

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

1 message

hscrc.trustees@maryland.gov <hscrc.trustees@maryland.gov>

Thu, Apr 16, 2020 at 3:09 PM

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

DATE OF STATEMENT: 4/16/2020

PERIOD COVERED: FROM: 01/01/2019 TO: 12/31/2019

TRUSTEE, DIRECTOR, OR OFFICER NAME: DR. BILL MILLER

TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS: 606 GREENVILLE AVE; STAUNTON, VA 24401

HOSPITAL NAME: Adventist Healthcare Rehabilitation

HOSPITAL ADDRESS: 9909 MEDICAL CENTER DR.; ROCKVILLE, MD 20850

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME: POTOMAC CONFERENCE CORPORATION OF

SEVENTH DAY ADVENTISTS

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS: 606 GREENVILLE AVE; STAUNTON, VA 24401

MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: POTOMAC CONFERENCE CORPORATION EXISTS TO GROW HEALTHY-DISCIPLE MAKING **CHURCHES**

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: ADVENTIST HEALTHCARE, INC. LEASED SPACE FROM POTOMAC CONFERENCE CORPORATION OD SEVENTH DAY ADVENTISTS DURING CALENDAR YEAR 2019. THIS SPACE WAS LEASED IN CONJUNCTION WITH THE RELOCATION OF WASHINGTON ADVENTIST HOSPITAL FROM TAKOMA PARK TO IT'S CURRENT LOCATION IN WHITE OAK. SPACE WAS ALSO LEASED WITH RESPECT TO THE OPENING OF AN IMAGING CENTER OFF OF CHERRY HILL RD. IN SILVER SPRING.

MONETARY VALUE OF THE BUSINESS TRANSACTION(S)TO THE TRUSTEE, DIRECTOR, OR OFFICER'S **BUSINESS ENTITY: \$58,755**

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: DR. BILL MILLER



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

1 message

hscrc.trustees@maryland.gov <hscrc.trustees@maryland.gov>

Mon, Apr 20, 2020 at 1:39 PM

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

DATE OF STATEMENT: Maryland

PERIOD COVERED: FROM: 01/01/2019 TO: 12/31/2019

TRUSTEE, DIRECTOR, OR OFFICER NAME: Paul E. Alpuche, Jr.

TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS: 7600 Wisconsin Avenue, Suite 700, Bethesda, MD 20814

HOSPITAL NAME: Adventist Healthcare Rehabilitation

HOSPITAL ADDRESS: 9909 Medical Center Drive, Rockville, MD 20850

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME: Lerch, Early & Brewer

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS: 7600 Wisconsin Avenue, Suite 700, Bethesda, MD 20814

MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: Lerch, Early & Brewer

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

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: Legal Services

MONETARY VALUE OF THE BUSINESS TRANSACTION(S)TO THE TRUSTEE, DIRECTOR, OR OFFICER'S **BUSINESS ENTITY: \$486,192**

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: Paul Alpuche, Jr.



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

1 message

hscrc.trustees@maryland.gov <hscrc.trustees@maryland.gov>

Mon, Apr 20, 2020 at 3:51 PM

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

DATE OF STATEMENT: 4/20/2020

PERIOD COVERED: FROM: 01/01/2019 TO: 12/31/2019

TRUSTEE, DIRECTOR, OR OFFICER NAME: Walter Fennell

TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS: 1800 Tysons Boulevard, McLean, VA 22102

HOSPITAL NAME: Adventist Healthcare Rehabilitation

HOSPITAL ADDRESS: 9909 Medical Center Dr Rockville, MD 20850

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME: Guidehouse LLP

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS: 1800 Tysons Boulevard, McLean, VA 22102

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

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

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: Business Consulting/Vendor Provider Services.

MONETARY VALUE OF THE BUSINESS TRANSACTION(S)TO THE TRUSTEE, DIRECTOR, OR OFFICER'S **BUSINESS ENTITY: \$153,604.00**

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: Walter Fennell



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

1 message

hscrc.trustees@maryland.gov <hscrc.trustees@maryland.gov>

Mon, Apr 20, 2020 at 4:29 PM

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

DATE OF STATEMENT: MARYLAND

PERIOD COVERED: FROM: 01/01/2019 TO: 12/31/2020

TRUSTEE, DIRECTOR, OR OFFICER NAME: Dr Brett Gamma

TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS: 9901 MEDICAL CENTER DRIVE, Rockville, MD 20858

HOSPITAL NAME: Adventist Healthcare Rehabilitation

HOSPITAL ADDRESS: 9909 Medical Center Drive, Rockville, Md 20850

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME: US Acute Care Solutions

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS: 4535 Dressler Road NW, Canton, Oh 44718

MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: USACS provides physician staffing and management for health system's emergency departments.

TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY: Associate Medical Director, USACS East Region

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: USACS provides physician coverage for the departments of Emergency Medicine, Hospitalist Medicine and Critical Care Medicine.

MONETARY VALUE OF THE BUSINESS TRANSACTION(S)TO THE TRUSTEE, DIRECTOR, OR OFFICER'S **BUSINESS ENTITY: \$262, 294**

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: Brett Gamma