



HSCRC Trustees -MDH- <hscrc.trustees@maryland.gov>

Response for survey 'Maryland Health Services Cost Review Commission Trustee Disclosure of Interest Statement'

1 message

hscrc.trustees@maryland.gov <hscrc.trustees@maryland.gov>
Reply-To: hscrc.trustees@maryland.gov
To: hscrc.trustees@maryland.gov

Wed, Oct 11, 2023 at 2:10 PM

DATE OF STATEMENT: 10/12/2023**PERIOD COVERED: FROM:** 07/01/2022 **TO:** 06/30/2023**TRUSTEE, DIRECTOR, OR OFFICER NAME:** Deborah S. Ellinghaus**TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS:** [2001 Olney Sandy Spring Road, Olney, MD 20832](#)**HOSPITAL NAME:** Medstar Montgomery General Hospital**HOSPITAL ADDRESS:** 18101 Prince Phillip Drive, Olney, MD 20832**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME:** Olney Theatre Center**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS:** [2001 Olney Sandy Spring Road, Olney, MD 20832](#)**MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** Non-Profit Arts Organization**TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY:**
Managing Director/Executive Director, and serves on the Board of Directors**TYPE OR NATURE OF BUSINESS TRANSACTIONS, DEALINGS, OR SERVICES BY AND BETWEEN THE HOSPITAL TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY HAVING AN ACTUAL OR IMPUTED VALUE OR WORTH OF \$10,000 OR MORE TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** Medstar Montgomery Medical Center made event sponsorship payments and charitable donations to Olney Theatre Center**MONETARY VALUE OF THE BUSINESS TRANSACTION(S) TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** 20,000**DECLARATION OF TRUSTEE, DIRECTOR, OR OFFICER THAT THE STATEMENT IS TRUE TO THE BEST OF HIS/HER KNOWLEDGE, INFORMATION, AND BELIEF THAT THIS STATEMENT IS TRUE AND CORRECT UNDER PENALTIES OF PERJURY:****PRINTED NAME OF TRUSTEE, DIRECTOR, OR OFFICER:** Deborah S. Ellinghaus



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Thu, Oct 19, 2023 at 3:35 PM

DATE OF STATEMENT: 10/19/2023**PERIOD COVERED: FROM:** 07/01/2022 **TO:** 06/30/2023**TRUSTEE, DIRECTOR, OR OFFICER NAME:** Deborah S. Ellinghaus**TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS:** [2001 Olney Sandy Spring Road, Olney, MD 20723](#)**HOSPITAL NAME:** Medstar Montgomery General Hospital**HOSPITAL ADDRESS:** [18101 Prince Philip Drive, Olney, MD 20832](#)**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME:** non-profit arts organization**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS:** [2001 Olney Sandy Spring Road, Olney, MD 20832](#)**MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** Non-profit arts organization**TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY:**
Managing Director, and serves on the Board of Directors**TYPE OR NATURE OF BUSINESS TRANSACTIONS, DEALINGS, OR SERVICES BY AND BETWEEN THE HOSPITAL TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY HAVING AN ACTUAL OR IMPUTED VALUE OR WORTH OF \$10,000 OR MORE TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** Medstar Montgomery Medical Center made philanthropic contributions to Olney Theatre Center, including event sponsorships and program support**MONETARY VALUE OF THE BUSINESS TRANSACTION(S) TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** \$25,000**DECLARATION OF TRUSTEE, DIRECTOR, OR OFFICER THAT THE STATEMENT IS TRUE TO THE BEST OF HIS/HER KNOWLEDGE, INFORMATION, AND BELIEF THAT THIS STATEMENT IS TRUE AND CORRECT UNDER PENALTIES OF PERJURY:****PRINTED NAME OF TRUSTEE, DIRECTOR, OR OFFICER:** Deborah S. Ellinghaus



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Fri, Oct 20, 2023 at 6:36 AM

DATE OF STATEMENT: 10/20/2023**PERIOD COVERED: FROM:** 7/1/2022 **TO:** 6/30/2023**TRUSTEE, DIRECTOR, OR OFFICER NAME:** Marc L. Kozam, M.D.**TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS:** [18111 Prince Philip Drive, Suite T14, Olney, MD 20832](#)**HOSPITAL NAME:** Medstar Montgomery General Hospital**HOSPITAL ADDRESS:** [18101 Prince Philip Drive, Olney, MD 20832](#)**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME:** Marc L. Kozam, M.D.**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS:** [18111 Prince Philip Drive, Suite T14, Olney, MD 20832](#)**MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** Professional Health Services**TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY:**
Physician**TYPE OR NATURE OF BUSINESS TRANSACTIONS, DEALINGS, OR SERVICES BY AND BETWEEN THE HOSPITAL TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY HAVING AN ACTUAL OR IMPUTED VALUE OR WORTH OF \$10,000 OR MORE TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** MedStar Montgomery Medical Center paid Dr. Kozam to serve as President of the Medical Staff**MONETARY VALUE OF THE BUSINESS TRANSACTION(S) TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** \$40,000**DECLARATION OF TRUSTEE, DIRECTOR, OR OFFICER THAT THE STATEMENT IS TRUE TO THE BEST OF HIS/HER KNOWLEDGE, INFORMATION, AND BELIEF THAT THIS STATEMENT IS TRUE AND CORRECT UNDER PENALTIES OF PERJURY:****PRINTED NAME OF TRUSTEE, DIRECTOR, OR OFFICER:** Marc L. Kozam, M.D.



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Fri, Oct 6, 2023 at 3:13 PM

DATE OF STATEMENT: 10/6/2023**PERIOD COVERED: FROM:** 07/01/2022 **TO:** 06/30/2023**TRUSTEE, DIRECTOR, OR OFFICER NAME:** Thomas J. Senker, FACHE**TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS:** [18101 Prince Philip Drive, Olney, MD 20832](#)**HOSPITAL NAME:** Medstar Montgomery General Hospital**HOSPITAL ADDRESS:** [18101 Prince Philip Drive, Olney, MD 20832](#)**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME:** Olney Theatre Center**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS:** [2001 Olney Sandy Spring Road, Olney, MD 20832](#)**MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** Non-Profit Arts Organization**TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY:** Board Director**TYPE OR NATURE OF BUSINESS TRANSACTIONS, DEALINGS, OR SERVICES BY AND BETWEEN THE HOSPITAL TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY HAVING AN ACTUAL OR IMPUTED VALUE OR WORTH OF \$10,000 OR MORE TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** MedStar Montgomery Medical Center made event sponsorship payments to Olney Theatre Center**MONETARY VALUE OF THE BUSINESS TRANSACTION(S) TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** \$25,000**DECLARATION OF TRUSTEE, DIRECTOR, OR OFFICER THAT THE STATEMENT IS TRUE TO THE BEST OF HIS/HER KNOWLEDGE, INFORMATION, AND BELIEF THAT THIS STATEMENT IS TRUE AND CORRECT UNDER PENALTIES OF PERJURY:****PRINTED NAME OF TRUSTEE, DIRECTOR, OR OFFICER:** Thomas J. Senker, FACHE



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Mon, Oct 9, 2023 at 3:14 PM

DATE OF STATEMENT: 10/9/2023

PERIOD COVERED: FROM: 07/01/2022 **TO:** 06/30/2023

TRUSTEE, DIRECTOR, OR OFFICER NAME: Neil R Ohora, DPM

TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS: [18111 Prince Philip Drive, suite 212, Olney, MD 20832](#)

HOSPITAL NAME: Medstar Montgomery General Hospital

HOSPITAL ADDRESS: [18109 Prince Philip Drive, Olney, MD](#)

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME: MedStar Medical Group

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS: [18111 Prince Philip Drive, suite 212, Olney, MD 20732](#)

MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: Professional Health Services

TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY:
Physician

TYPE OR NATURE OF BUSINESS TRANSACTIONS, DEALINGS, OR SERVICES BY AND BETWEEN THE HOSPITAL TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY HAVING AN ACTUAL OR IMPUTED VALUE OR WORTH OF \$10,000 OR MORE TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: MedStar Montgomery Medical Center paid Dr Ohora for professional health services and for serving as chief of surgery.

MONETARY VALUE OF THE BUSINESS TRANSACTION(S) TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: \$23,109.36

DECLARATION OF TRUSTEE, DIRECTOR, OR OFFICER THAT THE STATEMENT IS TRUE TO THE BEST OF HIS/HER KNOWLEDGE, INFORMATION, AND BELIEF THAT THIS STATEMENT IS TRUE AND CORRECT UNDER PENALTIES OF PERJURY:

PRINTED NAME OF TRUSTEE, DIRECTOR, OR OFFICER: Neil Ohora, DPM