

Dear Ms. Cole:

I am writing to you today as a Licensed Nursing Home Administrator of CommuniCare's South River Health And Rehabilitation Center, a 111 bed skilled nursing center in Edgewater, MD. South River is a crucial part of the economy and the services of Edgewater. We care for about 70 patients who are here for long term care and call South River their home. We also care for another 20-30 patients who only need short term rehab (less than 100 days, physical rehabilitation as opposed to substance rehab). Our patients range in all ages and backgrounds. Further, as part of our commitment to our residents, we serve their families as they seek assistance in caring for their loved one.

On behalf of South River, below are comments to COMAR 10.24.20 *State Health Plan for Facilities and Services: Comprehensive Care Facility Services*, as promulgated in the Maryland Register on December 7th. It is my understanding that the Maryland Health Care Commission is recommending that applications to build new skilled nursing centers in the state could be submitted without evidence of demographic need. While I understand that our state health system needs a thorough revamp to help eliminate burdensome restrictions and regulations, I am strongly opposed to this problematic provision.

The CON process in Maryland has long been based on granting a need once identified to help a particular jurisdiction. When providers are unable to care for those in need, the MHCC authorizes additional beds or other services to assist a community that requested action. Currently in the State of Maryland, skilled nursing facilities on average are operating at an occupancy rate below 90%. There is no known need for additional beds to any jurisdiction throughout the state. By recommending that a skilled nursing facility can be granted absent of any demographic need, the purpose of CON is essentially counterproductive.

Moreover, at South River, our center operates at our best when census is high and beds are filled. We constantly work in tandem with hospitals and other referral sources to place residents in our facility, where they can reach their maximum potential through rehab and other services, and return to their home as soon as possible. While some individuals are often strong enough to go home after a hospital stay, others have complex medical conditions that need further rehab at a skilled nursing facility for continuous care. These residents rely on us to operate efficiently and give them the highest quality of care. However, by allowing new centers to be built without proven need, it will result in excess beds, which can possibly lead to providers inability to operate centers efficiently. This could also lead to staff

layoffs and possible closure of centers. For reasons stated above, I am asking that the MHCC withdraws this recommendation, as I strongly believe that this regulation will decrease the quality of care for Maryland residents.

Please feel free to contact me with any questions or concerns that you may have.

Have a great day.

Sincerely,

Brian Lenehan, LNHA

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Executive Director

144 Washington Road
Edgewater, MD 21037

410-956-5000 (O)