

Andrew N. Pollak, M.D.
CHAIR

STATE OF MARYLAND

Ben Steffen
EXECUTIVE DIRECTOR



MARYLAND HEALTH CARE COMMISSION

4160 PATTERSON AVENUE – BALTIMORE, MARYLAND 21215
TELEPHONE: 410-764-3460 FAX: 410-358-1236

May 2, 2019

Spencer Wildonger, Director of Health Planning
Johns Hopkins Medicine
3910 Keswick Road, Suite N-2200
Baltimore, Maryland 21211

Re: Johns Hopkins Medicine
White Marsh Surgery Center Expansion
from a one operating room POSC to a two
operating room center
Matter No. 19-03-2437

VIA E-MAIL AND REGULAR MAIL

Dear Mr. Wildonger:

Staff of the Maryland Health Care Commission (“MHCC”) has reviewed the Certificate of Need application filed on February 2, 2019. We have the following questions and requests for additional information concerning this application. Please respond to this request, following the rules at COMAR 10.24.01.07. The application will be docketed if the responses are complete.

PART II – Project Budget

1. Total Sources of Funds (Exh. 6, Table E) is blank in the application. Please correct the table and resubmit.

PART IV - Consistency with General Review Criteria at COMAR 10.24.01.08G(3)

Charity Care Policy

2. Your response to (a)(i) regarding the charity care policy determination references the policy. The policy states on page 2 that standardized applications for Financial Assistance

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and Medical Financial Hardship have been developed. Copies are attached to this policy as Exhibits A and B. No attachments were included with the policy. Please provide copies of the application forms.

3. Your response to (a)(ii) does not include a copy of the notice provided to patients regarding the availability of charity care. Please provide a copy of the notice that is posted and handed out to patients.

Need

4. On page 40 it is stated that "There is increasing pressure from payors to perform outpatient cases in a lower cost setting when medically appropriate." Do you have documentation supporting this statement?

Design Requirement

5. The standard call for an ASC to be compliant with FGI standard 3.7. The architect's attestation (exh. 16) refers to standard 2.7 in error. Please submit a corrected attestation from the architect.

Please submit four copies of the responses to the additional information requested in this letter within ten working days of receipt (if additional time is required, applicant may request an extension). Also submit the response electronically, in both Word and PDF format, to Ruby Potter (ruby.potter@maryland.gov).

All information supplementing the application must be signed by person(s) available for cross-examination on the facts set forth in the supplementary information, who shall sign a statement as follows: "I hereby declare and affirm under the penalties of perjury that the facts stated in this application and its attachments are true and correct to the best of my knowledge, information, and belief."

Should you have any questions regarding this matter, feel free to contact either me at eric.baker@maryland.gov or by phone at (410)764-3324.

Sincerely,



Eric N. Baker
Program Manager
Certificate of Need

cc: Gregory Wm. Branch, M.D., Health Officer, Baltimore County Health Department
Kevin McDonald
Suellen Wideman, AAG