5%	16,203	3,414	21.1%	-4.8%	-2.7%
Henderson	28,316	6,199	21.9%	28,573	6,139	21.5%	-1.0%	0.9%
Henry	32,143	6,174	19.2%	32,155	6,015	18.7%	-2.6%	0.0%
Hickman	25,808	5,088	19.7%	26,253	5,008	19.1%	-1.6%	1.7%
Houston	8,364	1,731	20.7%	8,451	1,720	20.4%	-0.7%	1.0%
Humphreys	18,656	3,884	20.8%	18,733	3,834	20.5%	-1.3%	0.4%
Jackson	12,013	2,107	17.5%	12,152	2,116	17.4%	0.4%	1.2%
Jefferson	56,597	10,741	19.0%	58,053	10,826	18.6%	0.8%	2.6%
Johnson	17,780	2,841	16.0%	17,640	2,720	15.4%	-4.2%	-0.8%
Knox	489,230	103,803	21.2%	506,257	107,786	21.3%	3.8%	3.5%
Lake	6,907	949	13.7%	6,848	886	12.9%	-6.6%	-0.9%
Lauderdale	25,397	5,419	21.3%	25,274	5,292	20.9%	-2.4%	-0.5%
Lawrence	44,865	10,541	23.5%	45,264	10,133	22.4%	-3.9%	0.9%

Tennessee Population Estimates 2023 and 2027 *

	Population Estimate 2023			Population Estimate 2027			% Increase	
	Total	0-17	% 0-17	Total	0-17	% 0-17	0-17	Total
Lewis	12,394	2,586	20.9%	12,391	2,504	20.2%	-3.2%	0.0%
Lincoln	34,943	7,309	20.9%	35,405	7,133	20.1%	-2.4%	1.3%
Loudon	57,186	10,471	18.3%	59,885	10,711	17.9%	2.3%	4.7%
McMinn	54,986	11,293	20.5%	55,847	11,353	20.3%	0.5%	1.6%
McNairy	25,942	5,361	20.7%	26,171	5,297	20.2%	-1.2%	0.9%
Macon	25,655	6,204	24.2%	26,707	6,432	24.1%	3.7%	4.1%
Madison	98,718	22,253	22.5%	99,036	22,072	22.3%	-0.8%	0.3%
Marion	28,904	5,822	20.1%	28,793	5,676	19.7%	-2.5%	-0.4%
Marshall	36,191	8,217	22.7%	37,601	8,485	22.6%	3.3%	3.9%
Maury	104,474	23,609	22.6%	110,559	24,950	22.6%	5.7%	5.8%
Meigs	12,753	2,511	19.7%	13,005	2,513	19.3%	0.1%	2.0%
Monroe	48,151	9,496	19.7%	49,178	9,334	19.0%	-1.7%	2.1%
Montgomery	227,061	61,055	26.9%	243,942	65,918	27.0%	8.0%	7.4%
Moore	6,487	1,202	18.5%	6,543	1,200	18.3%	-0.2%	0.9%
Morgan	21,659	3,947	18.2%	21,890	3,920	17.9%	-0.7%	1.1%
Obion	29,916	6,391	21.4%	29,546	6,341	21.5%	-0.8%	-1.2%
Overton	22,968	4,728	20.6%	23,414	4,764	20.3%	0.8%	1.9%
Perry	8,194	1,787	21.8%	8,303	1,779	21.4%	-0.5%	1.3%
Pickett	5,005	806	16.1%	4,932	779	15.8%	-3.4%	-1.5%
Polk	17,083	3,170	18.6%	17,354	3,156	18.2%	-0.5%	1.6%
Putnam	83,834	18,165	21.7%	87,505	18,903	21.6%	4.1%	4.4%
Rhea	34,052	7,340	21.6%	34,768	7,251	20.9%	-1.2%	2.1%
Roane	53,994	9,700	18.0%	53,945	9,532	17.7%	-1.7%	-0.1%
Robertson	74,699	17,056	22.8%	77,702	17,582	22.6%	3.1%	4.0%
Rutherford	363,690	88,632	24.4%	396,434	96,018	24.2%	8.3%	9.0%
Scott	22,143	5,033	22.7%	22,151	4,934	22.3%	-2.0%	0.0%
Sequatchie	15,614	3,096	19.8%	16,138	3,151	19.5%	1.8%	3.4%
Sevier	103,232	20,414	19.8%	108,125	21,120	19.5%	3.5%	4.7%
Shelby	941,637	232,242	24.7%	947,491	232,447	24.5%	0.1%	0.6%
Smith	20,651	4,527	21.9%	21,065	4,548	21.6%	0.5%	2.0%
Stewart	14,003	2,810	20.1%	14,149	2,749	19.4%	-2.2%	1.0%
Sullivan	159,811	29,857	18.7%	160,539	29,869	18.6%	0.0%	0.5%
Sumner	205,092	46,499	22.7%	217,255	48,849	22.5%	5.1%	5.9%
Tipton	62,909	14,615	23.2%	63,997	14,642	22.9%	0.2%	1.7%
Trousdale	11,742	2,240	19.1%	12,067	2,229	18.5%	-0.5%	2.8%
Unicoi	17,847	3,156	17.7%	17,906	3,177	17.7%	0.7%	0.3%
Union	20,296	4,114	20.3%	20,361	3,983	19.6%	-3.2%	0.3%
Van Buren	5,916	1,141	19.3%	5,856	1,087	18.6%	-4.7%	-1.0%
Warren	41,908	9,372	22.4%	42,196	9,242	21.9%	-1.4%	0.7%
Washington	133,361	25,643	19.2%	136,811	26,233	19.2%	2.3%	2.6%
Wayne	16,377	2,542	15.5%	16,150	2,407	14.9%	-5.3%	-1.4%
Weakley	33,249	6,772	20.4%	33,245	6,739	20.3%	-0.5%	0.0%
White	28,385	5,867	20.7%	29,196	5,876	20.1%	0.2%	2.9%
Williamson	264,071	66,969	25.4%	288,952	71,729	24.8%	7.1%	9.4%
Wilson	157,668	35,836	22.7%	169,947	38,136	22.4%	6.4%	7.8%

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 Reassembled by the Tennessee Department of Health, Division of Population Health Assessment
 Note: These projections may not match Boyd Center projections precisely due to rounding.

Tennessee Population Estimates 2023 and 2027 *

	Population Estimate 2023			Population Estimate 2027			% Increase	
	Total	18+	%18+	Total	18+	%18+	18+	Total
Tennessee	7,071,060	5,520,300	78.1%	7,282,134	5,695,520	78.2%	3.2%	3.0%
Anderson	78,595	62,487	79.5%	79,648	63,534	79.8%	1.7%	1.3%
Bedford	51,992	39,194	75.4%	54,262	40,985	75.5%	4.6%	4.4%
Benton	16,170	13,101	81.0%	16,184	13,195	81.5%	0.7%	0.1%
Bledsoe	15,573	13,386	86.0%	15,958	13,763	86.2%	2.8%	2.5%
Blount	138,918	111,975	80.6%	143,850	116,207	80.8%	3.8%	3.6%
Bradley	111,877	87,796	78.5%	115,338	90,831	78.8%	3.5%	3.1%
Campbell	39,640	31,805	80.2%	39,250	31,583	80.5%	-0.7%	-1.0%
Cannon	15,125	11,992	79.3%	15,426	12,330	79.9%	2.8%	2.0%
Carroll	27,601	21,545	78.1%	27,274	21,399	78.5%	-0.7%	-1.2%
Carter	56,052	46,444	82.9%	55,304	46,092	83.3%	-0.8%	-1.3%
Cheatham	41,692	33,037	79.2%	42,304	33,739	79.8%	2.1%	1.5%
Chester	17,518	13,578	77.5%	17,648	13,774	78.0%	1.4%	0.7%
Claiborne	32,342	26,402	81.6%	32,653	26,956	82.6%	2.1%	1.0%
Clay	7,655	6,181	80.7%	7,659	6,218	81.2%	0.6%	0.1%
Cocke	36,597	29,612	80.9%	36,897	30,123	81.6%	1.7%	0.8%
Coffee	58,883	45,089	76.6%	60,425	46,440	76.9%	3.0%	2.6%
Crockett	14,161	10,894	76.9%	14,111	10,878	77.1%	-0.2%	-0.4%
Cumberland	63,803	53,383	83.7%	66,236	55,700	84.1%	4.3%	3.8%
Davidson	722,445	563,833	78.0%	742,241	577,505	77.8%	2.4%	2.7%
Decatur	11,607	9,338	80.5%	11,569	9,364	80.9%	0.3%	-0.3%
DeKalb	21,305	16,908	79.4%	21,862	17,439	79.8%	3.1%	2.6%
Dickson	56,005	43,752	78.1%	57,965	45,453	78.4%	3.9%	3.5%
Dyer	36,796	28,247	76.8%	36,862	28,312	76.8%	0.2%	0.2%
Fayette	43,097	35,469	82.3%	44,833	36,832	82.2%	3.8%	4.0%
Fentress	18,982	15,203	80.1%	19,135	15,401	80.5%	1.3%	0.8%
Franklin	42,819	34,264	80.0%	43,162	34,651	80.3%	1.1%	0.8%
Gibson	49,485	37,780	76.3%	49,806	38,146	76.6%	1.0%	0.6%
Giles	29,506	23,454	79.5%	29,368	23,433	79.8%	-0.1%	-0.5%
Grainger	23,871	19,352	81.1%	24,156	19,698	81.5%	1.8%	1.2%
Greene	70,100	57,012	81.3%	70,498	57,556	81.6%	1.0%	0.6%
Grundy	13,286	10,630	80.0%	12,981	10,488	80.8%	-1.3%	-2.3%
Hamblen	66,054	51,119	77.4%	67,218	52,078	77.5%	1.9%	1.8%
Hamilton	380,381	300,952	79.1%	390,799	309,168	79.1%	2.7%	2.7%
Hancock	6,381	5,116	80.2%	6,234	5,051	81.0%	-1.3%	-2.3%
Hardeman	24,635	20,099	81.6%	24,329	19,993	82.2%	-0.5%	-1.2%
Hardin	25,594	20,697	80.9%	25,522	20,811	81.5%	0.5%	-0.3%
Hawkins	56,935	46,508	81.7%	56,860	46,728	82.2%	0.5%	-0.1%
Haywood	16,660	13,075	78.5%	16,203	12,789	78.9%	-2.2%	-2.7%
Henderson	28,316	22,117	78.1%	28,573	22,434	78.5%	1.4%	0.9%
Henry	32,143	25,969	80.8%	32,155	26,140	81.3%	0.7%	0.0%
Hickman	25,808	20,720	80.3%	26,253	21,245	80.9%	2.5%	1.7%
Houston	8,364	6,633	79.3%	8,451	6,731	79.6%	1.5%	1.0%
Humphreys	18,656	14,771	79.2%	18,733	14,899	79.5%	0.9%	0.4%
Jackson	12,013	9,906	82.5%	12,152	10,036	82.6%	1.3%	1.2%
Jefferson	56,597	45,856	81.0%	58,053	47,227	81.4%	3.0%	2.6%
Johnson	17,780	14,939	84.0%	17,640	14,919	84.6%	-0.1%	-0.8%
Knox	489,230	385,427	78.8%	506,257	398,471	78.7%	3.4%	3.5%
Lake	6,907	5,958	86.3%	6,848	5,962	87.1%	0.1%	-0.9%
Lauderdale	25,397	19,977	78.7%	25,274	19,982	79.1%	0.0%	-0.5%
Lawrence	44,865	34,324	76.5%	45,264	35,131	77.6%	2.4%	0.9%

Tennessee Population Estimates 2023 and 2027 *

	Population Estimate 2023			Population Estimate 2027			% Increase	
	Total	18+	%18+	Total	18+	%18+	18+	Total
Lewis	12,394	9,808	79.1%	12,391	9,887	79.8%	0.8%	0.0%
Lincoln	34,943	27,633	79.1%	35,405	28,272	79.9%	2.3%	1.3%
Loudon	57,186	46,715	81.7%	59,885	49,174	82.1%	5.3%	4.7%
McMinn	54,986	43,693	79.5%	55,847	44,494	79.7%	1.8%	1.6%
McNairy	25,942	20,581	79.3%	26,171	20,875	79.8%	1.4%	0.9%
Macon	25,655	19,451	75.8%	26,707	20,275	75.9%	4.2%	4.1%
Madison	98,718	76,465	77.5%	99,036	76,964	77.7%	0.7%	0.3%
Marion	28,904	23,082	79.9%	28,793	23,117	80.3%	0.2%	-0.4%
Marshall	36,191	27,974	77.3%	37,601	29,115	77.4%	4.1%	3.9%
Maury	104,474	80,866	77.4%	110,559	85,609	77.4%	5.9%	5.8%
Meigs	12,753	10,241	80.3%	13,005	10,492	80.7%	2.4%	2.0%
Monroe	48,151	38,655	80.3%	49,178	39,843	81.0%	3.1%	2.1%
Montgomery	227,061	166,005	73.1%	243,942	178,024	73.0%	7.2%	7.4%
Moore	6,487	5,285	81.5%	6,543	5,343	81.7%	1.1%	0.9%
Morgan	21,659	17,712	81.8%	21,890	17,970	82.1%	1.5%	1.1%
Obion	29,916	23,525	78.6%	29,546	23,205	78.5%	-1.4%	-1.2%
Overton	22,968	18,240	79.4%	23,414	18,650	79.7%	2.2%	1.9%
Perry	8,194	6,406	78.2%	8,303	6,524	78.6%	1.8%	1.3%
Pickett	5,005	4,199	83.9%	4,932	4,154	84.2%	-1.1%	-1.5%
Polk	17,083	13,913	81.4%	17,354	14,199	81.8%	2.1%	1.6%
Putnam	83,834	65,669	78.3%	87,505	68,602	78.4%	4.5%	4.4%
Rhea	34,052	26,712	78.4%	34,768	27,517	79.1%	3.0%	2.1%
Roane	53,994	44,294	82.0%	53,945	44,413	82.3%	0.3%	-0.1%
Robertson	74,699	57,644	77.2%	77,702	60,121	77.4%	4.3%	4.0%
Rutherford	363,690	275,058	75.6%	396,434	300,416	75.8%	9.2%	9.0%
Scott	22,143	17,110	77.3%	22,151	17,216	77.7%	0.6%	0.0%
Sequatchie	15,614	12,519	80.2%	16,138	12,987	80.5%	3.7%	3.4%
Sevier	103,232	82,818	80.2%	108,125	87,005	80.5%	5.1%	4.7%
Shelby	941,637	709,395	75.3%	947,491	715,044	75.5%	0.8%	0.6%
Smith	20,651	16,124	78.1%	21,065	16,516	78.4%	2.4%	2.0%
Stewart	14,003	11,193	79.9%	14,149	11,400	80.6%	1.8%	1.0%
Sullivan	159,811	129,954	81.3%	160,539	130,670	81.4%	0.6%	0.5%
Sumner	205,092	158,593	77.3%	217,255	168,406	77.5%	6.2%	5.9%
Tipton	62,909	48,294	76.8%	63,997	49,355	77.1%	2.2%	1.7%
Trousdale	11,742	9,502	80.9%	12,067	9,838	81.5%	3.5%	2.8%
Unicoi	17,847	14,691	82.3%	17,906	14,728	82.3%	0.3%	0.3%
Union	20,296	16,182	79.7%	20,361	16,379	80.4%	1.2%	0.3%
Van Buren	5,916	4,775	80.7%	5,856	4,769	81.4%	-0.1%	-1.0%
Warren	41,908	32,536	77.6%	42,196	32,955	78.1%	1.3%	0.7%
Washington	133,361	107,718	80.8%	136,811	110,578	80.8%	2.7%	2.6%
Wayne	16,377	13,835	84.5%	16,150	13,743	85.1%	-0.7%	-1.4%
Weakley	33,249	26,477	79.6%	33,245	26,507	79.7%	0.1%	0.0%
White	28,385	22,518	79.3%	29,196	23,320	79.9%	3.6%	2.9%
Williamson	264,071	197,102	74.6%	288,952	217,223	75.2%	10.2%	9.4%
Wilson	157,668	121,832	77.3%	169,947	131,811	77.6%	8.2%	7.8%

* TN_CoPopProj_2021 UTCBER Population Projection Series.

Source: Boyd Center for Business and Economic Research, University of Tennessee, Knoxville
 Reassembled by the Tennessee Department of Health, Division of Population Health Assessment
 Note: These projections may not match Boyd Center projections precisely due to rounding.

Tennessee Population Estimates 2023 and 2027 *

	Population Estimate 2023			Population Estimate 2027			% Increase	
	Total	65+	%65+	Total	65+	%65+	65+	Total
Tennessee	7,071,060	1,290,989	18.3%	7,282,134	1,413,040	19.4%	9.5%	3.0%
Anderson	78,595	17,287	22.0%	79,648	18,544	23.3%	7.3%	1.3%
Bedford	51,992	8,591	16.5%	54,262	9,583	17.7%	11.5%	4.4%
Benton	16,170	4,202	26.0%	16,184	4,475	27.6%	6.5%	0.1%
Bledsoe	15,573	3,185	20.5%	15,958	3,521	22.1%	10.5%	2.5%
Blount	138,918	31,447	22.6%	143,850	34,692	24.1%	10.3%	3.6%
Bradley	111,877	21,166	18.9%	115,338	23,315	20.2%	10.2%	3.1%
Campbell	39,640	8,790	22.2%	39,250	9,242	23.5%	5.1%	-1.0%
Cannon	15,125	3,023	20.0%	15,426	3,369	21.8%	11.4%	2.0%
Carroll	27,601	6,072	22.0%	27,274	6,381	23.4%	5.1%	-1.2%
Carter	56,052	13,834	24.7%	55,304	14,708	26.6%	6.3%	-1.3%
Cheatham	41,692	7,365	17.7%	42,304	8,293	19.6%	12.6%	1.5%
Chester	17,518	3,331	19.0%	17,648	3,611	20.5%	8.4%	0.7%
Claiborne	32,342	7,192	22.2%	32,653	7,812	23.9%	8.6%	1.0%
Clay	7,655	2,097	27.4%	7,659	2,261	29.5%	7.8%	0.1%
Cocke	36,597	8,724	23.8%	36,897	9,472	25.7%	8.6%	0.8%
Coffee	58,883	10,985	18.7%	60,425	11,977	19.8%	9.0%	2.6%
Crockett	14,161	2,904	20.5%	14,111	3,096	21.9%	6.6%	-0.4%
Cumberland	63,803	21,874	34.3%	66,236	24,019	36.3%	9.8%	3.8%
Davidson	722,445	98,327	13.6%	742,241	106,767	14.4%	8.6%	2.7%
Decatur	11,607	3,001	25.9%	11,569	3,195	27.6%	6.5%	-0.3%
DeKalb	21,305	4,391	20.6%	21,862	4,843	22.2%	10.3%	2.6%
Dickson	56,005	10,268	18.3%	57,965	11,463	19.8%	11.6%	3.5%
Dyer	36,796	7,096	19.3%	36,862	7,549	20.5%	6.4%	0.2%
Fayette	43,097	10,584	24.6%	44,833	11,929	26.6%	12.7%	4.0%
Fentress	18,982	4,636	24.4%	19,135	5,022	26.2%	8.3%	0.8%
Franklin	42,819	9,582	22.4%	43,162	10,267	23.8%	7.1%	0.8%
Gibson	49,485	9,587	19.4%	49,806	10,178	20.4%	6.2%	0.6%
Giles	29,506	6,644	22.5%	29,368	7,138	24.3%	7.4%	-0.5%
Grainger	23,871	5,530	23.2%	24,156	6,055	25.1%	9.5%	1.2%
Greene	70,100	16,743	23.9%	70,498	17,914	25.4%	7.0%	0.6%
Grundy	13,286	3,041	22.9%	12,981	3,224	24.8%	6.0%	-2.3%
Hamblen	66,054	13,098	19.8%	67,218	14,091	21.0%	7.6%	1.8%
Hamilton	380,381	73,546	19.3%	390,799	79,524	20.3%	8.1%	2.7%
Hancock	6,381	1,542	24.2%	6,234	1,612	25.9%	4.5%	-2.3%
Hardeman	24,635	4,899	19.9%	24,329	5,061	20.8%	3.3%	-1.2%
Hardin	25,594	6,505	25.4%	25,522	6,941	27.2%	6.7%	-0.3%
Hawkins	56,935	13,456	23.6%	56,860	14,502	25.5%	7.8%	-0.1%
Haywood	16,660	3,660	22.0%	16,203	3,866	23.9%	5.6%	-2.7%
Henderson	28,316	5,676	20.0%	28,573	6,075	21.3%	7.0%	0.9%
Henry	32,143	8,203	25.5%	32,155	8,680	27.0%	5.8%	0.0%
Hickman	25,808	5,020	19.5%	26,253	5,475	20.9%	9.1%	1.7%
Houston	8,364	1,891	22.6%	8,451	2,027	24.0%	7.2%	1.0%
Humphreys	18,656	4,097	22.0%	18,733	4,377	23.4%	6.8%	0.4%
Jackson	12,013	3,066	25.5%	12,152	3,351	27.6%	9.3%	1.2%
Jefferson	56,597	12,783	22.6%	58,053	14,267	24.6%	11.6%	2.6%
Johnson	17,780	4,497	25.3%	17,640	4,692	26.6%	4.3%	-0.8%
Knox	489,230	85,740	17.5%	506,257	93,474	18.5%	9.0%	3.5%
Lake	6,907	1,191	17.2%	6,848	1,199	17.5%	0.6%	-0.9%
Lauderdale	25,397	4,475	17.6%	25,274	4,723	18.7%	5.5%	-0.5%
Lawrence	44,865	8,781	19.6%	45,264	9,565	21.1%	8.9%	0.9%

Tennessee Population Estimates 2023 and 2027 *

	Population Estimate 2023			Population Estimate 2027			% Increase	
	Total	65+	%65+	Total	65+	%65+	65+	Total
Lewis	12,394	2,887	23.3%	12,391	3,084	24.9%	6.8%	0.0%
Lincoln	34,943	7,592	21.7%	35,405	8,236	23.3%	8.5%	1.3%
Loudon	57,186	16,756	29.3%	59,885	18,491	30.9%	10.4%	4.7%
McMinn	54,986	12,074	22.0%	55,847	13,097	23.5%	8.5%	1.6%
McNairy	25,942	5,787	22.3%	26,171	6,159	23.5%	6.4%	0.9%
Macon	25,655	4,450	17.3%	26,707	4,907	18.4%	10.3%	4.1%
Madison	98,718	19,352	19.6%	99,036	20,925	21.1%	8.1%	0.3%
Marion	28,904	6,407	22.2%	28,793	6,793	23.6%	6.0%	-0.4%
Marshall	36,191	6,445	17.8%	37,601	7,197	19.1%	11.7%	3.9%
Maury	104,474	19,156	18.3%	110,559	21,553	19.5%	12.5%	5.8%
Meigs	12,753	2,873	22.5%	13,005	3,157	24.3%	9.9%	2.0%
Monroe	48,151	11,385	23.6%	49,178	12,505	25.4%	9.8%	2.1%
Montgomery	227,061	23,975	10.6%	243,942	27,584	11.3%	15.1%	7.4%
Moore	6,487	1,562	24.1%	6,543	1,671	25.5%	6.9%	0.9%
Morgan	21,659	4,315	19.9%	21,890	4,614	21.1%	6.9%	1.1%
Obion	29,916	6,759	22.6%	29,546	6,988	23.7%	3.4%	-1.2%
Overton	22,968	5,086	22.1%	23,414	5,479	23.4%	7.7%	1.9%
Perry	8,194	1,850	22.6%	8,303	1,952	23.5%	5.6%	1.3%
Pickett	5,005	1,525	30.5%	4,932	1,605	32.5%	5.2%	-1.5%
Polk	17,083	3,890	22.8%	17,354	4,255	24.5%	9.4%	1.6%
Putnam	83,834	15,307	18.3%	87,505	16,976	19.4%	10.9%	4.4%
Rhea	34,052	7,042	20.7%	34,768	7,658	22.0%	8.7%	2.1%
Roane	53,994	13,727	25.4%	53,945	14,626	27.1%	6.6%	-0.1%
Robertson	74,699	12,672	17.0%	77,702	14,395	18.5%	13.6%	4.0%
Rutherford	363,690	44,100	12.1%	396,434	52,325	13.2%	18.7%	9.0%
Scott	22,143	4,175	18.9%	22,151	4,459	20.1%	6.8%	0.0%
Sequatchie	15,614	3,652	23.4%	16,138	4,031	25.0%	10.4%	3.4%
Sevier	103,232	22,761	22.0%	108,125	25,331	23.4%	11.3%	4.7%
Shelby	941,637	146,215	15.5%	947,491	156,519	16.5%	7.0%	0.6%
Smith	20,651	3,879	18.8%	21,065	4,327	20.5%	11.6%	2.0%
Stewart	14,003	3,134	22.4%	14,149	3,404	24.1%	8.6%	1.0%
Sullivan	159,811	38,117	23.9%	160,539	40,469	25.2%	6.2%	0.5%
Sumner	205,092	36,251	17.7%	217,255	40,980	18.9%	13.0%	5.9%
Tipton	62,909	10,592	16.8%	63,997	11,743	18.3%	10.9%	1.7%
Trousdale	11,742	1,611	13.7%	12,067	1,746	14.5%	8.4%	2.8%
Unicoi	17,847	4,605	25.8%	17,906	4,899	27.4%	6.4%	0.3%
Union	20,296	4,226	20.8%	20,361	4,696	23.1%	11.1%	0.3%
Van Buren	5,916	1,510	25.5%	5,856	1,594	27.2%	5.6%	-1.0%
Warren	41,908	8,201	19.6%	42,196	8,795	20.8%	7.2%	0.7%
Washington	133,361	27,332	20.5%	136,811	29,657	21.7%	8.5%	2.6%
Wayne	16,377	3,471	21.2%	16,150	3,641	22.5%	4.9%	-1.4%
Weakley	33,249	6,810	20.5%	33,245	7,228	21.7%	6.1%	0.0%
White	28,385	6,319	22.3%	29,196	6,901	23.6%	9.2%	2.9%
Williamson	264,071	40,172	15.2%	288,952	47,379	16.4%	17.9%	9.4%
Wilson	157,668	27,360	17.4%	169,947	31,601	18.6%	15.5%	7.8%

* TN_CoPopProj_2021 UTCBER Population Projection Series.

Source: Boyd Center for Business and Economic Research, University of Tennessee, Knoxville
 Reassembled by the Tennessee Department of Health, Division of Population Health Assessment
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Tennessee Female Population Estimates 2023 and 2027 *

	Population Estimate 2023			Population Estimate 2027			% Increase	
	Total	15-44	%15-44	Total	15-44	%15-44	15-44	Total
Tennessee	3,625,723	1,364,507	37.6%	3,737,259	1,386,899	37.1%	1.6%	3.1%
Anderson	40,329	13,528	33.5%	40,850	13,549	33.2%	0.2%	1.3%
Bedford	26,416	9,764	37.0%	27,649	10,145	36.7%	3.9%	4.7%
Benton	8,213	2,389	29.1%	8,210	2,336	28.5%	-2.2%	0.0%
Bledsoe	6,224	1,871	30.1%	6,265	1,798	28.7%	-3.9%	0.6%
Blount	71,505	23,888	33.4%	74,192	24,458	33.0%	2.4%	3.8%
Bradley	57,623	21,226	36.8%	59,479	21,727	36.5%	2.4%	3.2%
Campbell	20,168	6,626	32.9%	19,956	6,437	32.3%	-2.9%	-1.1%
Cannon	7,580	2,559	33.8%	7,733	2,553	33.0%	-0.3%	2.0%
Carroll	14,045	4,726	33.6%	13,886	4,647	33.5%	-1.7%	-1.1%
Carter	28,671	9,267	32.3%	28,350	8,981	31.7%	-3.1%	-1.1%
Cheatham	21,012	7,520	35.8%	21,370	7,526	35.2%	0.1%	1.7%
Chester	9,176	3,583	39.1%	9,290	3,616	38.9%	0.9%	1.2%
Claiborne	16,538	5,778	34.9%	16,703	5,811	34.8%	0.6%	1.0%
Clay	3,905	1,123	28.7%	3,882	1,088	28.0%	-3.0%	-0.6%
Cocke	18,844	5,967	31.7%	19,059	5,951	31.2%	-0.3%	1.1%
Coffee	30,076	10,723	35.7%	30,887	10,956	35.5%	2.2%	2.7%
Crockett	7,433	2,562	34.5%	7,445	2,536	34.1%	-1.0%	0.2%
Cumberland	32,741	8,498	26.0%	33,966	8,680	25.6%	2.1%	3.7%
Davidson	373,661	168,077	45.0%	383,962	168,258	43.8%	0.1%	2.8%
Decatur	5,884	1,786	30.4%	5,874	1,741	29.6%	-2.5%	-0.2%
DeKalb	10,631	3,583	33.7%	10,935	3,629	33.2%	1.3%	2.9%
Dickson	28,560	10,209	35.7%	29,600	10,387	35.1%	1.7%	3.6%
Dyer	19,055	6,830	35.8%	19,128	6,768	35.4%	-0.9%	0.4%
Fayette	21,920	6,716	30.6%	22,820	6,800	29.8%	1.3%	4.1%
Fentress	9,638	2,889	30.0%	9,741	2,881	29.6%	-0.3%	1.1%
Franklin	21,947	7,798	35.5%	22,154	7,841	35.4%	0.6%	0.9%
Gibson	25,684	9,107	35.5%	25,841	9,054	35.0%	-0.6%	0.6%
Giles	15,251	5,086	33.3%	15,221	5,014	32.9%	-1.4%	-0.2%
Grainger	11,872	3,719	31.3%	12,010	3,691	30.7%	-0.8%	1.2%
Greene	35,679	11,518	32.3%	35,914	11,460	31.9%	-0.5%	0.7%
Grundy	6,679	2,178	32.6%	6,524	2,047	31.4%	-6.0%	-2.3%
Hamblen	33,799	11,628	34.4%	34,511	11,851	34.3%	1.9%	2.1%
Hamilton	197,051	74,691	37.9%	202,522	75,515	37.3%	1.1%	2.8%
Hancock	3,242	1,008	31.1%	3,168	986	31.1%	-2.2%	-2.3%
Hardeman	11,005	3,558	32.3%	10,749	3,405	31.7%	-4.3%	-2.3%
Hardin	13,202	4,079	30.9%	13,210	4,018	30.4%	-1.5%	0.1%
Hawkins	28,932	9,231	31.9%	28,938	9,062	31.3%	-1.8%	0.0%
Haywood	8,881	2,941	33.1%	8,642	2,728	31.6%	-7.2%	-2.7%
Henderson	14,464	5,028	34.8%	14,620	5,009	34.3%	-0.4%	1.1%
Henry	16,596	5,057	30.5%	16,645	5,018	30.1%	-0.8%	0.3%
Hickman	12,372	4,227	34.2%	12,609	4,272	33.9%	1.1%	1.9%
Houston	4,287	1,419	33.1%	4,356	1,416	32.5%	-0.2%	1.6%
Humphreys	9,348	3,085	33.0%	9,380	3,039	32.4%	-1.5%	0.3%
Jackson	5,989	1,799	30.0%	6,076	1,785	29.4%	-0.8%	1.4%
Jefferson	28,797	9,499	33.0%	29,593	9,659	32.6%	1.7%	2.8%
Johnson	8,272	2,371	28.7%	8,129	2,296	28.2%	-3.2%	-1.7%
Knox	251,678	101,769	40.4%	260,611	104,069	39.9%	2.3%	3.5%
Lake	2,475	733	29.6%	2,345	672	28.7%	-8.4%	-5.2%
Lauderdale	12,208	4,218	34.6%	12,121	4,124	34.0%	-2.2%	-0.7%
Lawrence	22,816	7,924	34.7%	23,055	7,974	34.6%	0.6%	1.0%

Tennessee Female Population Estimates 2023 and 2027 *

	Population Estimate 2023			Population Estimate 2027			% Increase	
	Total	15-44	%15-44	Total	15-44	%15-44	15-44	Total
Lewis	6,396	2,060	32.2%	6,417	2,038	31.8%	-1.1%	0.3%
Lincoln	17,827	5,814	32.6%	18,059	5,844	32.4%	0.5%	1.3%
Loudon	29,076	8,203	28.2%	30,483	8,612	28.3%	5.0%	4.8%
McMinn	28,183	9,544	33.9%	28,646	9,535	33.3%	-0.1%	1.6%
McNairy	13,263	4,332	32.7%	13,358	4,303	32.2%	-0.7%	0.7%
Macon	13,145	4,811	36.6%	13,740	4,994	36.3%	3.8%	4.5%
Madison	52,189	19,569	37.5%	52,548	19,459	37.0%	-0.6%	0.7%
Marion	14,764	4,821	32.7%	14,738	4,756	32.3%	-1.4%	-0.2%
Marshall	18,471	6,758	36.6%	19,222	6,930	36.1%	2.5%	4.1%
Maury	54,144	19,951	36.8%	57,467	20,711	36.0%	3.8%	6.1%
Meigs	6,437	2,036	31.6%	6,576	2,031	30.9%	-0.2%	2.2%
Monroe	24,331	7,710	31.7%	24,859	7,789	31.3%	1.0%	2.2%
Montgomery	114,142	51,589	45.2%	122,747	54,515	44.4%	5.7%	7.5%
Moore	3,267	1,042	31.9%	3,303	1,030	31.2%	-1.2%	1.1%
Morgan	9,761	3,167	32.4%	9,793	3,128	31.9%	-1.2%	0.3%
Obion	15,477	5,163	33.4%	15,325	5,031	32.8%	-2.6%	-1.0%
Overton	11,573	3,820	33.0%	11,804	3,860	32.7%	1.1%	2.0%
Perry	4,067	1,319	32.4%	4,124	1,336	32.4%	1.3%	1.4%
Pickett	2,550	673	26.4%	2,519	656	26.1%	-2.5%	-1.2%
Polk	8,677	2,746	31.6%	8,837	2,751	31.1%	0.2%	1.8%
Putnam	42,313	16,686	39.4%	44,253	17,384	39.3%	4.2%	4.6%
Rhea	17,199	5,985	34.8%	17,546	6,097	34.7%	1.9%	2.0%
Roane	27,453	8,417	30.7%	27,455	8,244	30.0%	-2.1%	0.0%
Robertson	37,894	13,879	36.6%	39,535	14,248	36.0%	2.7%	4.3%
Rutherford	185,464	81,433	43.9%	202,233	87,000	43.0%	6.8%	9.0%
Scott	11,263	4,036	35.8%	11,301	3,964	35.1%	-1.8%	0.3%
Sequatchie	7,889	2,502	31.7%	8,181	2,552	31.2%	2.0%	3.7%
Sevier	52,437	17,475	33.3%	54,967	18,284	33.3%	4.6%	4.8%
Shelby	496,301	195,842	39.5%	499,977	194,957	39.0%	-0.5%	0.7%
Smith	10,363	3,663	35.3%	10,611	3,693	34.8%	0.8%	2.4%
Stewart	7,033	2,225	31.6%	7,101	2,230	31.4%	0.2%	1.0%
Sullivan	82,093	26,650	32.5%	82,513	26,469	32.1%	-0.7%	0.5%
Sumner	105,330	38,548	36.6%	111,700	40,304	36.1%	4.6%	6.0%
Tipton	32,070	11,900	37.1%	32,669	11,883	36.4%	-0.1%	1.9%
Trousdale	4,877	1,891	38.8%	5,032	1,942	38.6%	2.7%	3.2%
Unicoi	9,046	2,763	30.5%	9,094	2,734	30.1%	-1.0%	0.5%
Union	10,264	3,425	33.4%	10,330	3,371	32.6%	-1.6%	0.6%
Van Buren	2,922	823	28.2%	2,891	796	27.5%	-3.3%	-1.1%
Warren	21,172	7,421	35.1%	21,355	7,399	34.6%	-0.3%	0.9%
Washington	68,318	26,339	38.6%	70,173	26,867	38.3%	2.0%	2.7%
Wayne	7,259	2,251	31.0%	7,127	2,145	30.1%	-4.7%	-1.8%
Weakley	17,097	6,757	39.5%	17,126	6,755	39.4%	0.0%	0.2%
White	14,516	4,800	33.1%	14,955	4,913	32.9%	2.4%	3.0%
Williamson	134,713	48,993	36.4%	147,670	52,960	35.9%	8.1%	9.6%
Wilson	80,326	29,315	36.5%	86,729	31,137	35.9%	6.2%	8.0%

* TN_CoPopProj_2021 UTCBER Population Projection Series.

Source: Boyd Center for Business and Economic Research, University of Tennessee, Knoxville
 Reassembled by the Tennessee Department of Health, Division of Population Health Assessment
 Note: These projections may not match Boyd Center projections precisely due to rounding.

Tennessee Population Estimates 2022 and 2026 *

	Population Estimate 2022			Population Estimate 2026			% Increase	
	Total	0-17	% 0-17	Total	0-17	% 0-17	0-17	Total
Tennessee	6,997,493	1,541,977	22.0%	7,203,404	1,573,804	21.8%	2.1%	2.9%
Anderson	77,746	15,823	20.4%	78,715	15,811	20.1%	-0.1%	1.2%
Bedford	51,436	12,741	24.8%	53,694	13,207	24.6%	3.7%	4.4%
Benton	16,259	3,120	19.2%	16,268	3,023	18.6%	-3.1%	0.1%
Bledsoe	15,265	2,250	14.7%	15,688	2,247	14.3%	-0.1%	2.8%
Blount	136,116	26,692	19.6%	140,274	27,136	19.3%	1.7%	3.1%
Bradley	110,318	23,808	21.6%	113,675	24,179	21.3%	1.6%	3.0%
Campbell	39,348	7,800	19.8%	38,939	7,588	19.5%	-2.7%	-1.0%
Cannon	14,791	3,018	20.4%	15,040	2,968	19.7%	-1.7%	1.7%
Carroll	27,767	6,030	21.7%	27,417	5,874	21.4%	-2.6%	-1.3%
Carter	55,761	9,725	17.4%	54,913	9,233	16.8%	-5.1%	-1.5%
Cheatham	41,212	8,635	21.0%	41,790	8,478	20.3%	-1.8%	1.4%
Chester	17,394	3,925	22.6%	17,518	3,819	21.8%	-2.7%	0.7%
Claiborne	32,217	5,829	18.1%	32,522	5,558	17.1%	-4.6%	0.9%
Clay	7,768	1,510	19.4%	7,769	1,476	19.0%	-2.3%	0.0%
Cocke	36,221	6,924	19.1%	36,459	6,708	18.4%	-3.1%	0.7%
Coffee	57,147	13,306	23.3%	58,462	13,413	22.9%	0.8%	2.3%
Crockett	14,300	3,259	22.8%	14,231	3,219	22.6%	-1.2%	-0.5%
Cumberland	62,326	10,442	16.8%	64,493	10,494	16.3%	0.5%	3.5%
Davidson	717,032	156,667	21.8%	737,504	163,413	22.2%	4.3%	2.9%
Decatur	11,711	2,326	19.9%	11,667	2,269	19.4%	-2.4%	-0.4%
DeKalb	20,730	4,275	20.6%	21,225	4,276	20.1%	0.0%	2.4%
Dickson	55,704	12,352	22.2%	57,725	12,560	21.8%	1.7%	3.6%
Dyer	37,465	8,773	23.4%	37,520	8,750	23.3%	-0.3%	0.1%
Fayette	42,567	7,834	18.4%	44,364	8,146	18.4%	4.0%	4.2%
Fentress	18,451	3,689	20.0%	18,570	3,626	19.5%	-1.7%	0.6%
Franklin	42,297	8,517	20.1%	42,601	8,424	19.8%	-1.1%	0.7%
Gibson	49,445	11,716	23.7%	49,737	11,684	23.5%	-0.3%	0.6%
Giles	29,403	6,079	20.7%	29,200	5,930	20.3%	-2.5%	-0.7%
Grainger	23,595	4,513	19.1%	23,895	4,431	18.5%	-1.8%	1.3%
Greene	69,852	13,117	18.8%	70,287	12,932	18.4%	-1.4%	0.6%
Grundy	13,072	2,636	20.2%	12,757	2,469	19.4%	-6.3%	-2.4%
Hamblen	65,862	14,827	22.5%	67,031	15,070	22.5%	1.6%	1.8%
Hamilton	375,027	78,747	21.0%	384,624	80,471	20.9%	2.2%	2.6%
Hancock	6,431	1,254	19.5%	6,290	1,176	18.7%	-6.3%	-2.2%
Hardeman	24,981	4,666	18.7%	24,680	4,460	18.1%	-4.4%	-1.2%
Hardin	25,795	5,013	19.4%	25,700	4,812	18.7%	-4.0%	-0.4%
Hawkins	56,619	10,562	18.7%	56,403	10,159	18.0%	-3.8%	-0.4%
Haywood	16,899	3,606	21.3%	16,451	3,438	20.9%	-4.6%	-2.7%
Henderson	28,158	6,165	21.9%	28,392	6,099	21.5%	-1.1%	0.8%
Henry	32,644	6,363	19.5%	32,794	6,226	19.0%	-2.2%	0.5%
Hickman	25,613	5,043	19.7%	26,050	4,946	19.0%	-1.9%	1.7%
Houston	8,384	1,747	20.8%	8,480	1,737	20.5%	-0.6%	1.2%
Humphreys	18,618	3,851	20.7%	18,683	3,780	20.2%	-1.9%	0.3%
Jackson	11,976	2,129	17.8%	12,112	2,131	17.6%	0.1%	1.1%
Jefferson	55,709	10,753	19.3%	57,115	10,757	18.8%	0.0%	2.5%
Johnson	17,711	2,832	16.0%	17,587	2,707	15.4%	-4.4%	-0.7%
Knox	482,417	103,410	21.4%	498,375	106,709	21.4%	3.2%	3.3%
Lake	7,321	979	13.4%	7,239	909	12.6%	-7.1%	-1.1%
Lauderdale	25,815	5,577	21.6%	25,734	5,452	21.2%	-2.3%	-0.3%
Lawrence	44,324	10,292	23.2%	44,721	9,910	22.2%	-3.7%	0.9%

Tennessee Population Estimates 2022 and 2026 *

	Population Estimate 2022			Population Estimate 2026			% Increase	
	Total	0-17	% 0-17	Total	0-17	% 0-17	0-17	Total
Lewis	12,134	2,475	20.4%	12,127	2,393	19.7%	-3.3%	-0.1%
Lincoln	34,677	7,212	20.8%	35,139	7,029	20.0%	-2.5%	1.3%
Loudon	55,779	10,372	18.6%	58,178	10,574	18.2%	1.9%	4.3%
McMinn	54,221	11,188	20.6%	54,947	11,160	20.3%	-0.3%	1.3%
McNairy	26,143	5,399	20.6%	26,336	5,300	20.1%	-1.8%	0.7%
Macon	25,375	6,194	24.4%	26,405	6,400	24.2%	3.3%	4.1%
Madison	97,958	22,207	22.7%	98,181	21,907	22.3%	-1.4%	0.2%
Marion	28,530	5,738	20.1%	28,375	5,571	19.6%	-2.9%	-0.5%
Marshall	35,034	7,946	22.7%	36,261	8,127	22.4%	2.3%	3.5%
Maury	100,386	23,012	22.9%	106,021	24,163	22.8%	5.0%	5.6%
Meigs	12,616	2,478	19.6%	12,872	2,470	19.2%	-0.3%	2.0%
Monroe	47,548	9,396	19.8%	48,442	9,201	19.0%	-2.1%	1.9%
Montgomery	223,240	60,476	27.1%	240,304	65,462	27.2%	8.2%	7.6%
Moore	6,495	1,188	18.3%	6,560	1,181	18.0%	-0.6%	1.0%
Morgan	21,911	4,013	18.3%	22,152	3,951	17.8%	-1.5%	1.1%
Obion	29,967	6,378	21.3%	29,577	6,287	21.3%	-1.4%	-1.3%
Overton	22,614	4,612	20.4%	23,064	4,652	20.2%	0.9%	2.0%
Perry	8,191	1,763	21.5%	8,304	1,753	21.1%	-0.6%	1.4%
Pickett	5,022	838	16.7%	4,947	794	16.1%	-5.3%	-1.5%
Polk	17,226	3,216	18.7%	17,482	3,189	18.2%	-0.8%	1.5%
Putnam	82,286	17,980	21.9%	85,483	18,555	21.7%	3.2%	3.9%
Rhea	33,892	7,331	21.6%	34,634	7,206	20.8%	-1.7%	2.2%
Roane	53,377	9,591	18.0%	53,357	9,408	17.6%	-1.9%	0.0%
Robertson	74,294	17,124	23.0%	77,321	17,626	22.8%	2.9%	4.1%
Rutherford	357,199	87,612	24.5%	389,816	94,893	24.3%	8.3%	9.1%
Scott	22,172	5,112	23.1%	22,215	5,007	22.5%	-2.1%	0.2%
Sequatchie	15,518	3,074	19.8%	16,085	3,132	19.5%	1.9%	3.7%
Sevier	103,319	20,604	19.9%	108,302	21,298	19.7%	3.4%	4.8%
Shelby	944,036	232,951	24.7%	950,748	233,163	24.5%	0.1%	0.7%
Smith	20,435	4,465	21.8%	20,836	4,474	21.5%	0.2%	2.0%
Stewart	13,765	2,734	19.9%	13,912	2,681	19.3%	-1.9%	1.1%
Sullivan	158,570	29,914	18.9%	158,840	29,693	18.7%	-0.7%	0.2%
Sumner	199,672	45,566	22.8%	211,712	47,756	22.6%	4.8%	6.0%
Tipton	62,919	14,823	23.6%	64,016	14,760	23.1%	-0.4%	1.7%
Trousdale	11,388	2,073	18.2%	11,693	2,067	17.7%	-0.3%	2.7%
Unicoi	17,916	3,240	18.1%	17,995	3,241	18.0%	0.0%	0.4%
Union	19,900	4,071	20.5%	19,998	3,938	19.7%	-3.3%	0.5%
VanBuren	5,748	1,059	18.4%	5,704	1,024	18.0%	-3.3%	-0.8%
Warren	41,170	9,172	22.3%	41,359	9,014	21.8%	-1.7%	0.5%
Washington	132,735	25,813	19.4%	136,327	26,367	19.3%	2.1%	2.7%
Wayne	16,388	2,642	16.1%	16,176	2,487	15.4%	-5.9%	-1.3%
Weakley	33,169	6,830	20.6%	32,977	6,707	20.3%	-1.8%	-0.6%
White	27,939	5,818	20.8%	28,660	5,782	20.2%	-0.6%	2.6%
Williamson	256,315	66,049	25.8%	280,668	70,417	25.1%	6.6%	9.5%
Wilson	153,287	35,076	22.9%	165,519	37,254	22.5%	6.2%	8.0%

* TN_CoPopProj_2019 UTCBER Population Projection Series.

Source: Boyd Center for Business and Economic Research, University of Tennessee, Knoxville
 Reassembled by the Tennessee Department of Health, Division of Policy, Planning and Assessment
 Note: These projections may not match Boyd Center projections precisely due to rounding.

Tennessee Population Estimates 2022 and 2026 *

	Population Estimate 2022			Population Estimate 2026			% Increase	
	Total	18+	%18+	Total	18+	%18+	18+	Total
Tennessee	6,997,493	5,455,516	78.0%	7,203,404	5,629,600	78.2%	3.2%	2.9%
Anderson	77,746	61,923	79.6%	78,715	62,904	79.9%	1.6%	1.2%
Bedford	51,436	38,694	75.2%	53,694	40,487	75.4%	4.6%	4.4%
Benton	16,259	13,138	80.8%	16,268	13,245	81.4%	0.8%	0.1%
Bledsoe	15,265	13,015	85.3%	15,688	13,441	85.7%	3.3%	2.8%
Blount	136,116	109,424	80.4%	140,274	113,138	80.7%	3.4%	3.1%
Bradley	110,318	86,510	78.4%	113,675	89,496	78.7%	3.5%	3.0%
Campbell	39,348	31,548	80.2%	38,939	31,351	80.5%	-0.6%	-1.0%
Cannon	14,791	11,773	79.6%	15,040	12,072	80.3%	2.5%	1.7%
Carroll	27,767	21,737	78.3%	27,417	21,543	78.6%	-0.9%	-1.3%
Carter	55,761	46,036	82.6%	54,913	45,680	83.2%	-0.8%	-1.5%
Cheatham	41,212	32,577	79.0%	41,790	33,312	79.7%	2.3%	1.4%
Chester	17,394	13,469	77.4%	17,518	13,699	78.2%	1.7%	0.7%
Claiborne	32,217	26,388	81.9%	32,522	26,963	82.9%	2.2%	0.9%
Clay	7,768	6,258	80.6%	7,769	6,294	81.0%	0.6%	0.0%
Cocke	36,221	29,297	80.9%	36,459	29,752	81.6%	1.6%	0.7%
Coffee	57,147	43,841	76.7%	58,462	45,049	77.1%	2.8%	2.3%
Crockett	14,300	11,041	77.2%	14,231	11,011	77.4%	-0.3%	-0.5%
Cumberland	62,326	51,884	83.2%	64,493	53,999	83.7%	4.1%	3.5%
Davidson	717,032	560,365	78.2%	737,504	574,092	77.8%	2.4%	2.9%
Decatur	11,711	9,385	80.1%	11,667	9,398	80.6%	0.1%	-0.4%
DeKalb	20,730	16,455	79.4%	21,225	16,949	79.9%	3.0%	2.4%
Dickson	55,704	43,352	77.8%	57,725	45,165	78.2%	4.2%	3.6%
Dyer	37,465	28,692	76.6%	37,520	28,770	76.7%	0.3%	0.1%
Fayette	42,567	34,733	81.6%	44,364	36,218	81.6%	4.3%	4.2%
Fentress	18,451	14,761	80.0%	18,570	14,944	80.5%	1.2%	0.6%
Franklin	42,297	33,781	79.9%	42,601	34,177	80.2%	1.2%	0.7%
Gibson	49,445	37,729	76.3%	49,737	38,054	76.5%	0.9%	0.6%
Giles	29,403	23,324	79.3%	29,200	23,270	79.7%	-0.2%	-0.7%
Grainger	23,595	19,082	80.9%	23,895	19,464	81.5%	2.0%	1.3%
Greene	69,852	56,734	81.2%	70,287	57,355	81.6%	1.1%	0.6%
Grundy	13,072	10,435	79.8%	12,757	10,287	80.6%	-1.4%	-2.4%
Hamblen	65,862	51,035	77.5%	67,031	51,961	77.5%	1.8%	1.8%
Hamilton	375,027	296,280	79.0%	384,624	304,153	79.1%	2.7%	2.6%
Hancock	6,431	5,177	80.5%	6,290	5,115	81.3%	-1.2%	-2.2%
Hardeman	24,981	20,315	81.3%	24,680	20,220	81.9%	-0.5%	-1.2%
Hardin	25,795	20,782	80.6%	25,700	20,888	81.3%	0.5%	-0.4%
Hawkins	56,619	46,056	81.3%	56,403	46,244	82.0%	0.4%	-0.4%
Haywood	16,899	13,294	78.7%	16,451	13,013	79.1%	-2.1%	-2.7%
Henderson	28,158	21,993	78.1%	28,392	22,292	78.5%	1.4%	0.8%
Henry	32,644	26,280	80.5%	32,794	26,568	81.0%	1.1%	0.5%
Hickman	25,613	20,570	80.3%	26,050	21,105	81.0%	2.6%	1.7%
Houston	8,384	6,636	79.2%	8,480	6,744	79.5%	1.6%	1.2%
Humphreys	18,618	14,767	79.3%	18,683	14,903	79.8%	0.9%	0.3%
Jackson	11,976	9,847	82.2%	12,112	9,981	82.4%	1.4%	1.1%
Jefferson	55,709	44,957	80.7%	57,115	46,359	81.2%	3.1%	2.5%
Johnson	17,711	14,879	84.0%	17,587	14,879	84.6%	0.0%	-0.7%
Knox	482,417	379,006	78.6%	498,375	391,666	78.6%	3.3%	3.3%
Lake	7,321	6,343	86.6%	7,239	6,330	87.4%	-0.2%	-1.1%
Lauderdale	25,815	20,238	78.4%	25,734	20,282	78.8%	0.2%	-0.3%
Lawrence	44,324	34,032	76.8%	44,721	34,811	77.8%	2.3%	0.9%

Tennessee Population Estimates 2022 and 2026 *

	Population Estimate 2022			Population Estimate 2026			% Increase	
	Total	18+	%18+	Total	18+	%18+	18+	Total
Lewis	12,134	9,659	79.6%	12,127	9,734	80.3%	0.8%	-0.1%
Lincoln	34,677	27,465	79.2%	35,139	28,110	80.0%	2.3%	1.3%
Loudon	55,779	45,407	81.4%	58,178	47,604	81.8%	4.8%	4.3%
McMinn	54,221	43,033	79.4%	54,947	43,787	79.7%	1.8%	1.3%
McNairy	26,143	20,745	79.4%	26,336	21,036	79.9%	1.4%	0.7%
Macon	25,375	19,181	75.6%	26,405	20,004	75.8%	4.3%	4.1%
Madison	97,958	75,752	77.3%	98,181	76,275	77.7%	0.7%	0.2%
Marion	28,530	22,791	79.9%	28,375	22,804	80.4%	0.1%	-0.5%
Marshall	35,034	27,088	77.3%	36,261	28,133	77.6%	3.9%	3.5%
Maury	100,386	77,374	77.1%	106,021	81,857	77.2%	5.8%	5.6%
Meigs	12,616	10,138	80.4%	12,872	10,402	80.8%	2.6%	2.0%
Monroe	47,548	38,152	80.2%	48,442	39,242	81.0%	2.9%	1.9%
Montgomery	223,240	162,764	72.9%	240,304	174,842	72.8%	7.4%	7.6%
Moore	6,495	5,307	81.7%	6,560	5,379	82.0%	1.3%	1.0%
Morgan	21,911	17,899	81.7%	22,152	18,201	82.2%	1.7%	1.1%
Obion	29,967	23,588	78.7%	29,577	23,290	78.7%	-1.3%	-1.3%
Overton	22,614	18,003	79.6%	23,064	18,413	79.8%	2.3%	2.0%
Perry	8,191	6,428	78.5%	8,304	6,551	78.9%	1.9%	1.4%
Pickett	5,022	4,184	83.3%	4,947	4,153	83.9%	-0.7%	-1.5%
Polk	17,226	14,010	81.3%	17,482	14,293	81.8%	2.0%	1.5%
Putnam	82,286	64,306	78.1%	85,483	66,928	78.3%	4.1%	3.9%
Rhea	33,892	26,561	78.4%	34,634	27,429	79.2%	3.3%	2.2%
Roane	53,377	43,786	82.0%	53,357	43,949	82.4%	0.4%	0.0%
Robertson	74,294	57,170	77.0%	77,321	59,695	77.2%	4.4%	4.1%
Rutherford	357,199	269,587	75.5%	389,816	294,923	75.7%	9.4%	9.1%
Scott	22,172	17,060	76.9%	22,215	17,208	77.5%	0.9%	0.2%
Sequatchie	15,518	12,444	80.2%	16,085	12,953	80.5%	4.1%	3.7%
Sevier	103,319	82,715	80.1%	108,302	87,004	80.3%	5.2%	4.8%
Shelby	944,036	711,085	75.3%	950,748	717,585	75.5%	0.9%	0.7%
Smith	20,435	15,970	78.2%	20,836	16,362	78.5%	2.5%	2.0%
Stewart	13,765	11,031	80.1%	13,912	11,230	80.7%	1.8%	1.1%
Sullivan	158,570	128,655	81.1%	158,840	129,147	81.3%	0.4%	0.2%
Sumner	199,672	154,106	77.2%	211,712	163,955	77.4%	6.4%	6.0%
Tipton	62,919	48,096	76.4%	64,016	49,255	76.9%	2.4%	1.7%
Trousdale	11,388	9,314	81.8%	11,693	9,626	82.3%	3.3%	2.7%
Unicoi	17,916	14,676	81.9%	17,995	14,754	82.0%	0.5%	0.4%
Union	19,900	15,828	79.5%	19,998	16,059	80.3%	1.5%	0.5%
VanBuren	5,748	4,689	81.6%	5,704	4,679	82.0%	-0.2%	-0.8%
Warren	41,170	31,998	77.7%	41,359	32,344	78.2%	1.1%	0.5%
Washington	132,735	106,922	80.6%	136,327	109,960	80.7%	2.8%	2.7%
Wayne	16,388	13,745	83.9%	16,176	13,690	84.6%	-0.4%	-1.3%
Weakley	33,169	26,339	79.4%	32,977	26,270	79.7%	-0.3%	-0.6%
White	27,939	22,121	79.2%	28,660	22,878	79.8%	3.4%	2.6%
Williamson	256,315	190,266	74.2%	280,668	210,251	74.9%	10.5%	9.5%
Wilson	153,287	118,211	77.1%	165,519	128,265	77.5%	8.5%	8.0%

* TN_CoPopProj_2019 UTCBER Population Projection Series.

Source: Boyd Center for Business and Economic Research, University of Tennessee, Knoxville
 Reassembled by the Tennessee Department of Health, Division of Policy, Planning and Assessment
 Note: These projections may not match Boyd Center projections precisely due to rounding.

Tennessee Population Estimates 2022 and 2026 *

	Population Estimate 2022			Population Estimate 2026			% Increase	
	Total	65+	%65+	Total	65+	%65+	65+	Total
Tennessee	6,997,493	1,254,329	17.9%	7,203,404	1,376,455	19.1%	9.7%	2.9%
Anderson	77,746	16,997	21.9%	78,715	18,265	23.2%	7.5%	1.2%
Bedford	51,436	8,430	16.4%	53,694	9,395	17.5%	11.4%	4.4%
Benton	16,259	4,154	25.5%	16,268	4,419	27.2%	6.4%	0.1%
Bledsoe	15,265	3,072	20.1%	15,688	3,398	21.7%	10.6%	2.8%
Blount	136,116	30,079	22.1%	140,274	33,120	23.6%	10.1%	3.1%
Bradley	110,318	20,539	18.6%	113,675	22,589	19.9%	10.0%	3.0%
Campbell	39,348	8,772	22.3%	38,939	9,198	23.6%	4.8%	-1.0%
Cannon	14,791	2,991	20.2%	15,040	3,306	22.0%	10.5%	1.7%
Carroll	27,767	6,094	21.9%	27,417	6,395	23.3%	4.9%	-1.3%
Carter	55,761	13,484	24.2%	54,913	14,323	26.1%	6.2%	-1.5%
Cheatham	41,212	7,109	17.2%	41,790	8,041	19.2%	13.1%	1.4%
Chester	17,394	3,265	18.8%	17,518	3,540	20.2%	8.4%	0.7%
Claiborne	32,217	7,106	22.1%	32,522	7,733	23.8%	8.8%	0.9%
Clay	7,768	2,085	26.8%	7,769	2,250	29.0%	7.9%	0.0%
Cocke	36,221	8,452	23.3%	36,459	9,200	25.2%	8.9%	0.7%
Coffee	57,147	10,675	18.7%	58,462	11,589	19.8%	8.6%	2.3%
Crockett	14,300	2,926	20.5%	14,231	3,111	21.9%	6.3%	-0.5%
Cumberland	62,326	20,609	33.1%	64,493	22,565	35.0%	9.5%	3.5%
Davidson	717,032	95,863	13.4%	737,504	104,859	14.2%	9.4%	2.9%
Decatur	11,711	2,999	25.6%	11,667	3,183	27.3%	6.1%	-0.4%
DeKalb	20,730	4,215	20.3%	21,225	4,665	22.0%	10.7%	2.4%
Dickson	55,704	10,035	18.0%	57,725	11,224	19.4%	11.9%	3.6%
Dyer	37,465	7,151	19.1%	37,520	7,596	20.2%	6.2%	0.1%
Fayette	42,567	10,177	23.9%	44,364	11,494	25.9%	12.9%	4.2%
Fentress	18,451	4,464	24.2%	18,570	4,827	26.0%	8.1%	0.6%
Franklin	42,297	9,313	22.0%	42,601	10,008	23.5%	7.5%	0.7%
Gibson	49,445	9,575	19.4%	49,737	10,134	20.4%	5.8%	0.6%
Giles	29,403	6,482	22.0%	29,200	6,953	23.8%	7.3%	-0.7%
Grainger	23,595	5,369	22.8%	23,895	5,898	24.7%	9.9%	1.3%
Greene	69,852	16,425	23.5%	70,287	17,609	25.1%	7.2%	0.6%
Grundy	13,072	3,007	23.0%	12,757	3,171	24.9%	5.4%	-2.4%
Hamblen	65,862	12,988	19.7%	67,031	13,928	20.8%	7.2%	1.8%
Hamilton	375,027	71,417	19.0%	384,624	77,381	20.1%	8.4%	2.6%
Hancock	6,431	1,513	23.5%	6,290	1,592	25.3%	5.3%	-2.2%
Hardeman	24,981	4,863	19.5%	24,680	5,031	20.4%	3.5%	-1.2%
Hardin	25,795	6,487	25.2%	25,700	6,891	26.8%	6.2%	-0.4%
Hawkins	56,619	13,161	23.2%	56,403	14,170	25.1%	7.7%	-0.4%
Haywood	16,899	3,647	21.6%	16,451	3,884	23.6%	6.5%	-2.7%
Henderson	28,158	5,616	19.9%	28,392	6,037	21.3%	7.5%	0.8%
Henry	32,644	8,207	25.1%	32,794	8,752	26.7%	6.6%	0.5%
Hickman	25,613	4,905	19.1%	26,050	5,342	20.5%	8.9%	1.7%
Houston	8,384	1,854	22.1%	8,480	1,991	23.5%	7.4%	1.2%
Humphreys	18,618	4,063	21.8%	18,683	4,349	23.3%	7.1%	0.3%
Jackson	11,976	3,014	25.2%	12,112	3,299	27.2%	9.5%	1.1%
Jefferson	55,709	12,364	22.2%	57,115	13,759	24.1%	11.3%	2.5%
Johnson	17,711	4,358	24.6%	17,587	4,541	25.8%	4.2%	-0.7%
Knox	482,417	82,989	17.2%	498,375	90,811	18.2%	9.4%	3.3%
Lake	7,321	1,204	16.4%	7,239	1,213	16.8%	0.8%	-1.1%
Lauderdale	25,815	4,458	17.3%	25,734	4,698	18.3%	5.4%	-0.3%
Lawrence	44,324	8,644	19.5%	44,721	9,395	21.0%	8.7%	0.9%

Tennessee Population Estimates 2022 and 2026 *

	Population Estimate 2022			Population Estimate 2026			% Increase	
	Total	65+	%65+	Total	65+	%65+	65+	Total
Lewis	12,134	2,829	23.3%	12,127	3,042	25.1%	7.6%	-0.1%
Lincoln	34,677	7,407	21.4%	35,139	8,056	22.9%	8.8%	1.3%
Loudon	55,779	15,932	28.6%	58,178	17,499	30.1%	9.8%	4.3%
McMinn	54,221	11,739	21.7%	54,947	12,765	23.2%	8.7%	1.3%
McNairy	26,143	5,831	22.3%	26,336	6,197	23.5%	6.3%	0.7%
Macon	25,375	4,330	17.1%	26,405	4,810	18.2%	11.1%	4.1%
Madison	97,958	18,656	19.0%	98,181	20,248	20.6%	8.5%	0.2%
Marion	28,530	6,260	21.9%	28,375	6,641	23.4%	6.1%	-0.5%
Marshall	35,034	6,205	17.7%	36,261	6,910	19.1%	11.4%	3.5%
Maury	100,386	17,888	17.8%	106,021	20,276	19.1%	13.3%	5.6%
Meigs	12,616	2,868	22.7%	12,872	3,130	24.3%	9.2%	2.0%
Monroe	47,548	11,056	23.3%	48,442	12,097	25.0%	9.4%	1.9%
Montgomery	223,240	22,705	10.2%	240,304	26,213	10.9%	15.5%	7.6%
Moore	6,495	1,542	23.7%	6,560	1,664	25.4%	7.9%	1.0%
Morgan	21,911	4,239	19.3%	22,152	4,545	20.5%	7.2%	1.1%
Obion	29,967	6,675	22.3%	29,577	6,957	23.5%	4.2%	-1.3%
Overton	22,614	4,995	22.1%	23,064	5,378	23.3%	7.7%	2.0%
Perry	8,191	1,846	22.5%	8,304	1,960	23.6%	6.1%	1.4%
Pickett	5,022	1,492	29.7%	4,947	1,575	31.8%	5.6%	-1.5%
Polk	17,226	3,910	22.7%	17,482	4,258	24.4%	8.9%	1.5%
Putnam	82,286	14,863	18.1%	85,483	16,415	19.2%	10.4%	3.9%
Rhea	33,892	6,859	20.2%	34,634	7,464	21.6%	8.8%	2.2%
Roane	53,377	13,393	25.1%	53,357	14,380	27.0%	7.4%	0.0%
Robertson	74,294	12,402	16.7%	77,321	14,103	18.2%	13.7%	4.1%
Rutherford	357,199	42,114	11.8%	389,816	50,310	12.9%	19.5%	9.1%
Scott	22,172	4,095	18.5%	22,215	4,396	19.8%	7.4%	0.2%
Sequatchie	15,518	3,524	22.7%	16,085	3,929	24.4%	11.5%	3.7%
Sevier	103,319	22,298	21.6%	108,302	24,857	23.0%	11.5%	4.8%
Shelby	944,036	142,579	15.1%	950,748	154,037	16.2%	8.0%	0.7%
Smith	20,435	3,876	19.0%	20,836	4,304	20.7%	11.0%	2.0%
Stewart	13,765	3,067	22.3%	13,912	3,332	23.9%	8.6%	1.1%
Sullivan	158,570	37,493	23.6%	158,840	39,711	25.0%	5.9%	0.2%
Sumner	199,672	34,799	17.4%	211,712	39,506	18.7%	13.5%	6.0%
Tipton	62,919	10,275	16.3%	64,016	11,454	17.9%	11.5%	1.7%
Trousdale	11,388	1,564	13.7%	11,693	1,692	14.5%	8.2%	2.7%
Unicoi	17,916	4,511	25.2%	17,995	4,813	26.7%	6.7%	0.4%
Union	19,900	4,119	20.7%	19,998	4,582	22.9%	11.2%	0.5%
VanBuren	5,748	1,497	26.0%	5,704	1,589	27.9%	6.2%	-0.8%
Warren	41,170	7,965	19.3%	41,359	8,531	20.6%	7.1%	0.5%
Washington	132,735	26,466	19.9%	136,327	28,838	21.2%	9.0%	2.7%
Wayne	16,388	3,425	20.9%	16,176	3,581	22.1%	4.5%	-1.3%
Weakley	33,169	6,754	20.4%	32,977	7,151	21.7%	5.9%	-0.6%
White	27,939	6,137	22.0%	28,660	6,681	23.3%	8.9%	2.6%
Williamson	256,315	37,752	14.7%	280,668	44,883	16.0%	18.9%	9.5%
Wilson	153,287	26,434	17.2%	165,519	30,578	18.5%	15.7%	8.0%

* TN_CoPopProj_2019 UTCBER Population Projection Series.

Source: Boyd Center for Business and Economic Research, University of Tennessee, Knoxville
 Reassembled by the Tennessee Department of Health, Division of Policy, Planning and Assessment
 Note: These projections may not match Boyd Center projections precisely due to rounding.

Tennessee Female Population Estimates 2022 and 2026 *

	Population Estimate 2022			Population Estimate 2026			% Increase	
	Total	15-44	%15-44	Total	15-44	%15-44	15-44	Total
Tennessee	3,587,578	1,351,308	37.7%	3,696,105	1,374,176	37.2%	1.7%	3.0%
Anderson	39,873	13,233	33.2%	40,326	13,252	32.9%	0.1%	1.1%
Bedford	26,256	9,666	36.8%	27,476	10,059	36.6%	4.1%	4.6%
Benton	8,287	2,420	29.2%	8,283	2,371	28.6%	-2.1%	0.0%
Bledsoe	6,145	1,895	30.8%	6,195	1,820	29.4%	-4.0%	0.8%
Blount	70,255	23,578	33.6%	72,521	24,071	33.2%	2.1%	3.2%
Bradley	56,761	21,105	37.2%	58,544	21,583	36.9%	2.3%	3.1%
Campbell	20,014	6,591	32.9%	19,798	6,396	32.3%	-3.0%	-1.1%
Cannon	7,449	2,473	33.2%	7,574	2,467	32.6%	-0.2%	1.7%
Carroll	14,182	4,734	33.4%	13,997	4,643	33.2%	-1.9%	-1.3%
Carter	28,542	9,227	32.3%	28,174	8,939	31.7%	-3.1%	-1.3%
Cheatham	20,794	7,459	35.9%	21,128	7,434	35.2%	-0.3%	1.6%
Chester	9,081	3,578	39.4%	9,191	3,596	39.1%	0.5%	1.2%
Claiborne	16,480	5,773	35.0%	16,642	5,779	34.7%	0.1%	1.0%
Clay	3,923	1,125	28.7%	3,900	1,096	28.1%	-2.5%	-0.6%
Cocke	18,774	5,980	31.9%	18,948	5,933	31.3%	-0.8%	0.9%
Coffee	29,261	10,383	35.5%	29,953	10,550	35.2%	1.6%	2.4%
Crockett	7,495	2,567	34.2%	7,491	2,537	33.9%	-1.2%	-0.1%
Cumberland	31,998	8,485	26.5%	33,088	8,661	26.2%	2.1%	3.4%
Davidson	370,870	167,846	45.3%	381,483	168,269	44.1%	0.3%	2.9%
Decatur	5,971	1,806	30.3%	5,951	1,764	29.6%	-2.4%	-0.3%
DeKalb	10,397	3,501	33.7%	10,657	3,537	33.2%	1.0%	2.5%
Dickson	28,410	10,125	35.6%	29,482	10,347	35.1%	2.2%	3.8%
Dyer	19,457	6,982	35.9%	19,521	6,912	35.4%	-1.0%	0.3%
Fayette	21,643	6,679	30.9%	22,580	6,799	30.1%	1.8%	4.3%
Fentress	9,470	2,860	30.2%	9,552	2,841	29.7%	-0.7%	0.9%
Franklin	21,679	7,750	35.7%	21,868	7,784	35.6%	0.4%	0.9%
Gibson	25,726	9,084	35.3%	25,869	9,040	34.9%	-0.5%	0.6%
Giles	15,183	5,068	33.4%	15,124	5,007	33.1%	-1.2%	-0.4%
Grainger	11,709	3,656	31.2%	11,856	3,622	30.5%	-0.9%	1.3%
Greene	35,535	11,572	32.6%	35,782	11,496	32.1%	-0.7%	0.7%
Grundy	6,608	2,164	32.7%	6,448	2,038	31.6%	-5.8%	-2.4%
Hamblen	33,845	11,704	34.6%	34,559	11,910	34.5%	1.8%	2.1%
Hamilton	193,980	73,137	37.7%	198,971	74,041	37.2%	1.2%	2.6%
Hancock	3,251	1,027	31.6%	3,180	994	31.3%	-3.2%	-2.2%
Hardeman	11,215	3,648	32.5%	10,953	3,483	31.8%	-4.5%	-2.3%
Hardin	13,282	4,096	30.8%	13,288	4,046	30.4%	-1.2%	0.1%
Hawkins	28,877	9,230	32.0%	28,803	9,051	31.4%	-1.9%	-0.3%
Haywood	9,021	2,956	32.8%	8,781	2,748	31.3%	-7.0%	-2.7%
Henderson	14,510	5,043	34.8%	14,644	5,019	34.3%	-0.5%	0.9%
Henry	16,885	5,129	30.4%	17,004	5,121	30.1%	-0.2%	0.7%
Hickman	12,183	4,172	34.2%	12,415	4,203	33.9%	0.7%	1.9%
Houston	4,297	1,433	33.3%	4,370	1,441	33.0%	0.6%	1.7%
Humphreys	9,362	3,068	32.8%	9,392	3,032	32.3%	-1.2%	0.3%
Jackson	6,032	1,775	29.4%	6,109	1,759	28.8%	-0.9%	1.3%
Jefferson	28,367	9,436	33.3%	29,147	9,576	32.9%	1.5%	2.7%
Johnson	8,129	2,369	29.1%	8,006	2,290	28.6%	-3.4%	-1.5%
Knox	248,301	100,086	40.3%	256,675	102,392	39.9%	2.3%	3.4%
Lake	2,508	758	30.2%	2,379	694	29.2%	-8.4%	-5.2%
Lauderdale	12,492	4,394	35.2%	12,417	4,281	34.5%	-2.6%	-0.6%
Lawrence	22,573	7,837	34.7%	22,802	7,881	34.6%	0.6%	1.0%

Tennessee Female Population Estimates 2022 and 2026 *

	Population Estimate 2022			Population Estimate 2026			% Increase	
	Total	15-44	%15-44	Total	15-44	%15-44	15-44	Total
Lewis	6,242	1,999	32.0%	6,262	1,968	31.4%	-1.5%	0.3%
Lincoln	17,661	5,717	32.4%	17,884	5,757	32.2%	0.7%	1.3%
Loudon	28,423	8,171	28.7%	29,665	8,522	28.7%	4.3%	4.4%
McMinn	27,836	9,380	33.7%	28,227	9,372	33.2%	-0.1%	1.4%
McNairy	13,280	4,313	32.5%	13,361	4,282	32.0%	-0.7%	0.6%
Macon	13,032	4,728	36.3%	13,612	4,913	36.1%	3.9%	4.4%
Madison	51,763	19,453	37.6%	52,054	19,360	37.2%	-0.5%	0.6%
Marion	14,616	4,780	32.7%	14,561	4,705	32.3%	-1.6%	-0.4%
Marshall	17,905	6,477	36.2%	18,558	6,626	35.7%	2.3%	3.6%
Maury	52,130	19,067	36.6%	55,210	19,843	35.9%	4.1%	5.9%
Meigs	6,375	2,025	31.8%	6,517	2,019	31.0%	-0.3%	2.2%
Monroe	23,894	7,710	32.3%	24,360	7,752	31.8%	0.5%	2.0%
Montgomery	112,215	51,057	45.5%	120,909	54,105	44.7%	6.0%	7.7%
Moore	3,263	1,044	32.0%	3,300	1,035	31.4%	-0.8%	1.2%
Morgan	9,850	3,210	32.6%	9,885	3,168	32.0%	-1.3%	0.4%
Obion	15,509	5,111	33.0%	15,341	5,001	32.6%	-2.1%	-1.1%
Overton	11,419	3,790	33.2%	11,653	3,818	32.8%	0.7%	2.0%
Perry	4,060	1,321	32.5%	4,115	1,341	32.6%	1.5%	1.4%
Pickett	2,518	674	26.8%	2,486	647	26.0%	-4.1%	-1.3%
Polk	8,766	2,772	31.6%	8,921	2,773	31.1%	0.0%	1.8%
Putnam	41,443	16,471	39.7%	43,159	17,025	39.4%	3.4%	4.1%
Rhea	17,075	5,979	35.0%	17,435	6,097	35.0%	2.0%	2.1%
Roane	27,352	8,347	30.5%	27,349	8,168	29.9%	-2.1%	0.0%
Robertson	37,716	13,859	36.7%	39,369	14,274	36.3%	3.0%	4.4%
Rutherford	181,595	79,871	44.0%	198,319	85,538	43.1%	7.1%	9.2%
Scott	11,323	4,073	36.0%	11,371	4,024	35.4%	-1.2%	0.4%
Sequatchie	7,866	2,561	32.6%	8,174	2,596	31.8%	1.4%	3.9%
Sevier	52,791	17,695	33.5%	55,348	18,480	33.4%	4.4%	4.8%
Shelby	496,201	195,450	39.4%	500,341	194,737	38.9%	-0.4%	0.8%
Smith	10,297	3,593	34.9%	10,534	3,625	34.4%	0.9%	2.3%
Stewart	6,894	2,168	31.4%	6,967	2,164	31.1%	-0.2%	1.0%
Sullivan	81,534	26,408	32.4%	81,717	26,179	32.0%	-0.9%	0.2%
Sumner	102,364	37,309	36.4%	108,674	39,112	36.0%	4.8%	6.2%
Tipton	31,923	11,807	37.0%	32,527	11,830	36.4%	0.2%	1.9%
Trousdale	4,662	1,798	38.6%	4,811	1,832	38.1%	1.9%	3.2%
Unicoi	9,140	2,847	31.1%	9,199	2,817	30.6%	-1.1%	0.6%
Union	10,117	3,369	33.3%	10,195	3,339	32.8%	-0.9%	0.8%
VanBuren	2,870	819	28.6%	2,845	786	27.6%	-4.0%	-0.9%
Warren	20,834	7,317	35.1%	20,958	7,278	34.7%	-0.5%	0.6%
Washington	67,989	26,473	38.9%	69,893	27,034	38.7%	2.1%	2.8%
Wayne	7,307	2,263	31.0%	7,173	2,170	30.3%	-4.1%	-1.8%
Weakley	16,981	6,669	39.3%	16,927	6,650	39.3%	-0.3%	-0.3%
White	14,300	4,737	33.1%	14,691	4,851	33.0%	2.4%	2.7%
Williamson	130,834	47,546	36.3%	143,492	51,642	36.0%	8.6%	9.7%
Wilson	78,082	28,418	36.4%	84,460	30,321	35.9%	6.7%	8.2%

* TN_CoPopProj_2019 UTCBER Population Projection Series.

Source: Boyd Center for Business and Economic Research, University of Tennessee, Knoxville
 Reassembled by the Tennessee Department of Health, Division of Policy, Planning and Assessment
 Note: These projections may not match Boyd Center projections precisely due to rounding.

Attachment 1N-3
Projected Home Health Need

County	Licensed Agencies Serving County (2023)*	Agencies Reporting Patients Served (2023)**	Population (2023)^	Home Health Patients (2023)**	Use Rate / 1,000 (2023)	Projected Population (2026)^^	Projected HH Capacity (2026)	Projected HH Need (2026)	2026 Need/(Surplus)
Carroll	21	19	27,601	1,167	42.3	27,417	1,159	411	(748)
Crockett	19	13	14,161	393	27.8	14,231	395	213	(181)
Dyer	18	10	36,796	1,237	33.6	37,520	1,261	563	(699)
Fayette	30	19	43,097	623	14.5	44,364	641	665	24
Gibson	21	18	49,485	1,809	36.6	49,737	1,818	746	(1,072)
Haywood	22	12	16,660	479	28.8	16,451	473	247	(226)
Henry	20	12	32,143	1,192	37.1	32,794	1,216	492	(724)
Lauderdale	22	14	25,397	769	30.3	25,734	779	386	(393)
Obion	18	9	29,916	1,160	38.8	29,577	1,147	444	(703)
Shelby	31	30	941,637	16,868	17.9	950,748	17,031	14,261	(2,770)
Tipton	31	21	62,909	1,329	21.1	64,016	1,352	960	(392)
Weakley	22	16	33,249	1,042	31.3	32,977	1,033	495	(539)
Service Area Total	275	193	1,313,051	28,068	21.4	1,325,566	28,307	19,883	(8,424)
Lake	14	6	6,907	268	38.8	7,239	281	109	(172)
Service Area Total with Lake County	289	199	1,319,958	28,336	21.5	1,332,805	28,588	19,992	(8,596)

* Accessed via the Tennessee Health Facilities Commission, at <https://www.tn.gov/hfc/certificate-of-need-information/hfc-toolbox/county-licensed-home-health-and-hospice-agencies-.html>.

** Accessed via the Tennessee Department of Health, Joint Annual Reports (JARs), 2023, at <https://apps.health.tn.gov/publicjars/default.aspx>.

^ Accessed via the Tennessee Department of Health, "Population Projections 2023-2025," at <https://www.tn.gov/content/dam/tn/health/documents/population/CON-Population-Estimates-4-reports-2023-2025.pdf>.

^^ Accessed via the Tennessee Department of Health, "Population Projections 2022-2026," at <https://www.tn.gov/content/dam/tn/health/documents/population/CON-Population-Estimates-2022-2026.pdf>

Attachment 1N-4
Letters of Support

[Pending; to be added with Supplemental Responses]

Attachment 1N-7
Referring Institutions

West Region Facilities:

- St. Francis Hospital- Barlett
- Spring Gate Nursing and Rehab
- Methodist North (Hospital)
- Graceland Nursing and Rehab
- Methodist South
- Memphis VA
- Harborview
- AHC Covington Care
- Quince Nursing and Rehab
- The Waters of Memphis
- Methodist Hospital (Germantown)
- Memphis Jewish Homes
- Jackson Madison County General Hospital
- West TN Rehab Hospital
- Northbrooke
- West TN Bone and Joint
- Maplewood
- American House Senior Living
- Forest Cove
- Henderson Health and Rehab
- AHC McNairy
- Baptist Memorial Hospital- Union City
- Lifecare of Bruceton
- The Water of McKenzie
- AHC McKenzie
- Henry County Healthcare
- AHC Paris
- Henry County Hospital
- Spring Hill Nursing and Rehab

Attachment 3N-1
Department of Health Population Estimates

Tennessee Population Estimates 2023 and 2027 *

	Population Estimate 2023			Population Estimate 2027			% Increase	
	Total	0-17	% 0-17	Total	0-17	% 0-17	0-17	Total
Tennessee	7,071,060	1,550,759	21.9%	7,282,134	1,586,614	21.8%	2.3%	3.0%
Anderson	78,595	16,109	20.5%	79,648	16,113	20.2%	0.0%	1.3%
Bedford	51,992	12,798	24.6%	54,262	13,277	24.5%	3.7%	4.4%
Benton	16,170	3,069	19.0%	16,184	2,990	18.5%	-2.6%	0.1%
Bledsoe	15,573	2,187	14.0%	15,958	2,195	13.8%	0.3%	2.5%
Blount	138,918	26,942	19.4%	143,850	27,642	19.2%	2.6%	3.6%
Bradley	111,877	24,081	21.5%	115,338	24,507	21.2%	1.8%	3.1%
Campbell	39,640	7,834	19.8%	39,250	7,666	19.5%	-2.1%	-1.0%
Cannon	15,125	3,133	20.7%	15,426	3,096	20.1%	-1.2%	2.0%
Carroll	27,601	6,056	21.9%	27,274	5,875	21.5%	-3.0%	-1.2%
Carter	56,052	9,608	17.1%	55,304	9,211	16.7%	-4.1%	-1.3%
Cheatham	41,692	8,654	20.8%	42,304	8,565	20.2%	-1.0%	1.5%
Chester	17,518	3,940	22.5%	17,648	3,874	22.0%	-1.7%	0.7%
Claiborne	32,342	5,940	18.4%	32,653	5,697	17.4%	-4.1%	1.0%
Clay	7,655	1,474	19.3%	7,659	1,441	18.8%	-2.2%	0.1%
Cocke	36,597	6,984	19.1%	36,897	6,774	18.4%	-3.0%	0.8%
Coffee	58,883	13,794	23.4%	60,425	13,985	23.1%	1.4%	2.6%
Crockett	14,161	3,267	23.1%	14,111	3,234	22.9%	-1.0%	-0.4%
Cumberland	63,803	10,420	16.3%	66,236	10,536	15.9%	1.1%	3.8%
Davidson	722,445	158,613	22.0%	742,241	164,736	22.2%	3.9%	2.7%
Decatur	11,607	2,269	19.5%	11,569	2,205	19.1%	-2.8%	-0.3%
DeKalb	21,305	4,398	20.6%	21,862	4,423	20.2%	0.6%	2.6%
Dickson	56,005	12,254	21.9%	57,965	12,512	21.6%	2.1%	3.5%
Dyer	36,796	8,549	23.2%	36,862	8,550	23.2%	0.0%	0.2%
Fayette	43,097	7,628	17.7%	44,833	8,001	17.8%	4.9%	4.0%
Fentress	18,982	3,779	19.9%	19,135	3,734	19.5%	-1.2%	0.8%
Franklin	42,819	8,555	20.0%	43,162	8,511	19.7%	-0.5%	0.8%
Gibson	49,485	11,705	23.7%	49,806	11,660	23.4%	-0.4%	0.6%
Giles	29,506	6,052	20.5%	29,368	5,935	20.2%	-1.9%	-0.5%
Grainger	23,871	4,519	18.9%	24,156	4,459	18.5%	-1.3%	1.2%
Greene	70,100	13,088	18.7%	70,498	12,942	18.4%	-1.1%	0.6%
Grundy	13,286	2,655	20.0%	12,981	2,493	19.2%	-6.1%	-2.3%
Hamblen	66,054	14,935	22.6%	67,218	15,140	22.5%	1.4%	1.8%
Hamilton	380,381	79,429	20.9%	390,799	81,631	20.9%	2.8%	2.7%
Hancock	6,381	1,264	19.8%	6,234	1,183	19.0%	-6.4%	-2.3%
Hardeman	24,635	4,536	18.4%	24,329	4,337	17.8%	-4.4%	-1.2%
Hardin	25,594	4,897	19.1%	25,522	4,711	18.5%	-3.8%	-0.3%
Hawkins	56,935	10,427	18.3%	56,860	10,132	17.8%	-2.8%	-0.1%
Haywood	16,660	3,584	21.5%	16,203	3,414	21.1%	-4.8%	-2.7%
Henderson	28,316	6,199	21.9%	28,573	6,139	21.5%	-1.0%	0.9%
Henry	32,143	6,174	19.2%	32,155	6,015	18.7%	-2.6%	0.0%
Hickman	25,808	5,088	19.7%	26,253	5,008	19.1%	-1.6%	1.7%
Houston	8,364	1,731	20.7%	8,451	1,720	20.4%	-0.7%	1.0%
Humphreys	18,656	3,884	20.8%	18,733	3,834	20.5%	-1.3%	0.4%
Jackson	12,013	2,107	17.5%	12,152	2,116	17.4%	0.4%	1.2%
Jefferson	56,597	10,741	19.0%	58,053	10,826	18.6%	0.8%	2.6%
Johnson	17,780	2,841	16.0%	17,640	2,720	15.4%	-4.2%	-0.8%
Knox	489,230	103,803	21.2%	506,257	107,786	21.3%	3.8%	3.5%
Lake	6,907	949	13.7%	6,848	886	12.9%	-6.6%	-0.9%
Lauderdale	25,397	5,419	21.3%	25,274	5,292	20.9%	-2.4%	-0.5%
Lawrence	44,865	10,541	23.5%	45,264	10,133	22.4%	-3.9%	0.9%

Tennessee Population Estimates 2023 and 2027 *

	Population Estimate 2023			Population Estimate 2027			% Increase	
	Total	0-17	% 0-17	Total	0-17	% 0-17	0-17	Total
Lewis	12,394	2,586	20.9%	12,391	2,504	20.2%	-3.2%	0.0%
Lincoln	34,943	7,309	20.9%	35,405	7,133	20.1%	-2.4%	1.3%
Loudon	57,186	10,471	18.3%	59,885	10,711	17.9%	2.3%	4.7%
McMinn	54,986	11,293	20.5%	55,847	11,353	20.3%	0.5%	1.6%
McNairy	25,942	5,361	20.7%	26,171	5,297	20.2%	-1.2%	0.9%
Macon	25,655	6,204	24.2%	26,707	6,432	24.1%	3.7%	4.1%
Madison	98,718	22,253	22.5%	99,036	22,072	22.3%	-0.8%	0.3%
Marion	28,904	5,822	20.1%	28,793	5,676	19.7%	-2.5%	-0.4%
Marshall	36,191	8,217	22.7%	37,601	8,485	22.6%	3.3%	3.9%
Maury	104,474	23,609	22.6%	110,559	24,950	22.6%	5.7%	5.8%
Meigs	12,753	2,511	19.7%	13,005	2,513	19.3%	0.1%	2.0%
Monroe	48,151	9,496	19.7%	49,178	9,334	19.0%	-1.7%	2.1%
Montgomery	227,061	61,055	26.9%	243,942	65,918	27.0%	8.0%	7.4%
Moore	6,487	1,202	18.5%	6,543	1,200	18.3%	-0.2%	0.9%
Morgan	21,659	3,947	18.2%	21,890	3,920	17.9%	-0.7%	1.1%
Obion	29,916	6,391	21.4%	29,546	6,341	21.5%	-0.8%	-1.2%
Overton	22,968	4,728	20.6%	23,414	4,764	20.3%	0.8%	1.9%
Perry	8,194	1,787	21.8%	8,303	1,779	21.4%	-0.5%	1.3%
Pickett	5,005	806	16.1%	4,932	779	15.8%	-3.4%	-1.5%
Polk	17,083	3,170	18.6%	17,354	3,156	18.2%	-0.5%	1.6%
Putnam	83,834	18,165	21.7%	87,505	18,903	21.6%	4.1%	4.4%
Rhea	34,052	7,340	21.6%	34,768	7,251	20.9%	-1.2%	2.1%
Roane	53,994	9,700	18.0%	53,945	9,532	17.7%	-1.7%	-0.1%
Robertson	74,699	17,056	22.8%	77,702	17,582	22.6%	3.1%	4.0%
Rutherford	363,690	88,632	24.4%	396,434	96,018	24.2%	8.3%	9.0%
Scott	22,143	5,033	22.7%	22,151	4,934	22.3%	-2.0%	0.0%
Sequatchie	15,614	3,096	19.8%	16,138	3,151	19.5%	1.8%	3.4%
Sevier	103,232	20,414	19.8%	108,125	21,120	19.5%	3.5%	4.7%
Shelby	941,637	232,242	24.7%	947,491	232,447	24.5%	0.1%	0.6%
Smith	20,651	4,527	21.9%	21,065	4,548	21.6%	0.5%	2.0%
Stewart	14,003	2,810	20.1%	14,149	2,749	19.4%	-2.2%	1.0%
Sullivan	159,811	29,857	18.7%	160,539	29,869	18.6%	0.0%	0.5%
Sumner	205,092	46,499	22.7%	217,255	48,849	22.5%	5.1%	5.9%
Tipton	62,909	14,615	23.2%	63,997	14,642	22.9%	0.2%	1.7%
Trousdale	11,742	2,240	19.1%	12,067	2,229	18.5%	-0.5%	2.8%
Unicoi	17,847	3,156	17.7%	17,906	3,177	17.7%	0.7%	0.3%
Union	20,296	4,114	20.3%	20,361	3,983	19.6%	-3.2%	0.3%
Van Buren	5,916	1,141	19.3%	5,856	1,087	18.6%	-4.7%	-1.0%
Warren	41,908	9,372	22.4%	42,196	9,242	21.9%	-1.4%	0.7%
Washington	133,361	25,643	19.2%	136,811	26,233	19.2%	2.3%	2.6%
Wayne	16,377	2,542	15.5%	16,150	2,407	14.9%	-5.3%	-1.4%
Weakley	33,249	6,772	20.4%	33,245	6,739	20.3%	-0.5%	0.0%
White	28,385	5,867	20.7%	29,196	5,876	20.1%	0.2%	2.9%
Williamson	264,071	66,969	25.4%	288,952	71,729	24.8%	7.1%	9.4%
Wilson	157,668	35,836	22.7%	169,947	38,136	22.4%	6.4%	7.8%

* TN_CoPopProj_2021 UTCBER Population Projection Series.

Source: Boyd Center for Business and Economic Research, University of Tennessee, Knoxville
 Reassembled by the Tennessee Department of Health, Division of Population Health Assessment
 Note: These projections may not match Boyd Center projections precisely due to rounding.

Tennessee Population Estimates 2023 and 2027 *

	Population Estimate 2023			Population Estimate 2027			% Increase	
	Total	18+	%18+	Total	18+	%18+	18+	Total
Tennessee	7,071,060	5,520,300	78.1%	7,282,134	5,695,520	78.2%	3.2%	3.0%
Anderson	78,595	62,487	79.5%	79,648	63,534	79.8%	1.7%	1.3%
Bedford	51,992	39,194	75.4%	54,262	40,985	75.5%	4.6%	4.4%
Benton	16,170	13,101	81.0%	16,184	13,195	81.5%	0.7%	0.1%
Bledsoe	15,573	13,386	86.0%	15,958	13,763	86.2%	2.8%	2.5%
Blount	138,918	111,975	80.6%	143,850	116,207	80.8%	3.8%	3.6%
Bradley	111,877	87,796	78.5%	115,338	90,831	78.8%	3.5%	3.1%
Campbell	39,640	31,805	80.2%	39,250	31,583	80.5%	-0.7%	-1.0%
Cannon	15,125	11,992	79.3%	15,426	12,330	79.9%	2.8%	2.0%
Carroll	27,601	21,545	78.1%	27,274	21,399	78.5%	-0.7%	-1.2%
Carter	56,052	46,444	82.9%	55,304	46,092	83.3%	-0.8%	-1.3%
Cheatham	41,692	33,037	79.2%	42,304	33,739	79.8%	2.1%	1.5%
Chester	17,518	13,578	77.5%	17,648	13,774	78.0%	1.4%	0.7%
Claiborne	32,342	26,402	81.6%	32,653	26,956	82.6%	2.1%	1.0%
Clay	7,655	6,181	80.7%	7,659	6,218	81.2%	0.6%	0.1%
Cocke	36,597	29,612	80.9%	36,897	30,123	81.6%	1.7%	0.8%
Coffee	58,883	45,089	76.6%	60,425	46,440	76.9%	3.0%	2.6%
Crockett	14,161	10,894	76.9%	14,111	10,878	77.1%	-0.2%	-0.4%
Cumberland	63,803	53,383	83.7%	66,236	55,700	84.1%	4.3%	3.8%
Davidson	722,445	563,833	78.0%	742,241	577,505	77.8%	2.4%	2.7%
Decatur	11,607	9,338	80.5%	11,569	9,364	80.9%	0.3%	-0.3%
DeKalb	21,305	16,908	79.4%	21,862	17,439	79.8%	3.1%	2.6%
Dickson	56,005	43,752	78.1%	57,965	45,453	78.4%	3.9%	3.5%
Dyer	36,796	28,247	76.8%	36,862	28,312	76.8%	0.2%	0.2%
Fayette	43,097	35,469	82.3%	44,833	36,832	82.2%	3.8%	4.0%
Fentress	18,982	15,203	80.1%	19,135	15,401	80.5%	1.3%	0.8%
Franklin	42,819	34,264	80.0%	43,162	34,651	80.3%	1.1%	0.8%
Gibson	49,485	37,780	76.3%	49,806	38,146	76.6%	1.0%	0.6%
Giles	29,506	23,454	79.5%	29,368	23,433	79.8%	-0.1%	-0.5%
Grainger	23,871	19,352	81.1%	24,156	19,698	81.5%	1.8%	1.2%
Greene	70,100	57,012	81.3%	70,498	57,556	81.6%	1.0%	0.6%
Grundy	13,286	10,630	80.0%	12,981	10,488	80.8%	-1.3%	-2.3%
Hamblen	66,054	51,119	77.4%	67,218	52,078	77.5%	1.9%	1.8%
Hamilton	380,381	300,952	79.1%	390,799	309,168	79.1%	2.7%	2.7%
Hancock	6,381	5,116	80.2%	6,234	5,051	81.0%	-1.3%	-2.3%
Hardeman	24,635	20,099	81.6%	24,329	19,993	82.2%	-0.5%	-1.2%
Hardin	25,594	20,697	80.9%	25,522	20,811	81.5%	0.5%	-0.3%
Hawkins	56,935	46,508	81.7%	56,860	46,728	82.2%	0.5%	-0.1%
Haywood	16,660	13,075	78.5%	16,203	12,789	78.9%	-2.2%	-2.7%
Henderson	28,316	22,117	78.1%	28,573	22,434	78.5%	1.4%	0.9%
Henry	32,143	25,969	80.8%	32,155	26,140	81.3%	0.7%	0.0%
Hickman	25,808	20,720	80.3%	26,253	21,245	80.9%	2.5%	1.7%
Houston	8,364	6,633	79.3%	8,451	6,731	79.6%	1.5%	1.0%
Humphreys	18,656	14,771	79.2%	18,733	14,899	79.5%	0.9%	0.4%
Jackson	12,013	9,906	82.5%	12,152	10,036	82.6%	1.3%	1.2%
Jefferson	56,597	45,856	81.0%	58,053	47,227	81.4%	3.0%	2.6%
Johnson	17,780	14,939	84.0%	17,640	14,919	84.6%	-0.1%	-0.8%
Knox	489,230	385,427	78.8%	506,257	398,471	78.7%	3.4%	3.5%
Lake	6,907	5,958	86.3%	6,848	5,962	87.1%	0.1%	-0.9%
Lauderdale	25,397	19,977	78.7%	25,274	19,982	79.1%	0.0%	-0.5%
Lawrence	44,865	34,324	76.5%	45,264	35,131	77.6%	2.4%	0.9%

Tennessee Population Estimates 2023 and 2027 *

	Population Estimate 2023			Population Estimate 2027			% Increase	
	Total	18+	%18+	Total	18+	%18+	18+	Total
Lewis	12,394	9,808	79.1%	12,391	9,887	79.8%	0.8%	0.0%
Lincoln	34,943	27,633	79.1%	35,405	28,272	79.9%	2.3%	1.3%
Loudon	57,186	46,715	81.7%	59,885	49,174	82.1%	5.3%	4.7%
McMinn	54,986	43,693	79.5%	55,847	44,494	79.7%	1.8%	1.6%
McNairy	25,942	20,581	79.3%	26,171	20,875	79.8%	1.4%	0.9%
Macon	25,655	19,451	75.8%	26,707	20,275	75.9%	4.2%	4.1%
Madison	98,718	76,465	77.5%	99,036	76,964	77.7%	0.7%	0.3%
Marion	28,904	23,082	79.9%	28,793	23,117	80.3%	0.2%	-0.4%
Marshall	36,191	27,974	77.3%	37,601	29,115	77.4%	4.1%	3.9%
Maury	104,474	80,866	77.4%	110,559	85,609	77.4%	5.9%	5.8%
Meigs	12,753	10,241	80.3%	13,005	10,492	80.7%	2.4%	2.0%
Monroe	48,151	38,655	80.3%	49,178	39,843	81.0%	3.1%	2.1%
Montgomery	227,061	166,005	73.1%	243,942	178,024	73.0%	7.2%	7.4%
Moore	6,487	5,285	81.5%	6,543	5,343	81.7%	1.1%	0.9%
Morgan	21,659	17,712	81.8%	21,890	17,970	82.1%	1.5%	1.1%
Obion	29,916	23,525	78.6%	29,546	23,205	78.5%	-1.4%	-1.2%
Overton	22,968	18,240	79.4%	23,414	18,650	79.7%	2.2%	1.9%
Perry	8,194	6,406	78.2%	8,303	6,524	78.6%	1.8%	1.3%
Pickett	5,005	4,199	83.9%	4,932	4,154	84.2%	-1.1%	-1.5%
Polk	17,083	13,913	81.4%	17,354	14,199	81.8%	2.1%	1.6%
Putnam	83,834	65,669	78.3%	87,505	68,602	78.4%	4.5%	4.4%
Rhea	34,052	26,712	78.4%	34,768	27,517	79.1%	3.0%	2.1%
Roane	53,994	44,294	82.0%	53,945	44,413	82.3%	0.3%	-0.1%
Robertson	74,699	57,644	77.2%	77,702	60,121	77.4%	4.3%	4.0%
Rutherford	363,690	275,058	75.6%	396,434	300,416	75.8%	9.2%	9.0%
Scott	22,143	17,110	77.3%	22,151	17,216	77.7%	0.6%	0.0%
Sequatchie	15,614	12,519	80.2%	16,138	12,987	80.5%	3.7%	3.4%
Sevier	103,232	82,818	80.2%	108,125	87,005	80.5%	5.1%	4.7%
Shelby	941,637	709,395	75.3%	947,491	715,044	75.5%	0.8%	0.6%
Smith	20,651	16,124	78.1%	21,065	16,516	78.4%	2.4%	2.0%
Stewart	14,003	11,193	79.9%	14,149	11,400	80.6%	1.8%	1.0%
Sullivan	159,811	129,954	81.3%	160,539	130,670	81.4%	0.6%	0.5%
Sumner	205,092	158,593	77.3%	217,255	168,406	77.5%	6.2%	5.9%
Tipton	62,909	48,294	76.8%	63,997	49,355	77.1%	2.2%	1.7%
Trousdale	11,742	9,502	80.9%	12,067	9,838	81.5%	3.5%	2.8%
Unicoi	17,847	14,691	82.3%	17,906	14,728	82.3%	0.3%	0.3%
Union	20,296	16,182	79.7%	20,361	16,379	80.4%	1.2%	0.3%
Van Buren	5,916	4,775	80.7%	5,856	4,769	81.4%	-0.1%	-1.0%
Warren	41,908	32,536	77.6%	42,196	32,955	78.1%	1.3%	0.7%
Washington	133,361	107,718	80.8%	136,811	110,578	80.8%	2.7%	2.6%
Wayne	16,377	13,835	84.5%	16,150	13,743	85.1%	-0.7%	-1.4%
Weakley	33,249	26,477	79.6%	33,245	26,507	79.7%	0.1%	0.0%
White	28,385	22,518	79.3%	29,196	23,320	79.9%	3.6%	2.9%
Williamson	264,071	197,102	74.6%	288,952	217,223	75.2%	10.2%	9.4%
Wilson	157,668	121,832	77.3%	169,947	131,811	77.6%	8.2%	7.8%

* TN_CoPopProj_2021 UTCBER Population Projection Series.

Source: Boyd Center for Business and Economic Research, University of Tennessee, Knoxville
 Reassembled by the Tennessee Department of Health, Division of Population Health Assessment
 Note: These projections may not match Boyd Center projections precisely due to rounding.

Tennessee Population Estimates 2023 and 2027 *

	Population Estimate 2023			Population Estimate 2027			% Increase	
	Total	65+	%65+	Total	65+	%65+	65+	Total
Tennessee	7,071,060	1,290,989	18.3%	7,282,134	1,413,040	19.4%	9.5%	3.0%
Anderson	78,595	17,287	22.0%	79,648	18,544	23.3%	7.3%	1.3%
Bedford	51,992	8,591	16.5%	54,262	9,583	17.7%	11.5%	4.4%
Benton	16,170	4,202	26.0%	16,184	4,475	27.6%	6.5%	0.1%
Bledsoe	15,573	3,185	20.5%	15,958	3,521	22.1%	10.5%	2.5%
Blount	138,918	31,447	22.6%	143,850	34,692	24.1%	10.3%	3.6%
Bradley	111,877	21,166	18.9%	115,338	23,315	20.2%	10.2%	3.1%
Campbell	39,640	8,790	22.2%	39,250	9,242	23.5%	5.1%	-1.0%
Cannon	15,125	3,023	20.0%	15,426	3,369	21.8%	11.4%	2.0%
Carroll	27,601	6,072	22.0%	27,274	6,381	23.4%	5.1%	-1.2%
Carter	56,052	13,834	24.7%	55,304	14,708	26.6%	6.3%	-1.3%
Cheatham	41,692	7,365	17.7%	42,304	8,293	19.6%	12.6%	1.5%
Chester	17,518	3,331	19.0%	17,648	3,611	20.5%	8.4%	0.7%
Claiborne	32,342	7,192	22.2%	32,653	7,812	23.9%	8.6%	1.0%
Clay	7,655	2,097	27.4%	7,659	2,261	29.5%	7.8%	0.1%
Cocke	36,597	8,724	23.8%	36,897	9,472	25.7%	8.6%	0.8%
Coffee	58,883	10,985	18.7%	60,425	11,977	19.8%	9.0%	2.6%
Crockett	14,161	2,904	20.5%	14,111	3,096	21.9%	6.6%	-0.4%
Cumberland	63,803	21,874	34.3%	66,236	24,019	36.3%	9.8%	3.8%
Davidson	722,445	98,327	13.6%	742,241	106,767	14.4%	8.6%	2.7%
Decatur	11,607	3,001	25.9%	11,569	3,195	27.6%	6.5%	-0.3%
DeKalb	21,305	4,391	20.6%	21,862	4,843	22.2%	10.3%	2.6%
Dickson	56,005	10,268	18.3%	57,965	11,463	19.8%	11.6%	3.5%
Dyer	36,796	7,096	19.3%	36,862	7,549	20.5%	6.4%	0.2%
Fayette	43,097	10,584	24.6%	44,833	11,929	26.6%	12.7%	4.0%
Fentress	18,982	4,636	24.4%	19,135	5,022	26.2%	8.3%	0.8%
Franklin	42,819	9,582	22.4%	43,162	10,267	23.8%	7.1%	0.8%
Gibson	49,485	9,587	19.4%	49,806	10,178	20.4%	6.2%	0.6%
Giles	29,506	6,644	22.5%	29,368	7,138	24.3%	7.4%	-0.5%
Grainger	23,871	5,530	23.2%	24,156	6,055	25.1%	9.5%	1.2%
Greene	70,100	16,743	23.9%	70,498	17,914	25.4%	7.0%	0.6%
Grundy	13,286	3,041	22.9%	12,981	3,224	24.8%	6.0%	-2.3%
Hamblen	66,054	13,098	19.8%	67,218	14,091	21.0%	7.6%	1.8%
Hamilton	380,381	73,546	19.3%	390,799	79,524	20.3%	8.1%	2.7%
Hancock	6,381	1,542	24.2%	6,234	1,612	25.9%	4.5%	-2.3%
Hardeman	24,635	4,899	19.9%	24,329	5,061	20.8%	3.3%	-1.2%
Hardin	25,594	6,505	25.4%	25,522	6,941	27.2%	6.7%	-0.3%
Hawkins	56,935	13,456	23.6%	56,860	14,502	25.5%	7.8%	-0.1%
Haywood	16,660	3,660	22.0%	16,203	3,866	23.9%	5.6%	-2.7%
Henderson	28,316	5,676	20.0%	28,573	6,075	21.3%	7.0%	0.9%
Henry	32,143	8,203	25.5%	32,155	8,680	27.0%	5.8%	0.0%
Hickman	25,808	5,020	19.5%	26,253	5,475	20.9%	9.1%	1.7%
Houston	8,364	1,891	22.6%	8,451	2,027	24.0%	7.2%	1.0%
Humphreys	18,656	4,097	22.0%	18,733	4,377	23.4%	6.8%	0.4%
Jackson	12,013	3,066	25.5%	12,152	3,351	27.6%	9.3%	1.2%
Jefferson	56,597	12,783	22.6%	58,053	14,267	24.6%	11.6%	2.6%
Johnson	17,780	4,497	25.3%	17,640	4,692	26.6%	4.3%	-0.8%
Knox	489,230	85,740	17.5%	506,257	93,474	18.5%	9.0%	3.5%
Lake	6,907	1,191	17.2%	6,848	1,199	17.5%	0.6%	-0.9%
Lauderdale	25,397	4,475	17.6%	25,274	4,723	18.7%	5.5%	-0.5%
Lawrence	44,865	8,781	19.6%	45,264	9,565	21.1%	8.9%	0.9%

Tennessee Population Estimates 2023 and 2027 *

	Population Estimate 2023			Population Estimate 2027			% Increase	
	Total	65+	%65+	Total	65+	%65+	65+	Total
Lewis	12,394	2,887	23.3%	12,391	3,084	24.9%	6.8%	0.0%
Lincoln	34,943	7,592	21.7%	35,405	8,236	23.3%	8.5%	1.3%
Loudon	57,186	16,756	29.3%	59,885	18,491	30.9%	10.4%	4.7%
McMinn	54,986	12,074	22.0%	55,847	13,097	23.5%	8.5%	1.6%
McNairy	25,942	5,787	22.3%	26,171	6,159	23.5%	6.4%	0.9%
Macon	25,655	4,450	17.3%	26,707	4,907	18.4%	10.3%	4.1%
Madison	98,718	19,352	19.6%	99,036	20,925	21.1%	8.1%	0.3%
Marion	28,904	6,407	22.2%	28,793	6,793	23.6%	6.0%	-0.4%
Marshall	36,191	6,445	17.8%	37,601	7,197	19.1%	11.7%	3.9%
Maury	104,474	19,156	18.3%	110,559	21,553	19.5%	12.5%	5.8%
Meigs	12,753	2,873	22.5%	13,005	3,157	24.3%	9.9%	2.0%
Monroe	48,151	11,385	23.6%	49,178	12,505	25.4%	9.8%	2.1%
Montgomery	227,061	23,975	10.6%	243,942	27,584	11.3%	15.1%	7.4%
Moore	6,487	1,562	24.1%	6,543	1,671	25.5%	6.9%	0.9%
Morgan	21,659	4,315	19.9%	21,890	4,614	21.1%	6.9%	1.1%
Obion	29,916	6,759	22.6%	29,546	6,988	23.7%	3.4%	-1.2%
Overton	22,968	5,086	22.1%	23,414	5,479	23.4%	7.7%	1.9%
Perry	8,194	1,850	22.6%	8,303	1,952	23.5%	5.6%	1.3%
Pickett	5,005	1,525	30.5%	4,932	1,605	32.5%	5.2%	-1.5%
Polk	17,083	3,890	22.8%	17,354	4,255	24.5%	9.4%	1.6%
Putnam	83,834	15,307	18.3%	87,505	16,976	19.4%	10.9%	4.4%
Rhea	34,052	7,042	20.7%	34,768	7,658	22.0%	8.7%	2.1%
Roane	53,994	13,727	25.4%	53,945	14,626	27.1%	6.6%	-0.1%
Robertson	74,699	12,672	17.0%	77,702	14,395	18.5%	13.6%	4.0%
Rutherford	363,690	44,100	12.1%	396,434	52,325	13.2%	18.7%	9.0%
Scott	22,143	4,175	18.9%	22,151	4,459	20.1%	6.8%	0.0%
Sequatchie	15,614	3,652	23.4%	16,138	4,031	25.0%	10.4%	3.4%
Sevier	103,232	22,761	22.0%	108,125	25,331	23.4%	11.3%	4.7%
Shelby	941,637	146,215	15.5%	947,491	156,519	16.5%	7.0%	0.6%
Smith	20,651	3,879	18.8%	21,065	4,327	20.5%	11.6%	2.0%
Stewart	14,003	3,134	22.4%	14,149	3,404	24.1%	8.6%	1.0%
Sullivan	159,811	38,117	23.9%	160,539	40,469	25.2%	6.2%	0.5%
Sumner	205,092	36,251	17.7%	217,255	40,980	18.9%	13.0%	5.9%
Tipton	62,909	10,592	16.8%	63,997	11,743	18.3%	10.9%	1.7%
Trousdale	11,742	1,611	13.7%	12,067	1,746	14.5%	8.4%	2.8%
Unicoi	17,847	4,605	25.8%	17,906	4,899	27.4%	6.4%	0.3%
Union	20,296	4,226	20.8%	20,361	4,696	23.1%	11.1%	0.3%
Van Buren	5,916	1,510	25.5%	5,856	1,594	27.2%	5.6%	-1.0%
Warren	41,908	8,201	19.6%	42,196	8,795	20.8%	7.2%	0.7%
Washington	133,361	27,332	20.5%	136,811	29,657	21.7%	8.5%	2.6%
Wayne	16,377	3,471	21.2%	16,150	3,641	22.5%	4.9%	-1.4%
Weakley	33,249	6,810	20.5%	33,245	7,228	21.7%	6.1%	0.0%
White	28,385	6,319	22.3%	29,196	6,901	23.6%	9.2%	2.9%
Williamson	264,071	40,172	15.2%	288,952	47,379	16.4%	17.9%	9.4%
Wilson	157,668	27,360	17.4%	169,947	31,601	18.6%	15.5%	7.8%

* TN_CoPopProj_2021 UTCBER Population Projection Series.

Source: Boyd Center for Business and Economic Research, University of Tennessee, Knoxville
 Reassembled by the Tennessee Department of Health, Division of Population Health Assessment
 Note: These projections may not match Boyd Center projections precisely due to rounding.

Tennessee Female Population Estimates 2023 and 2027 *

	Population Estimate 2023			Population Estimate 2027			% Increase	
	Total	15-44	%15-44	Total	15-44	%15-44	15-44	Total
Tennessee	3,625,723	1,364,507	37.6%	3,737,259	1,386,899	37.1%	1.6%	3.1%
Anderson	40,329	13,528	33.5%	40,850	13,549	33.2%	0.2%	1.3%
Bedford	26,416	9,764	37.0%	27,649	10,145	36.7%	3.9%	4.7%
Benton	8,213	2,389	29.1%	8,210	2,336	28.5%	-2.2%	0.0%
Bledsoe	6,224	1,871	30.1%	6,265	1,798	28.7%	-3.9%	0.6%
Blount	71,505	23,888	33.4%	74,192	24,458	33.0%	2.4%	3.8%
Bradley	57,623	21,226	36.8%	59,479	21,727	36.5%	2.4%	3.2%
Campbell	20,168	6,626	32.9%	19,956	6,437	32.3%	-2.9%	-1.1%
Cannon	7,580	2,559	33.8%	7,733	2,553	33.0%	-0.3%	2.0%
Carroll	14,045	4,726	33.6%	13,886	4,647	33.5%	-1.7%	-1.1%
Carter	28,671	9,267	32.3%	28,350	8,981	31.7%	-3.1%	-1.1%
Cheatham	21,012	7,520	35.8%	21,370	7,526	35.2%	0.1%	1.7%
Chester	9,176	3,583	39.1%	9,290	3,616	38.9%	0.9%	1.2%
Claiborne	16,538	5,778	34.9%	16,703	5,811	34.8%	0.6%	1.0%
Clay	3,905	1,123	28.7%	3,882	1,088	28.0%	-3.0%	-0.6%
Cocke	18,844	5,967	31.7%	19,059	5,951	31.2%	-0.3%	1.1%
Coffee	30,076	10,723	35.7%	30,887	10,956	35.5%	2.2%	2.7%
Crockett	7,433	2,562	34.5%	7,445	2,536	34.1%	-1.0%	0.2%
Cumberland	32,741	8,498	26.0%	33,966	8,680	25.6%	2.1%	3.7%
Davidson	373,661	168,077	45.0%	383,962	168,258	43.8%	0.1%	2.8%
Decatur	5,884	1,786	30.4%	5,874	1,741	29.6%	-2.5%	-0.2%
DeKalb	10,631	3,583	33.7%	10,935	3,629	33.2%	1.3%	2.9%
Dickson	28,560	10,209	35.7%	29,600	10,387	35.1%	1.7%	3.6%
Dyer	19,055	6,830	35.8%	19,128	6,768	35.4%	-0.9%	0.4%
Fayette	21,920	6,716	30.6%	22,820	6,800	29.8%	1.3%	4.1%
Fentress	9,638	2,889	30.0%	9,741	2,881	29.6%	-0.3%	1.1%
Franklin	21,947	7,798	35.5%	22,154	7,841	35.4%	0.6%	0.9%
Gibson	25,684	9,107	35.5%	25,841	9,054	35.0%	-0.6%	0.6%
Giles	15,251	5,086	33.3%	15,221	5,014	32.9%	-1.4%	-0.2%
Grainger	11,872	3,719	31.3%	12,010	3,691	30.7%	-0.8%	1.2%
Greene	35,679	11,518	32.3%	35,914	11,460	31.9%	-0.5%	0.7%
Grundy	6,679	2,178	32.6%	6,524	2,047	31.4%	-6.0%	-2.3%
Hamblen	33,799	11,628	34.4%	34,511	11,851	34.3%	1.9%	2.1%
Hamilton	197,051	74,691	37.9%	202,522	75,515	37.3%	1.1%	2.8%
Hancock	3,242	1,008	31.1%	3,168	986	31.1%	-2.2%	-2.3%
Hardeman	11,005	3,558	32.3%	10,749	3,405	31.7%	-4.3%	-2.3%
Hardin	13,202	4,079	30.9%	13,210	4,018	30.4%	-1.5%	0.1%
Hawkins	28,932	9,231	31.9%	28,938	9,062	31.3%	-1.8%	0.0%
Haywood	8,881	2,941	33.1%	8,642	2,728	31.6%	-7.2%	-2.7%
Henderson	14,464	5,028	34.8%	14,620	5,009	34.3%	-0.4%	1.1%
Henry	16,596	5,057	30.5%	16,645	5,018	30.1%	-0.8%	0.3%
Hickman	12,372	4,227	34.2%	12,609	4,272	33.9%	1.1%	1.9%
Houston	4,287	1,419	33.1%	4,356	1,416	32.5%	-0.2%	1.6%
Humphreys	9,348	3,085	33.0%	9,380	3,039	32.4%	-1.5%	0.3%
Jackson	5,989	1,799	30.0%	6,076	1,785	29.4%	-0.8%	1.4%
Jefferson	28,797	9,499	33.0%	29,593	9,659	32.6%	1.7%	2.8%
Johnson	8,272	2,371	28.7%	8,129	2,296	28.2%	-3.2%	-1.7%
Knox	251,678	101,769	40.4%	260,611	104,069	39.9%	2.3%	3.5%
Lake	2,475	733	29.6%	2,345	672	28.7%	-8.4%	-5.2%
Lauderdale	12,208	4,218	34.6%	12,121	4,124	34.0%	-2.2%	-0.7%
Lawrence	22,816	7,924	34.7%	23,055	7,974	34.6%	0.6%	1.0%

Tennessee Female Population Estimates 2023 and 2027 *

	Population Estimate 2023			Population Estimate 2027			% Increase	
	Total	15-44	%15-44	Total	15-44	%15-44	15-44	Total
Lewis	6,396	2,060	32.2%	6,417	2,038	31.8%	-1.1%	0.3%
Lincoln	17,827	5,814	32.6%	18,059	5,844	32.4%	0.5%	1.3%
Loudon	29,076	8,203	28.2%	30,483	8,612	28.3%	5.0%	4.8%
McMinn	28,183	9,544	33.9%	28,646	9,535	33.3%	-0.1%	1.6%
McNairy	13,263	4,332	32.7%	13,358	4,303	32.2%	-0.7%	0.7%
Macon	13,145	4,811	36.6%	13,740	4,994	36.3%	3.8%	4.5%
Madison	52,189	19,569	37.5%	52,548	19,459	37.0%	-0.6%	0.7%
Marion	14,764	4,821	32.7%	14,738	4,756	32.3%	-1.4%	-0.2%
Marshall	18,471	6,758	36.6%	19,222	6,930	36.1%	2.5%	4.1%
Maury	54,144	19,951	36.8%	57,467	20,711	36.0%	3.8%	6.1%
Meigs	6,437	2,036	31.6%	6,576	2,031	30.9%	-0.2%	2.2%
Monroe	24,331	7,710	31.7%	24,859	7,789	31.3%	1.0%	2.2%
Montgomery	114,142	51,589	45.2%	122,747	54,515	44.4%	5.7%	7.5%
Moore	3,267	1,042	31.9%	3,303	1,030	31.2%	-1.2%	1.1%
Morgan	9,761	3,167	32.4%	9,793	3,128	31.9%	-1.2%	0.3%
Obion	15,477	5,163	33.4%	15,325	5,031	32.8%	-2.6%	-1.0%
Overton	11,573	3,820	33.0%	11,804	3,860	32.7%	1.1%	2.0%
Perry	4,067	1,319	32.4%	4,124	1,336	32.4%	1.3%	1.4%
Pickett	2,550	673	26.4%	2,519	656	26.1%	-2.5%	-1.2%
Polk	8,677	2,746	31.6%	8,837	2,751	31.1%	0.2%	1.8%
Putnam	42,313	16,686	39.4%	44,253	17,384	39.3%	4.2%	4.6%
Rhea	17,199	5,985	34.8%	17,546	6,097	34.7%	1.9%	2.0%
Roane	27,453	8,417	30.7%	27,455	8,244	30.0%	-2.1%	0.0%
Robertson	37,894	13,879	36.6%	39,535	14,248	36.0%	2.7%	4.3%
Rutherford	185,464	81,433	43.9%	202,233	87,000	43.0%	6.8%	9.0%
Scott	11,263	4,036	35.8%	11,301	3,964	35.1%	-1.8%	0.3%
Sequatchie	7,889	2,502	31.7%	8,181	2,552	31.2%	2.0%	3.7%
Sevier	52,437	17,475	33.3%	54,967	18,284	33.3%	4.6%	4.8%
Shelby	496,301	195,842	39.5%	499,977	194,957	39.0%	-0.5%	0.7%
Smith	10,363	3,663	35.3%	10,611	3,693	34.8%	0.8%	2.4%
Stewart	7,033	2,225	31.6%	7,101	2,230	31.4%	0.2%	1.0%
Sullivan	82,093	26,650	32.5%	82,513	26,469	32.1%	-0.7%	0.5%
Sumner	105,330	38,548	36.6%	111,700	40,304	36.1%	4.6%	6.0%
Tipton	32,070	11,900	37.1%	32,669	11,883	36.4%	-0.1%	1.9%
Trousdale	4,877	1,891	38.8%	5,032	1,942	38.6%	2.7%	3.2%
Unicoi	9,046	2,763	30.5%	9,094	2,734	30.1%	-1.0%	0.5%
Union	10,264	3,425	33.4%	10,330	3,371	32.6%	-1.6%	0.6%
Van Buren	2,922	823	28.2%	2,891	796	27.5%	-3.3%	-1.1%
Warren	21,172	7,421	35.1%	21,355	7,399	34.6%	-0.3%	0.9%
Washington	68,318	26,339	38.6%	70,173	26,867	38.3%	2.0%	2.7%
Wayne	7,259	2,251	31.0%	7,127	2,145	30.1%	-4.7%	-1.8%
Weakley	17,097	6,757	39.5%	17,126	6,755	39.4%	0.0%	0.2%
White	14,516	4,800	33.1%	14,955	4,913	32.9%	2.4%	3.0%
Williamson	134,713	48,993	36.4%	147,670	52,960	35.9%	8.1%	9.6%
Wilson	80,326	29,315	36.5%	86,729	31,137	35.9%	6.2%	8.0%

* TN_CoPopProj_2021 UTCBER Population Projection Series.

Source: Boyd Center for Business and Economic Research, University of Tennessee, Knoxville
 Reassembled by the Tennessee Department of Health, Division of Population Health Assessment
 Note: These projections may not match Boyd Center projections precisely due to rounding.

Attachment 3N-2

US Census Supplementary Demographic Data

	Tennessee							
	Total		Percent		Male		Percent Male	
Label	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error
Total population	6,923,772	*****	(X)	(X)	3,400,979	±1,445	(X)	(X)
AGE								
Under 5 years	402,591	±797	5.8%	±0.1	205,719	±801	6.0%	±0.1
5 to 9 years	415,093	±4,983	6.0%	±0.1	212,410	±3,196	6.2%	±0.1
10 to 14 years	443,075	±5,088	6.4%	±0.1	226,214	±3,161	6.7%	±0.1
15 to 19 years	443,311	±1,263	6.4%	±0.1	227,585	±1,060	6.7%	±0.1
20 to 24 years	460,990	±1,445	6.7%	±0.1	233,205	±1,073	6.9%	±0.1
25 to 29 years	483,816	±1,195	7.0%	±0.1	241,851	±899	7.1%	±0.1
30 to 34 years	465,596	±1,288	6.7%	±0.1	231,295	±866	6.8%	±0.1
35 to 39 years	444,007	±4,787	6.4%	±0.1	220,789	±3,224	6.5%	±0.1
40 to 44 years	427,125	±4,780	6.2%	±0.1	213,238	±3,230	6.3%	±0.1
45 to 49 years	433,044	±1,220	6.3%	±0.1	215,830	±848	6.3%	±0.1
50 to 54 years	444,626	±1,200	6.4%	±0.1	220,815	±855	6.5%	±0.1
55 to 59 years	457,404	±4,633	6.6%	±0.1	221,232	±2,814	6.5%	±0.1
60 to 64 years	447,781	±4,393	6.5%	±0.1	216,637	±2,610	6.4%	±0.1
65 to 69 years	383,697	±3,280	5.5%	±0.1	181,206	±2,419	5.3%	±0.1
70 to 74 years	313,410	±3,214	4.5%	±0.1	144,948	±2,382	4.3%	±0.1
75 to 79 years	210,716	±2,719	3.0%	±0.1	93,998	±1,559	2.8%	±0.1
80 to 84 years	132,895	±2,361	1.9%	±0.1	54,424	±1,540	1.6%	±0.1
85 years and over	114,595	±2,554	1.7%	±0.1	39,583	±1,412	1.2%	±0.1
SELECTED AGE CATEGORIES								
5 to 14 years	858,168	±933	12.4%	±0.1	438,624	±861	12.9%	±0.1
15 to 17 years	265,721	±675	3.8%	±0.1	136,118	±672	4.0%	±0.1
Under 18 years	1,526,480	±743	22.0%	±0.1	780,461	±1,194	22.9%	±0.1
18 to 24 years	638,580	±1,304	9.2%	±0.1	324,672	±1,026	9.5%	±0.1
15 to 44 years	2,724,845	±2,008	39.4%	±0.1	1,367,963	±1,555	40.2%	±0.1
16 years and over	5,576,402	±2,460	80.5%	±0.1	2,713,022	±1,634	79.8%	±0.1
18 years and over	5,397,292	±739	78.0%	±0.1	2,620,518	±1,049	77.1%	±0.1
21 years and over	5,121,854	±3,134	74.0%	±0.1	2,479,040	±2,208	72.9%	±0.1
60 years and over	1,603,094	±4,669	23.2%	±0.1	730,796	±2,731	21.5%	±0.1
62 years and over	1,418,860	±3,861	20.5%	±0.1	641,556	±2,578	18.9%	±0.1
65 years and over	1,155,313	±974	16.7%	±0.1	514,159	±622	15.1%	±0.1
75 years and over	458,206	±799	6.6%	±0.1	188,005	±472	5.5%	±0.1
SUMMARY INDICATORS								
Median age (years)	38.9	±0.1	(X)	(X)	37.8	±0.1	(X)	(X)
Sex ratio (males per 100 females)	96.5	±0.1	(X)	(X)	(X)	(X)	(X)	(X)
Age dependency ratio	63.2	±0.1	(X)	(X)	(X)	(X)	(X)	(X)
Old-age dependency ratio	27.2	±0.1	(X)	(X)	(X)	(X)	(X)	(X)
Child dependency ratio	36.0	±0.1	(X)	(X)	(X)	(X)	(X)	(X)
PERCENT ALLOCATED								
Sex	(X)	(X)	0.1%	(X)	(X)	(X)	(X)	(X)
Age	(X)	(X)	1.5%	(X)	(X)	(X)	(X)	(X)

					Carroll County, Tennessee				
		Female		Percent Female		Total		Percent	
Label	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	
Total population	3,522,793	±1,444	(X)	(X)	28,381	*****	(X)	(X)	
AGE									
Under 5 years	196,872	±785	5.6%	±0.1	1,489	±64	5.2%	±0.2	
5 to 9 years	202,683	±3,171	5.8%	±0.1	1,850	±233	6.5%	±0.8	
10 to 14 years	216,861	±3,280	6.2%	±0.1	1,808	±255	6.4%	±0.9	
15 to 19 years	215,726	±1,114	6.1%	±0.1	1,986	±109	7.0%	±0.4	
20 to 24 years	227,785	±874	6.5%	±0.1	1,827	±183	6.4%	±0.6	
25 to 29 years	241,965	±865	6.9%	±0.1	1,659	±159	5.8%	±0.6	
30 to 34 years	234,301	±782	6.7%	±0.1	1,698	±96	6.0%	±0.3	
35 to 39 years	223,218	±3,170	6.3%	±0.1	1,326	±218	4.7%	±0.8	
40 to 44 years	213,887	±3,011	6.1%	±0.1	1,619	±205	5.7%	±0.7	
45 to 49 years	217,214	±748	6.2%	±0.1	1,775	±89	6.3%	±0.3	
50 to 54 years	223,811	±654	6.4%	±0.1	1,799	±83	6.3%	±0.3	
55 to 59 years	236,172	±3,161	6.7%	±0.1	2,024	±205	7.1%	±0.7	
60 to 64 years	231,144	±3,109	6.6%	±0.1	1,811	±208	6.4%	±0.7	
65 to 69 years	202,491	±2,152	5.7%	±0.1	1,760	±194	6.2%	±0.7	
70 to 74 years	168,462	±2,079	4.8%	±0.1	1,493	±171	5.3%	±0.6	
75 to 79 years	116,718	±2,188	3.3%	±0.1	977	±174	3.4%	±0.6	
80 to 84 years	78,471	±1,787	2.2%	±0.1	799	±146	2.8%	±0.5	
85 years and over	75,012	±1,753	2.1%	±0.1	681	±180	2.4%	±0.6	
SELECTED AGE CATEGORIES									
5 to 14 years	419,544	±777	11.9%	±0.1	3,658	±82	12.9%	±0.3	
15 to 17 years	129,603	±701	3.7%	±0.1	1,026	±74	3.6%	±0.3	
Under 18 years	746,019	±1,172	21.2%	±0.1	6,173	*****	21.8%	*****	
18 to 24 years	313,908	±771	8.9%	±0.1	2,787	±183	9.8%	±0.6	
15 to 44 years	1,356,882	±1,407	38.5%	±0.1	10,115	±126	35.6%	±0.4	
16 years and over	2,863,380	±1,902	81.3%	±0.1	22,845	±122	80.5%	±0.4	
18 years and over	2,776,774	±868	78.8%	±0.1	22,208	*****	78.2%	*****	
21 years and over	2,642,814	±2,301	75.0%	±0.1	20,674	±192	72.8%	±0.7	
60 years and over	872,298	±3,326	24.8%	±0.1	7,521	±204	26.5%	±0.7	
62 years and over	777,304	±2,980	22.1%	±0.1	6,779	±166	23.9%	±0.6	
65 years and over	641,154	±709	18.2%	±0.1	5,710	±74	20.1%	±0.3	
75 years and over	270,201	±561	7.7%	±0.1	2,457	±131	8.7%	±0.5	
SUMMARY INDICATORS									
Median age (years)	40.0	±0.2	(X)	(X)	41.7	±0.8	(X)	(X)	
Sex ratio (males per 100 females)	(X)	(X)	(X)	(X)	98.1	±1.4	(X)	(X)	
Age dependency ratio	(X)	(X)	(X)	(X)	72.0	±0.8	(X)	(X)	
Old-age dependency ratio	(X)	(X)	(X)	(X)	34.6	±0.6	(X)	(X)	
Child dependency ratio	(X)	(X)	(X)	(X)	37.4	±0.2	(X)	(X)	
PERCENT ALLOCATED									
Sex	(X)	(X)	(X)	(X)	(X)	(X)	0.1%	(X)	
Age	(X)	(X)	(X)	(X)	(X)	(X)	0.8%	(X)	

	Male		Percent Male		Female		Percent Female	
Label	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error
Total population	14,053	±104	(X)	(X)	14,328	±104	(X)	(X)
AGE								
Under 5 years	709	±70	5.0%	±0.5	780	±58	5.4%	±0.4
5 to 9 years	1,002	±198	7.1%	±1.4	848	±156	5.9%	±1.1
10 to 14 years	935	±225	6.7%	±1.6	873	±145	6.1%	±1.0
15 to 19 years	1,022	±97	7.3%	±0.7	964	±85	6.7%	±0.6
20 to 24 years	931	±114	6.6%	±0.8	896	±121	6.3%	±0.8
25 to 29 years	901	±122	6.4%	±0.9	758	±76	5.3%	±0.5
30 to 34 years	817	±55	5.8%	±0.4	881	±68	6.1%	±0.5
35 to 39 years	692	±153	4.9%	±1.1	634	±131	4.4%	±0.9
40 to 44 years	795	±142	5.7%	±1.0	824	±108	5.8%	±0.8
45 to 49 years	940	±76	6.7%	±0.5	835	±36	5.8%	±0.3
50 to 54 years	850	±17	6.0%	±0.1	949	±82	6.6%	±0.6
55 to 59 years	1,103	±122	7.8%	±0.9	921	±151	6.4%	±1.0
60 to 64 years	880	±125	6.3%	±0.9	931	±145	6.5%	±1.0
65 to 69 years	867	±124	6.2%	±0.9	893	±126	6.2%	±0.9
70 to 74 years	649	±113	4.6%	±0.8	844	±115	5.9%	±0.8
75 to 79 years	390	±92	2.8%	±0.7	587	±144	4.1%	±1.0
80 to 84 years	286	±74	2.0%	±0.5	513	±124	3.6%	±0.9
85 years and over	284	±87	2.0%	±0.6	397	±124	2.8%	±0.9
SELECTED AGE CATEGORIES								
5 to 14 years	1,937	±83	13.8%	±0.5	1,721	±85	12.0%	±0.5
15 to 17 years	545	±68	3.9%	±0.5	481	±63	3.4%	±0.4
Under 18 years	3,191	±93	22.7%	±0.5	2,982	±94	20.8%	±0.5
18 to 24 years	1,408	±115	10.0%	±0.8	1,379	±112	9.6%	±0.8
15 to 44 years	5,158	±109	36.7%	±0.7	4,957	±106	34.6%	±0.7
16 years and over	11,190	±84	79.6%	±0.7	11,655	±94	81.3%	±0.7
18 years and over	10,862	±30	77.3%	±0.5	11,346	±30	79.2%	±0.5
21 years and over	10,144	±138	72.2%	±1.0	10,530	±127	73.5%	±1.0
60 years and over	3,356	±123	23.9%	±0.9	4,165	±143	29.1%	±1.0
62 years and over	2,989	±104	21.3%	±0.8	3,790	±134	26.5%	±0.9
65 years and over	2,476	±22	17.6%	±0.2	3,234	±69	22.6%	±0.5
75 years and over	960	±65	6.8%	±0.5	1,497	±103	10.4%	±0.7
SUMMARY INDICATORS								
Median age (years)	40.1	±0.8	(X)	(X)	43.7	±0.6	(X)	(X)
Sex ratio (males per 100 females)	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Age dependency ratio	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Old-age dependency ratio	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Child dependency ratio	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
PERCENT ALLOCATED								
Sex	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Age	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)

Crockett County, Tennessee								
	Total		Percent		Male		Percent Male	
Label	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error
Total population	13,955	*****	(X)	(X)	6,853	±51	(X)	(X)
AGE								
Under 5 years	819	±4	5.9%	±0.1	508	±28	7.4%	±0.4
5 to 9 years	820	±117	5.9%	±0.8	395	±84	5.8%	±1.2
10 to 14 years	1,117	±117	8.0%	±0.8	521	±84	7.6%	±1.2
15 to 19 years	921	±106	6.6%	±0.8	482	±51	7.0%	±0.7
20 to 24 years	798	±98	5.7%	±0.7	396	±47	5.8%	±0.7
25 to 29 years	772	±64	5.5%	±0.5	384	±34	5.6%	±0.5
30 to 34 years	944	±120	6.8%	±0.9	459	±84	6.7%	±1.2
35 to 39 years	740	±180	5.3%	±1.3	403	±116	5.9%	±1.7
40 to 44 years	825	±148	5.9%	±1.1	336	±103	4.9%	±1.5
45 to 49 years	813	±88	5.8%	±0.6	418	±69	6.1%	±1.0
50 to 54 years	852	±58	6.1%	±0.4	418	±23	6.1%	±0.3
55 to 59 years	952	±156	6.8%	±1.1	446	±93	6.5%	±1.4
60 to 64 years	937	±143	6.7%	±1.0	462	±87	6.7%	±1.3
65 to 69 years	935	±116	6.7%	±0.8	464	±86	6.8%	±1.2
70 to 74 years	622	±98	4.5%	±0.7	357	±67	5.2%	±1.0
75 to 79 years	490	±82	3.5%	±0.6	175	±47	2.6%	±0.7
80 to 84 years	315	±75	2.3%	±0.5	114	±47	1.7%	±0.7
85 years and over	283	±82	2.0%	±0.6	115	±41	1.7%	±0.6
SELECTED AGE CATEGORIES								
5 to 14 years	1,937	±32	13.9%	±0.2	916	±2	13.4%	±0.1
15 to 17 years	538	±34	3.9%	±0.2	291	±27	4.2%	±0.4
Under 18 years	3,294	±11	23.6%	±0.1	1,715	±41	25.0%	±0.4
18 to 24 years	1,181	±66	8.5%	±0.5	587	±39	8.6%	±0.6
15 to 44 years	5,000	±98	35.8%	±0.7	2,460	±74	35.9%	±1.1
16 years and over	10,987	±58	78.7%	±0.4	5,305	±60	77.4%	±0.7
18 years and over	10,661	±11	76.4%	±0.1	5,138	±27	75.0%	±0.4
21 years and over	10,110	±118	72.4%	±0.8	4,851	±73	70.8%	±1.1
60 years and over	3,582	±157	25.7%	±1.1	1,687	±103	24.6%	±1.5
62 years and over	3,061	±133	21.9%	±1.0	1,434	±89	20.9%	±1.3
65 years and over	2,645	±56	19.0%	±0.4	1,225	±57	17.9%	±0.8
75 years and over	1,088	±20	7.8%	±0.1	404	±19	5.9%	±0.3
SUMMARY INDICATORS								
Median age (years)	40.2	±1.0	(X)	(X)	38.5	±0.7	(X)	(X)
Sex ratio (males per 100 females)	96.5	±1.4	(X)	(X)	(X)	(X)	(X)	(X)
Age dependency ratio	74.1	±1.2	(X)	(X)	(X)	(X)	(X)	(X)
Old-age dependency ratio	33.0	±0.9	(X)	(X)	(X)	(X)	(X)	(X)
Child dependency ratio	41.1	±0.4	(X)	(X)	(X)	(X)	(X)	(X)
PERCENT ALLOCATED								
Sex	(X)	(X)	0.1%	(X)	(X)	(X)	(X)	(X)
Age	(X)	(X)	1.8%	(X)	(X)	(X)	(X)	(X)

		Dyer County, Tennessee							
		Female		Percent Female		Total		Percent	
Label	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	
Total population	7,102	±51	(X)	(X)	36,818	*****	(X)	(X)	
AGE									
Under 5 years	311	±27	4.4%	±0.4	2,216	±96	6.0%	±0.3	
5 to 9 years	425	±97	6.0%	±1.4	2,342	±265	6.4%	±0.7	
10 to 14 years	596	±95	8.4%	±1.3	2,634	±276	7.2%	±0.8	
15 to 19 years	439	±94	6.2%	±1.3	2,299	±134	6.2%	±0.4	
20 to 24 years	402	±80	5.7%	±1.1	2,308	±184	6.3%	±0.5	
25 to 29 years	388	±52	5.5%	±0.7	2,264	±148	6.1%	±0.4	
30 to 34 years	485	±71	6.8%	±1.0	2,088	±159	5.7%	±0.4	
35 to 39 years	337	±103	4.7%	±1.5	1,969	±334	5.3%	±0.9	
40 to 44 years	489	±89	6.9%	±1.2	2,382	±352	6.5%	±1.0	
45 to 49 years	395	±49	5.6%	±0.7	2,505	±285	6.8%	±0.8	
50 to 54 years	434	±52	6.1%	±0.7	2,301	±136	6.2%	±0.4	
55 to 59 years	506	±93	7.1%	±1.3	2,870	±294	7.8%	±0.8	
60 to 64 years	475	±87	6.7%	±1.2	2,164	±268	5.9%	±0.7	
65 to 69 years	471	±69	6.6%	±1.0	2,115	±248	5.7%	±0.7	
70 to 74 years	265	±70	3.7%	±1.0	1,756	±240	4.8%	±0.7	
75 to 79 years	315	±70	4.4%	±1.0	1,291	±281	3.5%	±0.8	
80 to 84 years	201	±61	2.8%	±0.9	769	±234	2.1%	±0.6	
85 years and over	168	±67	2.4%	±0.9	545	±194	1.5%	±0.5	
SELECTED AGE CATEGORIES									
5 to 14 years	1,021	±32	14.4%	±0.4	4,976	±98	13.5%	±0.3	
15 to 17 years	247	±32	3.5%	±0.5	1,518	±61	4.1%	±0.2	
Under 18 years	1,579	±42	22.2%	±0.5	8,710	±51	23.7%	±0.1	
18 to 24 years	594	±52	8.4%	±0.7	3,089	±204	8.4%	±0.6	
15 to 44 years	2,540	±74	35.8%	±1.0	13,310	±273	36.2%	±0.7	
16 years and over	5,682	±41	80.0%	±0.7	28,929	±150	78.6%	±0.4	
18 years and over	5,523	±27	77.8%	±0.5	28,108	±51	76.3%	±0.1	
21 years and over	5,259	±91	74.0%	±1.4	26,784	±194	72.7%	±0.5	
60 years and over	1,895	±88	26.7%	±1.3	8,640	±274	23.5%	±0.7	
62 years and over	1,627	±67	22.9%	±1.0	7,468	±253	20.3%	±0.7	
65 years and over	1,420	±9	20.0%	±0.2	6,476	±84	17.6%	±0.2	
75 years and over	684	±6	9.6%	±0.1	2,605	±108	7.1%	±0.3	
SUMMARY INDICATORS									
Median age (years)	41.3	±0.9	(X)	(X)	40.5	±0.7	(X)	(X)	
Sex ratio (males per 100 females)	(X)	(X)	(X)	(X)	92.4	±2.4	(X)	(X)	
Age dependency ratio	(X)	(X)	(X)	(X)	70.2	±0.8	(X)	(X)	
Old-age dependency ratio	(X)	(X)	(X)	(X)	29.9	±0.5	(X)	(X)	
Child dependency ratio	(X)	(X)	(X)	(X)	40.3	±0.4	(X)	(X)	
PERCENT ALLOCATED									
Sex	(X)	(X)	(X)	(X)	(X)	(X)	0.2%	(X)	
Age	(X)	(X)	(X)	(X)	(X)	(X)	1.4%	(X)	

	Male		Percent Male		Female		Percent Female	
Label	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error
Total population	17,679	±234	(X)	(X)	19,139	±234	(X)	(X)
AGE								
Under 5 years	1,055	±122	6.0%	±0.7	1,161	±114	6.1%	±0.6
5 to 9 years	1,298	±176	7.3%	±1.0	1,044	±193	5.5%	±1.0
10 to 14 years	1,286	±189	7.3%	±1.1	1,348	±182	7.0%	±1.0
15 to 19 years	1,195	±171	6.8%	±0.9	1,104	±83	5.8%	±0.4
20 to 24 years	1,177	±108	6.7%	±0.6	1,131	±172	5.9%	±0.9
25 to 29 years	1,017	±85	5.8%	±0.5	1,247	±129	6.5%	±0.7
30 to 34 years	1,058	±150	6.0%	±0.8	1,030	±73	5.4%	±0.4
35 to 39 years	827	±213	4.7%	±1.2	1,142	±235	6.0%	±1.2
40 to 44 years	1,149	±216	6.5%	±1.2	1,233	±249	6.4%	±1.3
45 to 49 years	1,208	±187	6.8%	±1.1	1,297	±185	6.8%	±1.0
50 to 54 years	1,180	±110	6.7%	±0.6	1,121	±73	5.9%	±0.4
55 to 59 years	1,262	±227	7.1%	±1.3	1,608	±240	8.4%	±1.2
60 to 64 years	1,145	±193	6.5%	±1.1	1,019	±179	5.3%	±0.9
65 to 69 years	943	±165	5.3%	±0.9	1,172	±165	6.1%	±0.9
70 to 74 years	799	±159	4.5%	±0.9	957	±165	5.0%	±0.9
75 to 79 years	508	±153	2.9%	±0.9	783	±196	4.1%	±1.0
80 to 84 years	362	±144	2.0%	±0.8	407	±162	2.1%	±0.9
85 years and over	210	±152	1.2%	±0.9	335	±134	1.8%	±0.7
SELECTED AGE CATEGORIES								
5 to 14 years	2,584	±74	14.6%	±0.4	2,392	±57	12.5%	±0.3
15 to 17 years	735	±94	4.2%	±0.5	783	±80	4.1%	±0.4
Under 18 years	4,374	±178	24.7%	±0.8	4,336	±165	22.7%	±0.7
18 to 24 years	1,637	±126	9.3%	±0.7	1,452	±166	7.6%	±0.9
15 to 44 years	6,423	±232	36.3%	±1.1	6,887	±197	36.0%	±1.0
16 years and over	13,704	±213	77.5%	±0.8	15,225	±171	79.5%	±0.8
18 years and over	13,305	±179	75.3%	±0.8	14,803	±179	77.3%	±0.7
21 years and over	12,479	±244	70.6%	±1.3	14,305	±218	74.7%	±0.9
60 years and over	3,967	±193	22.4%	±1.1	4,673	±184	24.4%	±1.0
62 years and over	3,301	±159	18.7%	±0.9	4,167	±155	21.8%	±0.8
65 years and over	2,822	±61	16.0%	±0.4	3,654	±35	19.1%	±0.3
75 years and over	1,080	±75	6.1%	±0.4	1,525	±57	8.0%	±0.3
SUMMARY INDICATORS								
Median age (years)	39.5	±1.8	(X)	(X)	41.1	±1.5	(X)	(X)
Sex ratio (males per 100 females)	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Age dependency ratio	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Old-age dependency ratio	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Child dependency ratio	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
PERCENT ALLOCATED								
Sex	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Age	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)

Fayette County, Tennessee								
	Total		Percent		Male		Percent Male	
Label	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error
Total population	42,228	*****	(X)	(X)	21,068	±79	(X)	(X)
AGE								
Under 5 years	2,011	±30	4.8%	±0.1	1,011	±34	4.8%	±0.2
5 to 9 years	2,044	±231	4.8%	±0.5	1,032	±149	4.9%	±0.7
10 to 14 years	2,200	±227	5.2%	±0.5	1,145	±149	5.4%	±0.7
15 to 19 years	2,284	±85	5.4%	±0.2	1,288	±68	6.1%	±0.3
20 to 24 years	2,160	±67	5.1%	±0.2	1,131	±21	5.4%	±0.1
25 to 29 years	2,364	±69	5.6%	±0.2	1,146	±23	5.4%	±0.1
30 to 34 years	2,361	±67	5.6%	±0.2	1,215	±50	5.8%	±0.2
35 to 39 years	2,793	±276	6.6%	±0.7	1,191	±192	5.7%	±0.9
40 to 44 years	1,932	±259	4.6%	±0.6	1,185	±181	5.6%	±0.9
45 to 49 years	2,612	±64	6.2%	±0.2	1,314	±31	6.2%	±0.1
50 to 54 years	3,034	±44	7.2%	±0.1	1,483	±23	7.0%	±0.1
55 to 59 years	3,842	±267	9.1%	±0.6	1,844	±186	8.8%	±0.9
60 to 64 years	3,320	±262	7.9%	±0.6	1,735	±188	8.2%	±0.9
65 to 69 years	3,059	±276	7.2%	±0.7	1,453	±189	6.9%	±0.9
70 to 74 years	2,612	±270	6.2%	±0.6	1,271	±184	6.0%	±0.9
75 to 79 years	1,727	±206	4.1%	±0.5	895	±110	4.2%	±0.5
80 to 84 years	1,188	±208	2.8%	±0.5	520	±114	2.5%	±0.5
85 years and over	685	±160	1.6%	±0.4	209	±75	1.0%	±0.4
SELECTED AGE CATEGORIES								
5 to 14 years	4,244	±54	10.1%	±0.1	2,177	±23	10.3%	±0.1
15 to 17 years	1,497	±55	3.5%	±0.1	871	±55	4.1%	±0.3
Under 18 years	7,752	±40	18.4%	±0.1	4,059	±77	19.3%	±0.3
18 to 24 years	2,947	±51	7.0%	±0.1	1,548	±27	7.3%	±0.1
15 to 44 years	13,894	±85	32.9%	±0.2	7,156	±67	34.0%	±0.3
16 years and over	35,427	±152	83.9%	±0.4	17,567	±140	83.4%	±0.6
18 years and over	34,476	±40	81.6%	±0.1	17,009	±53	80.7%	±0.3
21 years and over	33,233	±168	78.7%	±0.4	16,296	±116	77.3%	±0.6
60 years and over	12,591	±264	29.8%	±0.6	6,083	±189	28.9%	±0.9
62 years and over	11,332	±237	26.8%	±0.6	5,463	±164	25.9%	±0.8
65 years and over	9,271	±62	22.0%	±0.1	4,348	±37	20.6%	±0.2
75 years and over	3,600	±19	8.5%	±0.1	1,624	±17	7.7%	±0.1
SUMMARY INDICATORS								
Median age (years)	46.8	±0.4	(X)	(X)	46.1	±0.5	(X)	(X)
Sex ratio (males per 100 females)	99.6	±0.7	(X)	(X)	(X)	(X)	(X)	(X)
Age dependency ratio	67.5	±0.4	(X)	(X)	(X)	(X)	(X)	(X)
Old-age dependency ratio	36.8	±0.3	(X)	(X)	(X)	(X)	(X)	(X)
Child dependency ratio	30.8	±0.2	(X)	(X)	(X)	(X)	(X)	(X)
PERCENT ALLOCATED								
Sex	(X)	(X)	0.0%	(X)	(X)	(X)	(X)	(X)
Age	(X)	(X)	1.3%	(X)	(X)	(X)	(X)	(X)

					Gibson County, Tennessee			
	Female		Percent Female		Total		Percent	
Label	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error
Total population	21,160	±79	(X)	(X)	50,455	*****	(X)	(X)
AGE								
Under 5 years	1,000	±47	4.7%	±0.2	2,986	±9	5.9%	±0.1
5 to 9 years	1,012	±166	4.8%	±0.8	3,405	±455	6.7%	±0.9
10 to 14 years	1,055	±154	5.0%	±0.7	3,683	±463	7.3%	±0.9
15 to 19 years	996	±66	4.7%	±0.3	3,200	±176	6.3%	±0.3
20 to 24 years	1,029	±65	4.9%	±0.3	2,740	±229	5.4%	±0.5
25 to 29 years	1,218	±56	5.8%	±0.3	3,145	±256	6.2%	±0.5
30 to 34 years	1,146	±37	5.4%	±0.2	2,942	±174	5.8%	±0.3
35 to 39 years	1,602	±171	7.6%	±0.8	3,284	±327	6.5%	±0.6
40 to 44 years	747	±158	3.5%	±0.8	3,273	±364	6.5%	±0.7
45 to 49 years	1,298	±47	6.1%	±0.2	3,154	±87	6.3%	±0.2
50 to 54 years	1,551	±33	7.3%	±0.2	3,087	±122	6.1%	±0.2
55 to 59 years	1,998	±192	9.4%	±0.9	3,432	±376	6.8%	±0.7
60 to 64 years	1,585	±189	7.5%	±0.9	3,293	±376	6.5%	±0.7
65 to 69 years	1,606	±177	7.6%	±0.8	3,013	±318	6.0%	±0.6
70 to 74 years	1,341	±177	6.3%	±0.8	2,158	±287	4.3%	±0.6
75 to 79 years	832	±158	3.9%	±0.7	1,469	±202	2.9%	±0.4
80 to 84 years	668	±151	3.2%	±0.7	1,289	±194	2.6%	±0.4
85 years and over	476	±130	2.2%	±0.6	902	±196	1.8%	±0.4
SELECTED AGE CATEGORIES								
5 to 14 years	2,067	±53	9.8%	±0.2	7,088	±97	14.0%	±0.2
15 to 17 years	626	±13	3.0%	±0.1	2,115	±98	4.2%	±0.2
Under 18 years	3,693	±66	17.5%	±0.3	12,189	±31	24.2%	±0.1
18 to 24 years	1,399	±42	6.6%	±0.2	3,825	±261	7.6%	±0.5
15 to 44 years	6,738	±62	31.8%	±0.3	18,584	±90	36.8%	±0.2
16 years and over	17,860	±68	84.4%	±0.4	39,588	±176	78.5%	±0.3
18 years and over	17,467	±48	82.5%	±0.3	38,266	±31	75.8%	±0.1
21 years and over	16,937	±135	80.0%	±0.7	36,671	±227	72.7%	±0.5
60 years and over	6,508	±198	30.8%	±0.9	12,124	±368	24.0%	±0.7
62 years and over	5,869	±167	27.7%	±0.8	10,762	±310	21.3%	±0.6
65 years and over	4,923	±49	23.3%	±0.2	8,831	±43	17.5%	±0.1
75 years and over	1,976	±7	9.3%	±0.1	3,660	±76	7.3%	±0.1
SUMMARY INDICATORS								
Median age (years)	47.8	±0.6	(X)	(X)	39.8	±0.5	(X)	(X)
Sex ratio (males per 100 females)	(X)	(X)	(X)	(X)	93.4	±0.7	(X)	(X)
Age dependency ratio	(X)	(X)	(X)	(X)	71.4	±0.3	(X)	(X)
Old-age dependency ratio	(X)	(X)	(X)	(X)	30.0	±0.2	(X)	(X)
Child dependency ratio	(X)	(X)	(X)	(X)	41.4	±0.2	(X)	(X)
PERCENT ALLOCATED								
Sex	(X)	(X)	(X)	(X)	(X)	(X)	0.0%	(X)
Age	(X)	(X)	(X)	(X)	(X)	(X)	0.6%	(X)

	Male		Percent Male		Female		Percent Female	
Label	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error
Total population	24,364	±99	(X)	(X)	26,091	±99	(X)	(X)
AGE								
Under 5 years	1,490	±12	6.1%	±0.1	1,496	±11	5.7%	±0.1
5 to 9 years	1,599	±307	6.6%	±1.3	1,806	±299	6.9%	±1.2
10 to 14 years	2,022	±298	8.3%	±1.2	1,661	±293	6.4%	±1.1
15 to 19 years	1,570	±118	6.4%	±0.5	1,630	±164	6.2%	±0.6
20 to 24 years	1,443	±153	5.9%	±0.6	1,297	±148	5.0%	±0.6
25 to 29 years	1,540	±153	6.3%	±0.6	1,605	±186	6.2%	±0.7
30 to 34 years	1,378	±106	5.7%	±0.4	1,564	±139	6.0%	±0.5
35 to 39 years	1,899	±218	7.8%	±0.9	1,385	±251	5.3%	±1.0
40 to 44 years	1,366	±202	5.6%	±0.8	1,907	±278	7.3%	±1.1
45 to 49 years	1,609	±86	6.6%	±0.4	1,545	±3	5.9%	±0.1
50 to 54 years	1,410	±83	5.8%	±0.3	1,677	±87	6.4%	±0.3
55 to 59 years	1,563	±239	6.4%	±1.0	1,869	±224	7.2%	±0.9
60 to 64 years	1,720	±239	7.1%	±1.0	1,573	±227	6.0%	±0.9
65 to 69 years	1,427	±171	5.9%	±0.7	1,586	±257	6.1%	±1.0
70 to 74 years	947	±146	3.9%	±0.6	1,211	±248	4.6%	±1.0
75 to 79 years	579	±115	2.4%	±0.5	890	±156	3.4%	±0.6
80 to 84 years	412	±100	1.7%	±0.4	877	±167	3.4%	±0.6
85 years and over	390	±136	1.6%	±0.6	512	±129	2.0%	±0.5
SELECTED AGE CATEGORIES								
5 to 14 years	3,621	±32	14.9%	±0.1	3,467	±102	13.3%	±0.4
15 to 17 years	1,034	±74	4.2%	±0.3	1,081	±120	4.1%	±0.5
Under 18 years	6,145	±79	25.2%	±0.3	6,044	±84	23.2%	±0.3
18 to 24 years	1,979	±149	8.1%	±0.6	1,846	±188	7.1%	±0.7
15 to 44 years	9,196	±101	37.7%	±0.3	9,388	±96	36.0%	±0.3
16 years and over	18,879	±156	77.5%	±0.5	20,709	±168	79.4%	±0.6
18 years and over	18,219	±71	74.8%	±0.3	20,047	±63	76.8%	±0.3
21 years and over	17,397	±145	71.4%	±0.6	19,274	±184	73.9%	±0.7
60 years and over	5,475	±242	22.5%	±1.0	6,649	±232	25.5%	±0.9
62 years and over	4,837	±233	19.9%	±1.0	5,925	±197	22.7%	±0.7
65 years and over	3,755	±49	15.4%	±0.2	5,076	±48	19.5%	±0.2
75 years and over	1,381	±75	5.7%	±0.3	2,279	±2	8.7%	±0.1
SUMMARY INDICATORS								
Median age (years)	38.5	±0.7	(X)	(X)	41.9	±0.6	(X)	(X)
Sex ratio (males per 100 females)	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Age dependency ratio	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Old-age dependency ratio	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Child dependency ratio	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
PERCENT ALLOCATED								
Sex	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Age	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)

Haywood County, Tennessee								
Label	Total		Percent		Male		Percent Male	
	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error
Total population	17,806	*****	(X)	(X)	8,445	±59	(X)	(X)
AGE								
Under 5 years	939	±51	5.3%	±0.3	492	±39	5.8%	±0.5
5 to 9 years	1,150	±203	6.5%	±1.1	560	±123	6.6%	±1.4
10 to 14 years	1,094	±208	6.1%	±1.2	605	±131	7.2%	±1.6
15 to 19 years	1,254	±154	7.0%	±0.9	706	±125	8.4%	±1.5
20 to 24 years	885	±153	5.0%	±0.9	363	±101	4.3%	±1.2
25 to 29 years	1,049	±40	5.9%	±0.2	530	±32	6.3%	±0.4
30 to 34 years	1,002	±39	5.6%	±0.2	449	±24	5.3%	±0.3
35 to 39 years	788	±169	4.4%	±1.0	314	±89	3.7%	±1.1
40 to 44 years	1,351	±167	7.6%	±0.9	610	±89	7.2%	±1.1
45 to 49 years	938	±95	5.3%	±0.5	477	±44	5.6%	±0.5
50 to 54 years	1,179	±46	6.6%	±0.3	574	±46	6.8%	±0.6
55 to 59 years	1,275	±173	7.2%	±1.0	663	±116	7.9%	±1.4
60 to 64 years	1,387	±177	7.8%	±1.0	612	±120	7.2%	±1.4
65 to 69 years	1,318	±162	7.4%	±0.9	673	±111	8.0%	±1.3
70 to 74 years	829	±160	4.7%	±0.9	299	±111	3.5%	±1.3
75 to 79 years	634	±125	3.6%	±0.7	317	±65	3.8%	±0.8
80 to 84 years	433	±119	2.4%	±0.7	133	±55	1.6%	±0.6
85 years and over	301	±89	1.7%	±0.5	68	±47	0.8%	±0.6
SELECTED AGE CATEGORIES								
5 to 14 years	2,244	±44	12.6%	±0.2	1,165	±34	13.8%	±0.4
15 to 17 years	738	±31	4.1%	±0.2	370	±64	4.4%	±0.7
Under 18 years	3,921	*****	22.0%	*****	2,027	±61	24.0%	±0.6
18 to 24 years	1,401	±21	7.9%	±0.1	699	±21	8.3%	±0.1
15 to 44 years	6,329	±100	35.5%	±0.6	2,972	±74	35.2%	±0.7
16 years and over	14,396	±65	80.8%	±0.4	6,650	±71	78.7%	±0.5
18 years and over	13,885	*****	78.0%	*****	6,418	±19	76.0%	±0.6
21 years and over	13,215	±162	74.2%	±0.9	5,997	±113	71.0%	±1.5
60 years and over	4,902	±173	27.5%	±1.0	2,102	±120	24.9%	±1.4
62 years and over	4,364	±180	24.5%	±1.0	1,801	±101	21.3%	±1.2
65 years and over	3,515	±23	19.7%	±0.1	1,490	±21	17.6%	±0.1
75 years and over	1,368	±22	7.7%	±0.1	518	±21	6.1%	±0.1
SUMMARY INDICATORS								
Median age (years)	43.1	±0.5	(X)	(X)	41.8	±0.9	(X)	(X)
Sex ratio (males per 100 females)	90.2	±1.2	(X)	(X)	(X)	(X)	(X)	(X)
Age dependency ratio	71.7	±0.4	(X)	(X)	(X)	(X)	(X)	(X)
Old-age dependency ratio	33.9	±0.3	(X)	(X)	(X)	(X)	(X)	(X)
Child dependency ratio	37.8	±0.1	(X)	(X)	(X)	(X)	(X)	(X)
PERCENT ALLOCATED								
Sex	(X)	(X)	0.0%	(X)	(X)	(X)	(X)	(X)
Age	(X)	(X)	1.0%	(X)	(X)	(X)	(X)	(X)

					Henry County, Tennessee				
		Female		Percent Female		Total		Percent	
Label	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	
Total population	9,361	±59	(X)	(X)	32,305	*****	(X)	(X)	
AGE									
Under 5 years	447	±21	4.8%	±0.2	1,609	±63	5.0%	±0.2	
5 to 9 years	590	±132	6.3%	±1.4	1,766	±257	5.5%	±0.8	
10 to 14 years	489	±132	5.2%	±1.4	2,073	±253	6.4%	±0.8	
15 to 19 years	548	±101	5.9%	±1.1	1,696	±71	5.2%	±0.2	
20 to 24 years	522	±98	5.6%	±1.0	1,786	±138	5.5%	±0.4	
25 to 29 years	519	±25	5.5%	±0.3	1,650	±96	5.1%	±0.3	
30 to 34 years	553	±35	5.9%	±0.4	1,657	±90	5.1%	±0.3	
35 to 39 years	474	±140	5.1%	±1.5	1,760	±296	5.4%	±0.9	
40 to 44 years	741	±135	7.9%	±1.4	1,780	±256	5.5%	±0.8	
45 to 49 years	461	±93	4.9%	±1.0	1,925	±94	6.0%	±0.3	
50 to 54 years	605	±4	6.5%	±0.1	2,090	±87	6.5%	±0.3	
55 to 59 years	612	±133	6.5%	±1.4	2,591	±267	8.0%	±0.8	
60 to 64 years	775	±134	8.3%	±1.4	2,372	±269	7.3%	±0.8	
65 to 69 years	645	±103	6.9%	±1.1	2,258	±289	7.0%	±0.9	
70 to 74 years	530	±101	5.7%	±1.1	2,110	±296	6.5%	±0.9	
75 to 79 years	317	±106	3.4%	±1.1	1,350	±243	4.2%	±0.8	
80 to 84 years	300	±113	3.2%	±1.2	1,025	±244	3.2%	±0.8	
85 years and over	233	±84	2.5%	±0.9	807	±161	2.5%	±0.5	
SELECTED AGE CATEGORIES									
5 to 14 years	1,079	±16	11.5%	±0.2	3,839	±76	11.9%	±0.2	
15 to 17 years	368	±60	3.9%	±0.6	1,087	±51	3.4%	±0.2	
Under 18 years	1,894	±61	20.2%	±0.5	6,535	±39	20.2%	±0.1	
18 to 24 years	702	±21	7.5%	±0.2	2,395	±124	7.4%	±0.4	
15 to 44 years	3,357	±95	35.9%	±1.0	10,329	±141	32.0%	±0.4	
16 years and over	7,746	±68	82.7%	±0.6	26,438	±132	81.8%	±0.4	
18 years and over	7,467	±19	79.8%	±0.5	25,770	±39	79.8%	±0.1	
21 years and over	7,218	±109	77.1%	±1.1	24,563	±232	76.0%	±0.7	
60 years and over	2,800	±135	29.9%	±1.5	9,922	±268	30.7%	±0.8	
62 years and over	2,563	±142	27.4%	±1.5	8,870	±243	27.5%	±0.8	
65 years and over	2,025	±23	21.6%	±0.3	7,550	±59	23.4%	±0.2	
75 years and over	850	±22	9.1%	±0.2	3,182	±75	9.8%	±0.2	
SUMMARY INDICATORS									
Median age (years)	43.5	±0.4	(X)	(X)	45.7	±0.5	(X)	(X)	
Sex ratio (males per 100 females)	(X)	(X)	(X)	(X)	93.6	±1.3	(X)	(X)	
Age dependency ratio	(X)	(X)	(X)	(X)	77.3	±0.7	(X)	(X)	
Old-age dependency ratio	(X)	(X)	(X)	(X)	41.4	±0.5	(X)	(X)	
Child dependency ratio	(X)	(X)	(X)	(X)	35.9	±0.3	(X)	(X)	
PERCENT ALLOCATED									
Sex	(X)	(X)	(X)	(X)	(X)	(X)	0.0%	(X)	
Age	(X)	(X)	(X)	(X)	(X)	(X)	0.9%	(X)	

	Male		Percent Male		Female		Percent Female	
Label	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error
Total population	15,622	±113	(X)	(X)	16,683	±113	(X)	(X)
AGE								
Under 5 years	786	±69	5.0%	±0.4	823	±88	4.9%	±0.5
5 to 9 years	997	±188	6.4%	±1.2	769	±173	4.6%	±1.0
10 to 14 years	848	±194	5.4%	±1.2	1,225	±174	7.3%	±1.0
15 to 19 years	886	±55	5.7%	±0.3	810	±57	4.9%	±0.3
20 to 24 years	941	±91	6.0%	±0.6	845	±97	5.1%	±0.6
25 to 29 years	859	±72	5.5%	±0.5	791	±52	4.7%	±0.3
30 to 34 years	811	±64	5.2%	±0.4	846	±73	5.1%	±0.4
35 to 39 years	863	±199	5.5%	±1.3	897	±170	5.4%	±1.0
40 to 44 years	924	±176	5.9%	±1.1	856	±155	5.1%	±0.9
45 to 49 years	858	±44	5.5%	±0.3	1,067	±82	6.4%	±0.5
50 to 54 years	1,065	±71	6.8%	±0.5	1,025	±40	6.1%	±0.2
55 to 59 years	1,219	±182	7.8%	±1.2	1,372	±177	8.2%	±1.1
60 to 64 years	1,181	±173	7.6%	±1.1	1,191	±185	7.1%	±1.1
65 to 69 years	911	±206	5.8%	±1.3	1,347	±177	8.1%	±1.1
70 to 74 years	1,152	±219	7.4%	±1.4	958	±177	5.7%	±1.1
75 to 79 years	643	±153	4.1%	±1.0	707	±168	4.2%	±1.0
80 to 84 years	432	±138	2.8%	±0.9	593	±185	3.6%	±1.1
85 years and over	246	±92	1.6%	±0.6	561	±117	3.4%	±0.7
SELECTED AGE CATEGORIES								
5 to 14 years	1,845	±53	11.8%	±0.3	1,994	±50	12.0%	±0.3
15 to 17 years	563	±34	3.6%	±0.2	524	±49	3.1%	±0.3
Under 18 years	3,194	±103	20.4%	±0.5	3,341	±103	20.0%	±0.5
18 to 24 years	1,264	±84	8.1%	±0.5	1,131	±86	6.8%	±0.5
15 to 44 years	5,284	±97	33.8%	±0.6	5,045	±116	30.2%	±0.7
16 years and over	12,810	±91	82.0%	±0.7	13,628	±125	81.7%	±0.7
18 years and over	12,428	±45	79.6%	±0.5	13,342	±60	80.0%	±0.5
21 years and over	11,843	±166	75.8%	±1.2	12,720	±168	76.2%	±1.0
60 years and over	4,565	±175	29.2%	±1.1	5,357	±188	32.1%	±1.2
62 years and over	4,035	±164	25.8%	±1.1	4,835	±167	29.0%	±1.0
65 years and over	3,384	±28	21.7%	±0.2	4,166	±54	25.0%	±0.3
75 years and over	1,321	±63	8.5%	±0.4	1,861	±54	11.2%	±0.3
SUMMARY INDICATORS								
Median age (years)	44.3	±0.9	(X)	(X)	46.4	±0.7	(X)	(X)
Sex ratio (males per 100 females)	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Age dependency ratio	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Old-age dependency ratio	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Child dependency ratio	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
PERCENT ALLOCATED								
Sex	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Age	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)

Lake County, Tennessee								
	Total		Percent		Male		Percent Male	
Label	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error
Total population	6,898	*****	(X)	(X)	4,382	±56	(X)	(X)
AGE								
Under 5 years	249	±43	3.6%	±0.6	146	±60	3.3%	±1.3
5 to 9 years	223	±73	3.2%	±1.1	73	±40	1.7%	±0.9
10 to 14 years	325	±66	4.7%	±1.0	206	±50	4.7%	±1.1
15 to 19 years	269	±61	3.9%	±0.9	139	±42	3.2%	±0.9
20 to 24 years	568	±138	8.2%	±2.0	421	±133	9.6%	±3.0
25 to 29 years	563	±129	8.2%	±1.9	455	±123	10.4%	±2.8
30 to 34 years	415	±102	6.0%	±1.5	284	±97	6.5%	±2.2
35 to 39 years	584	±127	8.5%	±1.8	439	±120	10.0%	±2.7
40 to 44 years	578	±136	8.4%	±2.0	417	±117	9.5%	±2.7
45 to 49 years	677	±152	9.8%	±2.2	513	±150	11.7%	±3.4
50 to 54 years	442	±60	6.4%	±0.9	278	±48	6.3%	±1.1
55 to 59 years	500	±101	7.2%	±1.5	272	±69	6.2%	±1.6
60 to 64 years	440	±94	6.4%	±1.4	291	±63	6.6%	±1.5
65 to 69 years	325	±66	4.7%	±1.0	154	±49	3.5%	±1.1
70 to 74 years	284	±69	4.1%	±1.0	139	±42	3.2%	±1.0
75 to 79 years	222	±107	3.2%	±1.5	109	±41	2.5%	±0.9
80 to 84 years	145	±57	2.1%	±0.8	35	±24	0.8%	±0.5
85 years and over	89	±58	1.3%	±0.8	11	±10	0.3%	±0.2
SELECTED AGE CATEGORIES								
5 to 14 years	548	±58	7.9%	±0.8	279	±47	6.4%	±1.1
15 to 17 years	190	±38	2.8%	±0.5	116	±39	2.6%	±0.9
Under 18 years	987	±50	14.3%	±0.7	541	±71	12.3%	±1.5
18 to 24 years	647	±149	9.4%	±2.2	444	±138	10.1%	±3.1
15 to 44 years	2,977	±162	43.2%	±2.3	2,155	±156	49.2%	±3.6
16 years and over	6,018	±42	87.2%	±0.6	3,900	±52	89.0%	±1.3
18 years and over	5,911	±50	85.7%	±0.7	3,841	±53	87.7%	±1.5
21 years and over	5,744	±77	83.3%	±1.1	3,771	±67	86.1%	±1.7
60 years and over	1,505	±102	21.8%	±1.5	739	±69	16.9%	±1.6
62 years and over	1,281	±87	18.6%	±1.3	580	±66	13.2%	±1.5
65 years and over	1,065	±39	15.4%	±0.6	448	±40	10.2%	±0.9
75 years and over	456	±38	6.6%	±0.6	155	±26	3.5%	±0.6
SUMMARY INDICATORS								
Median age (years)	41.8	±1.4	(X)	(X)	40.2	±1.2	(X)	(X)
Sex ratio (males per 100 females)	174.2	±6.1	(X)	(X)	(X)	(X)	(X)	(X)
Age dependency ratio	42.3	±1.9	(X)	(X)	(X)	(X)	(X)	(X)
Old-age dependency ratio	22.0	±1.0	(X)	(X)	(X)	(X)	(X)	(X)
Child dependency ratio	20.4	±1.3	(X)	(X)	(X)	(X)	(X)	(X)
PERCENT ALLOCATED								
Sex	(X)	(X)	0.0%	(X)	(X)	(X)	(X)	(X)
Age	(X)	(X)	0.9%	(X)	(X)	(X)	(X)	(X)

					Lauderdale County, Tennessee			
	Female		Percent Female		Total		Percent	
Label	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error
Total population	2,516	±56	(X)	(X)	25,171	*****	(X)	(X)
AGE								
Under 5 years	103	±41	4.1%	±1.6	1,424	±68	5.7%	±0.3
5 to 9 years	150	±55	6.0%	±2.2	1,590	±164	6.3%	±0.7
10 to 14 years	119	±42	4.7%	±1.7	1,565	±182	6.2%	±0.7
15 to 19 years	130	±48	5.2%	±1.9	1,669	±112	6.6%	±0.4
20 to 24 years	147	±48	5.8%	±1.9	1,787	±117	7.1%	±0.5
25 to 29 years	108	±45	4.3%	±1.8	1,775	±70	7.1%	±0.3
30 to 34 years	131	±26	5.2%	±1.0	1,616	±44	6.4%	±0.2
35 to 39 years	145	±39	5.8%	±1.5	1,603	±208	6.4%	±0.8
40 to 44 years	161	±46	6.4%	±1.8	1,855	±217	7.4%	±0.9
45 to 49 years	164	±21	6.5%	±0.8	1,407	±103	5.6%	±0.4
50 to 54 years	164	±27	6.5%	±1.1	1,560	±122	6.2%	±0.5
55 to 59 years	228	±57	9.1%	±2.3	1,806	±187	7.2%	±0.7
60 to 64 years	149	±56	5.9%	±2.2	1,494	±179	5.9%	±0.7
65 to 69 years	171	±44	6.8%	±1.7	1,382	±131	5.5%	±0.5
70 to 74 years	145	±53	5.8%	±2.1	1,048	±130	4.2%	±0.5
75 to 79 years	113	±80	4.5%	±3.2	640	±115	2.5%	±0.5
80 to 84 years	110	±51	4.4%	±2.0	516	±105	2.0%	±0.4
85 years and over	78	±52	3.1%	±2.1	434	±100	1.7%	±0.4
SELECTED AGE CATEGORIES								
5 to 14 years	269	±30	10.7%	±1.1	3,155	±92	12.5%	±0.4
15 to 17 years	74	±27	2.9%	±1.0	1,045	±54	4.2%	±0.2
Under 18 years	446	±53	17.7%	±1.7	5,624	±137	22.3%	±0.5
18 to 24 years	203	±45	8.1%	±1.8	2,411	±130	9.6%	±0.5
15 to 44 years	822	±42	32.7%	±1.5	10,305	±220	40.9%	±0.9
16 years and over	2,118	±25	84.2%	±1.7	20,161	±178	80.1%	±0.7
18 years and over	2,070	±15	82.3%	±1.7	19,547	±137	77.7%	±0.5
21 years and over	1,973	±52	78.4%	±2.1	18,631	±153	74.0%	±0.6
60 years and over	766	±60	30.4%	±2.4	5,514	±184	21.9%	±0.7
62 years and over	701	±45	27.9%	±1.8	4,995	±158	19.8%	±0.6
65 years and over	617	±12	24.5%	±0.7	4,020	±28	16.0%	±0.1
75 years and over	301	±26	12.0%	±1.1	1,590	±27	6.3%	±0.1
SUMMARY INDICATORS								
Median age (years)	47.1	±1.0	(X)	(X)	38.9	±0.6	(X)	(X)
Sex ratio (males per 100 females)	(X)	(X)	(X)	(X)	106.9	±1.4	(X)	(X)
Age dependency ratio	(X)	(X)	(X)	(X)	62.1	±1.5	(X)	(X)
Old-age dependency ratio	(X)	(X)	(X)	(X)	25.9	±0.3	(X)	(X)
Child dependency ratio	(X)	(X)	(X)	(X)	36.2	±1.2	(X)	(X)
PERCENT ALLOCATED								
Sex	(X)	(X)	(X)	(X)	(X)	(X)	0.2%	(X)
Age	(X)	(X)	(X)	(X)	(X)	(X)	1.8%	(X)

	Male		Percent Male		Female		Percent Female	
Label	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error
Total population	13,008	±85	(X)	(X)	12,163	±85	(X)	(X)
AGE								
Under 5 years	756	±54	5.8%	±0.4	668	±32	5.5%	±0.3
5 to 9 years	681	±147	5.2%	±1.1	909	±133	7.5%	±1.1
10 to 14 years	858	±140	6.6%	±1.1	707	±133	5.8%	±1.1
15 to 19 years	887	±95	6.8%	±0.7	782	±55	6.4%	±0.4
20 to 24 years	1,025	±73	7.9%	±0.6	762	±92	6.3%	±0.7
25 to 29 years	1,072	±68	8.2%	±0.5	703	±13	5.8%	±0.1
30 to 34 years	935	±27	7.2%	±0.2	681	±34	5.6%	±0.3
35 to 39 years	887	±166	6.8%	±1.3	716	±118	5.9%	±1.0
40 to 44 years	1,047	±159	8.0%	±1.2	808	±128	6.6%	±1.1
45 to 49 years	700	±103	5.4%	±0.8	707	±25	5.8%	±0.1
50 to 54 years	778	±120	6.0%	±0.9	782	±23	6.4%	±0.2
55 to 59 years	855	±127	6.6%	±1.0	951	±123	7.8%	±1.0
60 to 64 years	758	±120	5.8%	±0.9	736	±124	6.1%	±1.0
65 to 69 years	643	±102	4.9%	±0.8	739	±103	6.1%	±0.8
70 to 74 years	463	±101	3.6%	±0.8	585	±105	4.8%	±0.9
75 to 79 years	285	±90	2.2%	±0.7	355	±84	2.9%	±0.7
80 to 84 years	265	±72	2.0%	±0.6	251	±77	2.1%	±0.6
85 years and over	113	±50	0.9%	±0.4	321	±85	2.6%	±0.7
SELECTED AGE CATEGORIES								
5 to 14 years	1,539	±44	11.8%	±0.3	1,616	±100	13.3%	±0.8
15 to 17 years	517	±34	4.0%	±0.2	528	±55	4.3%	±0.4
Under 18 years	2,812	±86	21.6%	±0.6	2,812	±84	23.1%	±0.7
18 to 24 years	1,395	±77	10.7%	±0.6	1,016	±92	8.4%	±0.7
15 to 44 years	5,853	±168	45.0%	±1.3	4,452	±119	36.6%	±0.9
16 years and over	10,456	±124	80.4%	±0.8	9,705	±147	79.8%	±1.0
18 years and over	10,196	±89	78.4%	±0.6	9,351	±98	76.9%	±0.7
21 years and over	9,617	±128	73.9%	±1.0	9,014	±103	74.1%	±0.8
60 years and over	2,527	±123	19.4%	±1.0	2,987	±126	24.6%	±1.1
62 years and over	2,292	±108	17.6%	±0.8	2,703	±108	22.2%	±0.9
65 years and over	1,769	±28	13.6%	±0.2	2,251	±22	18.5%	±0.2
75 years and over	663	±27	5.1%	±0.2	927	±25	7.6%	±0.1
SUMMARY INDICATORS								
Median age (years)	36.5	±0.8	(X)	(X)	40.7	±0.6	(X)	(X)
Sex ratio (males per 100 females)	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Age dependency ratio	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Old-age dependency ratio	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Child dependency ratio	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
PERCENT ALLOCATED								
Sex	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Age	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)

Obion County, Tennessee								
Label	Total		Percent		Male		Percent Male	
	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error
Total population	30,670	*****	(X)	(X)	14,956	±125	(X)	(X)
AGE								
Under 5 years	1,692	±97	5.5%	±0.3	788	±29	5.3%	±0.2
5 to 9 years	1,899	±219	6.2%	±0.7	1,012	±148	6.8%	±1.0
10 to 14 years	1,938	±226	6.3%	±0.7	943	±145	6.3%	±1.0
15 to 19 years	1,827	±89	6.0%	±0.3	976	±88	6.5%	±0.6
20 to 24 years	1,671	±101	5.4%	±0.3	840	±73	5.6%	±0.5
25 to 29 years	1,827	±122	6.0%	±0.4	897	±87	6.0%	±0.6
30 to 34 years	1,695	±123	5.5%	±0.4	810	±69	5.4%	±0.5
35 to 39 years	1,670	±252	5.4%	±0.8	728	±150	4.9%	±1.0
40 to 44 years	2,135	±275	7.0%	±0.9	1,206	±169	8.1%	±1.1
45 to 49 years	1,834	±99	6.0%	±0.3	898	±60	6.0%	±0.4
50 to 54 years	1,985	±114	6.5%	±0.4	983	±64	6.6%	±0.4
55 to 59 years	2,275	±200	7.4%	±0.7	1,144	±164	7.6%	±1.1
60 to 64 years	1,950	±195	6.4%	±0.6	948	±150	6.3%	±1.0
65 to 69 years	1,937	±170	6.3%	±0.6	870	±108	5.8%	±0.7
70 to 74 years	1,707	±180	5.6%	±0.6	828	±119	5.5%	±0.8
75 to 79 years	1,240	±148	4.0%	±0.5	595	±96	4.0%	±0.6
80 to 84 years	585	±127	1.9%	±0.4	210	±79	1.4%	±0.5
85 years and over	803	±150	2.6%	±0.5	280	±90	1.9%	±0.6
SELECTED AGE CATEGORIES								
5 to 14 years	3,837	±97	12.5%	±0.3	1,955	±97	13.1%	±0.6
15 to 17 years	1,170	±19	3.8%	±0.1	606	±59	4.1%	±0.4
Under 18 years	6,699	±41	21.8%	±0.1	3,349	±112	22.4%	±0.6
18 to 24 years	2,328	±129	7.6%	±0.4	1,210	±93	8.1%	±0.6
15 to 44 years	10,825	±148	35.3%	±0.5	5,457	±99	36.5%	±0.6
16 years and over	24,703	±96	80.5%	±0.3	11,929	±126	79.8%	±0.8
18 years and over	23,971	±41	78.2%	±0.1	11,607	±85	77.6%	±0.6
21 years and over	22,953	±138	74.8%	±0.4	11,048	±115	73.9%	±0.8
60 years and over	8,222	±201	26.8%	±0.7	3,731	±163	24.9%	±1.1
62 years and over	7,520	±172	24.5%	±0.6	3,373	±140	22.6%	±1.0
65 years and over	6,272	±88	20.4%	±0.3	2,783	±74	18.6%	±0.5
75 years and over	2,628	±63	8.6%	±0.2	1,085	±47	7.3%	±0.3
SUMMARY INDICATORS								
Median age (years)	42.3	±0.4	(X)	(X)	41.8	±0.5	(X)	(X)
Sex ratio (males per 100 females)	95.2	±1.5	(X)	(X)	(X)	(X)	(X)	(X)
Age dependency ratio	73.3	±1.1	(X)	(X)	(X)	(X)	(X)	(X)
Old-age dependency ratio	35.4	±0.7	(X)	(X)	(X)	(X)	(X)	(X)
Child dependency ratio	37.8	±0.4	(X)	(X)	(X)	(X)	(X)	(X)
PERCENT ALLOCATED								
Sex	(X)	(X)	0.0%	(X)	(X)	(X)	(X)	(X)
Age	(X)	(X)	0.6%	(X)	(X)	(X)	(X)	(X)

					Shelby County, Tennessee			
	Female		Percent Female		Total		Percent	
Label	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error
Total population	15,714	±125	(X)	(X)	926,440	*****	(X)	(X)
AGE								
Under 5 years	904	±98	5.8%	±0.6	62,878	±54	6.8%	±0.1
5 to 9 years	887	±145	5.6%	±0.9	63,871	±2,059	6.9%	±0.2
10 to 14 years	995	±154	6.3%	±1.0	66,596	±2,062	7.2%	±0.2
15 to 19 years	851	±84	5.4%	±0.5	60,519	±88	6.5%	±0.1
20 to 24 years	831	±70	5.3%	±0.5	61,800	±118	6.7%	±0.1
25 to 29 years	930	±77	5.9%	±0.5	70,550	±114	7.6%	±0.1
30 to 34 years	885	±89	5.6%	±0.6	66,339	±61	7.2%	±0.1
35 to 39 years	942	±185	6.0%	±1.2	58,895	±1,842	6.4%	±0.2
40 to 44 years	929	±172	5.9%	±1.1	58,189	±1,846	6.3%	±0.2
45 to 49 years	936	±68	6.0%	±0.4	55,705	±54	6.0%	±0.1
50 to 54 years	1,002	±75	6.4%	±0.5	56,159	±59	6.1%	±0.1
55 to 59 years	1,131	±95	7.2%	±0.6	55,128	±1,786	6.0%	±0.2
60 to 64 years	1,002	±104	6.4%	±0.7	58,058	±1,787	6.3%	±0.2
65 to 69 years	1,067	±157	6.8%	±1.0	46,501	±1,153	5.0%	±0.1
70 to 74 years	879	±139	5.6%	±0.9	35,804	±1,154	3.9%	±0.1
75 to 79 years	645	±101	4.1%	±0.6	22,558	±1,083	2.4%	±0.1
80 to 84 years	375	±89	2.4%	±0.6	12,963	±733	1.4%	±0.1
85 years and over	523	±107	3.3%	±0.7	13,927	±922	1.5%	±0.1
SELECTED AGE CATEGORIES								
5 to 14 years	1,882	±29	12.0%	±0.2	130,467	±58	14.1%	±0.1
15 to 17 years	564	±64	3.6%	±0.4	37,921	±24	4.1%	±0.1
Under 18 years	3,350	±112	21.3%	±0.6	231,266	±38	25.0%	±0.1
18 to 24 years	1,118	±79	7.1%	±0.5	84,398	±110	9.1%	±0.1
15 to 44 years	5,368	±131	34.2%	±0.8	376,292	±73	40.6%	±0.1
16 years and over	12,774	±128	81.3%	±0.8	721,643	±913	77.9%	±0.1
18 years and over	12,364	±68	78.7%	±0.6	695,174	±38	75.0%	±0.1
21 years and over	11,905	±104	75.8%	±0.8	660,475	±1,020	71.3%	±0.1
60 years and over	4,491	±117	28.6%	±0.7	189,811	±1,786	20.5%	±0.2
62 years and over	4,147	±106	26.4%	±0.7	166,316	±1,635	18.0%	±0.2
65 years and over	3,489	±66	22.2%	±0.4	131,753	±11	14.2%	±0.1
75 years and over	1,543	±42	9.8%	±0.3	49,448	±3	5.3%	±0.1
SUMMARY INDICATORS								
Median age (years)	42.9	±1.1	(X)	(X)	35.9	±0.1	(X)	(X)
Sex ratio (males per 100 females)	(X)	(X)	(X)	(X)	91.1	±0.1	(X)	(X)
Age dependency ratio	(X)	(X)	(X)	(X)	64.4	±0.1	(X)	(X)
Old-age dependency ratio	(X)	(X)	(X)	(X)	23.4	±0.1	(X)	(X)
Child dependency ratio	(X)	(X)	(X)	(X)	41.0	±0.1	(X)	(X)
PERCENT ALLOCATED								
Sex	(X)	(X)	(X)	(X)	(X)	(X)	0.0%	(X)
Age	(X)	(X)	(X)	(X)	(X)	(X)	1.4%	(X)

	Male		Percent Male		Female		Percent Female	
Label	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error
Total population	441,579	±62	(X)	(X)	484,861	±62	(X)	(X)
AGE								
Under 5 years	31,760	±52	7.2%	±0.1	31,118	±22	6.4%	±0.1
5 to 9 years	32,655	±1,520	7.4%	±0.3	31,216	±1,458	6.4%	±0.3
10 to 14 years	33,872	±1,524	7.7%	±0.3	32,724	±1,457	6.7%	±0.3
15 to 19 years	30,534	±45	6.9%	±0.1	29,985	±81	6.2%	±0.1
20 to 24 years	30,429	±73	6.9%	±0.1	31,371	±87	6.5%	±0.1
25 to 29 years	34,045	±64	7.7%	±0.1	36,505	±89	7.5%	±0.1
30 to 34 years	31,804	±61	7.2%	±0.1	34,535	±4	7.1%	±0.1
35 to 39 years	27,828	±1,279	6.3%	±0.3	31,067	±1,218	6.4%	±0.3
40 to 44 years	27,978	±1,270	6.3%	±0.3	30,211	±1,238	6.2%	±0.3
45 to 49 years	26,373	±6	6.0%	±0.1	29,332	±54	6.0%	±0.1
50 to 54 years	26,675	±7	6.0%	±0.1	29,484	±58	6.1%	±0.1
55 to 59 years	25,695	±1,125	5.8%	±0.3	29,433	±1,304	6.1%	±0.3
60 to 64 years	26,793	±1,125	6.1%	±0.3	31,265	±1,304	6.4%	±0.3
65 to 69 years	20,373	±682	4.6%	±0.2	26,128	±792	5.4%	±0.2
70 to 74 years	16,301	±682	3.7%	±0.2	19,503	±792	4.0%	±0.2
75 to 79 years	9,712	±564	2.2%	±0.1	12,846	±852	2.6%	±0.2
80 to 84 years	4,689	±437	1.1%	±0.1	8,274	±585	1.7%	±0.1
85 years and over	4,063	±410	0.9%	±0.1	9,864	±760	2.0%	±0.2
SELECTED AGE CATEGORIES								
5 to 14 years	66,527	±61	15.1%	±0.1	63,940	±27	13.2%	±0.1
15 to 17 years	19,083	±26	4.3%	±0.1	18,838	±36	3.9%	±0.1
Under 18 years	117,370	±35	26.6%	±0.1	113,896	±52	23.5%	±0.1
18 to 24 years	41,880	±70	9.5%	±0.1	42,518	±84	8.8%	±0.1
15 to 44 years	182,618	±54	41.4%	±0.1	193,674	±80	39.9%	±0.1
16 years and over	337,250	±643	76.4%	±0.1	384,393	±670	79.3%	±0.1
18 years and over	324,209	±48	73.4%	±0.1	370,965	±21	76.5%	±0.1
21 years and over	306,749	±724	69.5%	±0.2	353,726	±688	73.0%	±0.1
60 years and over	81,931	±1,124	18.6%	±0.3	107,880	±1,304	22.2%	±0.3
62 years and over	71,607	±985	16.2%	±0.2	94,709	±1,072	19.5%	±0.2
65 years and over	55,138	±4	12.5%	±0.1	76,615	±9	15.8%	±0.1
75 years and over	18,464	±2	4.2%	±0.1	30,984	±3	6.4%	±0.1
SUMMARY INDICATORS								
Median age (years)	34.3	±0.2	(X)	(X)	37.5	±0.2	(X)	(X)
Sex ratio (males per 100 females)	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Age dependency ratio	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Old-age dependency ratio	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Child dependency ratio	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
PERCENT ALLOCATED								
Sex	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Age	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)

Tipton County, Tennessee								
	Total		Percent		Male		Percent Male	
Label	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error
Total population	61,116	*****	(X)	(X)	30,274	±120	(X)	(X)
AGE								
Under 5 years	3,396	±81	5.6%	±0.1	1,706	±64	5.6%	±0.2
5 to 9 years	3,766	±348	6.2%	±0.6	2,001	±290	6.6%	±1.0
10 to 14 years	4,777	±387	7.8%	±0.6	2,411	±293	8.0%	±1.0
15 to 19 years	4,215	±127	6.9%	±0.2	2,134	±53	7.0%	±0.2
20 to 24 years	3,688	±176	6.0%	±0.3	1,927	±114	6.4%	±0.4
25 to 29 years	3,770	±119	6.2%	±0.2	1,975	±113	6.5%	±0.4
30 to 34 years	4,024	±144	6.6%	±0.2	1,942	±81	6.4%	±0.3
35 to 39 years	4,134	±483	6.8%	±0.8	2,002	±334	6.6%	±1.1
40 to 44 years	3,843	±483	6.3%	±0.8	1,959	±349	6.5%	±1.2
45 to 49 years	3,841	±122	6.3%	±0.2	1,961	±123	6.5%	±0.4
50 to 54 years	4,105	±53	6.7%	±0.1	2,032	±34	6.7%	±0.1
55 to 59 years	4,352	±396	7.1%	±0.6	2,131	±241	7.0%	±0.8
60 to 64 years	4,053	±389	6.6%	±0.6	1,973	±246	6.5%	±0.8
65 to 69 years	3,152	±299	5.2%	±0.5	1,731	±211	5.7%	±0.7
70 to 74 years	2,533	±301	4.1%	±0.5	955	±200	3.2%	±0.7
75 to 79 years	1,510	±232	2.5%	±0.4	573	±143	1.9%	±0.5
80 to 84 years	1,328	±204	2.2%	±0.3	634	±155	2.1%	±0.5
85 years and over	629	±135	1.0%	±0.2	227	±84	0.7%	±0.3
SELECTED AGE CATEGORIES								
5 to 14 years	8,543	±108	14.0%	±0.2	4,412	±89	14.6%	±0.3
15 to 17 years	2,741	±60	4.5%	±0.1	1,388	±51	4.6%	±0.2
Under 18 years	14,680	±53	24.0%	±0.1	7,506	±110	24.8%	±0.3
18 to 24 years	5,162	±142	8.4%	±0.2	2,673	±113	8.8%	±0.4
15 to 44 years	23,674	±118	38.7%	±0.2	11,939	±146	39.4%	±0.5
16 years and over	48,275	±185	79.0%	±0.3	23,725	±139	78.4%	±0.5
18 years and over	46,436	±53	76.0%	±0.1	22,768	±92	75.2%	±0.3
21 years and over	44,296	±200	72.5%	±0.3	21,693	±139	71.7%	±0.4
60 years and over	13,205	±396	21.6%	±0.6	6,093	±248	20.1%	±0.8
62 years and over	11,490	±380	18.8%	±0.6	5,358	±235	17.7%	±0.8
65 years and over	9,152	±78	15.0%	±0.1	4,120	±52	13.6%	±0.2
75 years and over	3,467	±100	5.7%	±0.2	1,434	±92	4.7%	±0.3
SUMMARY INDICATORS								
Median age (years)	38.4	±0.8	(X)	(X)	37.2	±0.9	(X)	(X)
Sex ratio (males per 100 females)	98.2	±0.8	(X)	(X)	(X)	(X)	(X)	(X)
Age dependency ratio	63.9	±0.4	(X)	(X)	(X)	(X)	(X)	(X)
Old-age dependency ratio	24.5	±0.3	(X)	(X)	(X)	(X)	(X)	(X)
Child dependency ratio	39.4	±0.2	(X)	(X)	(X)	(X)	(X)	(X)
PERCENT ALLOCATED								
Sex	(X)	(X)	0.0%	(X)	(X)	(X)	(X)	(X)
Age	(X)	(X)	2.5%	(X)	(X)	(X)	(X)	(X)

		Weakley County, Tennessee							
		Female		Percent Female		Total		Percent	
Label	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	
Total population	30,842	±120	(X)	(X)	32,946	*****	(X)	(X)	
AGE									
Under 5 years	1,690	±35	5.5%	±0.1	1,557	±52	4.7%	±0.2	
5 to 9 years	1,765	±184	5.7%	±0.6	1,886	±205	5.7%	±0.6	
10 to 14 years	2,366	±218	7.7%	±0.7	1,611	±199	4.9%	±0.6	
15 to 19 years	2,081	±118	6.7%	±0.4	2,925	±136	8.9%	±0.4	
20 to 24 years	1,761	±119	5.7%	±0.4	3,845	±165	11.7%	±0.5	
25 to 29 years	1,795	±46	5.8%	±0.1	2,100	±185	6.4%	±0.6	
30 to 34 years	2,082	±101	6.8%	±0.3	1,583	±96	4.8%	±0.3	
35 to 39 years	2,132	±255	6.9%	±0.8	1,518	±245	4.6%	±0.7	
40 to 44 years	1,884	±259	6.1%	±0.8	1,968	±267	6.0%	±0.8	
45 to 49 years	1,880	±16	6.1%	±0.1	1,764	±77	5.4%	±0.2	
50 to 54 years	2,073	±48	6.7%	±0.2	2,028	±103	6.2%	±0.3	
55 to 59 years	2,221	±252	7.2%	±0.8	2,091	±216	6.3%	±0.7	
60 to 64 years	2,080	±244	6.7%	±0.8	1,998	±208	6.1%	±0.6	
65 to 69 years	1,421	±200	4.6%	±0.6	1,869	±215	5.7%	±0.7	
70 to 74 years	1,578	±196	5.1%	±0.6	1,589	±201	4.8%	±0.6	
75 to 79 years	937	±162	3.0%	±0.5	1,152	±136	3.5%	±0.4	
80 to 84 years	694	±156	2.3%	±0.5	623	±129	1.9%	±0.4	
85 years and over	402	±109	1.3%	±0.4	839	±126	2.5%	±0.4	
SELECTED AGE CATEGORIES									
5 to 14 years	4,131	±113	13.4%	±0.3	3,497	±94	10.6%	±0.3	
15 to 17 years	1,353	±49	4.4%	±0.2	1,115	±46	3.4%	±0.1	
Under 18 years	7,174	±96	23.3%	±0.3	6,169	±67	18.7%	±0.2	
18 to 24 years	2,489	±69	8.1%	±0.2	5,655	±173	17.2%	±0.5	
15 to 44 years	11,735	±101	38.0%	±0.3	13,939	±124	42.3%	±0.4	
16 years and over	24,550	±185	79.6%	±0.5	27,581	±115	83.7%	±0.3	
18 years and over	23,668	±99	76.7%	±0.3	26,777	±67	81.3%	±0.2	
21 years and over	22,603	±186	73.3%	±0.6	23,961	±258	72.7%	±0.8	
60 years and over	7,112	±245	23.1%	±0.8	8,070	±226	24.5%	±0.7	
62 years and over	6,132	±238	19.9%	±0.8	7,315	±217	22.2%	±0.7	
65 years and over	5,032	±54	16.3%	±0.2	6,072	±96	18.4%	±0.3	
75 years and over	2,033	±48	6.6%	±0.2	2,614	±94	7.9%	±0.3	
SUMMARY INDICATORS									
Median age (years)	39.2	±0.8	(X)	(X)	37.9	±0.7	(X)	(X)	
Sex ratio (males per 100 females)	(X)	(X)	(X)	(X)	97.8	±1.5	(X)	(X)	
Age dependency ratio	(X)	(X)	(X)	(X)	59.1	±0.7	(X)	(X)	
Old-age dependency ratio	(X)	(X)	(X)	(X)	29.3	±0.6	(X)	(X)	
Child dependency ratio	(X)	(X)	(X)	(X)	29.8	±0.4	(X)	(X)	
PERCENT ALLOCATED									
Sex	(X)	(X)	(X)	(X)	(X)	(X)	0.0%	(X)	
Age	(X)	(X)	(X)	(X)	(X)	(X)	0.7%	(X)	

	Male		Percent Male		Female		Percent Female	
Label	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error
Total population	16,288	±130	(X)	(X)	16,658	±130	(X)	(X)
AGE								
Under 5 years	831	±67	5.1%	±0.4	726	±52	4.4%	±0.3
5 to 9 years	1,073	±152	6.6%	±0.9	813	±143	4.9%	±0.8
10 to 14 years	750	±146	4.6%	±0.9	861	±129	5.2%	±0.8
15 to 19 years	1,480	±108	9.1%	±0.7	1,445	±102	8.7%	±0.6
20 to 24 years	1,929	±105	11.8%	±0.6	1,916	±114	11.5%	±0.7
25 to 29 years	1,074	±89	6.6%	±0.5	1,026	±141	6.2%	±0.8
30 to 34 years	751	±25	4.6%	±0.2	832	±93	5.0%	±0.6
35 to 39 years	672	±161	4.1%	±1.0	846	±181	5.1%	±1.1
40 to 44 years	978	±174	6.0%	±1.1	990	±173	5.9%	±1.0
45 to 49 years	905	±63	5.6%	±0.4	859	±40	5.2%	±0.2
50 to 54 years	1,065	±78	6.5%	±0.5	963	±63	5.8%	±0.4
55 to 59 years	1,008	±158	6.2%	±1.0	1,083	±133	6.5%	±0.8
60 to 64 years	1,026	±139	6.3%	±0.9	972	±139	5.8%	±0.8
65 to 69 years	904	±159	5.6%	±1.0	965	±136	5.8%	±0.8
70 to 74 years	775	±143	4.8%	±0.9	814	±130	4.9%	±0.8
75 to 79 years	451	±90	2.8%	±0.6	701	±101	4.2%	±0.6
80 to 84 years	285	±74	1.7%	±0.5	338	±93	2.0%	±0.6
85 years and over	331	±94	2.0%	±0.6	508	±84	3.0%	±0.5
SELECTED AGE CATEGORIES								
5 to 14 years	1,823	±65	11.2%	±0.4	1,674	±60	10.0%	±0.3
15 to 17 years	614	±45	3.8%	±0.3	501	±34	3.0%	±0.2
Under 18 years	3,268	±71	20.1%	±0.4	2,901	±83	17.4%	±0.4
18 to 24 years	2,795	±75	17.2%	±0.5	2,860	±138	17.2%	±0.8
15 to 44 years	6,884	±103	42.3%	±0.6	7,055	±101	42.4%	±0.5
16 years and over	13,429	±147	82.4%	±0.6	14,152	±104	85.0%	±0.5
18 years and over	13,020	±125	79.9%	±0.4	13,757	±103	82.6%	±0.4
21 years and over	11,648	±230	71.5%	±1.2	12,313	±216	73.9%	±1.2
60 years and over	3,772	±163	23.2%	±1.0	4,298	±145	25.8%	±0.9
62 years and over	3,410	±178	20.9%	±1.0	3,905	±116	23.4%	±0.7
65 years and over	2,746	±96	16.9%	±0.5	3,326	±43	20.0%	±0.3
75 years and over	1,067	±58	6.6%	±0.3	1,547	±56	9.3%	±0.3
SUMMARY INDICATORS								
Median age (years)	35.9	±1.0	(X)	(X)	39.1	±1.1	(X)	(X)
Sex ratio (males per 100 females)	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Age dependency ratio	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Old-age dependency ratio	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Child dependency ratio	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
PERCENT ALLOCATED								
Sex	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Age	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)

Attachment 3N-3
TennCare Enrollment Report

TennCare Enrollment Report for January 2024

MCO	Region	Total
BLUECARE	East Tennessee	237,320
BLUECARE	Middle Tennessee	195,236
BLUECARE	West Tennessee	166,869
UNITEDHEALTHCARE COMMUNITY PLAN	East Tennessee	157,304
UNITEDHEALTHCARE COMMUNITY PLAN	Middle Tennessee	192,099
UNITEDHEALTHCARE COMMUNITY PLAN	West Tennessee	132,517
TENNCARE SELECT LOW	All	17,782
TENNCARE SELECT HIGH	All	28,191
PACE		277
KBB under DIDD Program		2,985
WELLPOINT	East Tennessee	157,578
WELLPOINT	Middle Tennessee	190,710
WELLPOINT	West Tennessee	132,812
Grand Total		1,611,680

County	Female					Male					Grand Total
	0 - 18	19 - 20	21 - 64	65 - ->	Total	0 - 18	19 - 20	21 - 64	65 - ->	Total	
ANDERSON	4,723	391	4,709	642	10,465	5,044	313	2,130	339	7,826	18,291
BEDFORD	4,216	310	3,301	321	8,148	4,263	246	1,256	166	5,931	14,079
BENTON	1,132	86	1,297	179	2,694	1,209	82	574	99	1,964	4,658
BLEDSON	864	58	889	129	1,940	920	70	474	95	1,559	3,499
BLOUNT	6,426	511	6,298	706	13,941	6,676	444	2,594	394	10,108	24,049
BRADLEY	6,957	500	6,778	758	14,993	7,337	461	2,728	416	10,942	25,935
CAMPBELL	2,910	243	3,546	644	7,343	3,163	242	1,801	409	5,615	12,958
CANNON	869	52	909	136	1,966	907	62	413	64	1,446	3,412
CARROLL	1,853	143	2,138	327	4,461	1,998	124	1,043	172	3,337	7,798
CARTER	3,177	256	3,706	618	7,757	3,359	237	1,946	317	5,859	13,616
CHEATHAM	2,045	158	1,896	202	4,301	2,030	142	768	114	3,054	7,355
CHESTER	1,035	88	1,080	140	2,343	1,130	66	444	77	1,717	4,060
CLAIBORNE	2,186	209	2,592	539	5,526	2,315	153	1,412	346	4,226	9,752
CLAY	522	44	539	123	1,228	539	41	297	59	936	2,164
COCKE	2,931	221	3,446	532	7,130	3,066	209	1,697	321	5,293	12,423
COFFEE	4,045	303	4,278	449	9,075	4,270	284	1,692	271	6,517	15,592
CROCKETT	1,023	81	1,005	183	2,292	1,078	61	444	86	1,669	3,961
CUMBERLAND	3,569	256	3,609	526	7,960	3,824	237	1,768	311	6,140	14,100
DAVIDSON	43,225	2,740	34,442	3,894	84,301	44,529	2,485	13,984	2,585	63,583	147,884
DECATUR	749	61	849	169	1,828	837	50	421	76	1,384	3,212
DEKALB	1,498	120	1,527	206	3,351	1,560	113	713	121	2,507	5,858
DICKSON	3,271	248	3,328	367	7,214	3,444	239	1,345	240	5,268	12,482
DYER	2,899	226	3,209	424	6,758	3,118	179	1,284	210	4,791	11,549
FAYETTE	1,914	142	1,978	296	4,330	2,032	138	766	180	3,116	7,446

County	Female					Male					Grand Total
	0 - 18	19 - 20	21 - 64	65 - ->	Total	0 - 18	19 - 20	21 - 64	65 - ->	Total	
FENTRESS	1,524	128	1,633	319	3,604	1,535	83	962	221	2,801	6,405
FRANKLIN	2,236	195	2,380	310	5,121	2,343	154	1,056	149	3,702	8,823
GIBSON	3,524	333	3,836	538	8,231	3,681	229	1,562	292	5,764	13,995
GILES	1,829	131	1,912	232	4,104	1,857	103	833	156	2,949	7,053
GRAINGER	1,567	123	1,699	283	3,672	1,637	115	901	159	2,812	6,484
GREENE	4,251	363	4,851	675	10,140	4,549	304	2,333	405	7,591	17,731
GRUNDY	1,024	89	1,304	239	2,656	1,165	80	658	142	2,045	4,701
HAMBLEN	5,350	372	4,424	516	10,662	5,410	313	1,827	283	7,833	18,495
HAMILTON	20,297	1,398	18,634	2,670	42,999	21,142	1,197	7,397	1,545	31,281	74,280
HANCOCK	563	24	631	143	1,361	590	51	325	87	1,053	2,414
HARDEMAN	1,850	140	2,088	357	4,435	1,829	120	984	181	3,114	7,549
HARDIN	1,799	142	2,088	377	4,406	1,872	127	1,038	202	3,239	7,645
HAWKINS	3,645	320	4,091	525	8,581	3,905	269	1,963	331	6,468	15,049
HAYWOOD	1,384	111	1,550	279	3,324	1,469	102	559	154	2,284	5,608
HENDERSON	2,005	147	2,141	276	4,569	2,118	145	947	129	3,339	7,908
HENRY	2,126	146	2,348	280	4,900	2,227	135	1,080	175	3,617	8,517
HICKMAN	1,554	110	1,595	182	3,441	1,633	117	770	130	2,650	6,091
HOUSTON	543	42	636	99	1,320	597	47	297	52	993	2,313
HUMPHREYS	1,231	96	1,308	156	2,791	1,309	83	545	107	2,044	4,835
JACKSON	773	64	867	138	1,842	759	56	408	97	1,320	3,162
JEFFERSON	3,803	271	3,716	517	8,307	3,996	241	1,622	257	6,116	14,423
JOHNSON	1,098	84	1,198	250	2,630	1,137	72	679	158	2,046	4,676
KNOX	23,523	1,762	22,668	2,818	50,771	24,310	1,547	9,394	1,632	36,883	87,654
LAKE	484	36	581	132	1,233	509	44	290	69	912	2,145
LAUDERDALE	2,032	162	2,275	293	4,762	2,055	147	956	151	3,309	8,071
LAWRENCE	3,064	239	3,135	420	6,858	3,244	186	1,393	216	5,039	11,897
LEWIS	869	77	907	121	1,974	890	79	395	71	1,435	3,409
LINCOLN	2,246	198	2,213	273	4,930	2,308	157	948	164	3,577	8,507
LOUDON	2,953	226	2,581	308	6,068	3,104	168	1,105	189	4,566	10,634
MACON	2,087	158	1,870	209	4,324	2,218	127	824	121	3,290	7,614
MADISON	7,197	560	7,333	908	15,998	7,576	470	2,868	536	11,450	27,448
MARION	1,835	160	2,062	304	4,361	1,911	119	886	170	3,086	7,447
MARSHALL	2,162	152	2,067	217	4,598	2,221	132	824	106	3,283	7,881
MAURY	6,254	430	5,245	578	12,507	6,595	365	2,077	287	9,324	21,831
MCMINN	3,738	299	3,956	520	8,513	3,988	249	1,691	274	6,202	14,715
MCAIRY	1,787	155	2,047	350	4,339	1,864	127	980	182	3,153	7,492
MEIGS	931	82	1,027	101	2,141	949	59	511	76	1,595	3,736
MONROE	3,154	267	3,413	482	7,316	3,322	242	1,581	290	5,435	12,751
MONTGOMERY	14,269	982	13,528	961	29,740	14,865	837	4,353	433	20,488	50,228
MOORE	282	23	269	39	613	298	9	98	23	428	1,041
MORGAN	1,232	108	1,336	213	2,889	1,292	87	625	112	2,116	5,005

County	Female					Male					Grand Total
	0 - 18	19 - 20	21 - 64	65 - ->	Total	0 - 18	19 - 20	21 - 64	65 - ->	Total	
OBION	2,148	167	2,329	317	4,961	2,185	114	1,041	188	3,528	8,489
OVERTON	1,365	93	1,399	221	3,078	1,506	106	725	134	2,471	5,549
PERRY	528	46	576	88	1,238	604	39	281	57	981	2,219
PICKETT	291	24	318	62	695	283	21	189	48	541	1,236
POLK	1,038	95	1,158	160	2,451	1,052	71	589	106	1,818	4,269
PUTNAM	5,646	410	4,989	712	11,757	5,896	348	2,459	364	9,067	20,824
RHEA	2,437	192	2,554	373	5,556	2,599	162	1,127	212	4,100	9,656
ROANE	3,044	232	3,483	496	7,255	3,327	222	1,671	304	5,524	12,779
ROBERTSON	4,400	288	3,566	387	8,641	4,572	259	1,295	196	6,322	14,963
RUTHERFORD	21,006	1,377	16,737	1,342	40,462	21,801	1,165	5,883	682	29,531	69,993
SCOTT	1,960	183	2,138	317	4,598	1,995	127	1,059	200	3,381	7,979
SEQUATCHIE	1,050	90	1,156	180	2,476	1,117	74	526	86	1,803	4,279
SEVIER	6,296	447	5,538	531	12,812	6,763	403	2,350	267	9,783	22,595
SHELBY	76,723	5,362	70,420	7,849	160,354	79,448	4,694	24,292	5,150	113,584	273,938
SMITH	1,233	75	1,304	173	2,785	1,309	86	509	104	2,008	4,793
STEWART	902	61	857	120	1,940	889	62	422	54	1,427	3,367
SULLIVAN	8,838	707	9,939	1,363	20,847	9,268	616	4,662	742	15,288	36,135
SUMNER	9,651	641	8,844	898	20,034	10,137	567	3,202	475	14,381	34,415
TIPTON	3,709	290	3,818	420	8,237	3,692	244	1,428	223	5,587	13,824
TROUSDALE	614	36	578	83	1,311	609	31	238	50	928	2,239
UNICOI	931	89	1,135	236	2,391	1,027	87	536	139	1,789	4,180
UNION	1,442	116	1,529	212	3,299	1,515	112	728	134	2,489	5,788
VAN BUREN	382	27	383	84	876	391	28	202	49	670	1,546
WARREN	3,236	238	3,341	480	7,295	3,329	213	1,574	254	5,370	12,665
WASHINGTON	6,893	520	7,246	1,052	15,711	7,194	444	3,345	595	11,578	27,289
WAYNE	810	74	962	139	1,985	955	81	441	97	1,574	3,559
WEAKLEY	2,040	161	2,043	307	4,551	2,130	128	941	186	3,385	7,936
WHITE	1,878	167	2,078	309	4,432	2,182	149	1,046	193	3,570	8,002
WILLIAMSON	4,444	327	3,631	430	8,832	4,844	318	1,644	211	7,017	15,849
WILSON	6,871	497	6,048	528	13,944	7,119	404	2,414	314	10,251	24,195
Other	3,639	261	3,723	184	7,807	3,639	297	1,475	116	5,527	13,334
GRAND TOTAL	433,559	31,645	414,612	51,171	930,987	452,304	27,644	170,833	29,912	680,693	1,611,680

Reports include some membership additions that are the result of retroactivity, however, additional retroactivity may still occur. The Other county category reflects recipients who are Tennessee residents for which their domicile is temporarily located outside of the state.

Notes: Cost amounts for Dental, Pharmacy, and TennCare Select are based on claims from our invoice tables with paid date in January 2024. These claims may have been incurred at any time in or before January 2024. The county information is based on the most recent county information for the recipient associated with each claim or capitation payment.

County	Capitation	Dental	Pharmacy	TennCare Select	Grand Total
ANDERSON	\$6,995,736.06	\$74,697.20	\$1,910,498.29	\$367,073.19	\$9,348,004.74
BEDFORD	\$4,888,337.47	\$78,108.82	\$1,134,472.43	\$41,912.05	\$6,142,830.77
BENTON	\$1,567,489.93	\$20,725.51	\$519,566.29	\$17,252.73	\$2,125,034.46
BLEDSON	\$1,250,335.06	\$10,579.96	\$331,243.49	\$32,038.84	\$1,624,197.35
BLOUNT	\$8,686,985.19	\$74,406.87	\$2,779,022.58	\$241,705.50	\$11,782,120.14
BRADLEY	\$9,207,335.82	\$182,202.70	\$2,934,786.98	\$282,755.54	\$12,607,081.04
CAMPBELL	\$5,592,301.94	\$29,665.53	\$1,467,106.80	\$78,608.01	\$7,167,682.28
CANNON	\$1,394,012.32	\$11,264.38	\$442,538.93	\$19,491.03	\$1,867,306.66
CARROLL	\$3,414,308.67	\$21,284.04	\$810,181.02	\$52,916.81	\$4,298,690.54
CARTER	\$5,933,374.22	\$52,308.22	\$1,477,027.21	\$102,029.70	\$7,564,739.35
CHEATHAM	\$2,818,022.04	\$49,452.58	\$844,830.06	\$136,289.08	\$3,848,593.76
CHESTER	\$1,449,723.91	\$15,518.26	\$465,560.57	\$2,707.23	\$1,933,509.97
CLAIBORNE	\$4,288,626.36	\$24,067.27	\$1,157,697.82	\$81,709.75	\$5,552,101.20
CLAY	\$1,042,955.74	\$15,062.74	\$163,432.92	\$2,568.41	\$1,224,019.81
COCKE	\$4,553,414.38	\$40,429.56	\$1,396,563.24	\$189,029.26	\$6,179,436.44
COFFEE	\$5,904,394.23	\$83,639.92	\$1,427,903.16	\$137,281.30	\$7,553,218.61
CROCKETT	\$1,741,126.77	\$11,455.22	\$404,722.87	\$68,314.71	\$2,225,619.57
CUMBERLAND	\$5,647,431.72	\$84,436.63	\$1,332,115.58	\$125,409.01	\$7,189,392.94
DAVIDSON	\$55,344,539.22	\$870,713.78	\$9,380,224.20	\$1,715,843.75	\$67,311,320.95
DECATUR	\$1,441,311.34	\$16,371.02	\$380,437.11	\$11,250.66	\$1,849,370.13
DEKALB	\$2,280,173.29	\$30,857.03	\$792,859.30	\$48,580.12	\$3,152,469.74
DICKSON	\$4,946,870.28	\$49,250.91	\$1,333,702.35	\$160,981.14	\$6,490,804.68
DYER	\$4,299,996.65	\$44,639.15	\$1,110,810.86	\$142,586.43	\$5,598,033.09
FAYETTE	\$2,894,538.15	\$35,557.84	\$459,268.24	\$93,833.81	\$3,483,198.04
FENTRESS	\$2,545,067.36	\$35,987.18	\$702,541.20	\$63,346.95	\$3,346,942.69
FRANKLIN	\$3,376,158.61	\$47,532.52	\$894,784.54	\$25,430.15	\$4,343,905.82
GIBSON	\$5,719,503.77	\$43,808.02	\$1,536,010.03	\$202,796.03	\$7,502,117.85
GILES	\$3,149,504.36	\$28,588.32	\$592,525.91	\$35,521.21	\$3,806,139.80
GRAINGER	\$2,479,281.47	\$21,859.60	\$710,039.06	\$78,846.79	\$3,290,026.92
GREENE	\$7,054,689.67	\$52,065.95	\$2,254,157.94	\$245,810.14	\$9,606,723.70
GRUNDY	\$1,938,500.45	\$26,685.20	\$427,213.87	\$22,287.56	\$2,414,687.08
HAMBLEN	\$6,588,124.67	\$84,299.59	\$1,945,163.94	\$208,752.73	\$8,826,340.93
HAMILTON	\$31,139,541.90	\$406,697.07	\$7,745,097.02	\$1,150,367.20	\$40,441,703.19
HANCOCK	\$985,026.54	\$9,299.98	\$328,807.19	\$49,359.38	\$1,372,493.09
HARDEMAN	\$2,985,435.38	\$22,316.85	\$996,992.37	\$65,125.67	\$4,069,870.27
HARDIN	\$3,255,323.40	\$26,756.49	\$856,344.13	\$37,857.71	\$4,176,281.73
HAWKINS	\$5,739,702.38	\$52,648.09	\$1,816,449.21	\$99,330.45	\$7,708,130.13
HAYWOOD	\$2,263,257.08	\$26,489.19	\$421,909.91	\$74,071.13	\$2,785,727.31
HENDERSON	\$2,901,908.73	\$40,074.83	\$973,490.07	\$104,529.65	\$4,020,003.28
HENRY	\$3,224,821.80	\$41,881.99	\$916,776.91	\$79,213.86	\$4,262,694.56
HICKMAN	\$2,315,964.58	\$20,525.87	\$581,257.66	\$37,371.72	\$2,955,119.83
HOUSTON	\$1,120,863.27	\$9,401.46	\$159,063.20	\$19,655.86	\$1,308,983.79
HUMPHREYS	\$1,856,480.80	\$25,368.43	\$387,827.98	\$134,102.66	\$2,403,779.87
JACKSON	\$1,369,447.25	\$18,589.73	\$391,844.75	\$38,032.91	\$1,817,914.64
JEFFERSON	\$5,883,213.37	\$53,583.26	\$1,582,372.67	\$114,413.30	\$7,633,582.60
JOHNSON	\$2,068,593.30	\$10,399.34	\$396,077.67	\$69,068.28	\$2,544,138.59
KNOX	\$32,804,460.06	\$300,277.87	\$8,908,943.14	\$952,965.06	\$42,966,646.13
LAKE	\$1,237,431.98	\$7,267.17	\$258,874.32	\$10,027.59	\$1,513,601.06
LAUDERDALE	\$2,839,841.05	\$31,420.76	\$672,529.78	\$45,902.94	\$3,589,694.53
LAWRENCE	\$4,894,328.00	\$68,526.95	\$1,102,811.14	\$62,381.49	\$6,128,047.58
LEWIS	\$1,455,681.99	\$13,988.93	\$270,361.20	\$16,055.09	\$1,756,087.21
LINCOLN	\$3,176,897.31	\$42,410.58	\$920,771.90	\$17,085.42	\$4,157,165.21
LOUDON	\$3,884,300.29	\$45,118.67	\$955,472.02	\$103,008.48	\$4,987,899.46

County	Capitation	Dental	Pharmacy	TennCare Select	Grand Total
MACON	\$2,915,196.85	\$56,449.34	\$596,824.44	\$20,317.18	\$3,588,787.81
MADISON	\$10,422,090.58	\$98,462.96	\$2,222,054.10	\$622,138.12	\$13,364,745.76
MARION	\$2,893,634.42	\$22,875.31	\$857,799.84	\$97,779.19	\$3,872,088.76
MARSHALL	\$2,961,507.23	\$44,993.56	\$695,820.97	\$103,468.38	\$3,805,790.14
MAURY	\$8,052,868.80	\$138,122.88	\$1,906,237.18	\$313,462.01	\$10,410,690.87
MEIGS	\$1,478,813.71	\$19,586.63	\$452,212.96	\$10,547.23	\$1,961,160.53
MONROE	\$4,877,471.60	\$56,417.73	\$1,401,791.44	\$117,489.42	\$6,453,170.19
MONTGOMERY	\$18,018,283.45	\$255,195.65	\$3,502,892.14	\$339,727.91	\$22,116,099.15
MOORE	\$503,919.94	\$7,052.91	\$93,643.86	\$861.11	\$605,477.82
MORGAN	\$1,877,778.98	\$18,360.90	\$564,739.98	\$71,642.95	\$2,532,522.81
MCMINN	\$5,624,735.75	\$90,312.94	\$1,699,513.77	\$84,337.21	\$7,498,899.67
MCNAIRY	\$2,991,435.93	\$32,292.13	\$813,655.35	\$78,907.55	\$3,916,290.96
OBION	\$3,215,337.03	\$42,019.65	\$772,751.93	\$72,174.51	\$4,102,283.12
OVERTON	\$2,115,907.57	\$38,522.93	\$392,524.09	\$75,049.24	\$2,622,003.83
PERRY	\$1,186,703.58	\$10,395.83	\$170,542.28	\$7,169.56	\$1,374,811.25
PICKETT	\$748,737.93	\$4,277.64	\$74,897.46	\$9,016.36	\$836,929.39
POLK	\$1,587,380.96	\$30,390.39	\$466,215.18	\$24,415.59	\$2,108,402.12
PUTNAM	\$8,706,666.35	\$138,397.34	\$1,797,261.86	\$387,511.35	\$11,029,836.90
RHEA	\$3,776,566.90	\$45,450.21	\$1,058,861.78	\$84,708.61	\$4,965,587.50
ROANE	\$5,048,401.54	\$39,563.00	\$1,438,116.12	\$167,261.35	\$6,693,342.01
ROBERTSON	\$5,353,192.71	\$111,747.66	\$1,305,968.35	\$140,870.09	\$6,911,778.81
RUTHERFORD	\$23,537,578.48	\$476,180.10	\$4,414,286.17	\$655,110.52	\$29,083,155.27
SCOTT	\$3,069,417.30	\$43,854.55	\$1,021,512.39	\$119,047.49	\$4,253,831.73
SEQUATCHIE	\$1,657,129.47	\$18,495.68	\$378,136.68	\$25,321.94	\$2,079,083.77
SEVIER	\$7,596,012.09	\$93,291.40	\$2,179,492.67	\$94,095.08	\$9,962,891.24
SHELBY	\$93,083,410.78	\$1,185,123.58	\$16,156,223.79	\$2,354,124.45	\$112,778,882.60
SMITH	\$1,888,075.67	\$31,267.44	\$374,196.99	\$77,809.63	\$2,371,349.73
STEWART	\$1,259,708.33	\$19,350.10	\$394,411.39	\$16,604.14	\$1,690,073.96
SULLIVAN	\$14,233,193.79	\$150,790.05	\$4,194,494.05	\$287,842.31	\$18,866,320.20
SUMNER	\$13,176,076.94	\$197,253.69	\$2,883,740.02	\$200,673.71	\$16,457,744.36
TIPTON	\$4,767,712.29	\$63,471.74	\$1,338,017.42	\$46,602.83	\$6,215,804.28
TROUSDALE	\$879,994.38	\$15,956.36	\$191,548.32	\$3,403.20	\$1,090,902.26
UNICOI	\$2,222,366.16	\$11,739.46	\$515,298.66	\$27,896.80	\$2,777,301.08
UNION	\$2,117,420.81	\$22,950.73	\$833,624.26	\$12,256.26	\$2,986,252.06
VAN BUREN	\$910,100.03	\$12,555.68	\$110,148.72	\$51,580.45	\$1,084,384.88
WARREN	\$4,830,129.54	\$59,998.78	\$1,455,442.63	\$93,746.93	\$6,439,317.88
WASHINGTON	\$11,200,934.06	\$89,848.64	\$3,201,009.17	\$565,542.20	\$15,057,334.07
WAYNE	\$1,473,993.26	\$19,746.29	\$274,431.42	\$7,320.20	\$1,775,491.17
WEAKLEY	\$3,351,517.05	\$41,325.54	\$913,249.41	\$178,244.51	\$4,484,336.51
WHITE	\$3,297,901.47	\$50,113.68	\$698,091.03	\$83,528.59	\$4,129,634.77
WILLIAMSON	\$5,928,231.87	\$102,230.16	\$1,182,863.13	\$189,421.61	\$7,402,746.77
WILSON	\$9,092,836.26	\$165,910.70	\$2,373,317.21	\$183,149.84	\$11,815,214.01
OUT-OF-ST CO	\$854,168.40	\$9,783.18	\$91,818.32	\$132,536.13	\$1,088,306.03
UNKNOWN	.	\$17,060.22	\$73,732.77	\$1,235.57	\$92,028.56
Grand Total	\$602,621,231.82	\$7,739,750.37	\$141,696,494.73	\$16,550,834.78	\$768,608,311.70

Attachment 4N
Veterans Population in Service Area

County	Population (2023)*	Total Veterans**	% Population Veteran
Carroll	27,601	1,870	6.8%
Crockett	14,161	770	5.4%
Dyer	36,796	2,242	6.1%
Fayette	43,097	2,656	6.2%
Gibson	49,485	3,254	6.6%
Haywood	16,660	955	5.7%
Henry	32,143	2,784	8.7%
Lauderdale	25,397	1,349	5.3%
Obion	29,916	1,929	6.4%
Shelby	941,637	53,268	5.7%
Tipton	62,909	4,507	7.2%
Weakley	33,249	2,189	6.6%
Service Area Total	1,313,051	77,773	5.9%
Lake	6,907	327	4.7%
Service Area Total with Lake	1,319,958	78,100	5.9%
State of TN Total	7,071,060	449,263	6.4%

* Accessed via the Tennessee Department of Health, "Population Projections 2023-2025," at <https://www.tn.gov/content/dam/tn/health/documents/population/CON-Population-Estimates-4-reports-2025.pdf>.

** Accessed via the Tennessee Department of Veterans Services, "TN Veteran Population," at <https://www.tn.gov/veteran/tnvetmap.html>.

Attachment 6N-2
Population Data for Utilization Projections

Tennessee Population Estimates 2022 and 2024 *

	Population Estimate 2022			Population Estimate 2024			% Increase	
	Total	0-17	% 0-17	Total	0-17	% 0-17	0-17	Total
Tennessee	6,997,493	1,541,977	22.0%	7,102,950	1,558,170	21.9%	1.1%	1.5%
Anderson	77,746	15,823	20.4%	78,266	15,814	20.2%	-0.1%	0.7%
Bedford	51,436	12,741	24.8%	52,579	12,970	24.7%	1.8%	2.2%
Benton	16,259	3,120	19.2%	16,273	3,071	18.9%	-1.6%	0.1%
Bledsoe	15,265	2,250	14.7%	15,490	2,252	14.5%	0.1%	1.5%
Blount	136,116	26,692	19.6%	138,267	26,906	19.5%	0.8%	1.6%
Bradley	110,318	23,808	21.6%	112,020	23,985	21.4%	0.7%	1.5%
Campbell	39,348	7,800	19.8%	39,163	7,694	19.6%	-1.4%	-0.5%
Cannon	14,791	3,018	20.4%	14,925	2,995	20.1%	-0.8%	0.9%
Carroll	27,767	6,030	21.7%	27,602	5,953	21.6%	-1.3%	-0.6%
Carter	55,761	9,725	17.4%	55,364	9,473	17.1%	-2.6%	-0.7%
Cheatham	41,212	8,635	21.0%	41,527	8,552	20.6%	-1.0%	0.8%
Chester	17,394	3,925	22.6%	17,462	3,871	22.2%	-1.4%	0.4%
Claiborne	32,217	5,829	18.1%	32,392	5,692	17.6%	-2.3%	0.5%
Clay	7,768	1,510	19.4%	7,774	1,493	19.2%	-1.1%	0.1%
Cocke	36,221	6,924	19.1%	36,363	6,812	18.7%	-1.6%	0.4%
Coffee	57,147	13,306	23.3%	57,822	13,356	23.1%	0.4%	1.2%
Crockett	14,300	3,259	22.8%	14,269	3,236	22.7%	-0.7%	-0.2%
Cumberland	62,326	10,442	16.8%	63,470	10,470	16.5%	0.3%	1.8%
Davidson	717,032	156,667	21.8%	727,642	160,372	22.0%	2.4%	1.5%
Decatur	11,711	2,326	19.9%	11,695	2,296	19.6%	-1.3%	-0.1%
DeKalb	20,730	4,275	20.6%	20,988	4,274	20.4%	0.0%	1.2%
Dickson	55,704	12,352	22.2%	56,741	12,455	21.9%	0.8%	1.9%
Dyer	37,465	8,773	23.4%	37,505	8,761	23.4%	-0.1%	0.1%
Fayette	42,567	7,834	18.4%	43,500	7,989	18.4%	2.0%	2.2%
Fentress	18,451	3,689	20.0%	18,524	3,657	19.7%	-0.9%	0.4%
Franklin	42,297	8,517	20.1%	42,466	8,466	19.9%	-0.6%	0.4%
Gibson	49,445	11,716	23.7%	49,606	11,701	23.6%	-0.1%	0.3%
Giles	29,403	6,079	20.7%	29,314	6,001	20.5%	-1.3%	-0.3%
Grainger	23,595	4,513	19.1%	23,762	4,469	18.8%	-1.0%	0.7%
Greene	69,852	13,117	18.8%	70,107	13,018	18.6%	-0.8%	0.4%
Grundy	13,072	2,636	20.2%	12,920	2,551	19.7%	-3.2%	-1.2%
Hamblen	65,862	14,827	22.5%	66,458	14,935	22.5%	0.7%	0.9%
Hamilton	375,027	78,747	21.0%	379,958	79,675	21.0%	1.2%	1.3%
Hancock	6,431	1,254	19.5%	6,364	1,214	19.1%	-3.2%	-1.0%
Hardeman	24,981	4,666	18.7%	24,837	4,560	18.4%	-2.3%	-0.6%
Hardin	25,795	5,013	19.4%	25,758	4,910	19.1%	-2.0%	-0.1%
Hawkins	56,619	10,562	18.7%	56,546	10,348	18.3%	-2.0%	-0.1%
Haywood	16,899	3,606	21.3%	16,681	3,518	21.1%	-2.4%	-1.3%
Henderson	28,158	6,165	21.9%	28,286	6,128	21.7%	-0.6%	0.5%
Henry	32,644	6,363	19.5%	32,734	6,288	19.2%	-1.2%	0.3%
Hickman	25,613	5,043	19.7%	25,845	4,992	19.3%	-1.0%	0.9%
Houston	8,384	1,747	20.8%	8,436	1,741	20.6%	-0.4%	0.6%
Humphreys	18,618	3,851	20.7%	18,661	3,817	20.5%	-0.9%	0.2%
Jackson	11,976	2,129	17.8%	12,054	2,132	17.7%	0.2%	0.6%
Jefferson	55,709	10,753	19.3%	56,445	10,754	19.1%	0.0%	1.3%
Johnson	17,711	2,832	16.0%	17,657	2,768	15.7%	-2.3%	-0.3%
Knox	482,417	103,410	21.4%	490,549	105,106	21.4%	1.6%	1.7%
Lake	7,321	979	13.4%	7,280	944	13.0%	-3.5%	-0.6%
Lauderdale	25,815	5,577	21.6%	25,783	5,510	21.4%	-1.2%	-0.1%
Lawrence	44,324	10,292	23.2%	44,543	10,096	22.7%	-1.9%	0.5%

Tennessee Population Estimates 2022 and 2024 *

	Population Estimate 2022			Population Estimate 2024			% Increase	
	Total	0-17	% 0-17	Total	0-17	% 0-17	0-17	Total
Lewis	12,134	2,475	20.4%	12,138	2,433	20.0%	-1.7%	0.0%
Lincoln	34,677	7,212	20.8%	34,919	7,112	20.4%	-1.4%	0.7%
Loudon	55,779	10,372	18.6%	57,017	10,468	18.4%	0.9%	2.2%
McMinn	54,221	11,188	20.6%	54,607	11,170	20.5%	-0.2%	0.7%
McNairy	26,143	5,399	20.6%	26,253	5,346	20.4%	-1.0%	0.4%
Macon	25,375	6,194	24.4%	25,900	6,302	24.3%	1.7%	2.1%
Madison	97,958	22,207	22.7%	98,091	22,047	22.5%	-0.7%	0.1%
Marion	28,530	5,738	20.1%	28,466	5,651	19.9%	-1.5%	-0.2%
Marshall	35,034	7,946	22.7%	35,663	8,036	22.5%	1.1%	1.8%
Maury	100,386	23,012	22.9%	103,252	23,593	22.9%	2.5%	2.9%
Meigs	12,616	2,478	19.6%	12,753	2,473	19.4%	-0.2%	1.1%
Monroe	47,548	9,396	19.8%	48,029	9,289	19.3%	-1.1%	1.0%
Montgomery	223,240	60,476	27.1%	231,789	63,022	27.2%	4.2%	3.8%
Moore	6,495	1,188	18.3%	6,530	1,184	18.1%	-0.3%	0.5%
Morgan	21,911	4,013	18.3%	22,043	3,981	18.1%	-0.8%	0.6%
Obion	29,967	6,378	21.3%	29,782	6,332	21.3%	-0.7%	-0.6%
Overton	22,614	4,612	20.4%	22,851	4,631	20.3%	0.4%	1.0%
Perry	8,191	1,763	21.5%	8,251	1,759	21.3%	-0.3%	0.7%
Pickett	5,022	838	16.7%	4,987	815	16.3%	-2.8%	-0.7%
Polk	17,226	3,216	18.7%	17,362	3,200	18.4%	-0.5%	0.8%
Putnam	82,286	17,980	21.9%	83,919	18,282	21.8%	1.7%	2.0%
Rhea	33,892	7,331	21.6%	34,277	7,261	21.2%	-1.0%	1.1%
Roane	53,377	9,591	18.0%	53,400	9,496	17.8%	-1.0%	0.0%
Robertson	74,294	17,124	23.0%	75,837	17,365	22.9%	1.4%	2.1%
Rutherford	357,199	87,612	24.5%	373,482	91,220	24.4%	4.1%	4.6%
Scott	22,172	5,112	23.1%	22,204	5,057	22.8%	-1.1%	0.1%
Sequatchie	15,518	3,074	19.8%	15,812	3,101	19.6%	0.9%	1.9%
Sevier	103,319	20,604	19.9%	105,864	20,950	19.8%	1.7%	2.5%
Shelby	944,036	232,951	24.7%	947,551	233,093	24.6%	0.1%	0.4%
Smith	20,435	4,465	21.8%	20,649	4,471	21.7%	0.1%	1.0%
Stewart	13,765	2,734	19.9%	13,844	2,707	19.6%	-1.0%	0.6%
Sullivan	158,570	29,914	18.9%	158,776	29,804	18.8%	-0.4%	0.1%
Sumner	199,672	45,566	22.8%	205,755	46,662	22.7%	2.4%	3.0%
Tipton	62,919	14,823	23.6%	63,496	14,788	23.3%	-0.2%	0.9%
Trousdale	11,388	2,073	18.2%	11,547	2,070	17.9%	-0.2%	1.4%
Unicoi	17,916	3,240	18.1%	17,965	3,238	18.0%	-0.1%	0.3%
Union	19,900	4,071	20.5%	19,963	4,003	20.1%	-1.7%	0.3%
VanBuren	5,748	1,059	18.4%	5,730	1,043	18.2%	-1.5%	-0.3%
Warren	41,170	9,172	22.3%	41,277	9,083	22.0%	-1.0%	0.3%
Washington	132,735	25,813	19.4%	134,593	26,084	19.4%	1.0%	1.4%
Wayne	16,388	2,642	16.1%	16,288	2,563	15.7%	-3.0%	-0.6%
Weakley	33,169	6,830	20.6%	33,087	6,775	20.5%	-0.8%	-0.2%
White	27,939	5,818	20.8%	28,314	5,798	20.5%	-0.3%	1.3%
Williamson	256,315	66,049	25.8%	268,520	68,203	25.4%	3.3%	4.8%
Wilson	153,287	35,076	22.9%	159,452	36,168	22.7%	3.1%	4.0%

* TN_CoPopProj_2019 UTCBER Population Projection Series.

Source: Boyd Center for Business and Economic Research, University of Tennessee, Knoxville
 Reassembled by the Tennessee Department of Health, Division of Policy, Planning and Assessment
 Note: These projections may not match Boyd Center projections precisely due to rounding.

Tennessee Population Estimates 2022 and 2024*

	Population Estimate 2022			Population Estimate 2024			% Increase	
	Total	18+	%18+	Total	18+	%18+	18+	Total
Tennessee	6,997,493	5,455,516	78.0%	7,102,950	5,544,780	78.1%	1.6%	1.5%
Anderson	77,746	61,923	79.6%	78,266	62,452	79.8%	0.9%	0.7%
Bedford	51,436	38,694	75.2%	52,579	39,609	75.3%	2.4%	2.2%
Benton	16,259	13,138	80.8%	16,273	13,201	81.1%	0.5%	0.1%
Bledsoe	15,265	13,015	85.3%	15,490	13,237	85.5%	1.7%	1.5%
Blount	136,116	109,424	80.4%	138,267	111,361	80.5%	1.8%	1.6%
Bradley	110,318	86,510	78.4%	112,020	88,035	78.6%	1.8%	1.5%
Campbell	39,348	31,548	80.2%	39,163	31,469	80.4%	-0.3%	-0.5%
Cannon	14,791	11,773	79.6%	14,925	11,930	79.9%	1.3%	0.9%
Carroll	27,767	21,737	78.3%	27,602	21,649	78.4%	-0.4%	-0.6%
Carter	55,761	46,036	82.6%	55,364	45,892	82.9%	-0.3%	-0.7%
Cheatham	41,212	32,577	79.0%	41,527	32,975	79.4%	1.2%	0.8%
Chester	17,394	13,469	77.4%	17,462	13,591	77.8%	0.9%	0.4%
Claiborne	32,217	26,388	81.9%	32,392	26,699	82.4%	1.2%	0.5%
Clay	7,768	6,258	80.6%	7,774	6,281	80.8%	0.4%	0.1%
Cocke	36,221	29,297	80.9%	36,363	29,551	81.3%	0.9%	0.4%
Coffee	57,147	43,841	76.7%	57,822	44,465	76.9%	1.4%	1.2%
Crockett	14,300	11,041	77.2%	14,269	11,033	77.3%	-0.1%	-0.2%
Cumberland	62,326	51,884	83.2%	63,470	53,000	83.5%	2.2%	1.8%
Davidson	717,032	560,365	78.2%	727,642	567,269	78.0%	1.2%	1.5%
Decatur	11,711	9,385	80.1%	11,695	9,399	80.4%	0.2%	-0.1%
DeKalb	20,730	16,455	79.4%	20,988	16,714	79.6%	1.6%	1.2%
Dickson	55,704	43,352	77.8%	56,741	44,287	78.1%	2.2%	1.9%
Dyer	37,465	28,692	76.6%	37,505	28,744	76.6%	0.2%	0.1%
Fayette	42,567	34,733	81.6%	43,500	35,511	81.6%	2.2%	2.2%
Fentress	18,451	14,761	80.0%	18,524	14,867	80.3%	0.7%	0.4%
Franklin	42,297	33,781	79.9%	42,466	34,000	80.1%	0.7%	0.4%
Gibson	49,445	37,729	76.3%	49,606	37,905	76.4%	0.5%	0.3%
Giles	29,403	23,324	79.3%	29,314	23,313	79.5%	0.0%	-0.3%
Grainger	23,595	19,082	80.9%	23,762	19,293	81.2%	1.1%	0.7%
Greene	69,852	56,734	81.2%	70,107	57,089	81.4%	0.6%	0.4%
Grundy	13,072	10,435	79.8%	12,920	10,369	80.3%	-0.6%	-1.2%
Hamblen	65,862	51,035	77.5%	66,458	51,523	77.5%	1.0%	0.9%
Hamilton	375,027	296,280	79.0%	379,958	300,283	79.0%	1.4%	1.3%
Hancock	6,431	5,177	80.5%	6,364	5,149	80.9%	-0.5%	-1.0%
Hardeman	24,981	20,315	81.3%	24,837	20,277	81.6%	-0.2%	-0.6%
Hardin	25,795	20,782	80.6%	25,758	20,848	80.9%	0.3%	-0.1%
Hawkins	56,619	46,056	81.3%	56,546	46,198	81.7%	0.3%	-0.1%
Haywood	16,899	13,294	78.7%	16,681	13,162	78.9%	-1.0%	-1.3%
Henderson	28,158	21,993	78.1%	28,286	22,158	78.3%	0.7%	0.5%
Henry	32,644	26,280	80.5%	32,734	26,447	80.8%	0.6%	0.3%
Hickman	25,613	20,570	80.3%	25,845	20,853	80.7%	1.4%	0.9%
Houston	8,384	6,636	79.2%	8,436	6,695	79.4%	0.9%	0.6%
Humphreys	18,618	14,767	79.3%	18,661	14,844	79.5%	0.5%	0.2%
Jackson	11,976	9,847	82.2%	12,054	9,921	82.3%	0.8%	0.6%
Jefferson	55,709	44,957	80.7%	56,445	45,691	80.9%	1.6%	1.3%
Johnson	17,711	14,879	84.0%	17,657	14,889	84.3%	0.1%	-0.3%
Knox	482,417	379,006	78.6%	490,549	385,443	78.6%	1.7%	1.7%
Lake	7,321	6,343	86.6%	7,280	6,336	87.0%	-0.1%	-0.6%
Lauderdale	25,815	20,238	78.4%	25,783	20,273	78.6%	0.2%	-0.1%
Lawrence	44,324	34,032	76.8%	44,543	34,447	77.3%	1.2%	0.5%

Tennessee Population Estimates 2022 and 2024*

	Population Estimate 2022			Population Estimate 2024			% Increase	
	Total	18+	%18+	Total	18+	%18+	18+	Total
Lewis	12,134	9,659	79.6%	12,138	9,705	80.0%	0.5%	0.0%
Lincoln	34,677	27,465	79.2%	34,919	27,807	79.6%	1.2%	0.7%
Loudon	55,779	45,407	81.4%	57,017	46,548	81.6%	2.5%	2.2%
McMinn	54,221	43,033	79.4%	54,607	43,437	79.5%	0.9%	0.7%
McNairy	26,143	20,745	79.4%	26,253	20,907	79.6%	0.8%	0.4%
Macon	25,375	19,181	75.6%	25,900	19,597	75.7%	2.2%	2.1%
Madison	97,958	75,752	77.3%	98,091	76,044	77.5%	0.4%	0.1%
Marion	28,530	22,791	79.9%	28,466	22,815	80.1%	0.1%	-0.2%
Marshall	35,034	27,088	77.3%	35,663	27,627	77.5%	2.0%	1.8%
Maury	100,386	77,374	77.1%	103,252	79,659	77.1%	3.0%	2.9%
Meigs	12,616	10,138	80.4%	12,753	10,280	80.6%	1.4%	1.1%
Monroe	47,548	38,152	80.2%	48,029	38,740	80.7%	1.5%	1.0%
Montgomery	223,240	162,764	72.9%	231,789	168,767	72.8%	3.7%	3.8%
Moore	6,495	5,307	81.7%	6,530	5,347	81.9%	0.7%	0.5%
Morgan	21,911	17,899	81.7%	22,043	18,063	81.9%	0.9%	0.6%
Obion	29,967	23,588	78.7%	29,782	23,450	78.7%	-0.6%	-0.6%
Overton	22,614	18,003	79.6%	22,851	18,220	79.7%	1.2%	1.0%
Perry	8,191	6,428	78.5%	8,251	6,492	78.7%	1.0%	0.7%
Pickett	5,022	4,184	83.3%	4,987	4,172	83.7%	-0.3%	-0.7%
Polk	17,226	14,010	81.3%	17,362	14,162	81.6%	1.1%	0.8%
Putnam	82,286	64,306	78.1%	83,919	65,637	78.2%	2.1%	2.0%
Rhea	33,892	26,561	78.4%	34,277	27,017	78.8%	1.7%	1.1%
Roane	53,377	43,786	82.0%	53,400	43,904	82.2%	0.3%	0.0%
Robertson	74,294	57,170	77.0%	75,837	58,472	77.1%	2.3%	2.1%
Rutherford	357,199	269,587	75.5%	373,482	282,263	75.6%	4.7%	4.6%
Scott	22,172	17,060	76.9%	22,204	17,148	77.2%	0.5%	0.1%
Sequatchie	15,518	12,444	80.2%	15,812	12,711	80.4%	2.2%	1.9%
Sevier	103,319	82,715	80.1%	105,864	84,914	80.2%	2.7%	2.5%
Shelby	944,036	711,085	75.3%	947,551	714,458	75.4%	0.5%	0.4%
Smith	20,435	15,970	78.2%	20,649	16,178	78.3%	1.3%	1.0%
Stewart	13,765	11,031	80.1%	13,844	11,137	80.4%	1.0%	0.6%
Sullivan	158,570	128,655	81.1%	158,776	128,972	81.2%	0.2%	0.1%
Sumner	199,672	154,106	77.2%	205,755	159,093	77.3%	3.2%	3.0%
Tipton	62,919	48,096	76.4%	63,496	48,708	76.7%	1.3%	0.9%
Trousdale	11,388	9,314	81.8%	11,547	9,477	82.1%	1.7%	1.4%
Unicoi	17,916	14,676	81.9%	17,965	14,726	82.0%	0.3%	0.3%
Union	19,900	15,828	79.5%	19,963	15,960	79.9%	0.8%	0.3%
VanBuren	5,748	4,689	81.6%	5,730	4,687	81.8%	0.0%	-0.3%
Warren	41,170	31,998	77.7%	41,277	32,194	78.0%	0.6%	0.3%
Washington	132,735	106,922	80.6%	134,593	108,509	80.6%	1.5%	1.4%
Wayne	16,388	13,745	83.9%	16,288	13,725	84.3%	-0.1%	-0.6%
Weakley	33,169	26,339	79.4%	33,087	26,312	79.5%	-0.1%	-0.2%
White	27,939	22,121	79.2%	28,314	22,516	79.5%	1.8%	1.3%
Williamson	256,315	190,266	74.2%	268,520	200,317	74.6%	5.3%	4.8%
Wilson	153,287	118,211	77.1%	159,452	123,284	77.3%	4.3%	4.0%

* TN_CoPopProj_2019 UTCBER Population Projection Series.

Source: Boyd Center for Business and Economic Research, University of Tennessee, Knoxville
 Reassembled by the Tennessee Department of Health, Division of Policy, Planning and Assessment
 Note: These projections may not match Boyd Center projections precisely due to rounding.

Tennessee Population Estimates 2022 and 2024 *

	Population Estimate 2022			Population Estimate 2024			% Increase	
	Total	65+	%65+	Total	65+	%65+	65+	Total
Tennessee	6,997,493	1,254,329	17.9%	7,102,950	1,318,602	18.6%	5.1%	1.5%
Anderson	77,746	16,997	21.9%	78,266	17,682	22.6%	4.0%	0.7%
Bedford	51,436	8,430	16.4%	52,579	8,928	17.0%	5.9%	2.2%
Benton	16,259	4,154	25.5%	16,273	4,293	26.4%	3.4%	0.1%
Bledsoe	15,265	3,072	20.1%	15,490	3,242	20.9%	5.5%	1.5%
Blount	136,116	30,079	22.1%	138,267	31,673	22.9%	5.3%	1.6%
Bradley	110,318	20,539	18.6%	112,020	21,600	19.3%	5.2%	1.5%
Campbell	39,348	8,772	22.3%	39,163	9,000	23.0%	2.6%	-0.5%
Cannon	14,791	2,991	20.2%	14,925	3,154	21.1%	5.4%	0.9%
Carroll	27,767	6,094	21.9%	27,602	6,259	22.7%	2.7%	-0.6%
Carter	55,761	13,484	24.2%	55,364	13,939	25.2%	3.4%	-0.7%
Cheatham	41,212	7,109	17.2%	41,527	7,601	18.3%	6.9%	0.8%
Chester	17,394	3,265	18.8%	17,462	3,409	19.5%	4.4%	0.4%
Claiborne	32,217	7,106	22.1%	32,392	7,435	23.0%	4.6%	0.5%
Clay	7,768	2,085	26.8%	7,774	2,173	27.9%	4.2%	0.1%
Cocke	36,221	8,452	23.3%	36,363	8,848	24.3%	4.7%	0.4%
Coffee	57,147	10,675	18.7%	57,822	11,157	19.3%	4.5%	1.2%
Crockett	14,300	2,926	20.5%	14,269	3,027	21.2%	3.4%	-0.2%
Cumberland	62,326	20,609	33.1%	63,470	21,639	34.1%	5.0%	1.8%
Davidson	717,032	95,863	13.4%	727,642	100,647	13.8%	5.0%	1.5%
Decatur	11,711	2,999	25.6%	11,695	3,100	26.5%	3.4%	-0.1%
DeKalb	20,730	4,215	20.3%	20,988	4,452	21.2%	5.6%	1.2%
Dickson	55,704	10,035	18.0%	56,741	10,656	18.8%	6.2%	1.9%
Dyer	37,465	7,151	19.1%	37,505	7,392	19.7%	3.4%	0.1%
Fayette	42,567	10,177	23.9%	43,500	10,868	25.0%	6.8%	2.2%
Fentress	18,451	4,464	24.2%	18,524	4,658	25.1%	4.4%	0.4%
Franklin	42,297	9,313	22.0%	42,466	9,691	22.8%	4.1%	0.4%
Gibson	49,445	9,575	19.4%	49,606	9,879	19.9%	3.2%	0.3%
Giles	29,403	6,482	22.0%	29,314	6,738	23.0%	3.9%	-0.3%
Grainger	23,595	5,369	22.8%	23,762	5,648	23.8%	5.2%	0.7%
Greene	69,852	16,425	23.5%	70,107	17,060	24.3%	3.9%	0.4%
Grundy	13,072	3,007	23.0%	12,920	3,095	24.0%	2.9%	-1.2%
Hamblen	65,862	12,988	19.7%	66,458	13,481	20.3%	3.8%	0.9%
Hamilton	375,027	71,417	19.0%	379,958	74,592	19.6%	4.4%	1.3%
Hancock	6,431	1,513	23.5%	6,364	1,557	24.5%	3.0%	-1.0%
Hardeman	24,981	4,863	19.5%	24,837	4,965	20.0%	2.1%	-0.6%
Hardin	25,795	6,487	25.2%	25,758	6,704	26.0%	3.3%	-0.1%
Hawkins	56,619	13,161	23.2%	56,546	13,696	24.2%	4.1%	-0.1%
Haywood	16,899	3,647	21.6%	16,681	3,779	22.7%	3.6%	-1.3%
Henderson	28,158	5,616	19.9%	28,286	5,840	20.6%	4.0%	0.5%
Henry	32,644	8,207	25.1%	32,734	8,501	26.0%	3.6%	0.3%
Hickman	25,613	4,905	19.1%	25,845	5,136	19.9%	4.7%	0.9%
Houston	8,384	1,854	22.1%	8,436	1,926	22.8%	3.9%	0.6%
Humphreys	18,618	4,063	21.8%	18,661	4,216	22.6%	3.8%	0.2%
Jackson	11,976	3,014	25.2%	12,054	3,166	26.3%	5.1%	0.6%
Jefferson	55,709	12,364	22.2%	56,445	13,087	23.2%	5.8%	1.3%
Johnson	17,711	4,358	24.6%	17,657	4,464	25.3%	2.4%	-0.3%
Knox	482,417	82,989	17.2%	490,549	87,114	17.8%	5.0%	1.7%
Lake	7,321	1,204	16.4%	7,280	1,211	16.6%	0.6%	-0.6%
Lauderdale	25,815	4,458	17.3%	25,783	4,597	17.8%	3.1%	-0.1%
Lawrence	44,324	8,644	19.5%	44,543	9,036	20.3%	4.5%	0.5%

Tennessee Population Estimates 2022 and 2024 *

	Population Estimate 2022			Population Estimate 2024			% Increase	
	Total	65+	%65+	Total	65+	%65+	65+	Total
Lewis	12,134	2,829	23.3%	12,138	2,946	24.3%	4.2%	0.0%
Lincoln	34,677	7,407	21.4%	34,919	7,749	22.2%	4.6%	0.7%
Loudon	55,779	15,932	28.6%	57,017	16,760	29.4%	5.2%	2.2%
McMinn	54,221	11,739	21.7%	54,607	12,284	22.5%	4.6%	0.7%
McNairy	26,143	5,831	22.3%	26,253	6,026	23.0%	3.3%	0.4%
Macon	25,375	4,330	17.1%	25,900	4,577	17.7%	5.7%	2.1%
Madison	97,958	18,656	19.0%	98,091	19,520	19.9%	4.6%	0.1%
Marion	28,530	6,260	21.9%	28,466	6,469	22.7%	3.3%	-0.2%
Marshall	35,034	6,205	17.7%	35,663	6,571	18.4%	5.9%	1.8%
Maury	100,386	17,888	17.8%	103,252	19,144	18.5%	7.0%	2.9%
Meigs	12,616	2,868	22.7%	12,753	3,002	23.5%	4.7%	1.1%
Monroe	47,548	11,056	23.3%	48,029	11,605	24.2%	5.0%	1.0%
Montgomery	223,240	22,705	10.2%	231,789	24,495	10.6%	7.9%	3.8%
Moore	6,495	1,542	23.7%	6,530	1,608	24.6%	4.3%	0.5%
Morgan	21,911	4,239	19.3%	22,043	4,404	20.0%	3.9%	0.6%
Obion	29,967	6,675	22.3%	29,782	6,838	23.0%	2.5%	-0.6%
Overton	22,614	4,995	22.1%	22,851	5,194	22.7%	4.0%	1.0%
Perry	8,191	1,846	22.5%	8,251	1,906	23.1%	3.3%	0.7%
Pickett	5,022	1,492	29.7%	4,987	1,536	30.8%	3.0%	-0.7%
Polk	17,226	3,910	22.7%	17,362	4,089	23.5%	4.6%	0.8%
Putnam	82,286	14,863	18.1%	83,919	15,668	18.7%	5.4%	2.0%
Rhea	33,892	6,859	20.2%	34,277	7,176	20.9%	4.6%	1.1%
Roane	53,377	13,393	25.1%	53,400	13,928	26.1%	4.0%	0.0%
Robertson	74,294	12,402	16.7%	75,837	13,288	17.5%	7.1%	2.1%
Rutherford	357,199	42,114	11.8%	373,482	46,229	12.4%	9.8%	4.6%
Scott	22,172	4,095	18.5%	22,204	4,256	19.2%	4.0%	0.1%
Sequatchie	15,518	3,524	22.7%	15,812	3,738	23.6%	6.1%	1.9%
Sevier	103,319	22,298	21.6%	105,864	23,637	22.3%	6.0%	2.5%
Shelby	944,036	142,579	15.1%	947,551	148,831	15.7%	4.4%	0.4%
Smith	20,435	3,876	19.0%	20,649	4,103	19.9%	5.8%	1.0%
Stewart	13,765	3,067	22.3%	13,844	3,206	23.2%	4.5%	0.6%
Sullivan	158,570	37,493	23.6%	158,776	38,693	24.4%	3.2%	0.1%
Sumner	199,672	34,799	17.4%	205,755	37,222	18.1%	7.0%	3.0%
Tipton	62,919	10,275	16.3%	63,496	10,899	17.2%	6.1%	0.9%
Trousdale	11,388	1,564	13.7%	11,547	1,628	14.1%	4.1%	1.4%
Unicoi	17,916	4,511	25.2%	17,965	4,673	26.0%	3.6%	0.3%
Union	19,900	4,119	20.7%	19,963	4,364	21.9%	5.9%	0.3%
VanBuren	5,748	1,497	26.0%	5,730	1,547	27.0%	3.4%	-0.3%
Warren	41,170	7,965	19.3%	41,277	8,270	20.0%	3.8%	0.3%
Washington	132,735	26,466	19.9%	134,593	27,721	20.6%	4.7%	1.4%
Wayne	16,388	3,425	20.9%	16,288	3,511	21.6%	2.5%	-0.6%
Weakley	33,169	6,754	20.4%	33,087	6,970	21.1%	3.2%	-0.2%
White	27,939	6,137	22.0%	28,314	6,422	22.7%	4.6%	1.3%
Williamson	256,315	37,752	14.7%	268,520	41,342	15.4%	9.5%	4.8%
Wilson	153,287	26,434	17.2%	159,452	28,552	17.9%	8.0%	4.0%

* TN_CoPopProj_2019 UTCBER Population Projection Series.

Source: Boyd Center for Business and Economic Research, University of Tennessee, Knoxville
 Reassembled by the Tennessee Department of Health, Division of Policy, Planning and Assessment
 Note: These projections may not match Boyd Center projections precisely due to rounding.

Tennessee Female Population Estimates 2022 and 2024 *

	Population Estimate 2022			Population Estimate 2024			% Increase	
	Total	15-44	%15-44	Total	15-44	%15-44	15-44	Total
Tennessee	3,587,578	1,351,308	37.7%	3,643,223	1,363,323	37.4%	0.9%	1.6%
Anderson	39,873	13,233	33.2%	40,117	13,251	33.0%	0.1%	0.6%
Bedford	26,256	9,666	36.8%	26,875	9,866	36.7%	2.1%	2.4%
Benton	8,287	2,420	29.2%	8,289	2,395	28.9%	-1.0%	0.0%
Bledsoe	6,145	1,895	30.8%	6,176	1,856	30.1%	-2.1%	0.5%
Blount	70,255	23,578	33.6%	71,429	23,834	33.4%	1.1%	1.7%
Bradley	56,761	21,105	37.2%	57,669	21,341	37.0%	1.1%	1.6%
Campbell	20,014	6,591	32.9%	19,917	6,495	32.6%	-1.5%	-0.5%
Cannon	7,449	2,473	33.2%	7,516	2,471	32.9%	-0.1%	0.9%
Carroll	14,182	4,734	33.4%	14,095	4,689	33.3%	-0.9%	-0.6%
Carter	28,542	9,227	32.3%	28,373	9,087	32.0%	-1.5%	-0.6%
Cheatham	20,794	7,459	35.9%	20,975	7,454	35.5%	-0.1%	0.9%
Chester	9,081	3,578	39.4%	9,140	3,587	39.2%	0.2%	0.7%
Claiborne	16,480	5,773	35.0%	16,573	5,782	34.9%	0.2%	0.6%
Clay	3,923	1,125	28.7%	3,915	1,112	28.4%	-1.1%	-0.2%
Cocke	18,774	5,980	31.9%	18,874	5,958	31.6%	-0.4%	0.5%
Coffee	29,261	10,383	35.5%	29,617	10,473	35.4%	0.9%	1.2%
Crockett	7,495	2,567	34.2%	7,495	2,554	34.1%	-0.5%	0.0%
Cumberland	31,998	8,485	26.5%	32,580	8,579	26.3%	1.1%	1.8%
Davidson	370,870	167,846	45.3%	376,350	168,207	44.7%	0.2%	1.5%
Decatur	5,971	1,806	30.3%	5,965	1,784	29.9%	-1.2%	-0.1%
DeKalb	10,397	3,501	33.7%	10,533	3,519	33.4%	0.5%	1.3%
Dickson	28,410	10,125	35.6%	28,962	10,244	35.4%	1.2%	1.9%
Dyer	19,457	6,982	35.9%	19,496	6,947	35.6%	-0.5%	0.2%
Fayette	21,643	6,679	30.9%	22,128	6,741	30.5%	0.9%	2.2%
Fentress	9,470	2,860	30.2%	9,519	2,851	29.9%	-0.3%	0.5%
Franklin	21,679	7,750	35.7%	21,784	7,769	35.7%	0.2%	0.5%
Gibson	25,726	9,084	35.3%	25,805	9,066	35.1%	-0.2%	0.3%
Giles	15,183	5,068	33.4%	15,160	5,041	33.3%	-0.5%	-0.1%
Grainger	11,709	3,656	31.2%	11,792	3,639	30.9%	-0.5%	0.7%
Greene	35,535	11,572	32.6%	35,680	11,537	32.3%	-0.3%	0.4%
Grundy	6,608	2,164	32.7%	6,531	2,101	32.2%	-2.9%	-1.2%
Hamblen	33,845	11,704	34.6%	34,210	11,808	34.5%	0.9%	1.1%
Hamilton	193,980	73,137	37.7%	196,544	73,637	37.5%	0.7%	1.3%
Hancock	3,251	1,027	31.6%	3,216	1,010	31.4%	-1.6%	-1.1%
Hardeman	11,215	3,648	32.5%	11,088	3,563	32.1%	-2.3%	-1.1%
Hardin	13,282	4,096	30.8%	13,292	4,072	30.6%	-0.6%	0.1%
Hawkins	28,877	9,230	32.0%	28,860	9,145	31.7%	-0.9%	-0.1%
Haywood	9,021	2,956	32.8%	8,904	2,850	32.0%	-3.6%	-1.3%
Henderson	14,510	5,043	34.8%	14,582	5,036	34.5%	-0.2%	0.5%
Henry	16,885	5,129	30.4%	16,955	5,130	30.3%	0.0%	0.4%
Hickman	12,183	4,172	34.2%	12,306	4,191	34.1%	0.5%	1.0%
Houston	4,297	1,433	33.3%	4,335	1,438	33.2%	0.4%	0.9%
Humphreys	9,362	3,068	32.8%	9,383	3,051	32.5%	-0.6%	0.2%
Jackson	6,032	1,775	29.4%	6,075	1,766	29.1%	-0.5%	0.7%
Jefferson	28,367	9,436	33.3%	28,776	9,508	33.0%	0.8%	1.4%
Johnson	8,129	2,369	29.1%	8,073	2,330	28.9%	-1.7%	-0.7%
Knox	248,301	100,086	40.3%	252,574	101,272	40.1%	1.2%	1.7%
Lake	2,508	758	30.2%	2,443	726	29.7%	-4.2%	-2.6%
Lauderdale	12,492	4,394	35.2%	12,460	4,338	34.8%	-1.3%	-0.3%
Lawrence	22,573	7,837	34.7%	22,698	7,865	34.7%	0.4%	0.6%

Tennessee Female Population Estimates 2022 and 2024 *

	Population Estimate 2022			Population Estimate 2024			% Increase	
	Total	15-44	%15-44	Total	15-44	%15-44	15-44	Total
Lewis	6,242	1,999	32.0%	6,256	1,984	31.7%	-0.7%	0.2%
Lincoln	17,661	5,717	32.4%	17,780	5,745	32.3%	0.5%	0.7%
Loudon	28,423	8,171	28.7%	29,068	8,350	28.7%	2.2%	2.3%
McMinn	27,836	9,380	33.7%	28,045	9,375	33.4%	-0.1%	0.8%
McNairy	13,280	4,313	32.5%	13,328	4,300	32.3%	-0.3%	0.4%
Macon	13,032	4,728	36.3%	13,327	4,820	36.2%	2.0%	2.3%
Madison	51,763	19,453	37.6%	51,921	19,407	37.4%	-0.2%	0.3%
Marion	14,616	4,780	32.7%	14,595	4,743	32.5%	-0.8%	-0.1%
Marshall	17,905	6,477	36.2%	18,240	6,554	35.9%	1.2%	1.9%
Maury	52,130	19,067	36.6%	53,696	19,461	36.2%	2.1%	3.0%
Meigs	6,375	2,025	31.8%	6,451	2,022	31.3%	-0.2%	1.2%
Monroe	23,894	7,710	32.3%	24,146	7,739	32.1%	0.4%	1.1%
Montgomery	112,215	51,057	45.5%	116,570	52,606	45.1%	3.0%	3.9%
Moore	3,263	1,044	32.0%	3,284	1,040	31.7%	-0.4%	0.6%
Morgan	9,850	3,210	32.6%	9,874	3,189	32.3%	-0.7%	0.2%
Obion	15,509	5,111	33.0%	15,431	5,054	32.8%	-1.1%	-0.5%
Overton	11,419	3,790	33.2%	11,543	3,806	33.0%	0.4%	1.1%
Perry	4,060	1,321	32.5%	4,089	1,331	32.6%	0.8%	0.7%
Pickett	2,518	674	26.8%	2,504	660	26.3%	-2.1%	-0.6%
Polk	8,766	2,772	31.6%	8,848	2,770	31.3%	-0.1%	0.9%
Putnam	41,443	16,471	39.7%	42,318	16,756	39.6%	1.7%	2.1%
Rhea	17,075	5,979	35.0%	17,264	6,044	35.0%	1.1%	1.1%
Roane	27,352	8,347	30.5%	27,368	8,259	30.2%	-1.1%	0.1%
Robertson	37,716	13,859	36.7%	38,558	14,074	36.5%	1.5%	2.2%
Rutherford	181,595	79,871	44.0%	189,950	82,721	43.5%	3.6%	4.6%
Scott	11,323	4,073	36.0%	11,353	4,048	35.7%	-0.6%	0.3%
Sequatchie	7,866	2,561	32.6%	8,026	2,579	32.1%	0.7%	2.0%
Sevier	52,791	17,695	33.5%	54,102	18,094	33.4%	2.3%	2.5%
Shelby	496,201	195,450	39.4%	498,358	195,138	39.2%	-0.2%	0.4%
Smith	10,297	3,593	34.9%	10,423	3,608	34.6%	0.4%	1.2%
Stewart	6,894	2,168	31.4%	6,934	2,165	31.2%	-0.1%	0.6%
Sullivan	81,534	26,408	32.4%	81,667	26,305	32.2%	-0.4%	0.2%
Sumner	102,364	37,309	36.4%	105,556	38,232	36.2%	2.5%	3.1%
Tipton	31,923	11,807	37.0%	32,241	11,827	36.7%	0.2%	1.0%
Trousdale	4,662	1,798	38.6%	4,738	1,820	38.4%	1.2%	1.6%
Unicoi	9,140	2,847	31.1%	9,175	2,830	30.8%	-0.6%	0.4%
Union	10,117	3,369	33.3%	10,163	3,359	33.1%	-0.3%	0.5%
VanBuren	2,870	819	28.6%	2,859	802	28.0%	-2.2%	-0.4%
Warren	20,834	7,317	35.1%	20,903	7,299	34.9%	-0.3%	0.3%
Washington	67,989	26,473	38.9%	68,976	26,764	38.8%	1.1%	1.5%
Wayne	7,307	2,263	31.0%	7,243	2,218	30.6%	-2.0%	-0.9%
Weakley	16,981	6,669	39.3%	16,962	6,658	39.3%	-0.2%	-0.1%
White	14,300	4,737	33.1%	14,504	4,797	33.1%	1.3%	1.4%
Williamson	130,834	47,546	36.3%	137,181	49,623	36.2%	4.4%	4.9%
Wilson	78,082	28,418	36.4%	81,301	29,386	36.1%	3.4%	4.1%

* TN_CoPopProj_2019 UTCBER Population Projection Series.

Source: Boyd Center for Business and Economic Research, University of Tennessee, Knoxville
 Reassembled by the Tennessee Department of Health, Division of Policy, Planning and Assessment
 Note: These projections may not match Boyd Center projections precisely due to rounding.

Attachment 2C
Commercial Private Payors Contracted by
Applicant

Commercial Plans Currently Contracted with:

Aetna

Amerigroup Community Care

BCBS of TN

CareCentrix Network

Centipede Health Network

Cigna Healthspring

eviCore Healthcare

Humana

myNexus

Oscar

Provider Network of America

United Healthcare

WellCare Health Plans

Attachment 4C
TQC Job Descriptions

JOB DESCRIPTION

JOB TITLE:	HOME HEALTH - EXECUTIVE DIRECTOR	DEPARTMENT:	ADMINISTRATIVE
REPORTS TO:	AVPO	FLSA STATUS:	<input checked="" type="checkbox"/> EXEMPT <input type="checkbox"/> NON-EXEMPT
SUPERVISORY RESPONSIBILITIES	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	EFFECTIVE DATE:	8/12/2020

POSITION SUMMARY: This position is responsible for the overall direction of home health clinical services. This position establishes, implements and evaluates goals and objectives for home health services that meet and promote the standards of quality and contribute to the total organization and philosophy. The Executive Director also serves as the Clinical Manager for the purposes of meeting the Medicare Conditions of Participation.

ESSENTIAL DUTIES:

- Coordinates and oversees all direct and indirect patient services provided by clinical organization personnel.
- Provides guidance and counseling to coordinators, Directors of Nursing (DONs), Directors of Therapy (DOT), Clinical Supervisors, and various staff members to assist them in continually improving all aspects of home health care services, provided through organization personnel.
- Assists clinical supervisory staff in managing clinical teams and planning.
- Provides help in assessment, planning, implementation and evaluation of patient and family/caregiver care to all clinical personnel as indicated.
- Assists the Administrator in the preparation and administration of the organization's budget.
- Interprets operational indicators to detect census changes and increases or decreases in volume, which could impact staffing levels, revenues or expenses.
- Evaluates performance of clinical supervisory staff.
- Assists clinical supervisory staff to develop skills and techniques in evaluating the performance of clinicians.
- Hires, evaluates, and terminates organization personnel.
- Conducts clinical performance evaluations annually, or more frequently if indicated.
- Oversees the maintenance of patient clinical records, statistics, reports and records for purposes of evaluation and reporting of organization activities.
- Assures proper maintenance of clinical records in compliance with local, state and federal laws.
- Responsible for the maintenance of adequate and appropriate inventory supplies and equipment for the provision of patient services.
- Develops, implements and evaluates the orientation program for new organization personnel. Responsible for orientation of new organization personnel, either directly or by delegating to another staff member.
- Plans and implements in-services and/or continuing education programs to meet education and training needs of organization personnel.
- Assists with the evaluation of organization performance via performance improvement program, productivity, quarterly and annual reviews. Assures for the quality and safe delivery of home health services provided through the Organization.
- Assists in the development of organization goals. Develops, recommends, and administers Organization policies and procedures.
- Assures compliance with all local, state and federal laws regarding licensure and certification of organization personnel and, maintains compliance to federal/state/local and Organizational standards.
- Stays informed about changes in the field of nursing, therapy, and home health care; shares information with appropriate organization personnel.
- Promotes home health referrals in the health care community.
- In the absence of the Administrator, the Executive Director will become the acting Administrator and will be vested with authority to act in behalf of the Administrator.

JOB DESCRIPTION

- If functioning as Clinical Manager: Will be available at all times during operating hours and will provide oversight of all patient care services and personnel including making patient and personnel assignments; coordinating patient care; coordinating referrals; assuring patient needs are continually assessed: and assuring the development, implementation, and updates of the individualized plan of care.
- Other duties as assigned by the Administrator or Organization.

PERFORMANCE RESPONSIBILITIES:

- Maintains positive internal and external customer service relationships
- Maintains open lines of communication
- Plans and organizes work effectively and ensures its completion
- Meets all productivity requirements
- Demonstrates team behavior and promotes a team-oriented environment
- Actively participates in Continuous Quality Improvement
- Represents the organization professionally at all times

POSITION REQUIREMENTS & COMPETENCIES:

- Registered Nurse/ LPN/ PT/OT/SLP with current licensure to practice professionally in the state or a licensed physician in the state.
- A degree in Medicine or professional degree in from an accredited program. Master's degree in health care preferred.
- Three years of management experience in a home health or related health care organization.
- Demonstrated ability to supervise and direct professional administrative personnel.
- Ability to market and deal tactfully with customers and the community.
- Has excellent observation, verbal and written communication skills.
- Knowledge of business management, governmental/state/local regulations, and Organizational standards.
- Has been oriented to the Administrator job responsibilities.
- Must undergo pre-hire drug screening

WORKING CONDITIONS: The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. While performing the duties of this job, the employee is regularly required to sit, talk, hear; use hands to finger, and handle controls. Must be physically able to perform the duties of the position, including lifting in excess of 50lbs, with or without assistance, depending on assignment requirements. Bending and stooping to prepare equipment for consumer or managing consumer environment. Transferring, turning and positioning clients and assisting to ambulate. The employee frequently is required to reach with hands and arms. The employee is frequently required to stand, walk, and stoop. Specific vision abilities required by this job include close vision and the ability to adjust focus.

Universal precautions and infection control standards must be maintained; there may be unsafe environments in a consumer's home (e.g. pets). May be exposed to blood and body fluids, household dust, cigarette smoke, needles and other sharp instruments. May need to use mask, gloves, goggles, or gowns.

ENVIRONMENT: Moderate noise level similar to a typical office environment with computers, printers, and work activity.

Addus provides equal employment opportunities to all employees and applicants for employment and prohibits discrimination and harassment of any type without regard to race, color, religion, age, sex, national origin, disability status, genetics, protected veteran status, sexual orientation, gender identity or expression, or any other characteristic protected by federal, state or local laws.

This policy applies to all terms and conditions of employment, including recruiting, hiring, placement, promotion, termination, layoff, recall, transfer, leaves of absence, compensation and training.

EMPLOYEE ACKNOWLEDGMENT

JOB DESCRIPTION

I acknowledge by my signature that I have read and understand the duties and responsibilities, physical demands, and work environment of the position and all other standards expected of me. I understand this job description in no way states or implies that these are the only duties to be performed by me in this position. Nothing in this job description restricts the right of an authorized person to assign or reassign duties and responsibilities to this job at any time. I also understand that nothing in this job description is meant to create a contract of employment or alter in any way the employment-at-will status of the employee in this job.

EMPLOYEE NAME: _____

DATE: _____

EMPLOYEE SIGNATURE: _____

DATE: _____

JOB DESCRIPTION

JOB TITLE:	HOME HEALTH - LICENSE PRACTICAL/VOCATIONAL NURSE	DEPARTMENT:	DIRECT SERVICES
REPORTS TO:	DIRECTOR OF NURSING	FLSA STATUS:	<input type="checkbox"/> EXEMPT <input checked="" type="checkbox"/> NON-EXEMPT
SUPERVISORY RESPONSIBILITIES	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	EFFECTIVE DATE:	8/14/2020

POSITION SUMMARY: The Licensed Practical/Vocational Nurse is responsible for providing direct patient care under the supervision of a registered nurse. Responsibilities include following the plan of care, providing treatments, and working collaboratively with the members of the team to help meet positive patient care outcomes

ESSENTIAL DUTIES:

- Provides direct patient care as defined in the state Nurse Practice Act.
- Implements plan of care initiated by the registered nurse.
- Provides accurate and timely documentation consistent with the plan of care.
- Assesses and provides patient and family/caregiver education regarding self-care techniques and information pertinent to diagnosis and plan of care.
- Participates in coordination of home health services, appropriately reporting the identified needs for other disciplines (HHA, OT, PT, MSW, ST, Dietician) to the registered nurse and/or Clinical Supervisor.
- Uses and/or prepares equipment and supplies effectively and efficiently adhering to aseptic technique.
- Participates in personal and professional growth and development.
- Performs other duties as assigned by the registered nurse.
- Provides health care instructions to the patient as appropriate per assessment and plan of care.
- Performs other duties as assigned.

PERFORMANCE RESPONSIBILITIES:

- Maintains positive internal and external customer service relationships
- Maintains open lines of communication
- Plans and organizes work effectively and ensures its completion
- Meets all productivity requirements
- Demonstrates team behavior and promotes a team-oriented environment
- Actively participates in Continuous Quality Improvement
- Represents the organization professionally at all times

POSITION REQUIREMENTS & COMPETENCIES:

- Graduate of an accredited practical nurse or vocational nursing program.
- Has three (3) years nursing experience. Community/home health or medical/surgical experience is preferred.
- Currently licensed as a licensed practical nurse or licensed vocational nurse in the state.
- Possess and maintain valid CPR certification.
- Complies with accepted professional standards and practice.
- Demonstrates good verbal and written communication, and organization skills.
- Must have reliable transportation, current driver's license and appropriate automobile insurance
- Must undergo pre-hire drug screening

WORKING CONDITIONS: The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. While performing the duties of this job, the employee is regularly required to sit, talk, hear; use hands to finger, and handle controls. Must be physically able to perform the duties of the position, including lifting in excess of 50lbs, with or without assistance, depending on assignment requirements. Bending and stooping to prepare equipment

JOB DESCRIPTION

for consumer or managing consumer environment. Transferring, turning and positioning clients and assisting to ambulate. The employee frequently is required to reach with hands and arms. The employee is frequently required to stand, walk, and stoop. Specific vision abilities required by this job include close vision and the ability to adjust focus.

Universal precautions and infection control standards must be maintained; there may be unsafe environments in a consumer's home (e.g. pets). May be exposed to blood and body fluids, household dust, cigarette smoke, needles and other sharp instruments. May need to use mask, gloves, goggles, or gowns.

ENVIRONMENT: Moderate noise level similar to a typical home environment.

Addus provides equal employment opportunities to all employees and applicants for employment and prohibits discrimination and harassment of any type without regard to race, color, religion, age, sex, national origin, disability status, genetics, protected veteran status, sexual orientation, gender identity or expression, or any other characteristic protected by federal, state or local laws.

This policy applies to all terms and conditions of employment, including recruiting, hiring, placement, promotion, termination, layoff, recall, transfer, leaves of absence, compensation and training.

EMPLOYEE ACKNOWLEDGMENT

I acknowledge by my signature that I have read and understand the duties and responsibilities, physical demands, and work environment of the position and all other standards expected of me. I understand this job description in no way states or implies that these are the only duties to be performed by me in this position. Nothing in this job description restricts the right of an authorized person to assign or reassign duties and responsibilities to this job at any time. I also understand that nothing in this job description is meant to create a contract of employment or alter in any way the employment-at-will status of the employee in this job.

EMPLOYEE NAME: _____

DATE: _____

EMPLOYEE SIGNATURE: _____

DATE: _____

JOB DESCRIPTION

JOB TITLE:	HOME HEALTH - REGISTERED NURSE (RN)	DEPARTMENT:	DIRECT SERVICES
REPORTS TO:	DIRECTOR OF NURSING	FLSA STATUS:	<input checked="" type="checkbox"/> EXEMPT <input type="checkbox"/> NON-EXEMPT
SUPERVISORY RESPONSIBILITIES	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	EFFECTIVE DATE:	12/21/2022

POSITION SUMMARY: The registered nurse plans, organizes and directs home care services and is experienced in nursing, with emphasis on community health education/experience. The professional nurse builds from the resources of the community to plan and direct services to meet the needs of individuals and families within their homes and communities.

ESSENTIAL DUTIES:

- Completes an initial assessment of patient and family to determine home care needs. Provides a complete physical assessment and history of current and previous illness(es).
- Observe and report any signs or symptoms indicative of changes in condition of the patient and family situation. Document such reports and observations in the clinical record and notify supervisor.
- Regularly re-evaluates patient nursing needs.
- Initiates the plan of care and makes necessary revisions as patient status and needs change.
- Uses health assessment data to determine nursing diagnosis.
- Develops a care plan, which establishes goals based on nursing diagnosis and incorporates therapeutic, preventive, and rehabilitative nursing actions. Includes the patient and the family in the planning process.
- Initiates appropriate preventive and rehabilitative nursing procedures. Administers medications and treatments as prescribed by the provider.
- Provides direct patient care as defined in the State Nurse Practice Act.
- Counsels the patient and family in meeting nursing and related needs.
- Provides health care instructions to the patient as appropriate per assessment and plan of care.
- Identifies discharge planning needs as part of the care plan development and implements prior to discharge of the patient.
- Acts as Case Manager when assigned by Clinical Supervisor and assumes responsibility to coordinate patient care for assigned caseload.
- Prepares clinical notes and updates the primary provider when necessary and at least every 60 days.
- Communicates with all relevant providers regarding the patient's needs and reports any changes in the patient's condition; obtains/receives orders as required.
- Communicates with community health related persons to coordinate the care plan.
- Performs other duties as assigned.

PERFORMANCE RESPONSIBILITIES:

- Maintains positive internal and external customer service relationships
- Maintains open lines of communication
- Plans and organizes work effectively and ensures its completion
- Meets all productivity requirements
- Demonstrates team behavior and promotes a team-oriented environment
- Actively participates in Continuous Quality Improvement
- Represents the organization professionally at all times

POSITION REQUIREMENTS & COMPETENCIES:

- Graduate from an accredited registered nursing program
- Licensed as a RN in the state of practice and CPR certifications required.
- At least one (1) year clinical practical nursing experience preferably in intensive care, rehabilitation or medical surgical nursing (preferred)



JOB DESCRIPTION

- Home health experience preferred
- Ability to make home visits and provide nursing care in the home environment
- Ability to complete necessary documentation appropriately, legibly and timely
- Interpersonal, verbal, and written communication skills necessary to complete job responsibilities
- Must have reliable transportation, current driver's license and appropriate automobile insurance
- Complies and maintains current CPR certification.
- Must undergo pre-hire drug screening

WORKING CONDITIONS: The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. While performing the duties of this job, the employee is regularly required to sit, talk, hear; use hands to finger, and handle controls. Must be physically able to perform the duties of the position, including lifting in excess of 50lbs, with or without assistance, depending on assignment requirements. Bending and stooping to prepare equipment for consumer or managing consumer environment. Transferring, turning and positioning clients and assisting to ambulate. The employee frequently is required to reach with hands and arms. The employee is frequently required to stand, walk, and stoop. Specific vision abilities required by this job include close vision and the ability to adjust focus.

Universal precautions and infection control standards must be maintained; there may be unsafe environments in a consumer’s home (e.g. pets). May be exposed to blood and body fluids, household dust, cigarette smoke, needles and other sharp instruments. May need to use mask, gloves, goggles, or gowns.

ENVIRONMENT: Moderate noise level similar to a typical home environment.

Addus provides equal employment opportunities to all employees and applicants for employment and prohibits discrimination and harassment of any type without regard to race, color, religion, age, sex, national origin, disability status, genetics, protected veteran status, sexual orientation, gender identity or expression, or any other characteristic protected by federal, state or local laws.

This policy applies to all terms and conditions of employment, including recruiting, hiring, placement, promotion, termination, layoff, recall, transfer, leaves of absence, compensation and training.

EMPLOYEE ACKNOWLEDGMENT

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EMPLOYEE NAME: _____

DATE: _____

EMPLOYEE SIGNATURE: _____

DATE: _____

JOB DESCRIPTION

JOB TITLE:	HOME HEALTH – OCCUPATIONAL THERAPIST	DEPARTMENT:	SKILLED
REPORTS TO:	DIRECTOR OF NURSING	FLSA STATUS:	<input checked="" type="checkbox"/> EXEMPT <input type="checkbox"/> NON-EXEMPT
SUPERVISORY RESPONSIBILITY:	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	EFFECTIVE DATE:	12/21/2022

POSITION SUMMARY: The Occupational Therapist plans and provides Occupational Therapy services to the clients in their home in accordance with the plan of care and agency policies and procedures. The Occupational Therapist performs functions which require substantial specialized knowledge, judgment and skill based upon the principles of psychological, biological and social services and must be able to make judgments accordingly.

ESSENTIAL DUTIES:

- Provides occupation therapy services to patients according to a written physician's plan of care and as defined in the state Occupational Therapy Practice Act.
- Develops treatment program and establishes goals for improved function. Communicates plan of care to referring physician and other Organization professionals as needed.
- May teach new skills or retrain patient in once familiar daily activities that have been lost due to illness or injury, in accordance with our policy.
- May fabricate splints and instruct patient in the use of various types of adaptive equipment to improve function.
- May train patient in the use of prosthetic and/or orthotic devices.
- Maintains appropriate clinical records, clinical notes, and reports to the physician any changes in the patient's condition. Submits these records in accordance with our policy.
- Maintains contact/communication with other personnel involved in the patient's care to promote coordinated, efficient care.
- Attends and contributes to in-services, case conferences, and other meetings as required by our policy to ensure coordinated and comprehensive plans of care for the patient.
- Identifies patient and family/caregiver needs for other home health services and refers as appropriate.
- Instructs patient's family/caregiver and other health care personnel in patient's treatment regime when indicated and appropriate.
- Supervises certified occupational therapy assistants according to organization policy and state regulations.
- When therapy is the only skilled service, instructs, supervises and evaluates home health aide care every two (2) weeks.
- Participates in discharge planning for patient.
- Perform other duties as assigned

PERFORMANCE RESPONSIBILITIES:

- Maintains positive internal and external customer service relationships
- Maintains open lines of communication
- Plans and organizes work effectively and ensures its completion
- Meets all productivity requirements
- Demonstrates team behavior and promotes a team-oriented environment
- Actively participates in Continuous Quality Improvement, educational programs, and staff meetings
- Represents the organization professionally at all times

POSITION REQUIREMENTS & COMPETENCIES:

- Graduate of an occupational therapy curriculum accredited jointly by the Committee on Allied Health Education and Accreditation of the American Medical Association and the American Occupational Therapy Association.
- Registered with the National Registration Examination of the American Occupational Therapy Association.

JOB DESCRIPTION

- At least Two (2) years of clinical experience as an occupational therapist. (Preferred)
- Demonstrates good verbal and written communication, and organization skills.
- Must have reliable transportation, current driver's license and appropriate automobile insurance
- Complies and maintains current CPR certification.
- Must undergo pre-hire drug screening

WORKING CONDITIONS: The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. While performing the duties of this job, the employee is regularly required to sit, talk, hear; use hands to finger, and handle controls. Must be physically able to perform the duties of the position, including lifting in excess of 50lbs, with or without assistance, depending on assignment requirements. Bending and stooping to prepare equipment for consumer or managing consumer environment. Transferring, turning and positioning clients and assisting to ambulate. The employee frequently is required to reach with hands and arms. The employee is frequently required to stand, walk, and stoop. Specific vision abilities required by this job include close vision and the ability to adjust focus.

Universal precautions and infection control standards must be maintained; there may be unsafe environments in a consumer's home (e.g. pets). May be exposed to blood and body fluids, household dust, cigarette smoke, needles and other sharp instruments. May need to use mask, gloves, goggles, or gowns.

ENVIRONMENT: Moderate noise level similar to a typical home environment and/or typical office environment with computers, printers, and work activity.

EMPLOYEE ACKNOWLEDGMENT

I acknowledge by my signature that I have read and understand the duties and responsibilities, physical demands, and work environment of the position and all other standards expected of me. I understand this job description in no way states or implies that these are the only duties to be performed by me in this position. Nothing in this job description restricts the right of an authorized person to assign or reassign duties and responsibilities to this job at any time. I also understand that nothing in this job description is meant to create a contract of employment or alter in any way the employment-at-will status of the employee in this job.

EMPLOYEE NAME: _____

EMPLOYEE SIGNATURE: _____

DATE: _____

JOB DESCRIPTION

JOB TITLE:	HOME HEALTH – PHYSICAL THERAPIST	DEPARTMENT:	SKILLED
REPORTS TO:	DIRECTOR OF NURSING	FLSA STATUS:	<input checked="" type="checkbox"/> EXEMPT <input type="checkbox"/> NON-EXEMPT
SUPERVISORY RESPONSIBILITY:	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	EFFECTIVE DATE:	12/21/2022

POSITION SUMMARY: The Physical Therapist plans and provides physical therapy services to the clients in their home in accordance with the plan of care and agency policies and procedures. The Physical Therapist performs functions which require substantial specialized knowledge, judgment and skill based upon the principles of psychological, biological and social services and must be able to make judgments accordingly.

ESSENTIAL DUTIES:

- Provides physical therapy services to patients according to a written physician's plan of care and as defined in the state Physical Therapy Practice Act.
- Advise, consult and teach appropriate treatment procedures and supportive activities to clients, family members and other agency staff
- Assist the provider in evaluating level of function
- Participate in the development of the plan of care
- Prepare clinical and progress notes
- Translate all exercise into functional activities or activities of daily living
- Develop needed plans for modifying equipment, appliances and the physical surrounding in clients home
- Confer regularly with attending provider regarding client's progress and report the physical and emotional conditions and reactions to treatment and interpret social and physical factors in the environment that affect care
- Interpret to the client and family the implication of the treatment consistent with the actions and wishes of the provider
- Provide families with information, support and encouragement to help motivate them in their progress
- Teach basic principles of good posture and body mechanics in relation to changing needs of individuals in all age groups
- May train patient in the use of prosthetic device
- Prepares and submits clinical and progress summaries based on the attainment of goals.
- Participates in discharge planning for patient.
- Participates in peer consultation process.
- Supervises physical therapy assistants according to organization policy and state regulations.
- When therapy is the only skilled service, instructs, supervises and evaluates home health aide care every two (2) weeks.
- Provides in-service education programs for nursing organization personnel as needed.
- Communicate effectively with all members of the interdisciplinary team
- Participate in the educational program of the new staff and students in the area of practice
- Maintains accurate clinical records, keeping track of goals and progress of clients'
- Abides by all regulations, policies, procedures and standards
- Teaches clients' how to properly use exercise techniques
- Perform other duties as assigned

PERFORMANCE RESPONSIBILITIES:

- Maintains positive internal and external customer service relationships
- Maintains open lines of communication
- Plans and organizes work effectively and ensures its completion
- Meets all productivity requirements
- Demonstrates team behavior and promotes a team-oriented environment
- Actively participates in Continuous Quality Improvement, educational programs, and staff meetings
- Represents the organization professionally at all times

JOB DESCRIPTION

POSITION REQUIREMENTS & COMPETENCIES:

- Graduate from a School of Physical Therapy approved by the American Physical Therapy Association or Allied Health Education and Accreditation of the American Medical Association and the Physical Therapy Association
- Current licensure as a Physical Therapist in the state of practice
- At least two (2) years' experience in an acute hospital or equivalent experience (preferred)
- Must possess current CPR and First Aid Certification
- Ability to make home visits and provide nursing care in the home environment
- Possess knowledge of principles and practices of physical therapy
- Ability to complete necessary documentation appropriately, legibly and timely
- Interpersonal, verbal, and written communication skills necessary to complete job responsibilities
- Must have reliable transportation, current driver's license and appropriate automobile insurance
- Must undergo pre-hire drug screening

WORKING CONDITIONS: The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. While performing the duties of this job, the employee is regularly required to sit, talk, hear; use hands to finger, and handle controls. Must be physically able to perform the duties of the position, including lifting in excess of 50lbs, with or without assistance, depending on assignment requirements. Bending and stooping to prepare equipment for consumer or managing consumer environment. Transferring, turning and positioning clients and assisting to ambulate. The employee frequently is required to reach with hands and arms. The employee is frequently required to stand, walk, and stoop. Specific vision abilities required by this job include close vision and the ability to adjust focus.

Universal precautions and infection control standards must be maintained; there may be unsafe environments in a consumer's home (e.g. pets). May be exposed to blood and body fluids, household dust, cigarette smoke, needles and other sharp instruments. May need to use mask, gloves, goggles, or gowns.

ENVIRONMENT: Moderate noise level similar to a typical home environment and/or typical office environment with computers, printers, and work activity.

EMPLOYEE ACKNOWLEDGMENT

I acknowledge by my signature that I have read and understand the duties and responsibilities, physical demands, and work environment of the position and all other standards expected of me. I understand this job description in no way states or implies that these are the only duties to be performed by me in this position. Nothing in this job description restricts the right of an authorized person to assign or reassign duties and responsibilities to this job at any time. I also understand that nothing in this job description is meant to create a contract of employment or alter in any way the employment-at-will status of the employee in this job.

EMPLOYEE NAME: _____

EMPLOYEE SIGNATURE: _____

DATE: _____

Attachment 5C
Applicable TQC Policies

HOME HEALTH AIDE TRAINING
Policy No. 1-012.1**PURPOSE**

To outline a home health aide training program to ensure the competence and skills of home care aides.

POLICY

Tennessee Quality Care will only hire individuals as home health aides on a full time, temporary, per diem or other basis who have completed a training program or a competency evaluation program that meets the organization's criteria described below:

1. If the individual has not been employed and provided services as a certified home health aide for a continuous period of 24 months since completing a program, then the individual is not considered to have completed either a training and competency program, or a competency evaluation program. If there is a 24-month lapse in furnishing services, the individual must complete another program.
2. The organization will provide performance reviews (at least annually) and inservice education to ensure competence of home health aides. The performance review will address each of the areas of the competency evaluation. The inservices will be provided by a qualified instructor and may occur while an aide is providing care to patients.

Definitions

Pseudo-patient: means a person trained to participate in role-play situation, or a computer-based mannequin device.

Note: A pseudo-patient must be capable of responding to and interacting with the home health aide trainee, and must demonstrate the general characteristic to the primary patient population served by the HHA in key areas such as age, frailty, functional status and cognitive stats.

Simulation: means a training and assessment technique that mimics the reality of the homecare environment.

Note: This includes environmental distractions and constraints that evoke or replicate substantial aspects of the real world in a fully interactive fashion, in order to teach and assess proficiency in performing skills, and to promote decision making and critical thinking.

Criteria

1. A home health aide training program must include a minimum of 75 hours of a combination of classroom and supervised practical training. The training program must contain at least 16 hours of supervised practical training. Supervised practical training could occur in the course of providing care to patients as long as the trainee is accompanied by a registered nurse or licensed practical nurse/licensed vocational nurse who retains responsibility for the care being provided.

2. The home health aide training program must include each of the following subject areas (basic checklist):
 - A. Communication skills, including the ability to read, write, and verbally report clinical information to patients, representatives, and caregivers, as well as to other organization staff.
 - B. Observation, reporting, and documentation of patient status and care furnished.
 - C. Reading and recording temperature, pulse and respiration.
 - D. Basic infection prevention and control procedures.
 - E. Basic elements of body function and changes in body function that must be reported to an aide's Clinical Supervisor.
 - F. Maintenance of a clean, safe, and healthy environment.
 - G. Recognizing emergencies and knowledge of instituting emergency procedures and their application.
 - H. The physical, emotional, and developmental characteristics of the populations served by the organization, including the need for respect for the patient, his/her privacy, and property.
 - I. Appropriate and safe techniques in personal hygiene and grooming, including bed bath; sponge, tub or shower bath; hair shampooing in sink, tub and bed; nail and skin care; oral hygiene, toileting and elimination.
 - J. Safe transfer techniques and ambulation.
 - K. Normal range of motion and positioning.
 - L. Adequate nutrition and fluid intake.
 - M. Recognizing and reporting changes in skin condition, including pressure ulcers.
 - N. Any other tasks that Tennessee Quality Care may choose to have the home health aide perform under state law. The organization is responsible for training the aide for skills not covered in the basic checklist.
3. The supervisor or instructor must be a registered nurse and must evaluate by observing an aide's performance of the task with a patient or pseudo-patient to determine competency. The tasks that shall be observed include:
 - A. Communication skills, including the ability to read, write and verbally report clinical information to patients, caregivers and other hospice staff.
 - B. Reading and recording temperature, pulse and respiration

- C. Appropriate and safe techniques in performing personal hygiene and grooming tasks, including the following items:
 - 1. Bed bath
 - 2. Sponge, tub and shower bath
 - 3. Hair shampoo (sink, tub and bed)
 - 4. Nail and skin care
 - 5. Oral hygiene
 - 6. Toileting and elimination
 - D. Safe transfer techniques and ambulation
 - E. Normal range of motion
4. Instructors for home health aide training and competency evaluation programs may be registered nurses with two (2) years of nursing experience and at least one (1) year in home health care. Other skilled professionals may supplement the instruction as long as they function under the supervision of a qualified instructor (RN).
5. Documentation that the requirement relating to the training program and competency evaluation program has been met must include:
- A. Description of the training/competency program, including qualifications of the instructor.
 - B. Documentation that confirms that competency was determined by direct observation and the results of those observations.
 - C. A record, which identifies skills taught and demonstrated during patient care, and those taught in a laboratory.
 - D. How additional skills beyond the basic skills are taught and tested if the admission policies and case-mix of patients require aides to assist medically complex patients.
6. A home health aide will not be considered competent in any task in which they are evaluated "Unsatisfactory." The aide must not perform that task without direct supervision. The aide may perform the task that was evaluated as unsatisfactory after retesting in that area and receiving a satisfactory evaluation. There is no limit on the number of times that an individual may be retested.

A home health aide will not be considered to have successfully passed a competency evaluation if he/she has an "Unsatisfactory" rating in more than one (1) of the required areas.

7. Tennessee Quality Care may offer a competency preparation program in lieu of the formal training program. This program, designed to prepare home health aides to pass the competency evaluation, will not be subject to the 75 hour requirement. Tennessee Quality Care may also offer a remedial program in areas where home health aides have been evaluated as “Unsatisfactory”. After this program and retesting, if the home health aide is evaluated as “Satisfactory”, they would be competent to perform the task. Documentation of all preparation and evaluation will be kept in the personnel file.

PROCEDURE

1. All home health aides will complete written or oral examination (or through observation of an aide with a patient or pseudo-patient during a simulation) in the following areas:
 - A. Observing and reporting, and documentation of patient status and the care or services furnished
 - B. Basic infection control procedures
 - C. Basic elements in body functioning and changes in body function that must be reported to an aide’s supervisor
 - D. Maintenance of a clean, safe environment and healthy environment
 - E. Recognizing emergencies and initiating necessary emergency procedures
 - F. Physical, emotional and developmental needs of and ways to work with the populations served by the home health aide, including the need to respect the patient and their privacy and property.
 - G. Adequate nutrition and fluid intake
 - H. Any other task that the organization may choose to have the home health aide perform as permitted under state law.
2. When an employment offer is extended to the applicant, the organization will:
 - A. Review written/oral test with applicant
 - B. Obtain copy of competency testing, if done previously
 - C. Review skills checklist
 - D. If competency testing is required, determine training needs before competency testing is scheduled
 - E. Schedule orientation

- F. Schedule training/competency testing time
 - 1. The appropriate Clinical Supervisor will ensure completion of the manual skills evaluation on all home health aide personnel
 - 2. Areas evaluated as “Unsatisfactory” will be reviewed
 - 3. Practical training will be provided with supervision
 - 4. Competency skill will be re-evaluated
 - 5. Documentation will be made in personnel file
 - 6. For the purpose of the skills evaluation, a patient is defined as a live volunteer in a lab setting or an actual patient in a home
- 3. The home health aide competency evaluation program will be under the direction of the appropriate Clinical Supervisor.
 - A. Home health aide personnel files will be reviewed quarterly
 - B. All files must contain:
 - 1. Copy of competency training and/or evaluation
 - 2. Competency Orientation Skills Checklist (See “[Initial Competency Assessment Skills Checklist \(Sample for the Home Health Aide\)](#)” Addendum 3-002.D)
 - 3. Inservice records
 - 4. Annual performance reviews which will include:
 - a. On-site skills assessments for supervisory visits done every six (6) months
 - b. Updating of skills checklist
 - c. Compliance with inservice requirements
- 4. Tennessee Quality Care will complete a performance and competency evaluation for each home health aide at least once annually.

5. The organization will offer 12 hours of inservice training annually. Topics may include, but not be limited to:

Nutrition	1 hour
Personal Care & Hygiene	1 hour
Coping with Feelings	1 hour
Safe Mobility & Patient Transfer	1 hour
How to Monitor, Evaluate & Report on Patient Condition	1 hour
Standard Precautions	1 hour
Emergency Preparedness Plan	1 hour
Agency-specific subjects	3 hours
OSHA Bloodborne Pathogens	2 hours

Note: Many elements of this home health aide training program are appropriate for other home care aide personnel and other personal care providers.

SUPERVISION
Policy No. 1-007.1**PURPOSE**

To ensure that qualified personnel direct patient care and that supervision is available during all operating hours.

POLICY

All skilled nursing, students and other therapeutic services will be provided under the supervision or direction of a qualified Clinical Supervisor and/or designee.

The administrator or designated individual is available during all operating hours.

PROCEDURE

1. A registered nurse is available on the premises or by telephone/electronic paging 24 hours a day.
2. The Clinical Supervisor or designee will be available for consultation 24 hours a day via an electronic paging system. The process for contacting the designated Clinical Supervisor will be reviewed during staff orientation.
3. A registered nurse (or therapist, when appropriate) will be available whenever home health aide services are provided. Home health aide services will be supervised every fourteen (14) days.
4. A Clinical Supervisor at least once per year will observe all clinicians in the home.
5. A summary of the field supervisory visits will be documented utilizing an observation tool. The results will be shared with the clinician. A copy will be retained in the personnel file.
6. If services are contracted from another organization, the organization will be expected to comply with the organization's staff supervision policies.
7. Supervision of patients who are not patients of the organization and whose services are provided through a contract with another organization will be in accordance with the contracting organization's plan of care and contract.
8. Tennessee Quality Care verifies that supervisory staff understand and have the clinical and supervisory experience in all the care, treatment and services that they are required to supervise. Tennessee Quality Care verifies that supervisory staff understand the staff responsibilities associated with the level of care provided by the staff they supervise. When a Clinical Supervisor does not have experience related to the clinical specialty area, he/she will consult with the Clinical Director, Executive Director/Administrator or an appropriate supervisory consultant to provide the supervision.

COMPETENCY ASSESSMENT
Policy No. 1-008.1**PURPOSE**

To outline the process of assessing staff competence.

POLICY

The competence of all organization staff (employed, contract, or volunteer) will be assessed during orientation, during the probationary period, periodically throughout the course of the year, when job responsibilities or duties change and during the annual performance evaluation. Educational activities will be based, in part, on the outcomes of the competency evaluation.

PROCEDURE***Orientation and Probationary Period***

1. As part of the orientation process, a preceptor/Clinical/assigned Supervisor will be assigned to each new person.
2. Using a Competency Skills Performance Checklist, and the Orientation Checklist, the preceptor/Clinical/assigned Supervisor will observe the new personnel performing the required skills and activities.
3. Upon completion of the checklists, the new staff will end initial orientation.

Ongoing Assessments

1. Competency assessments will be completed at least one (1) time per year. Additional competencies may be required for performance issues, new technology, or other appropriate indications.
2. Using a Competency Skills Performance Checklist, the Supervisor will evaluate the competence in performing and rendering care according to organization policies and standards of practice. When there is no qualified individual available to perform competencies for comparable care, treatment and services, the organization may utilize qualified staff from other organizations or consult the appropriate professional organization for guidelines to assess competence.
3. Clinical staff will make a joint visit with a Clinical Supervisor annually for direct observation assessment.
4. Based on the identified clinical needs during reviews, the inservice education plan will incorporate training on issues where trends and patterns are identified for all staff.

5. Isolated episodes relating to individual performance will be addressed on an individual basis. Actions may include one-on-one counseling and/or mentoring, reviewing resource information, inservice training or continuing education.
6. In addition to the continuous review of personnel competence, the following measures will be monitored and trended for use in improving staff performance:
 - A. Personnel injuries
 - B. Incidents relating to both patients and personnel
 - C. Infections among patients and personnel
 - D. Patient complaints
 - E. Personnel complaints
 - F. Personnel opinion surveys
 - G. Patient satisfaction surveys

Annual Performance Evaluation

1. During the annual performance evaluation, staff's competence in performing specified activities will be evaluated.
2. Staff will be asked to demonstrate their core competencies in specific areas relating to their job description and functions and needs of the populations served (i.e., home health aides demonstrate skills for ADLs, bathing, toileting, etc.; nurses performing Infusion Therapy demonstrate skills for venipuncture, accessing ports; medical word processors demonstrate skill for word processing.)
3. Improving skills for competency will be part of the annual performance evaluation and performance plans for the next year, as well as establishing individual goals for personal/professional growth and development.

COMPETENCY PATTERNS AND TRENDS
Policy No. 1-009.1**PURPOSE**

To outline the process of improving staff competence.

POLICY

The organization will use competency assessment findings or data from performance improvement activities to identify opportunities for staff to improve competencies. Appropriate actions will be taken to improve the individual's competence.

PROCEDURE

1. Individual competence assessment findings and data from performance improvement activities will be continuously collected and analyzed to target areas for the improvement of personnel competence.
2. Data on individual competence and performance improvement activities may include, but not be limited to:
 - A. Incident reports (See policy "Incident Reporting" in the Administration manual for the breakdown of areas)
 - B. Patient infections
 - C. Organization personnel infections
 - D. Safety and environment hazards
 - E. Unsafe practices
 - F. Complaints
 - G. Patient satisfaction surveys
 - H. Joint visit reports/supervisory visits
 - I. Personnel needs assessment surveys
3. The above information will be analyzed for trends and patterns, which may be addressed through education, training and/or other teaching methods.

STAFFING AND SCHEDULING**Policy No. 2-031.1****PURPOSE**

To ensure continuity of care for all patients while receiving home health services.

To define the organization's expectation for communication between clinicians and the office.

POLICY

Continuity of care is fostered by assigning consistent personnel to the patient whenever possible. This includes limiting the number of identified organization personnel, whenever possible, who are caring for the patient. The exception is for on-call visits, weekend, and holiday coverage.

Clinicians will contact the office daily to confirm their schedules and caseload, and to receive reports on patients.

PROCEDURE

1. The Clinical Services Manager will review the patient census and staffing levels on a daily basis and will make patient assignments which consider:
 - A. Geographic area
 - B. Patient needs and skills required
 - C. The skill, education, training, and availability of personnel
 - D. Language and communication requirements
 - E. Patient acuity
 - F. Patient load
 - G. Previous organization personnel assigned to case
 - H. Patient request for personnel
2. The Clinical Services Manager will consult the Clinical Director or Executive Director/Area Vice President regarding any daily staffing issues that cannot be resolved.
3. Clinicians will contact the office daily to:
 - A. Confirm their schedule for the day

- B. Receive any necessary reports on patient to be visited
 - C. Confirm caseload with Clinical Services Manager or designee
4. Clinicians will communicate with the office to verify that all planned visits for the day were made, to report availability for visits the next day, and to receive reports on admission or changes for the next day's schedule.
 5. Clinicians cannot alter the schedule for assignment of cases without the prior approval of Clinical Services Manager or designee. The clinician should alert the Clinical Services Manager of any requests.
 6. If an emergency arises or if any organization personnel are ill and it is impossible to fulfill their obligations, it is mandatory that the organization personnel contact the organization as soon as possible to report the absence.

ON-CALL/WEEKEND STAFFING**Policy No. 2-032.1****PURPOSE**

To define the on-call system for assuring 24-hour coverage of services.

POLICY

Patient care needs are the highest priority; therefore, weekend and evening staffing will be scheduled accordingly. Clinical personnel are expected to perform visits on an as-needed basis, including weekends and holidays.

There will be on-call staff available after office hours Monday through Friday, and 24 hours a day on weekends and holidays. Staff on-call will be:

1. Administrative call by a Senior Management staff member
2. Clinical call by a registered nurse (all registered nurses will participate in an on-call rotation)

PROCEDURE

1. On admission, each patient will be made aware of the organization's 24-hour availability.
2. The on-call schedule will be developed on a monthly basis by the Clinical Services manager or designee. The schedule will be forwarded to the answering service and on-call staff.
3. The on-call staff can be reached by calling the home health number. After hours, this number will be forwarded to a professional answering service.
4. The on-call nurse will be issued a pager and/or a cellular phone to allow for mobility.
5. Reports will be given to the on-call nurse daily Monday through Friday. Supplies and records will be available to the on-call staff through direct access to the office.
6. Clinical staff must respond to a page within 15 minutes and be able to reach a patient within one (1) hour. (There may be rare exceptions, depending on how far away the patient lives and if the staff member is with another patient at the time of the page.)
7. In the event the patient has an emergency need, the on-call staff member will call 911 on behalf of the patient and report to the patient's home immediately, as appropriate.
8. The on-call nurse will report his/her evening and/or weekend patient care activities to the Clinical Director on the next business day.

9. All on-call activities concerning a patient will be documented on the on-call communication form. If an on-call visit is necessary, the activities of the visit will be documented in the clinical note.

RECRUITMENT, RETENTION, DEVELOPMENT, AND CONTINUING EDUCATION

Policy No. 4-012.1

PURPOSE

To outline guidelines for the recruitment, retention, development and continuing education of organization personnel.

POLICY

The Governing Body, through the Executive Director/Area Vice President and senior management, will provide for the needs of its patients by attracting and retaining the number and type of qualified, competent organization personnel needed to provide safe and effective care. The Governing Body accepts the responsibility and duty to provide good physical working conditions to maintain and pursue personnel practices that are consistent with the welfare of personnel.

PROCEDURE

1. Senior management will address the issues of recruitment and retention, development and continuing education of organization personnel. Factors that will be considered include, but will not be limited to:
 - A. The organization's mission and philosophy, as well as values and vision
 - B. The organization's strategic and business plan, including any new care programs and staffing needs
 - C. The degree and complexity of care required by patients
 - D. Technology used while providing care in the home
 - E. Identified learning needs of organization personnel, obtained through supervisory visits, questionnaires, performance improvement results, incident reports, etc.
 - F. Mechanisms for recognizing the expertise and performance of organization personnel, including a formal recognition program, memos, biannual organization-wide meetings, etc.
 - G. Issues identified or stated by organization personnel that influence their decision to continue employment, through opinion surveys and other methods
2. The Clinical Services Manager, in conjunction with the Executive Director/Area Vice President, will develop an overall plan for the recruitment, retention, development and continuing education of organization personnel, both clinical and support services.

3. The plan will be evaluated as part of the organization's annual evaluation and may include such measures as:
 - A. Turnover rate
 - B. Percentage of unfilled positions
 - C. Length of time for unfilled positions
 - D. Percentage of exit interviews conducted

IMPROVING ORGANIZATIONAL PERFORMANCE

Policy No. 4-015.1

PURPOSE

To establish a performance improvement framework, which integrates activities to improve organization performance, manage change, improve patient safety, improve quality of care, treatment or services and reduce the risks for acquisition and transmission of infections.

To improve organizational performance by focusing on high risk, high volume, and problem-prone areas.

POLICY

Senior management, as delegated and approved by the Governing Body, will carry the responsibility: to guide the organization's efforts in improving organizational performance in governance, management, clinical and support activities; to define expectations and priorities of the performance improvement activities; to define the frequency and detail of data collection and to generate the plan and processes the organization will utilize to assess, improve and maintain quality and safety of care and service.

All personnel will be active participants in the organization's performance improvement activities.

PROCEDURE

1. The Governing Body will review the QAPI plan and update it to reflect any changes in strategic priorities and in response to any changes in the internal or external environment.
2. Senior management will:
 - A. Participate in educational activities to increase their level of understanding and ability to implement performance improvement activities. The educational activities may include seminars, consultations, readings, periodicals, benchmarking, and review of available information from other organizations regarding the occurrence of sentinel events to reduce the risk of similar sentinel events within the organization.
 - B. Set expectations for performance improvement, set priorities and frequency of data collection and manage processes to improve organization performance.
 - C. Focus on high risk, high volume, and problem-prone areas. Consider incidence, prevalence, and severity of problems in those areas and lead to an immediate correction of any identified problem that directly or potentially threaten the health and safety of patients.

Note: Examples of areas of risk include blood-borne infections, wound care, undetected urinary tract infections, oxygen-related fires, and patient handoff to or from the home care organization.

- D. Adopt a scientific, problem-solving approach to performance improvement. The scientific, problem-solving approach will include, minimally:
1. Planning for performance improvement with integration of information from other relevant activities
 - a. Risk management
 - b. Utilization management
 - c. Patient outcomes
 1. Improved outcomes
 2. Hospital admissions
 3. Hospital readmissions
 4. Use of emergent care services
 - d. Quality control
 - e. Infection control surveillance
 - f. Patient safety program
 - g. Other high risk, high volume and problem prone areas when identified by data collection
 2. Setting priorities for improvement and adjusting priorities in response to unusual or urgent events
 3. Systematic assessment of performance through comparison of organizational performance:
 - a. Internally over time
 - b. To the performance of similar process in other organizations
 - c. To external sources of information
 4. Implementing improvement on the basis of assessment and comparison data
 5. Maintaining achieved improvements
 6. Identifying and establishing activities to measure patient outcomes

- E. Ensure that new or modified services or processes are designed well and incorporate:
 - 1. Needs and expectations of patients, staff, and others
 - 2. Information about potential risks to patients, when available
 - 3. Current knowledge, when available and relevant
 - 4. Testing and analysis to determine whether design or redesign is an improvement
- F. Ensure that the organization adheres to the Joint Commission's published guidelines for describing information in its Quality Report.
- G. Ensure that the organization adheres to the CMS Conditions of Participation for Quality Assessment and Performance Improvement (QAPI) standards.
- H. Ensure that performance improvement projects are conducted that reflect the following standards:
 - 1. The number and scope of distinct improvement projects conducted annually must reflect the scope, complexity, and past performance of the organization's services and operations.
 - 2. The organization must document the quality improvement projects undertaken, the reasons for conducting these projects, and the measurable progress achieved on these projects.
 - 3. That data collection frequency is sufficient to monitor performance improvement projects and high risk areas.
 - 4. The organization will collect data on the following areas at a frequency identified by policy:
 - a. Significant medication errors
 - b. Significant drug reactions
 - c. Patient perception of the quality and safety of care delivered by the organization
- I. Allocate resources for assessing, improving and communicating the organization's performance by:
 - 2. Assigning organization personnel to participate in performance improvement activities
 - 3. Providing adequate time for organization personnel to participate in performance improvement activities

Policy No. 4-015.4

4. Creating and maintaining information systems and data management processes to support collecting, managing and analyzing data to improve performance
 5. Utilizing appropriate statistical techniques to analyze and display data
 - a. Statistical facts to include:
 1. Run charts that display summary comparison data
 2. Scatter diagrams
 3. Control charts that display variations and trends over time
 4. Histograms
 5. Pareto charts
 6. Cause-and-effect or fishbone diagrams
 7. Process flowcharts
 6. Provide organization personnel training in effective approaches and methods of assessment and improvement
 7. Assessing the adequacy of human, information, physical, and financial resources allocated to support performance improvement and patient safety
 8. Communication of processes that foster the safety and quality of patient care to patients, staff and the community
 - J. Analyze and assess the effectiveness of their contributions to improving organization performance, including review of leadership performance against pre-established, objective process criteria. The senior management, also, measure and assess the performance improvement and safety improvement activities.
3. Senior management will ensure that an integrated patient safety program is implemented throughout the organization by:
 - A. Assigning qualified individual(s) or an interdisciplinary group to manage the program
 - B. Defining the scope of the program's oversight
 - C. Establishing procedures for immediate response to system or process failures, and the internal and external reporting of such failures
 - D. Defining responses to various types of unanticipated adverse events and a process for conducting proactive risk assessment/risk reduction activities
 - E. Report, at least annually, to the Governing Body on system or process failures and actions taken to improve safety (both proactively and in response to actual occurrence)

4. Senior management will ensure that the infection control program is an integral part of the organization's safety and performance improvement program by:
 - A. Participating in the design and implementation of the infection control program including the annual influenza vaccination program
 1. Sets incremental influenza vaccination goals
 2. Tracks vaccination rates of staff. (See "[Methodology Used to Determine Influenza Vaccination Rates](#)" Addendum 4-015.B)
 3. Annually evaluates reasons given for declining the influenza vaccine
 4. Provides influenza vaccination data annually
 - B. Participating in educational activities to increase their knowledge
 - C. Establishing a process for ongoing assessment of the risks for acquisition and transmission of infectious agents
 1. Sets goals for improving compliance with hand hygiene guidelines
 - D. Establishing a process for at least annual review of the infection control program
5. All other organization personnel will:
 - A. Be involved in performance improvement activities
 - B. Promote communication and coordination of performance improvement activities, as well as contribute to those activities
 - C. Forward relevant information regarding performance improvement activities to senior management and to the Performance Improvement Coordinator
 - D. Take action on recommendations generated through performance improvement activities, as outlined in the organization's written performance improvement plan and as recommended in the Joint Commission's Sentinel Event Alerts and National Patient Safety Goals, based on care and service provided by the organization

LICENSURE/CERTIFICATION/REGISTRATION
Policy No. 1-005.1**PURPOSE**

To ensure that staff qualifications are consistent with job responsibilities.

POLICY

All organization staff will be properly licensed, certified, registered and/or trained to meet specific job requirements.

PROCEDURE

1. Personnel must maintain and show proof of licensure, certification, and/or registration at time of hire and upon expiration of the credentials.
2. When current licensure, certification or registrations are required by law or regulation to practice a profession, the organization verifies these credentials with the primary source at the time of hire and the time credentials are renewed. It is acceptable to verify with the primary source or their designated agency via a secure electronic communication or by telephone if this process is documented.
3. If the organization uses a credentials verification organization (CVO) to obtain information, a process must be in place to ensure timeliness, accuracy and completeness of the information.
4. Staff must comply with requirements to maintain such licensure, certification, and/or registration in accordance with applicable state law and regulation.
5. A current copy or other proof of licensure, certification, and/or registration will be kept in the personnel file.
6. Staff not requiring specific licensure, certification, and/or registration will demonstrate competency through the organization's competency evaluation process.
7. Any employees who fail to maintain a required license, certification or registration will be subject to suspension or termination.

Index of Endnotes
Tennessee Valley Home Care, LLC
TQC West Application

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- (5) "Urban and Rural Classification Press Kit." United States Census Bureau. December 29, 2022. Accessed at <https://www.census.gov/newsroom/press-kits/2022/urban-rural-classification.html>, see "State-level Urban and Rural Information for the 2020 Census and 2010 Census."
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Pandemic." *Journal of Primary Care & Community Health*, January 2023, 14. Published online July 2, 2023, accessed at <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10315790/>.

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Project Name : Tennessee Valley Home Care, LLC, d/b/a Tennessee Quality Care – Home Health

Supplemental Round Name : 1

Due Date : 3/12/2024

Certificate No. : CN2402-004

Submitted Date : 3/5/2024

1. 1E. Overview

What percentage of patients in the proposed 13-county service area are expected to be private duty nursing patients?

Does the applicant intend to expand any service offerings, i.e. adding home infusion therapy services in the first two years of the project?

Response : According to internal census data from Tennessee Quality Care’s (TQC) branch offices currently serving the proposed TQC West region, approximately eight percent of total home health patients in the 13-county service area have been private duty nursing patients. Given that TQC does not propose to expand its overall service area in either of its complementary and concurrent applications (TQC West/TQC East), TQC believes that it will treat this same percentage of private duty nursing patients in TQC West following the approval of the proposed project.

TQC does not intend to expand its service offerings at this time beyond the traditional home health services it has historically provided. While TQC may consider additional service offerings in the future, TQC’s primary focus in pursuing the TQC West and TQC East projects is to improve the quality of its existing services and provide even greater care access.

2. 6C. Historical/Projected Data Chart

It is noted that the applicant does not have any Charity Care reported or projected in response to Item 6C. Please explain.

Does the applicant maintain a charity care policy?

Response : As stated in its response to Question 10C, TQC Parsons already serves underserved patient populations, including medically indigent patients who lack the ability to pay for home health services. Upon approval, TQC East intends to operate in the same manner, caring for patients in need of home health services regardless of their ability to pay. Based on TQC’s and Addus’s historical experience to date, TQC has not maintained a charity care policy as patients in need of charity care have typically made up a small portion of its patient population. As shown in the Projected Payor Mix table in Question 10C, which is based on TQC Parsons’s nearly 40 years of operating in Tennessee, the majority of TQC’s patients typically have some form of insurance with the majority of its patients being Medicare/TennCare patients. TQC is willing to furnish charity care when appropriate and implement a corresponding policy, as well as continually examine its operations to ensure it is meeting patients’ needs. In addition, with the reorganization that will occur through TQC West and TQC East, TQC expects to be able to engage in more comprehensive community outreach, which may facilitate access for more patients in need of charity care.

3. 3N. Demographics

There appears to be an error in the demographic table included with Attachment 3N.B for the following items:

Median Household Income - Henry County

Persons Below Poverty Level as % of Total - Carroll, Crockett, Dyer, Fayette, Gibson, Haywood, Lauderdale, Obion, Shelby and Tipton Counties when compared to the Census QuickFacts website.

Please revise and resubmit Attachment 3N.B (labeled as Attachment 3N.BR.)

Response : Please see the resubmitted Attachment 3N.BR.

4. 5N. Unimplemented services

Please label the table provided in response to Item 5N with the past three Joint Annual Report years (2021 - 2023) rather than 2020-2022.

The following agencies appear to be missing from the table:

2023 - ID 79886: AccentCare Home Health of West Tennessee

2023 & 2022 - ID 01032: Clinch River Home Health

2021 - ID 75024: NHC Homecare

2023 - ID 79866: St. Jude Children's Research Hospital Homecare

2022 - ID 74054: NHC Homecare

Please include missing items and resubmit Attachment 5N (labeled as Attachment 5NR).

Response : Please see the resubmitted Attachment 5NR for the revised home health utilization in the proposed service area, now including the HHAs listed above.

Of note, the revised home health utilization for TQC West's proposed 13-county service area alters a few pieces of TQC's initial CON application, including its projected utilization for its first two fiscal years. In order to remain consistent with its revised tabulation of the home health utilization for its proposed service area, TQC has modified its application as appropriate to reflect these new figures. This includes a modification to multiple tables in its discussion of its methodology and assumptions in Question 6N. The tables that have been updated are denoted as such, as Table 6N-5R, Table 6N-6R, Table 6N-7R, and Table 6N-8R.

TQC has also revised multiple attachments to reflect this updated service area utilization. Please see resubmitted Attachment 6N (labeled as Attachment 6NR) for the revised projected total home health patient utilization for TQC West in its first and second full years of service. Please also see resubmitted Attachment 8C (labeled as Attachment 8CR) for the revised charges per visit from 2023 JARs for HHAs in the proposed service area as well as the total visits, hours, gross revenue, average revenue per patient, and average revenue per visit from the 2023 JARs for HHAs in the proposed service area. Lastly, please see the resubmitted Attachment 1NR (Criteria and Standards).

5. 1N. Criteria and Standards

Please include any available letters of support for the project under Attachment 1N-4.

Response : Please see Attachment 1N-4R for letters of support for the proposed TQC West project.