



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

Fri, Oct 27, 2023 at 10:55 AM

**DATE OF STATEMENT:** 10/27/2023

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

**TRUSTEE, DIRECTOR, OR OFFICER NAME:** Theresa Felder

**TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS:** [401 Thomas Run Road Bel Air, Maryland 21015](#)

**HOSPITAL NAME:** University of Maryland - Upper Chesapeake Medical Center

**HOSPITAL ADDRESS:** [500 Upper Chesapeake Drive, Bel Air, Maryland 21014](#)

**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME:** Harford Community College

**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS:** [401 Thomas Run Road Bel Air, Maryland 21015](#)

**MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** Academic Institution

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

**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:**  
Scholarships and Professional Development

**MONETARY VALUE OF THE BUSINESS TRANSACTION(S) TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** \$41,060.91

**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:** Theresa Felder



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Tue, Oct 24, 2023 at 5:35 PM

**DATE OF STATEMENT:** 10/24/2023**PERIOD COVERED: FROM:** 07/01/2022 **TO:** 06/30/2023**TRUSTEE, DIRECTOR, OR OFFICER NAME:** Mohan Suntha, MD, MBA**TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS:** [250 West Pratt Street, 24th Floor, Baltimore, Maryland 21201](#)**HOSPITAL NAME:** University of Maryland - Upper Chesapeake Medical Center**HOSPITAL ADDRESS:** [500 Upper Chesapeake Drive, Bel Air, Maryland 21014](#)**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME:** Maryland Hospital Association**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS:** [6820 Deerpath Road, Glen Burnie, Maryland 21075](#)**MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** Major Business - Hospital Advocacy**TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY:** Board Member**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:** Membership Dues**MONETARY VALUE OF THE BUSINESS TRANSACTION(S) TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** 140,653.00**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:** Mohan Suntha, MD, MBA



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Fri, Oct 27, 2023 at 10:51 AM

**DATE OF STATEMENT:** 10/27/2023**PERIOD COVERED: FROM:** 07/01/2022 **TO:** 06/30/2023**TRUSTEE, DIRECTOR, OR OFFICER NAME:** Sanjeev Kumar, MD**TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS:** [265 Brookview Ctr Way, Suite 400, Knoxville, TN 37919](#)**HOSPITAL NAME:** University of Maryland - Upper Chesapeake Medical Center**HOSPITAL ADDRESS:** [500 Upper Chesapeake Drive, Bel Air, Maryland 21014](#)**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME:** TeamHealth**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS:** [265 Brookview Ctr Way, Suite 400, Knoxville, TN 37919](#)**MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** Professional - Clinical**TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY:**  
Anesthesiologist**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:** Clinical Services**MONETARY VALUE OF THE BUSINESS TRANSACTION(S) TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** \$1,015,115.06**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:** Sanjeev Kumar, MD



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

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Fri, Oct 27, 2023 at 10:54 AM

Reply-To: hscrc.trustees@maryland.gov

To: hscrc.trustees@maryland.gov

**DATE OF STATEMENT:** 10/27/2023**PERIOD COVERED: FROM:** 07/01/2022 **TO:** 06/30/2023**TRUSTEE, DIRECTOR, OR OFFICER NAME:** Lisa E. Thomas, MD**TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS:** [110 S Paca Street Floor 6, Baltimore, MD 21201](#)**HOSPITAL NAME:** University of Maryland - Upper Chesapeake Medical Center**HOSPITAL ADDRESS:** [500 Upper Chesapeake Drive, Bel Air, Maryland 21014](#)**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME:** University of Maryland Emergency Medicine Network**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS:** [110 S Paca Street Floor 6, Baltimore, MD 21201](#)**MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** Professional - Clinical**TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY:** Emergency 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:** Clinical Services**MONETARY VALUE OF THE BUSINESS TRANSACTION(S) TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** \$622,932.01**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:** Lisa E. Thomas, MD



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Fri, Oct 27, 2023 at 3:51 PM

**DATE OF STATEMENT:** 10/27/2023**PERIOD COVERED: FROM:** 07/01/2022 **TO:** 06/30/2023**TRUSTEE, DIRECTOR, OR OFFICER NAME:** V. Dixon King, MD**TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS:** [2330 W. Joppa Road, Lutherville, MD 21093](#)**HOSPITAL NAME:** University of Maryland - Upper Chesapeake Medical Center**HOSPITAL ADDRESS:** [500 Upper Chesapeake Drive, Bel Air, Maryland 21014](#)**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME:** Hicken, Cranly and Taylor, PA**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS:** [2330 W. Joppa Road, Lutherville, MD 21093](#)**MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** Professional - Clinical Services**TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY:** 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:** Pathology - Clinical Services**MONETARY VALUE OF THE BUSINESS TRANSACTION(S) TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** \$184,772.56**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:** V. Dixon King, MD