

BAKER DONELSON

100 LIGHT STREET • BALTIMORE, MARYLAND 21202 • 410.685.1120 • bakerdonelson.com

JOHN J. ELLER, SENIOR COUNSEL
Direct Dial: 410.862.1162
Direct Fax: 443.263.7562
E-Mail Address: jeller@bakerdonelson.com

October 20, 2017

VIA EMAIL & FIRST CLASS MAIL

Kevin McDonald, Chief
Certificate of Need Division
Maryland Health Care Commission
4160 Patterson Avenue
Baltimore, Maryland 21215

Re: Thomas Johnson Surgery Center, LLC
Certificate of Need Application: Additional Tables

Dear Mr. McDonald:

Enclosed please find six copies of Tables C, D and L to be incorporated in the Certificate of Need Application filed on behalf of Thomas Johnson Surgery Center, LLC (“TJSC”) on October 6, 2017 to convert the existing procedure room to a second operating room (“OR”). These tables are intended to be added to Exhibit 1 which contains the CON Table Packet. We apologize for not having included these tables in the original submission. The Excel version of the entire CON Table Packet is attached to the email transmitting these materials to you.

I hereby certify that a copy of these materials has been provided to the affected local health department.

Sincerely,
BAKER, DONELSON, BEARMAN,
CALDWELL & BERKOWITZ, PC


John J. Eller, Senior Counsel

JJE/tjr

Enclosures

cc: Barbara Brookmeyer, M.D., MPH, Health Officer, Frederick County
Ms. Ruby Potter
Health Facilities Coordination Office
Naomi Allen, CEO
Kristine Lowther, Vice President, Operations

Kevin McDonald, Chief
Certificate of Need Division
October 20, 2017
Page 2

cc: Charles Ferguson, Esq.
Andrew Solberg, CON Consultant
A.L.S. Healthcare Consultant Services

TABLE C. CONSTRUCTION CHARACTERISTICS

INSTRUCTION: If project includes non-hospital space structures (e.g., parking garges, medical office buildings, or energy plants), complete an additional Table C for each structure.

	NEW CONSTRUCTION	RENOVATION
BASE BUILDING CHARACTERISTICS	Check if applicable	
Class of Construction (for renovations the class of the building being renovated)*	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Class A	<input type="checkbox"/>	<input type="checkbox"/>
Class B	<input type="checkbox"/>	<input type="checkbox"/>
Class C	<input type="checkbox"/>	<input type="checkbox"/>
Class D	<input type="checkbox"/>	<input type="checkbox"/>
Type of Construction/Renovation*		
Low	<input type="checkbox"/>	<input type="checkbox"/>
Average	<input type="checkbox"/>	<input type="checkbox"/>
Good	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Excellent	<input type="checkbox"/>	<input type="checkbox"/>
Number of Stories		

*As defined by Marshall Valuation Service

PROJECT SPACE	List Number of Feet, if applicable	
Total Square Footage	Total Square Feet	
Basement		NA
First Floor		420 SF
Second Floor		NA
Third Floor		NA
Fourth Floor		NA
Average Square Feet		420 SF
Perimeter in Linear Feet	Linear Feet	
Basement		NA
First Floor		80'- 2"
Second Floor		NA
Third Floor		NA
Fourth Floor		NA
Total Linear Feet		80'-2"
Average Linear Feet		80'-2"
Wall Height (floor to eaves)	Feet	
Basement		NA
First Floor		9'-0"
Second Floor		NA
Third Floor		NA
Fourth Floor		NA
Average Wall Height		9'-0"
OTHER COMPONENTS		
Elevators	List Number	
Passenger		NA
Freight		NA
Sprinklers	Square Feet Covered	
Wet System		420
Dry System		NA
Other	Describe Type	
Type of HVAC System for proposed project		EXISTING
Type of Exterior Walls for proposed project		EXISTING

TABLE D. ONSITE AND OFFSITE COSTS INCLUDED AND EXCLUDED IN MARSHALL VALUATION COSTS

<i>INSTRUCTION: If project includes non-hospital space structures (e.g., parking garages, medical office buildings, or energy plants), complete an additional Table D for each structure.</i>		
	NEW CONSTRUCTION COSTS	RENOVATION COSTS
SITE PREPARATION COSTS		
Normal Site Preparation		NA
Utilities from Structure to Lot Line		NA
Subtotal included in Marshall Valuation Costs		NA
Site Demolition Costs		
Storm Drains		
Rough Grading		
Hillside Foundation		
Paving		
Exterior Signs		
Landscaping		
Walls		
Yard Lighting		
Other (Specify/add rows if needed) Interior demolition		\$5,160
Subtotal On-Site excluded from Marshall Valuation Costs		\$5,160
OFFSITE COSTS		
Roads		
Utilities		
Jurisdictional Hook-up Fees		
Other (Specify/add rows if needed)		
Subtotal Off-Site excluded from Marshall Valuation Costs		
TOTAL Estimated On-Site and Off-Site Costs <u>not</u> included in Marshall Valuation Costs	\$0	\$5,160
TOTAL Site and Off-Site Costs included and excluded from Marshall Valuation Service*	\$0	\$5,160

*The combined total site and offsite cost included and excluded from Marshall Valuation Service should typically equal the estimated site preparation cost reported in Application Part II, Project Budget (see Table E. Project Budget). If these numbers are not equal, please reconcile the numbers in an explanation in an attachment to the application.

TABLE H. WORKFORCE INFORMATION

INSTRUCTION: List the facility's existing staffing and changes required by this project. Include all major job categories under each heading provided in the table. The number of Full Time Equivalents (FTEs) should be calculated on the basis of 2,080 paid hours per year equals one FTE. In an attachment to the application, explain any factor used in converting paid hours to worked hours. Please ensure that the projections in this table are consistent with expenses provided in uninflated projections in Tables F and G.

Job Category	CURRENT ENTIRE FACILITY			PROJECTED CHANGES AS A RESULT OF THE PROPOSED PROJECT THROUGH THE LAST YEAR OF PROJECTION			OTHER EXPECTED CHANGES IN OPERATIONS THROUGH THE LAST YEAR OF PROJECTION (CURRENT)			PROJECTED ENTIRE FACILITY THROUGH THE LAST YEAR OF	
	Current Year FTEs	Average Salary per FTE	Current Year Total Cost	FTEs	Average Salary per FTE	Total Cost (should be consistent with projections in Table G, if submitted).	FTEs	Average Salary per FTE	Total Cost	FTEs	Total Cost (should be consistent with projections in Table G)
1. Regular Employees											
<i>Administration (List general categories, add rows if needed)</i>											
Administrator	1.00	\$123,768	\$123,768			\$0			\$0	1.0	\$123,768
Business Office	1.00	\$56,300	\$56,300			\$0			\$0	1.0	\$56,300
Admission Clerk	1.00	\$32,324	\$32,324			\$0			\$0	1.0	\$32,324
			\$0			\$0			\$0	0.0	\$0
Total Administration	3.0	212,392.0	212,392.0	0.0	0.0	0.0	0.0	0.0	0.0	3.0	212,392.0
<i>Direct Care Staff (List general categories, add rows if needed)</i>											
Surgical Techs	2.2	\$47,595	\$104,709	0.8	\$47,595	\$38,108			\$0	3.0	\$142,817
RN (*Pre Op & OR)	5.4	\$65,279	\$352,506	1.6	\$65,279	\$101,182			\$0	7.0	\$453,688
						\$0			\$0	0.0	\$0
						\$0			\$0	0.0	\$0
Total Direct Care	7.6	112,874.1	457,215.4	2.4	112,874.1	139,289.8	0.0	0.0	0.0	10.0	596,505.2
<i>Support Staff (List general categories, add rows if needed)</i>											
Sterile Processing Coordinator	0.7	\$28,176	\$28,176			\$0			\$0	0.7	\$28,176
						\$0			\$0	0.0	\$0
						\$0			\$0	0.0	\$0
						\$0			\$0	0.0	\$0
Total Support	0.7	28,176.0	28,176.0	0.0	0.0	0.0	0.0	0.0	0.0	0.7	28,176.0
REGULAR EMPLOYEES TOTAL	11.3	353,442.1	697,783.4	2.4	112,874.1	139,289.8	0.0	0.0	0.0	13.7	837,073.2
2. Contractual Employees											
<i>Administration (List general categories, add rows if needed)</i>											
			\$0			\$0			\$0	0.0	\$0
			\$0			\$0			\$0	0.0	\$0
			\$0			\$0			\$0	0.0	\$0
			\$0			\$0			\$0	0.0	\$0
Total Administration			\$0			\$0			\$0	0.0	\$0
<i>Direct Care Staff (List general categories, add rows if needed)</i>											
			\$0			\$0			\$0	0.0	\$0
			\$0			\$0			\$0	0.0	\$0
			\$0			\$0			\$0	0.0	\$0
			\$0			\$0			\$0	0.0	\$0
Total Direct Care Staff			\$0			\$0			\$0	0.0	\$0
<i>Support Staff (List general categories, add rows if needed)</i>											
			\$0			\$0			\$0	0.0	\$0
			\$0			\$0			\$0	0.0	\$0
			\$0			\$0			\$0	0.0	\$0
			\$0			\$0			\$0	0.0	\$0
Total Support Staff			\$0			\$0			\$0	0.0	\$0
CONTRACTUAL EMPLOYEES TOTAL			\$0			\$0			\$0	0.0	\$0
Benefits (State method of calculating benefits below) :			157,296.7			32,036.7					189,333
Calculated as 23% of Salaries											
TOTAL COST	11.3		\$855,080	2.4		\$171,326	0.0		\$0		\$1,026,407