

June 24, 2022

VIA Email & U.S. MAIL

Shari Cohen Chief Operating Officer Clarkview Surgery Center, LLC 1427 Clarkview Road, Suite 300 Baltimore, Maryland 21209

> Re: Second Completeness Questions Set-Clarkview Surgery Center CON, Matter No. 22-04-2454

Dear Ms. Cohen:

Commission staff has reviewed the answers provided by the Clarkview Surgery Center, LLC (CSC) for first set of completeness questions, dated June 6, 2022. Staff requests that you answer the following questions in order to clarify certain responses provided for the first set of completeness questions.

Charity Care

1. Regarding the response provided for question 8 in the first set of completeness questions, please provide a response for Standard .05(A)(3)(c) Charity Care Policy (below).

(c) A proposal to establish or expand an ASF for which third party reimbursement is available, shall commit to provide charitable surgical services to indigent patients that are equivalent to at least the average amount of charity care provided by ASFs in the most recent year reported, measured as a percentage of total operating expenses. The applicant shall demonstrate that:

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(i) Its track record in the provision of charitable health care facility services supports the credibility of its commitment; and
(ii) It has a specific plan for achieving the level of charitable care provision to which it is committed.
(iii) If an existing ASF has not met the expected level of charity care for the two most recent years reported to MHCC, the applicant shall demonstrate that its historic level of charity care was appropriate to the needs of the service area population.

Impact on Existing Providers

2. Regarding the response provided for question 28 in the first set of completeness questions, please provide an analysis of the impact of the proposed project in accordance with Standard 10.24.01.08G(3)(f) (below).

Please assure that all sources of information used in the impact analysis are identified and identify all the assumptions made in the impact analysis with respect to demand for services, payer mix, access to service and cost to the health care delivery system including relevant populations considered in the analysis, and changes in market share, with information that supports the validity of these assumptions. Provide an analysis of the following impacts:

(a) On the volume of service provided by all other existing health care providers that are likely to experience some impact as a result of this project;

In your answer, include why and how you came to your conclusions.

Please submit two copies of the responses to above questions and requests for additional information within ten working days of receipt. Also submit the response electronically, in both Word and PDF format, to Ruby Potter (ruby.potter@maryland.gov). If additional time is needed to prepare a response, please let me know at your earliest convenience.

As with the request itself, all information supplementing the request 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, please contact me directly at (804) 347-6024.



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Sincerely,

The Mangel

Laura Hare Nirschl CON Program Manager

cc: Paul Parker, Director, Center for Health Care Facilities Planning & Development Wynee Hawk, Chief, Certificate of Need Gregory Branch, M.D., M.B.A., C.P.E., Health Officer, Baltimore County Health Department

