

# 20 ANNUAL 22 REPORT



**THE TENNESSEE  
HOSPITAL  
ASSOCIATION'S (THA)  
PROGRAMS AND  
SERVICES  
ARE BASED ON  
SIX PILLARS:**

This annual report highlights the major accomplishments of THA in 2022.



**ADVOCACY**



**QUALITY AND  
PATIENT SAFETY**



**INFORMATION SERVICES  
AND TECHNOLOGY**



**PRODUCTS  
AND SERVICES**



**EDUCATION AND  
MEMBER SERVICES**



**SERVING AS A  
NEUTRAL FORUM**



# ADVOCACY

## State Advocacy

The second session of the 112th General Assembly convened on Jan. 11 and adjourned sine die on April 28. Despite action taken during the Oct. 2021 COVID-19 special session, pandemic-related issues were a central focus of the 2022 legislative session.

While not all hospital legislative priorities saw favorable outcomes, THA's state lobbying team had another largely successful year at the legislature. This success included ensuring positive outcomes on nearly 30 pieces of legislation that could have been problematic for hospitals.

All of this activity was in addition to the defined priorities for THA, which included a focus on payer policies, workforce staffing and stabilization, telehealth, the annual hospital assessment, hospital visitation and liability protection as it relates to COVID-19. THA was successful in favorable legislative results in the following:

- **Telehealth:** Telehealth payment parity was extended with no limit or sunset on the provision that requires reimbursement for telehealth services in the same manner as services provided in-person.
- **Emergency Claims:** Passed prudent layperson clarification legislation that explicitly includes payment with the existing coverage requirement and a prohibition on denial of emergency claims based on final diagnosis.
- **Hospital Assessment:** Once again, passed the annual hospital assessment, which generates roughly \$1.7 billion in state and federal funding for the TennCare program.
- **Hospital Visitation:** Revised the state law passed last October on hospital visitation to effectively codify the Centers for Medicare & Medicaid Services' (CMS) conditions of participation for visitation and applying those requirements to periods when COVID-19 is a health concern.
- **COVID-19 Liability:** In addition, COVID-19 liability protection was extended through July 1, 2023, and THA was successful in creating a process by which the commissioner of the Tennessee Department of Health may declare a health staffing crisis and implement various regulatory flexibilities that previously had been in place under Governor Bill Lee's executive orders.
- **Advocacy Forums:** THA hosted three in-person Advocacy Forums, along with a virtual session, with members in September to review and collect feedback on a number of emerging state policy issues in preparation for the development of the Associations 2023 legislative agenda.



## Legislative Day on the Hill

THA organized a successful Legislative Day on the Hill in February in Nashville, with more than 100 Tennessee hospital and health system leaders participating. The agenda included an issue briefing for members, meetings with legislators and a legislative reception. The reception was well-attended by some of the legislature's biggest champions for hospitals, including Lieutenant Governor Randy McNally (R-Oak Ridge) and House Speaker Cameron Sexton (R-Crossville).



## Friends of THA

Friends of THA, the Association's political action committee (PAC), set an ambitious \$180,000 fundraising goal this year, which was met thanks to the generosity of THA members and a contribution from the THA Center for Innovative Solutions. The campaign was led by Janelle Reilly, THA chair-elect and market CEO, CHI Memorial, Chattanooga. The funds raised this year were used to support legislators who champion hospital priorities.

## Hospital Heroes

THA organized local events at member hospitals to present awards to three legislators being honored for their support on issues of importance to hospitals. Receiving awards this year were Rep. Andrew Farmer (R-Sevierville), Rep. Sabi Kumar (R-Springfield) and Sen. Ferrell Haile (R-Gallatin).



## Phone2Action

Throughout the legislative session, the THA government affairs team engaged members in grassroots support by leveraging the Phone2Action platform for direct interaction with state lawmakers. THA issued 10 state and federal calls to action in 2022, which resulted in hundreds of touchpoints with THA members and legislators.





## Federal Advocacy

At the federal level, THA was actively involved in a variety of legislation, policies and programs that could impact hospitals and healthcare. Considering the ongoing financial strain of the COVID-19 pandemic, staffing shortages, supply chain issues and inflation, much of the federal advocacy items involved hospital funding.

- **Area Wage Index:** THA was successful in getting all nine members of Tennessee's U.S. House delegation to co-sponsor the *Save Rural Hospitals Act* as part of its area wage index (AWI) efforts. THA joined nine other state hospital associations in writing a [letter](#) to the Centers for Medicare & Medicaid Services (CMS) regarding a recent court [ruling](#) on CMS's low wage index hospital policy. The same coalition put together a [comment letter](#) on the FY2023 inpatient prospective payment system (IPPS) rule for congressional delegations to sign on and send to CMS. THA also joined six other state hospital associations on an [amicus brief](#) that resulted in the court ordering the remedy THA and the other hospital associations requested.
- **LVH and MDH Program Extensions:** THA communicated with both U.S. Senators and the seven House members with Medicare dependent hospitals (MDH) regarding the [18 MDH hospitals](#) and [26 Low-Volume hospitals](#) in Tennessee, urging them to support extension of these programs, both of which ultimately were included in the continuing resolution funding the federal government through mid-December.
- **340B Program:** THA successfully advocated on behalf of four hospitals across the state that were in jeopardy of losing their 340B eligibility due to COVID-19 volume changes.
- **Medicare/Regulatory Input and Guidance:** THA provided information, webinars and financial analyses regarding Medicare prospective payment rules and submitted comment letters to the Centers for Medicare & Medicaid Services (CMS).
  - [FFY 2023 Medicare IRF PPS Comment Letter – May 31, 2022](#)
  - [FFY 2023 Medicare IPPS PPS Comment Letter – June 17, 2022](#)
  - [CY 2023 Medicare HH PPS Comment Letter – August 16, 2022](#)
  - [CY 2023 Medicare OPSS Comment Letter – September 13, 2022](#)

## Finance and Reimbursement

- The approved state budget for fiscal year 2022-2023 included several important appropriations for hospitals. THA worked throughout the year to advocate for these state allocations:
  - **Trauma Fund:** The state's trauma system fund received \$5 million in new recurring dollars, which increases the fund's annual availability to an estimated \$12 million.
  - **CPE Solution:** After THA advocated for a change in the use of certified public expenditures (CPE) for many years, TennCare received state general fund dollars to remove its reliance on CPE as a source of funding for TennCare operations. CPE will continue to be claimed but the federal share (estimated at over \$81 million in the current year) will be passed through to the public hospitals on which the CPE was claimed.
  - **Increased GME Funding:** THA worked extensively with TennCare and teaching hospitals to develop new methodology to distribute graduate medical education (GME) funds. THA also worked with legislative leadership to obtain an additional \$10 million in new state funding for GME. These changes will grow the state's Medicaid GME program from \$48 million to approximately \$77 million and allow all Tennessee teaching hospitals to participate.
  - **Increase in Hospital Supplemental Payments:** THA worked with TennCare over a two-year period to obtain CMS approval for \$318 million in one-time directed payments to hospitals in fiscal year 2022. The state match for these payments was created as a result of the enhanced FMAP received on the hospital assessment during the public health emergency. In addition to this one-time influx of funding, THA worked with TennCare to calculate routine supplemental pool payments for hospitals and ensure they were distributed timely. Below are the total amounts distributed by fund:

Total Virtual DSH	\$127.7 Million	Total Financial Assistance to Hospitals Through TennCare  \$683.7 Million
Total Statutory DSH	\$80.1 Million	
Total CAH Cost Reimbursement	\$15 Million	
Charity Cost	\$142.9 Million	

- **DSH Audit Mitigation:** THA successfully advocated for two major changes that will have the effect of mitigating disproportionate share hospital (DSH) audit recoupment risks – reclassification of directed payments and eliminating the potential for virtual DSH payback.
- **ARPA Funds for Hospitals:** THA worked with the governor's office and Tennessee Department of Health to advocate for hospital financial support from the *American Recovery Plan Act* (ARPA) funds. The Fiscal Stimulus Accountability Group announced an additional \$150 million in federal relief dollars for acute care hospitals for capital grants and care delivery transformation, along with another \$50 million for long-term care providers.
- **TennCare Waiver:** THA conducted extensive analysis of the recent amendment to the TennCare III waiver, submitting comments to both TennCare and the Centers for Medicare & Medicaid Services (CMS).
- **Supplemental Pool Task Force:** THA led the work of the supplemental pool task force, providing expertise and conducting modeling in support of proposed changes to reduce the impact of TennCare DSH audit recoupments, as well as to develop new payment opportunities for hospitals.
- **Member Education:** THA provided member educational sessions focused on the Medicare payment systems, the *No Surprises Act*, information blocking and the *Americans with Disabilities Act*.

# Payer Issues

THA had some significant wins this year regarding payer issues impacting hospitals. In order to gain feedback from member hospitals on ongoing and emerging payer issues, THA formed managed care, revenue cycle and compliance workgroups to help guide education for members, document best practices, prioritize issues, and keep the Association informed of various details and industry trends. THA was successful in addressing a variety of payer issues that were concerning for hospitals in three key areas:

## Payer Steerage Policies

- THA advocated against the Amerigroup PT/OT/ST steerage policy that directed patients away from hospitals and to outpatient clinics. Due to the work of THA and its members, Amerigroup rescinded this policy in January 2022.

## Administrative Burden

- THA was successful in working with all major commercial, Medicare Advantage and Medicaid managed care organizations (MCOs) to implement post-acute waivers during the Omicron surge.
- After strong advocacy efforts with TennCare, BlueCare decided to make its new NICU authorization policy optional, resulting in less administrative burden to members and potentially avoiding countless denials.
- After the expiration of the primary care physician (PCP) waiver, all TennCare managed care organizations (MCOs) experienced a backlog of primary care physicians (PCP) change request forms that resulted in many claim denials and delays in payments. THA worked closely with TennCare to ensure these delays were resolved by the MCOs.

## Reimbursement Erosion

- BlueCross BlueShield of Tennessee (BCBSTN) implemented a clinical policy for transcatheter aortic valve replacement (TAVR) procedures that resulted in significant decreases to reimbursement and raised concerns over patient safety. Due to THA's advocacy efforts, BCBSTN reversed its clinical policy and retroactively paid claims that were forced to outpatient status.
- BCBSTN also implemented policies that resulted in many procedures that previously were inpatient to being moved to outpatient and placed in "unlisted groupers." THA worked closely with BCBSTN and ultimately the payer is negotiating new rates for these procedures with members.
- Some payers have sought to retrospectively deny emergency room claims, stating these visits did not meet "emergency standards." THA introduced a bill to codify language in state code that would require payment for emergency room visits that meet the prudent layperson standard.



# QUALITY AND PATIENT SAFETY

- **Quality:** THA developed and shared reports with hospital leaders showing quality performance compared to Tennessee peer groups and highlighting areas of improvement over time.
- **Staffing/PSO:** Throughout the pandemic and especially during surges, hospitals used temporary staff and travel nurses to fill staff shortages. The THA Patient Safety Organization (PSO) conducted a safe table that explored the benefits and risks associated with the use of temporary staff and strategies hospitals have implemented to prevent harm. The findings were disseminated to all Tennessee hospitals.
- THA held a [Nurse Staffing Innovation Design Sprint](#), led by Do Tank, to create new solution ideas on nurse staffing. The design sprint was held across two days, a month apart, and helped hospitals and systems design and test innovations on nurse staffing.
- THA provided education and support in response to healthcare worker burnout and addressing employee well-being and resilience. Well-respected subject matter experts served as speakers for THA's Summer Conference and Annual Meeting in 2022 and presented on this topic. THA also hosted a five-month webinar series for hospital staff on mindfulness and meditation practices to improve overall well-being.
- **COVID-19:** THA engaged hospitals to share successful practices for managing the COVID-19 pandemic, including hosting regular sharing calls for chief medical officers (CMOs) and infection preventionists.
- **Health Equity:** THA assessed health equity metrics twice annually and provided corresponding leadership reports showing hospital progress over time and comparison statewide.
- **Agenda 21 Program:** For 27 years, THA has provided the Agenda 21 Internship Program for minority graduate students in healthcare administration. This summer, eight students interned in seven hospitals across the state, gaining the unique opportunity to learn from hospital leadership and experience healthcare administration at the executive level. Agenda 21 now has a LinkedIn alumni group for continued networking and support of the former interns.
- **Education:** THA provided numerous education programs and resources focused on topics such as COVID, sepsis, MRSA, infection prevention, falls, worker resilience and health equity. In response to member needs, THA hosted a bootcamp for new infection preventionists and a virtual quality fellowship to train new quality and safety leaders.
- **TSQC:** The Tennessee Surgical Quality Collaborative (TSQC) is a collaborative between THA and Tennessee Chapter of the American College of Surgeons to support hospitals in improving surgical outcomes. The collaborative participants met quarterly over the past year and continues to demonstrate exemplary outcomes in several categories, including overall morbidity, surgical site infections, urinary tract infections, ventilator use, C-diff and readmissions for the past year.
- **Focused Initiatives:** THA convened the monthly sepsis collaborative to address topics such as treatment guidelines, conducted site visits to 11 hospitals to provide support on preventing hospital-onset MRSA bloodstream infections, and recruited and worked with the emergency departments of 20 non-delivering hospitals to improve hypertensive and cardiovascular disorders during pregnancy. THA also established a collaborative of post-acute network directors to improve transitions of care.





## INFORMATION SERVICES AND TECHNOLOGY

- **DataBank:** THA launched a monthly hospital utilization and financial data program called DataBank, which will provide the Association with more timely financial data that can be used for advocacy purposes.
- **COVID-19 Data and Reports:** THA continued to track hospital reporting into HRTS and worked directly with hospitals to address any reporting concerns. Weekly COVID-19 reports continued to be produced and shared with hospitals. These reports track hospitalization trends statewide and included a district-level dashboard aggregating case, capacity, vaccination and hospitalization data to facilitate collaboration at the local level.
- **Statewide Hospital Claims Data:** THA assisted hospitals in meeting quarterly discharge data reporting requirements and provided access to the statewide claims data via THA MarketIQ / limited datasets to support hospital market share and strategic planning initiatives.
- **Admission, Discharge and Transfer (ADT) data via ConnectTN:** THA fulfilled TennCare ADT reporting requirements. It provided event notification service to physician groups and ACOs to improve care coordination post discharge.



# PRODUCTS AND SERVICES

## Communications and Marketing

- **Workforce:** THA developed and launched a recruitment campaign for entering the healthcare workforce that promotes the variety of hospital careers available as well as the benefits of working in Tennessee hospitals. A [comprehensive toolkit](#) was shared with hospital communications teams to assist them in joining the campaign and their own workforce recruitment efforts.
- **Member Update:** THA continued regular communication with all members through the twice-a-week *Member Update* email.
- **Special Events:** THA created and shared content throughout the year recognizing special events like Patient Safety Awareness Month, National Nurses Month and National Hospital Week, while highlighting Tennessee-specific stories.



# Tennessee Center for Health Workforce Development

- The Tennessee Center for Health Workforce Development (TCWD) connected with academic nursing and allied health programs throughout the year to collect information on the workforce pipeline and assist deans and directors with sharing challenges and best practices related to COVID-19.
- TCWD managed a healthcare workforce supply and demand study performed by GlobalData. The study was designed to look at the one-, five- and 10-year shortages in certain occupations statewide. Occupations studied included registered nurses, licensed practical nurses, nurse practitioners, physician assistants, emergency medical technicians, phlebotomists, medical technicians/technologists, cardiac catheterization lab techs, operating room techs, respiratory therapists and clinical social workers.
- In conjunction with the healthcare workforce supply and demand study, TCWD interviewed academic deans and directors from nursing and health science programs, chief nursing officers and hospital leadership statewide about the effects of COVID-19 on the workforce and pipeline.
- THA hosted an Academic and Clinical Partnership Meeting in September. The meeting was designed to strengthen the health workforce pipeline by bringing together Tennessee's hospital leaders and deans of the nursing and allied health academic programs to explore possibilities and develop a personalized action plan to improve the pipeline.
- Twelve one-time scholarships were awarded to outstanding 12th grade HOSA students who were accepted into a health professional program at a Tennessee college or university.
- TCWD continued to support the Managing Aggressive Patients Training Program (MAPS) developed by the University of Tennessee Health Science Center School of Nursing. MAPS uses simulation to train select employees from Tennessee hospitals in de-escalation techniques. The trainers use their newfound skills to train coworkers at their place of employment. The program is available statewide, and sessions can be virtual or live.

## Rural Services

- The Tennessee Center for Patient Safety (TCPS) supported 20 small and rural hospitals that participate in the CMS Hospital Quality Improvement Collaborative for a four-year project. In addition, with support from the Medicare Rural Hospital Flexibility Grant, THA provided critical access hospitals with educational programs focused on operational and care quality priorities that are tailored to the needs of these members.
- THA commented on the Centers for Medicare & Medicaid Services' (CMS) proposed rulemaking that updated the conditions of participation (CoPs) standards for critical access hospitals (CAHs), as well as CoPs for the new hospital designation, Rural Emergency Hospital (REH). THA also provided comments on the FY2023 hospital outpatient prospective payment system rule, which details the reimbursement structure for the new REH designation.
- Small and rural hospitals are interested in learning more about rural training track programs as part of residencies. Multiple small and rural hospitals in Tennessee have notified THA's Rural Health Department about new rural training tracks for family medicine residencies coming online at their hospitals. Residents working with THA's rural hospitals help recruitment and retention efforts to attract those residents back to that rural community to practice medicine.
- THA's vice president of rural health was appointed to the governor's Tennessee Rural Health Task Force, which is charged with assisting the state in formulating a statewide plan to address issues related to both health and healthcare in rural communities.



## THA Center for Innovative Solutions

- The THA Center for Innovative Solutions (TCIS) funded the THA Nursing Workforce Innovation Design Sprint during the months of May and June. THA, through its Tennessee Center for Patient Safety Center (TCPS), facilitated a design sprint aimed at bringing hospitals across the state together to design, prototype and test new innovative models for nurse staffing. TCIS was able to fund this project through revenues received from a partnership with Qualivis, a travel nurse company.
- The department brought on new vendor partners this year that provide services ranging from employee safety and revenue cycle enhancement to business consulting.
- TCIS also showed a record financial year with gross revenues from its portfolio of vendor partners. It will be the highest revenue produced in the history of this department.







# EDUCATION AND MEMBER SERVICES

In-person conferences included:

- THA Annual Meeting
- THA Summer Conference
- Palliative Care Conference
- Spring CSR Conference
- Mid-South Critical Access Conference
- THA Fall Compliance Virtual Conference
- Governance Excellence Meeting

THA offered a wide variety of webinars such as:

- CMS CoP Nursing Standards for Hospitals
- CMS CoP Hospital Improvement Rurals
- CMS CoP Acute Care Hospital
- CMS CoP Critical Access Hospital
- The Intersection of DEA, Opioids & Hospital Risk
- Beyond the Basics of Case Management Boot Camp
- Cybersecurity Threats in Healthcare Today
- Well-Being - a five-part series sharing mindfulness and meditation practices to alleviate burnout and increase resiliency
- Governance Series 4-Part
- Governing Board and C-Suites Responsibilities
- Creating Success - Healthcare Leadership

The member relations and education team works with multiple member groups to garner feedback and share information on top industry trends, promote education and training and share best practices. Member groups included:

- Chief operating officers group
- Psychiatric and behavioral health group
- Long-Term acute care hospital (LTACH) group
- Inpatient rehabilitation facility (IRF) group
- Hospital-based home health group

THA also partnered with several affiliate professional groups throughout the year promoting education and supporting membership functions. Those groups were:

- American Organization for Nursing Leadership – Tennessee (AONL-TN)
- Tennessee Association for Healthcare Quality (TAHQ)
- Tennessee Association for Healthcare Resource & Materials Management (TAHRMM)
- Tennessee Health Care Administration Professionals (THCAP)
- Tennessee Healthcare Engineering Association (THEA)
- Tennessee Healthcare Volunteer Professionals (TNVP)
- Tennessee Simulation Alliance (TNSA)
- Tennessee Society for Healthcare Human Resources Administration (TSHHRA)
- Tennessee Society of Healthcare Social Worker (TSHCSW)

THA raises approximately \$200,000 per year in sponsorship dollars, which helps bring high-level educational content and programming to members.

THA partnered with the Tennessee Department of Mental Health and Substance Abuse Services (TDMHSAS) to launch a grant pilot program focused on medication-assisted treatment (MAT) in the emergency department (ED). Objectives of this pilot program were to begin treatment in the ED for substance abuse patients and immediately connect patients to treatment in the community, decreasing ED boarding and recidivism. During the first six months of the program, pilot hospitals are exceeding four program objectives and continuing to spread education and awareness to support this patient population.



# NEUTRAL FORUM

The THA Board of Directors' quarterly meetings and the Association's premier conferences, such as the Annual Meeting and Summer Conference, provide opportunities for the membership to discuss and debate important issues and identify areas for collaboration.



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# THA CENTER FOR INNOVATIVE SOLUTIONS

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