Governor Haslam Announces Insure Tennessee

Tennessee Gov. Bill Haslam unveiled his Insure Tennessee plan, a two year pilot program to provide health care coverage to Tennesseans who currently don’t have access to health insurance or have limited options. The program is designed to reward healthy behaviors, prepare members to transition to private coverage, promote personal responsibility and incentivize choosing preventative and routine care instead of unnecessary use of emergency rooms. The governor announced that he plans to call a special session to focus on the proposal after the 109th General Assembly convenes in January.

“We made the decision in Tennessee nearly two years ago not to expand traditional Medicaid,” Haslam said. “This is an alternative approach that forges a different path and is a unique Tennessee solution. This plan leverages federal dollars to provide health care coverage to more Tennesseans, to give people a choice in their coverage, and to address the cost of health care, better health outcomes and personal responsibility.

“Our approach is responsible and reasonable, and I truly believe that it can be a catalyst to fundamentally changing health care in Tennessee. It is our hope that this plan opens the door in the future for innovation within our existing Medicaid program. I look forward to working with providers across the state to advance payment reform and with members of the General Assembly to make this plan a reality.”

Five key areas of the governor’s plan include:
1. A fiscally sound and sustainable program;
2. Providing two new private market choices for Tennesseans;
3. Shifting the delivery model and payment of health care in Tennessee from fee-for-service to outcomes based;
4. Incentivizing Tennesseans to be more engaged and to take more personal responsibility in their health;
5. And preparing participants for eventual transition to commercial health coverage.
FY 2016 Proposed Budget Cuts: TDMHSAS

<table>
<thead>
<tr>
<th>Priority</th>
<th>Category</th>
<th>Reduction Description</th>
<th>State Savings</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Program &amp; Operations</td>
<td>Reduces budgeted professional services, supplies and other non-personnel costs closer to actual expenditure</td>
<td>$200,800</td>
</tr>
<tr>
<td>2.</td>
<td>Program &amp; Operations</td>
<td>Elimination of 7 vacant positions in the central office</td>
<td>$315,100</td>
</tr>
<tr>
<td>3.</td>
<td>Program &amp; Operations</td>
<td>Reduce the funding available for forensic evaluations</td>
<td>$1,000,000</td>
</tr>
<tr>
<td>4.</td>
<td>Program Elimination</td>
<td>Elimination of Assisted Outpatient Therapy Program</td>
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</tr>
<tr>
<td>5.</td>
<td>Program &amp; Operations</td>
<td>Reduction of funding for private inpatient uninsured services</td>
<td>$510,400</td>
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<td>6.</td>
<td>Program Elimination</td>
<td>Elimination of Juvenile Court Screenings Funding</td>
<td>$20,000</td>
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<tr>
<td>7.</td>
<td>Program Elimination</td>
<td>Elimination of adolescent outpatient substance abuse services</td>
<td>$190,000</td>
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<tr>
<td>8.</td>
<td>Program Elimination</td>
<td>Elimination of adolescent day/evening treatment services statewide</td>
<td>$1,219,000</td>
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<tr>
<td>9.</td>
<td>Program Elimination</td>
<td>Elimination of support for all 45 peer support centers statewide. Reduction submitted in previous years.</td>
<td>$4,523,600</td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
<td></td>
<td>$8,103,900</td>
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TennCare

<table>
<thead>
<tr>
<th>Item</th>
<th>State</th>
<th>Total</th>
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</thead>
<tbody>
<tr>
<td>Buprenorphine Limits (Suboxone)</td>
<td>1,588,000</td>
<td>4,541,600</td>
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<tr>
<td>Therapy Related Payments</td>
<td>5,277,600</td>
<td>15,094,100</td>
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</tbody>
</table>

TN Departments had a directive from Gov. Haslam that every agency submit a budget with an overall reduction of 7 percent. That’s larger than in years past. “That does not mean we will take all those cuts,” Haslam said at the end of the budget proposal. “Those are not offered up lightly, and we would not be taking them lightly.” The TN Coalition for Mental Health and Substance Abuse Services is working to address the cuts to the Peer Support Centers and adolescent treatment in particular in the TDMHSAS budget as well as the cuts to therapy services as proposed by TennCare. The proposal would cut TennCare provider rates by 4% across the board to all providers. Providers had already taken a 1% rate cut for FY 15. The cuts to suboxone services as proposed by TennCare will be based on a lifetime limit for these prescriptions. The total TennCare budget cuts spending by $165 million — reductions that would actually reach $400 million with the loss of federal matching dollars.

TAADAS will be formulating a strategy to address these cuts and will be working with the Coalition during the 2015 legislative session to highlight the impact of all these cuts.
Teamwork

By Rod Bragg, Assistant Commissioner
Tennessee Department of Mental Health & Substance Abuse Services — Division of Substance Abuse Services

“No one can whistle a symphony. It takes a whole orchestra to play it.”
H.E. Luccock

Teamwork. What does this really mean and why is it so important? Team and teamwork are words that get thrown around a lot and almost have no meaning any longer. However, I believe that there are important concepts and strategies, particularly in the work we do. Here are some reasons why.

The collective wisdom of a group of people can lead to miraculous results. As one person puts out an idea, another individual may add to the idea, so on and so on. Generally we come up with a better product than if we only brainstorm by ourselves. Belief in each other is a foundation for a team to be successful. If we do not trust our team members, than that will lead to dysfunction in a team and render the team non-effective. Trust, while it has to be earned, must be sought out of the other team members and value their opinion.

Our consumers benefit from a strong team presence and also from the team that is working with the individual to enter a life of recovery. Often people with substance use disorders have a difficult time trusting and witnessing a positive team approach mirrors what the consumer will need in recovery.

As we begin 2015, let’s commit ourselves to being a catalyst for building a strong team with your boards of directors, your staff, and the consumers you are working with. Now is the time to renew our faith in the team approach.

Margaret Meade so wisely said: Never doubt that a small group of thoughtful, committed people can change the work. Indeed, it is the only thing that ever has. That says it all.
Results from the 2013 National Survey on Drug Use and Health

In 2013 an estimated 24.6 million Americans aged 12 or older were current (past month) illicit drug users, meaning they had used an illicit drug during the month prior to the survey interview (figure below). Illicit drugs include marijuana/hashish, cocaine/crack, heroin, hallucinogens, inhalants, or prescription type drugs used non-medically. The estimate represents 9.4 percent of the US population aged 12 or older.

The number and percentage of persons aged 12 or older who were current nonmedical users of pain relievers in 2013 (4.5 million or 1.7 percent) were similar to those in 2011 and 2012 (4.5 million and 4.9 million, respectively, or 1.7 and 1.9 %) (Figure 2.3).

Past month and past year heroin use nationally are shown right. While interventions in many states to limit opioid prescriptions and access has resulted in lower nonmedical use of these medications, many of those abusing these substances turn to heroin. This trend has been the case in Tennessee.

Among pregnant women aged 15 to 44, 5.4 percent were current illicit drug users based on data averaged across 2012 and 2013. This was lower than the rate among women in this age group who were not pregnant (11.4 percent). Among pregnant women aged 15 to 44, the average rate of current illicit drug use in 2012-2013 (5.4 percent) was not significantly different from the rate averaged across 2010-2011 (5.0 percent). Current illicit drug use in 2012-2013 was lower among pregnant women aged 15 to 44 during the third trimester than during the first and second trimesters (2.4 percent vs. 9.0 and 4.8 percent).
News from Capitol Hill

January 5, 2015
Nathan H. Ridley, Esq.

The only difference between ordinary and extraordinary is a little something extra.

The 109th General Assembly will convene on Tuesday, January 13, 2015 at noon in Organizational Session. The Organizational Session will continue through the week and conclude with the Speakers’ announcements of committee appointments on Friday, and the Inauguration of Governor Haslam on Saturday. Then, the Regular Session will begin on that same Saturday, and the General Assembly will stand in a recess. Vagueness comes from the desire of Governor Haslam to call an Extraordinary Session to consider his proposed “Insure Tennessee” plan. If the negotiations with the federal Center for Medicare and Medicaid Services (CMS) go well, the Extraordinary Session may begin as early as February 2, 2015, and run for one or two weeks. During the Extraordinary Session, the General Assembly may only act upon matters within the Governor’s call for the session. The call will be very narrow and limited to the requested federal waiver for the “Insure Tennessee” as a two year pilot program. The beauty of an Extraordinary Session is the forced focus for the 132 members of the General Assembly, and the format does not permit the subject of the call to get bogged down with other bills. Nothing, however, obligates the General Assembly to act, but the Tennessee Hospital Association, the Tennessee Medical Association, and the entire health care community will be strongly encouraging positive action. If such action is forthcoming, Tennessee would become the 28th state to expand Medicaid, and the 10th with a Republican Governor. Tennessee would be only the third southern state after Kentucky and Arkansas to expand the Medicaid program as permitted under the 2010 federal Affordable Care Act.

Legislative Session Dates of Note. Dates for items such as the deadlines for the introduction of general bills are a little fuzzier now with the prospects of an Extraordinary Session. Both speakers will still push for an adjournment in April though, perhaps as early as April 24.

Crystal Ball Gazing. After the Extraordinary Session concludes, Education matters will dominate the regular 2015 session. Most Tennesseans probably think it would be nice for all Tennessee third graders to know their multiplication tables by the third grade. If that standard is in any way labeled as part of the Common Core standards, the conversation quickly becomes more heated. After the approval of Question 1 at the November election, the General Assembly will have a raft of abortion bills to process. The definition of Tennessee Whisky will be discussed, as will bills decriminalizing the use of marijuana. The single most important bill is the appropriations bill; the State Funding Board predicts revenue growth between 2.55% and 2.95%.

Checklist for this month.
Call your elected officials and wish them well before the session begins.
Make plans to attend the March 11 TAADAS legislative breakfast.
Take a look at the redesigned legislative website at www.capitol.tn.gov.
Note that the deadline for political contributions to state public officials is January 13, 2015 at noon.

Calendar Notes: State offices will be closed Monday, January 19 for the Martin Luther King holiday and Monday, February 16 for the Presidents’ Day holiday.

Nathan Ridley is an attorney with the Nashville firm, Bradley Arant Boult Cummings LLP. You may contact him by e-mail at nridley@babc.com.
Tennessee Awarded CMS State Innovation Model (SIM) Grant

The State Innovation Models (SIM) Initiative provides financial and technical support to states for the development and testing of state-led, multi-payer health care payment and service delivery models that will improve health system performance, increase quality of care, and decrease costs for Medicare, Medicaid and Children’s Health Insurance Program (CHIP) beneficiaries—and for all residents of participating states.

Tennessee has been awarded a $65 million State Innovation Models (SIM) grant from the Centers for Medicare and Medicaid Services. Under Governor Haslam’s leadership, the Tennessee Health Care Innovation Initiative is building on its early success implementing multi-payer health care payment and delivery system reform. This grant award will further support the goal of the project: to make health care in Tennessee a value-based system focused on efficiency, quality of care, and the patient experience. Tennessee is pursuing three complementary strategies:

· Primary Care Transformation: Tennessee will implement a multi-payer Patient Centered Medical Home model to reduce avoidable hospitalizations, increase coordinated care, and improve quality of care. The state will also implement Health Homes for TennCare members with severe and persistent mental illness. Tennessee’s approach to primary care transformation will include a shared solution for alerting health care providers when their attributed patients are admitted, discharged, or transferred from the hospital or emergency department.

· Episodes of Care: Tennessee will implement 75 multi-payer episodes of care over the next five years to reward high-quality and efficient acute health care. Tennessee insurers have already implemented three episodes by sending actionable reports on cost and quality to over 500 providers in May 2014. The first annual performance period for those episodes will begin on January 1, 2015.

· Quality- and Acuity-Based Payment for Long Term Services and Supports: TennCare’s payments will be adjusted for quality and acuity for these services in nursing facilities and home and community based care, including for individuals with intellectual/developmental disabilities and people receiving respiratory care.

In addition, the grant will support evaluation of the project, stakeholder outreach, and an increased focus on measurable goals for population health improvement in Tennessee’s State Health Plan.

One voice for Tennessee’s substance abuse prevention efforts

PAT’s mission is to inform and advocate for alcohol safety, substance abuse prevention, and public health policy concerns to Tennesseans and lawmakers.

www.TNCoalitions.org
Helping Women Recover
March 12, 2015

Presented by: Twyla Wilson, LCSW

Help Chemically Dependent Women

Over the past thirty years our knowledge of women's lives has increased dramatically, and we have added significantly to our understanding of the treatment needs of chemically dependent women. Based on Dr. Covington's treatment curricula Helping Women Recover: A Program for Treating Addiction, the workshop offers a comprehensive treatment model that integrates theories of addiction, women's psychological development, and trauma. Designed to give counselors, clinicians, recovering women, and others a basic understanding of the current knowledge related to addiction, the workshop focuses primarily on women's recovery. The workshop emphasizes the key issues of self, relationships, sexuality, spirituality, and the therapeutic techniques for dealing with these issues. Throughout the workshop, Dr. Covington also discusses how the treatment program materials can be used with women in the criminal justice system, the most hidden group of women in our society.

* Cost is $60 per person
* Earn 6 Contact Hours
* For an additional $20 get 0.6 CEUs

Approved by:
* NAADAC
* DSAS

* Lunch WILL be provided
* This facility is quite cool so please dress appropriately

Training Locations
March 12, 2015
Northside United Methodist ~ Hope Hall ~
2571 North Highland Ave
Jackson, TN 38305
9:00 am-4:00 pm CST
TAADAS typically meets in Suite 140 at 1321 Murfreesboro Pike at 10 am on the second Thursday of each month and will meet this quarter on:

- January 8
- February 12
- March 11—Day on the Hill

Please contact the TAADAS Executive Director for meeting information, directions or other membership information:

Mary Linden Salter
615-780-5901, x-18
marylinden@taadas.org

TAADAS will be closed on:

- New Year’s Day January 1
- Martin Luther King Day January 18
- President’s Day February 16

Licensed Alcohol and Drug Abuse Counselor Board Meetings for 2015

The January 2015 meeting will announce new Board members.

January 16, 2015, 9:00 a.m.
April 17, 2015, 9:00 a.m.
July 9, 2015, 9:00 a.m.
October 9, 2015, 9:00 a.m.

665 Mainstream Dr, Poplar Rm, MetroCenter, Nashville, TN
Tennessee REDLINE Referrals
1-800-889-9789

- Alcoholism
- Substance Abuse
- Mental Health
- Smoking
- Gambling Addictions
- Eating Disorders
- Callers are given local resources to address Domestic Violence and AIDS/HIV.
- Federal Marketplace Assistance

The TENNESSEE REDLINE is an anonymous statewide hotline, providing the state a referral source for any person who calls seeking assistance and/or resources on substance abuse, addiction, co-occurring (Alcohol and Drug and Mental Health) disorders and Problem Gambling.

CALLERS
Callers are given listings for resources in their area based on need. Redline is available 24 hours a day, 7 days a week.

TAADAS
Opened on March 26, 1976 when a group of concerned citizens joined together to “create and foster a statewide association to promote common interest in prevention, control, and eradication of alcoholism and other drug dependency.”

The Tennessee Association of Alcohol, Drug and other Addiction Services is a statewide, consumer-oriented association consisting of over 50 agencies that focus on addiction, recovery, prevention, treatment, and advocacy. We represent thousands of consumers in recovery, their families, community leaders, healthcare professionals and providers. TAADAS’ mission is to educate, support and engage our members and the public, influence policy, and advocate for prevention, treatment and recovery services.

Recovery Books & Things is the TAADAS Bookstore. You will find hundreds of self-help book titles in stock and a unique collection of gifts designed to inspire and celebrate the recovery journey. Recovery Books & Things is located in the TAADAS office, Airport Executive Plaza, 1321 Murfreesboro Pike, Suite 155, Nashville, TN. Store hours are Monday-Friday 8 am - 5 pm CST.

TAADAS Clearinghouse has a mission to provide comprehensive information on addiction, mental health, and related issues. It offers free materials including pamphlets, fact sheets, booklets, and posters on topics ranging from general knowledge to current research and trends.

Marketplace Assistance is available to REDLINE callers. As of January 1, 2014 many Tennesseans became eligible for tax credits and cost sharing through the Federal Marketplace. If you or someone you know is uninsured, underinsured, cannot afford existing coverage, or has questions, please call the REDLINE. We offer limited in-office enrollment assistance and have collaborative partners to assist with your Marketplace needs.
Strengthening individuals, families and communities with hope, access to services, and recovery.

Tennessee Co-Occurring Disorders Collaborative

42 Rutledge Street • Nashville, TN 37210-2043

(615) 244-2220, Ext. 14
Toll Free in TN. (800) 568-2642
Fax (615) 254-8331
Your baby’s life shouldn’t begin with detox.
Your baby’s health depends on YOUR health.

To protect your baby, talk to a medical professional about all medications you are taking—prescriptions, street drugs, alcohol, and tobacco. We don’t judge. We get you help. And it’s confidential. Just ask your doctor or call our hotline.

GET ANSWERS. GET HELP.

BornDrugFreeTN.com
1-800-889-9789

Sponsored by the East Tennessee Neonatal Abstinence Syndrome Task Force.
On Thursday, February 4th, 2015, the Healing Arts Project will be hosting its annual Phoenix Art Gala. The event will take place at the Hilton Garden Inn, Nashville Vanderbilt location at 1715 Broadway, Nashville, TN 37203. A silent auction of artwork created by HAPI artists will take place, in addition to several celebrity auction items. Guests will be able to meet with HAPI's artists, while enjoying appetizers, refreshments, and live entertainment by the renowned recording session & ABC's "Nashville" guitarist, Jonathan Brown. Admission to the Gala is available through four levels of sponsorship: Platinum ($1,200 for 10 admissions), Gold ($600 for 5 admissions), Silver ($360 for 3 admissions), and Bronze ($120 for 1 admission). All proceeds from admission will go towards HAPI's continued art classes & support for its Middle Tennessee participants in mental health and addiction recovery. Proceeds from the auctioned artwork will be split between both HAPI's outreach services, as well as HAPI's artists. We hope you will join us in for the evening to ensure continue HAPI's outreach and mission to serve the continuing recovery and wellbeing of thousands of Middle Tennesseans dealing with mental health and addiction issues.

Learn More!
Visit our Facebook Page or Website at http://healingartsprojectinc.org to learn more of HAPI's day to day going-ons! Here you can see more of our wonderful artists' artwork and pictures from last year's Phoenix Art Gala.
We thank the following members for their support and involvement in our organization!

Charlotte Hoppers, President          Laura Berlind, President Elect        Daryl Murray, Treasurer

Organizational Members

Agape, Knoxville                 Hope of East Tennessee, Oak Ridge
Aspell Recovery Ctr., Jackson    Jack Gan Shelter, Savannah
Buffalo Valley, Hohenwald       JACOA, Jackson
CADAS, Chattanooga             Knox County Recovery Court
CADCOr, Murfreesboro            Madison Treatment Center, Madison
Clay County Anti-Drug Coalition, Celina
Community Prevention Coalition of Jackson Co., Gainsboro
Comprehensive Community Services, Johnson City
Crossbridge, Inc. Nashville
Cumberland Heights, Nashville   Park Center, Nashville
E.M. Jellinek Center, Knoxville  Place of Hope, Columbia
Families Free, Johnson City     Renewal House, Nashville
First Step Recovery Center, Memphis
Friend of Bill’s Recovery Houses, Lebanon
Generations Mental Health, McMinnville
Grace House, Memphis
Grandpa’s Recovery House, Smyrna
Hamblin County Drug Court, Morristown
Harbor House of Memphis, Memphis
Healing Arts Research Training Ctr., Memphis
HealthConnect America, Nashville
Here’s Hope, Counseling Ctr., Dyersburg

Affiliate and Individual Members

Bradford Health                  Oxford House
Cumberland Heights               TN Assoc. of Alcohol & Drug Abuse Counselors
Employee Benefit Specialists, Inc.
New Life Lodge                   TN Professional Assistance Program, Nashville

Todd Albert                      Wayne McElhiney
James Beck                       Harold Montgomery
Richard Chirip                   Melody Morris
Cody Harris                      Judge Seth Norman
Leland Lusk                      Butch Odom
John McAndrew                    Nathan Ridley

Brad Schmitt                     Sheila Shelton
Wayne McElhiney                  George Snodgrass
Harold Montgomery                Lawrence Wilson
Melody Morris                    Butch Odom
Judge Seth Norman                Nathan Ridley
Sheila Shelton
The Tennessee Association of Alcohol, Drug and other Addiction Services (TAADAS) began March 26, 1976 when a group of concerned Tennesseans joined together in Chattanooga for the purpose of “creating and fostering a statewide association to promote common interest in prevention, control, and eradication of alcoholism and other drug dependency.” The TAADAS mission is to educate the public and influence state/national policy decisions in order to improve services to those who are affected by alcoholism, drug dependency and other addictions. TAADAS programs are funded in part by grants from the Tennessee Department of Mental Health and Substance Abuse Services, Division of Alcohol and Drug Abuse Services. As a statewide association made up of prevention programs, treatment agencies, recovery services and private citizens, TAADAS strives to be the Voice for Recovery in Tennessee through its membership and many programs.

Alcohol and other drug dependence is a primary, chronic, progressive and potentially fatal disease. Its effects are systemic, predictable and unique. Without intervention and treatment, the disease runs an inexorable course marked by progressive crippling of mental, physical, and spiritual functioning with a devastating impact on all sectors of life — social, physiological, family, financial, vocational, educational, moral/spiritual, and legal. The public needs to understand that addiction is a treatable illness and that millions of people achieve recovery.

**TAADAS's purpose is to:**
- promote common interest in the prevention, control and eradication of alcoholism, drug dependency and other addictions;
- Work with and facilitate cooperation with all agencies interested in the health and welfare of the community;
- impact legislation regarding alcohol and drug abuse and other addictions;
- educate the community regarding alcohol and drug abuse and other addiction issues;
- encourage and support the development of alcohol and drug abuse and other addiction services in areas that are underserved;
- enhance the quality of services provided by Association members;
- to serve as a resource for Association members; and
- to further fellowship among those members.

**TAADAS Membership**
Through its association membership and by networking with public policy makers, TAADAS keeps alcoholism, drug abuse and other addiction issues in the forefront when public policy decisions are made and through the collective voice of its members, TAADAS directly impacts the important issues facing the addiction services field today. Membership benefits include:

- Expand knowledge – TAADAS has a statewide Clearinghouse of extensive resources and statewide training opportunities
- Impact public policy
- Networking opportunities that promote advocacy and best practices. TAADAS Committees address data and outcomes measurement, legislative advocacy and consumer support
- TAADAS Times Newsletter
- Discounts at Recovery Books & Things
- Discounted hotel rates
- Credit union membership
APPLICATION FOR MEMBERSHIP IN TAADAS

Membership shall be open to individuals or entities with an interest in addiction, co-occurring, prevention, or recovery support services and subject to payment of membership dues. **Organizational Member** - Any non profit or governmental organization or entity that provides addiction, co-occurring, prevention or recovery support services is eligible to become an Organizational Member of TAADAS.

**Affiliate Member**—Any organization or business that is affiliated with or wishes to support the efforts of the A&D provider and recovery community.

**Individual Member** - Individual membership is open to any individual with an interest in addiction, co-occurring or recovery support services in Tennessee.

**Student or Retiree Member**—A Student or Retiree membership is open to anyone with an interest in addiction, co-occurring or recovery support services in Tennessee. To qualify the applicant must be retired, unemployed, enrolled in a higher education program or working towards a LADAC.

**Annual Dues**

<table>
<thead>
<tr>
<th>Type of Membership</th>
<th>Annual Dues</th>
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<tbody>
<tr>
<td>Organizational/Affiliate Member with Annual Revenue &lt; $100,000</td>
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</tr>
<tr>
<td>Organizational/Affiliate Member with Annual Revenue = $100,000- $500,000</td>
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<tr>
<td>Organizational/Affiliate Member with Annual Revenue = $500,000 - $1,000,000</td>
<td>$1000</td>
</tr>
<tr>
<td>Organizational/Affiliate Member with Annual Revenue = $1,000,000 - $2,000,000</td>
<td>$1500</td>
</tr>
<tr>
<td>Organizational/Affiliate Member with Annual Revenue &gt; $2,000,000</td>
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<tr>
<td>Individual Member</td>
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<tr>
<td>Retiree or Student Member</td>
<td>$50</td>
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*Minimum suggested leadership pledge ... you may pledge more

Date: ____________  * Referring Member: (If Applicable) ____________________________

Name: __________________________________________________________

Agency: _________________________________________________________

Address: _______________________________________________________

City: __________________________ State: _________  Zip Code: _______________

Phone: __________________________ Toll Free: _______________________

Fax: ___________________________ Email: ____________________________

Agency Website: _____________________________________________

Agency Representative: _________________________________________

Representative Email: _________________________________________

Please send your completed application to TAADAS at 615-780-5905 (fax) or taadas@taadas.org
2015

Legislative Breakfast

The Tennessee Association of Alcohol Drug and other Addiction Services cordially invites you to attend our Annual Legislative Breakfast.

Breakfast will be held on March 11, 2015 at 8 am in the Legislative Plaza Cafeteria located at 301 6th Ave North

The entire membership of the 109th General Assembly has been invited to this event and a copy of this invitation has been timely delivered to the Tennessee Ethics Commission pursuant to T.C.A.3-6-305(d)(8).