

**June 6 ,2022**

**Re: Completeness Questions- Clarkview Surgery Center CON Matter No. 22-04-2454**

**Project Description**

1. Please provide a description of the construction, renovation, and demolition plans for this project.

CSC proposes to add a third operating room ("OR") through renovation of existing space. Thus, this project will be defined as an renovation of the current ambulatory surgical facility. The space used by CSC is leased from Continental Realty. The third operating room will be in the same operating room suite.

The project consists of renovation of 500 square feet of existing building space that currently serves as a waiting room. The renovation will not impact the current operating or procedure rooms.

The total estimated cost of the project is \$500,000. Building renovations, including architect/engineering fees/permits, etc., constitutes the bulk of the expenditures at \$450,000, the remaining \$50,000 is for major movable equipment. The source of the funds for the renovation is cash provided by the CSC. The project is anticipated to be completed within 6 months of the start of renovation due to difficulty in securing the needed HVAC components.

2. Will there be any changes in services offered by the facility when the project is complete? Will any new procedure types be added?

CSC will remain a multispecialty ambulatory surgical center focusing primarily on Cosmetic Plastic Surgery outpatient procedures. The addition of the 3<sup>rd</sup> operating room will allow for a greater volume of cases to be completed as well as eliminating the surgical waiting list. There will be no changes in services offered. No services will be added or removed.

3. Provide a description of the facility and its uses. Also provide the names and a description of any other entities that operate at the same location as CSC. If such entities exist, also provide a description of the relationship between CSC and those entities.

The Clarkview Surgery Center is an Ambulatory Surgery Center that consists of 2 operating rooms and 2 nonsterile procedure rooms. Currently all procedures performed at CSC are Cosmetic/Plastic Surgery procedures. The Clarkview Surgery Center operates at the same location as Belcara Health. Belcara Health is a Multi-Specialty Medical Center consisting of Plastic Surgery, Dermatology, Ophthalmology and Wellness services. Four of the surgeons at Belcara Health are credentialed at CSC.

4. Submit project drawings that include the existing facility floorplans and proposed future facility after completion of the requested project. Please see the CON application, question 13 for specifics required to be submitted.

We are happy to do a call to review the entire floor plan.

5. Please provide a narrative describing the renovation and construction involved in this project.

CSS hopes to begin construction this summer when volume is a bit lower due to vacation schedules. The proposed area to be constructed is an unused waiting area at the far end of the suite. This section will be closed off to the rest of the surgical suite so as not to disrupt current operations. Construction to close the newly renovated area will take place on the weekend. Once the area is sectioned off, all access will be from the outside of the building. Current operation will not be affected. Access to the current suite will be from another door at the opposite end of the surgical area. CSS plans to add a new HVAC unit to the roof for the newly renovated area. This will prevent any disruption to current Services. We have already verified that the current generator has the capacity to add new room so no additional work will need to be done outside of the building.

We have hired Obrecht Construction Companies to manage the construction. They built the current suite and are familiar with operations. O'Brecht will manage all of the subcontractors. It is presumed that we will use all of the original subcontractors for efficiency and accuracy. As previously mentioned, most of the capital equipment is already purchased and ready to be installed.

### **Project Budget**

6. Attachment S and Table D state that the total cost of the project as \$502,390, while Table E states that the total cost of the project is \$627,000.
  - i. Please explain the discrepancy.  
If there is no discrepancy, please provide corrected documents.  
No discrepancies, corrected table E.

- ii. Table E did not list any sources of funds. Provide an updated Table E, which includes "Sources of Funds."  
Updated. CSC will be paying Cash for the renovation.

### **Charity Care**

7. The application for eligibility determination for uncompensated services (Attachment F) may not include a requirement for proof of income. This requirement does not meet the standard and must be taken out of this application.

Attached F Edited to remove proof of income.

8. Table 4 (page 30) states that Medicare, Blue Cross, and commercial insurance make up one percent each of your patient mix. Given that third-party reimbursement is available, please provide responses for Standard .05(A)(3)(c) Charity Care Policy.

As previously reported CSC has a charity care policy and would accommodate a charity request. However, the credentialed surgeons at CSC are cosmetic/cash based therefore do not request charitable cases.

### **Quality of Care**

9. In response to Standard .05(A)(4) Quality of Care, the applicant states that CSC is "in the process of credentialing with Medicare." Please explain with more specificity at what stage CSC is in the process and when credentialing is expected to be completed and granted?

The application has been submitted to Medicare and approved (Attachment U). We are now awaiting final approval from the State Agency. We are in contact with Verlean Connor at the Maryland Department of Health Ambulatory Care Unit.

### **Transfer Agreement**

10. Certify that your transfer agreement complies with Health-General Article §19-308.2.  
This statement is certified.

### **Service Area**

11. Provide the zip codes and the counties, cities, and towns that document your existing service area, including the number of patients from each area.

Attachment N Edited to include requested information.

## Need Standard

12. Provide a narrative that demonstrates the need for the proposed additional OR, utilizing the OR capacity assumptions and other guidance included at Regulation .07 of the chapter.

CSC has the need for an additional OR due to the utilization of rooms. Both ORs are running at a combined utilization rate of 95% over the last 14 months. We are extending days (past the designated 3:30 stop time) to accommodate additional cases. We have also made requests to open a few Saturdays with our anesthesia providers.

13. Has the applicant reported the existing OR capacity for its most recent 12-month period to the Health Services Cost Review Commission? Within this response, please confirm that the existing ORs were being used at least at optimal capacity (80%) for the most recent 12-month period.

The OR capacity for the last 12 months has not been reported to the Health Services Cost Review Commission. Over the most recent 12-month period the ORs were running at a combined rate of 95%.

14. Provide a narrative discussing the historic and projected demand among the populations in the existing service area, for the types of surgery performed or proposed to be performed at your facility.

Over the most recent two-year period our case volume has increased 70%. In addition, as detailed out in Attachment O with supporting letters (Attachment P our credentialed surgeons are experiencing extended wait lists. With the addition of the 3<sup>rd</sup> Operating Room we can schedule an additional 46 cases per month. This would allow our credentialed surgeons to eliminate their wait lists. We would also be able to grant block time to other physicians who have recently inquired that as of now we are unable to.

15. Provide a version of Table 1 that includes an average turnover time.

See Below

16. Provide a narrative discussing the data displayed in Table 2. Include the sources of information, assumptions, the basis and an explanation of the projections.

Table 2 reflects the projected growth off of Attachment O. Each credentialed physician has provided a letter (Attachment P) stating how many more cases per month they would be able to perform at CSC if granted additional time. The projections also factor in a 10% growth each year based on our historical industry trends.

## **Construction Costs**

17. Provide a response to subsection (b) “Ambulatory Surgical Facilities.”

We were advised that this is not considered new construction. Could you please confirm that a response is needed?

## **Financial Feasibility**

18. Document that, as subsection (a), subdivision (iv) requires, “The facility will generate excess revenues over total expenses (including debt service expenses and plant and equipment depreciation), if utilization forecasts are achieved for the specific services affected by the project within five years of initiating operations.”

Please refer to table 3 for the revenue and expenses showing profit at the conclusion of year 1. The renovation will be paid for via cash therefore no new debt will be accumulated. There also is no equipment depreciation.

## **Impact**

19. Addendum B was not found in the application packet. Please provide it.  
Attachment B- Resubmitted.

20. Please identify the closest general hospital or outpatient surgical facility that provides the same or similar procedures as CSC. Provide a narrative that assesses the impact of the proposed project on the surgical case volume at that facility, including the proportion of case volume expected to shift from each existing facility to the proposed project. The only hospital within 30 miles of CSS that provided cosmetic rates for non-insurance patients was Northwest Hospital. The surgeons were credentialed at North-West Hospital for their cosmetic cases. Recently North- West implemented a substantial rate hike that prevents the surgeons from offering that facility as a financially feasible option to their patients. The supporting letters (Attachment P) are based on the cases that additional surgeons would bring to CSC.

## **Need COMAR 10.24.01.08G(3)(b).**

21. Please identify the local hospital referenced in the application that removed its cosmetic surgery programs. How many plastic surgeons are requesting time at your facility because of this program closure?

Northwest Hospital is the hospital referenced. Two of our currently credentialed physicians are requesting additional time (Rottman and Schuster) and we have 2 other physicians requesting time that we are unable to grant.

22. How many hours in the Total Utilization Table reflect the added hours from the displaced plastic surgeons from the hospital program closure?

0 hours.

23. Does the Total Utilization Table's Hours Filled column include turnover time? If not, please provide an updated table that includes turnover time.

(i) See Below

24. Provide an updated version "Table 1" that includes turnover time.

(i) See Below

#### **Availability of More Cost-Effective Alternatives**

25. The response states that no local hospitals provide the same plastic surgery procedures. Please identify other providers, either the closest general hospital or outpatient surgical facility that provides the same or similar procedures as CSC. Supply an analysis that examines and discusses the provision these services through alternative existing facilities.

The response states that the local hospitals do not offer these services as a cost-friendly option. Surgeon's may schedule plastic surgery procedures at any local hospital (Northwest, GBMC, St. Josephs) however, the rates are 3x more on average.

#### **Viability of the Proposal**

26. Detail the assumptions with respect to each revenue and expense line item made while completing Table 3 and 4.

\* Inpatient Services- We do not offer inpatient services.

\* Outpatient Services- Growth was calculated at 45% for 2022 due to the increased utilization of both rooms and the actual revenue from Quarter 1.

\* Expenses- All expenses were calculated off of the average percentage of revenue from 2020 and 2021. This percentage was then used to calculate future years.

27. Provide audited financial statements for the past two years.

Attachment U

#### **Impact on Existing Providers**

28. Determine the closest general hospital or outpatient surgical facility that provides the same or similar procedures that CSC provides. Consider that facility and provide an analysis for this section in accordance with the instructions.

As far as CSC knows, the closest like kind facility is Plastic Surgery Center of Baltimore. However, the facility is a private facility used only by the partner physicians and not available to outside physicians. The next closest is Maryland Plastic Surgery which is 27 miles away and will in no way be affected by our change.

### **Table 3**

29. The figures on line 2.a. "Salaries, Wages, and Professional Fees" are not consistent with the corresponding figures in Table L. Please correct the inconsistency.
- i. Table L is based on "Average Salary per FTE and the figures on Table 3 are actuals from the Profit and Loss Statement.
30. Please identify the contractual services CSC receives (line 2.b.).
- i. Biomedical Waste, Laundry, Equipment Maintenance
31. Line 3. should reflect gross income. Is the figure in the 2020 column, correct?
- i. Confirmed
32. Provide a narrative that discusses the methodology and assumptions used to calculate the projected figures included in Table 3.
- i. \* Outpatient Services- Growth was calculated at 45% for 2022 due to the increased utilization of both rooms and the actual revenue from Quarter
  - ii. \* Expenses- All expenses were calculated off of the average percentage of revenue from 2020 and 2021. This percentage was then used to calculate future years.

### **Table 4**

33. The figures on line 2.a. "Salaries, Wages, and Professional Fees (including fringe benefits)" are inconsistent with Table L. Please correct the discrepancy.
- (i) Table L is based on "Average Salary per FTE and the figures on Table 3 are actuals from the Profit and Loss Statement.

### **Miscellaneous**

34. Provide a narrative discussing how COVID-19 related closures and moratoriums on elective surgeries impacted CSC.

In 2020, CSC was closed for a total of 6 weeks (about 1 and a half months) due to COVID-19. Once the center re-opened it was business as usual regarding case volume. While the center did implement new safety measures, there were no changes to volume. CSC saw a growth of 45% in utilization , partly due to high demand for plastic surgery. According to ASPS “During the pandemic, 11% of women surveyed indicated they are more interested in cosmetic plastic surgery or non-surgical procedures now than before COVID-19, and the figure is even higher among women who have already had surgery or a procedure – 24%, respectively. Also, 35% of women who have previously had at least one cosmetic surgical procedure or minimally invasive procedure plan to spend significantly or somewhat more on treatments in 2021 than in 2020.”

Citation : American Society of Plastic Surgeons. (2021, April 27). *American Society of Plastic Surgeons unveils covid-19's impact and pent-up patient demand fueling the industry's current Post-Pandemic Boom*. American Society of Plastic Surgeons. Retrieved June 2, 2022, from <https://www.plasticsurgery.org/news/press-releases/american-society-of-plastic-surgeons-unveils-covid19s-impact-and-pent-up-patient-demand-fueling-the-industrys-current-post-pandemic-boom#:~:text=The%20Society's%20board%2Dcertified%20plastic,of%20procedures%20performed%20last%20year.>

**Table 1 with Turn Over Time**





**TABLE E. PROJECT BUDGET**

<b>INSTRUCTION: Estimates for Capital Costs (1.a-g), Financing Costs and Other Cash Requirements (2.a-g), and Working Capital Startup Costs (3) must reflect current costs as of the date of application and include all costs for construction and renovation. Explain the basis for construction cost estimates, renovation cost estimates, contingencies, interest during construction period, and inflation in an attachment to the application. See additional instruction in the column to the right of the table.</b>			
<b>NOTE: Inflation should only be included in the Inflation allowance line A.1.e. The value of donated land for the project should be included on Line A.1.a as a use of funds and on line B.8 as a source of funds</b>			
	<b>Hospital Building</b>	<b>Other Structure</b>	<b>Total</b>
<b>A. USE OF FUNDS</b>			
<b>1. CAPITAL COSTS</b>			
<b>a. New Construction</b>			
(1) Building			\$0
(2) Fixed Equipment			\$0
(3) Site and Infrastructure			\$0
(4) Architect/Engineering Fees			\$0
(5) Permits (Building, Utilities, Etc.)			\$0
<b>SUBTOTAL</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>b. Renovations</b>			
(1) Building		\$450,000	\$450,000
(2) Fixed Equipment (not included in construction)			\$0
(3) Architect/Engineering Fees		\$25,000	\$25,000
(4) Permits (Building, Utilities, Etc.)		\$2,000	\$2,000
<b>SUBTOTAL</b>	<b>\$0</b>	<b>\$477,000</b>	<b>\$477,000</b>
<b>c. Other Capital Costs</b>			
(1) Movable Equipment		\$10,390	\$10,390
(2) Contingency Allowance		\$15,000	\$15,000
(3) Gross interest during construction period			\$0
(4) Other (Specify/add rows if needed)			\$0
<b>SUBTOTAL</b>	<b>\$0</b>	<b>\$25,390</b>	<b>\$25,390</b>
<b>TOTAL CURRENT CAPITAL COSTS</b>	<b>\$0</b>	<b>\$502,390</b>	<b>\$502,390</b>
<b>d. Land Purchase</b>			
<b>e. Inflation Allowance</b>			
<b>TOTAL CAPITAL COSTS</b>	<b>\$0</b>	<b>\$502,390</b>	<b>\$502,390</b>
<b>2. Financing Cost and Other Cash Requirements</b>			
a. Loan Placement Fees			\$0
b. Bond Discount			\$0
c. Legal Fees (CON)			\$0
d. Legal Fees (Other)			\$0
e. Non-Legal Consultant Fees (CON application related - specify what it is and why it is needed for the CON)			\$0
f. Non-Legal Consultant Fees (Other)			\$0
g. Liquidation of Existing Debt			\$0
h. Debt Service Reserve Fund			\$0
i. Other (Specify/add rows if needed)			\$0
<b>SUBTOTAL</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>3. Working Capital Startup Costs</b>			
<b>TOTAL USES OF FUNDS</b>	<b>\$0</b>	<b>\$502,390</b>	<b>\$502,390</b>
<b>B. Sources of Funds</b>			
1. Cash		\$502,390	\$502,390
2. Philanthropy (to date and expected)			\$0
3. Authorized Bonds			\$0
4. Interest Income from bond proceeds listed in #3			\$0
5. Mortgage			\$0
6. Working Capital Loans			\$0
<b>7. Grants or Appropriations</b>			
a. Federal			\$0
b. State			\$0
c. Local			\$0
8. Other (Specify/add rows if needed)			\$0
<b>TOTAL SOURCES OF FUNDS</b>			<b>\$0</b>
	<b>Hospital Building</b>	<b>Other Structure</b>	<b>Total</b>
<b>Annual Lease Costs (if applicable)</b>			
1. Land			\$0
2. Building		\$62,000	\$62,000
3. Major Movable Equipment			\$0
4. Minor Movable Equipment			\$0
5. Other (Specify/add rows if needed)			\$0

**CLARKVIEW SURGERY CENTER**

**APPLICATION FOR ELIGIBILITY DETERMINATION  
FOR UNCOMPENSATED SERVICES**

I hereby request that the CLARKVIEW SURGERY CENTER make a written determination of my eligibility for uncompensated services. I understand that the information submitted concerning my annual income and family size is subject to verification by the CLARKVIEW SURGERY CENTER. I also understand that if the information that I submit is determined to be false, such a determination will result in denial of providing services as uncompensated services, and that I will be liable for charges for services provided. I affirm that the following information is true and correct to the best of my knowledge.

\_\_\_\_\_

Date of Request      Signature & Relationship of Person Making Request

1. Patient's Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_

2. Occupation \_\_\_\_\_ Employer \_\_\_\_\_

3. Income: List income for family from:

	<u>Total for Last 3 Months</u>	<u>Total for Last 12 Months</u>
Wages	_____	_____
Public Assistance	_____	_____
Social Security	_____	_____
Unemployment Compensation	_____	_____
Alimony	_____	_____
Child Support	_____	_____
Dividends, Interest, Rent	_____	_____
Other	_____	_____

4. Number of Persons in Family \_\_\_\_\_

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Accrual Basis

## Clarkview Surgery Center, LLC Profit & Loss Prev Year Comparison January through December 2021

	Jan - Dec 21	Jan - Dec 20	\$ Change
<b>Ordinary Income/Expense</b>			
Income		0.00	2,121,129.40
All Service Income	2,121,129.40	1,167,204.62	-1,167,204.62
Revenue - Surgery Center	0.00		
<b>Total Income</b>	2,121,129.40	1,167,204.62	953,924.78
Cost of Goods Sold		0.00	-26,748.90
Cost of Goods Sold	-26,748.90		
<b>Total COGS</b>	-26,748.90	0.00	-26,748.90
<b>Gross Profit</b>	2,147,878.30	1,167,204.62	980,673.68
<b>Expense</b>			
Advertising and Promotion	4,109.13	0.00	4,109.13
Automobile Expense	1,982.31	0.00	1,982.31
Bank Service Charges	10,805.94	0.00	10,805.94
Charitable Contributions	5,000.00	0.00	5,000.00
Continuing Education	13,990.78	0.00	13,990.78
Dues and Subscriptions	0.00	4,349.95	-4,349.95
Insurance Expense			
Health	0.00	12,117.43	-12,117.43
Malpractice	7,962.12	4,726.50	3,235.62
Umbrella	0.00	2,674.99	-2,674.99
Insurance Expense - Other	41,462.91	0.00	41,462.91
<b>Total Insurance Expense</b>	49,425.03	19,518.92	29,906.11
Interest Expense	74.93	0.00	74.93
Management Fee Expense	0.00	68,739.31	-68,739.31
Meals and Entertainment	3,417.12	2,378.29	1,038.83
Medical Records and Supplies			
Garments	0.00	1,998.44	-1,998.44
Gases	0.00	59,824.59	-59,824.59
Implants	0.00	300,075.94	-300,075.94
Other	0.00	60,120.22	-60,120.22
Medical Records and Supplies - Other	830,750.04	0.00	830,750.04
<b>Total Medical Records and Supplies</b>	830,750.04	422,019.19	408,730.85
Merchant Fees	0.00	36,751.47	-36,751.47
Miscellaneous Expense	426.08	0.00	426.08
Office Expense	10,192.51	27,192.42	-16,999.91
Office Supplies	19,588.56	0.00	19,588.56
Outsourced Services			
IT Support	0.00	515.80	-515.80
Outsourced Services - Other	50,783.57	13,044.69	37,738.88
<b>Total Outsourced Services</b>	50,783.57	13,560.49	37,223.08
Payroll Expenses	210.03	0.00	210.03
Pension Expense	0.00	3,397.75	-3,397.75
Postage & Delivery	0.00	852.68	-852.68
Professional Fees			
Accounting	0.00	7,320.00	-7,320.00
Legal	0.00	8,091.56	-8,091.56
Professional Fees - Other	34,022.20	32,644.47	1,377.73
<b>Total Professional Fees</b>	34,022.20	48,056.03	-14,033.83
Rent Expense	61,800.05	48,834.37	12,965.68
Repairs and Maintenance	78,225.13	27,875.19	50,349.94
Salaries & Wages			
Administrative	665.00	29,927.47	-29,262.47
Staff	0.00	340,368.61	-340,368.61
Salaries & Wages - Other	562,915.33	0.00	562,915.33
<b>Total Salaries &amp; Wages</b>	563,580.33	370,296.08	193,284.25

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 Accrual Basis

**Clarkview Surgery Center, LLC**  
**Profit & Loss Prev Year Comparison**  
 January through December 2021

	Jan - Dec 21	Jan - Dec 20	\$ Change
<b>Taxes</b>			
Payroll	43,582.70	26,012.50	17,570.20
Personal Property	297.22	600.00	-302.78
State Income	15,823.02	0.00	15,823.02
Taxes - Other	41,739.71	0.00	41,739.71
<b>Total Taxes</b>	101,442.65	26,612.50	74,830.15
<b>Travel Expense</b>			
Uniforms	1,654.08	5,847.67	-4,193.59
Utilities	83.29	7,522.47	-7,439.18
<b>Total Expense</b>	11,781.22	31,369.87	-19,588.65
<b>Net Ordinary Income</b>	1,853,344.98	1,165,174.65	688,170.33
<b>Other Income/Expense</b>	294,533.32	2,029.97	292,503.35
Other Income			
COVID	0.00	988.70	-988.70
<b>Total Other Income</b>	0.00	988.70	-988.70
<b>Net Other Income</b>	0.00	988.70	-988.70
<b>Net Income</b>	294,533.32	3,018.67	291,514.65

01583	West Boylston, MA	Worcester	1
02915	Riverside, RI	Providence	1
07644	Lodi, NJ	Bergen	1
08031	Bellmawr, NJ	Camden	1
08055	Medford, NJ	Burlington	1
08108	Collingswood, NJ	Camden	1
08640	Fort Dix, NJ	Burlington	1
08641	Trenton, NJ	Burlington	1
08724	Brick, NJ	Ocean	1
08901	New Brunswick, NJ	Middlesex	1
11102	Astoria, NY	Queens	1
11226	Brooklyn, NY	Kins	1
12206	Albany, NY	Albany	1
13116	Minoa, NY	Onondaga	1
13501	Utica, NY	Oneida	1
13760	Endicott, NY	Broome	1
14850	Ithaca, NY	Tompkins	1
15104	Braddock, PA	Allegheny	1
16920	Elkland, PA	Tioga	1
17015	Carlisle, PA	Cumberland	1
17022	Elizabethtown, PA	Lancaster	1
17025	Enola, PA	Cumberland	1
17050	Mechanicsburg, PA	Cumberland	1
17055	Mechanicsburg, PA	Cumberland	1
17112	Harrisburg, PA	Dauphin	1
17202	Chambersburg, PA	Franklin	1
17225	Greencastle, PA	Franklin	1
17236	Mercersburg, PA	Franklin	1
17301	Abbottstown, PA	Adams	1
17302	Airville, PA	York	1
17314	Delta, PA	York	1
17320	Fairfield, PA	Adams	1
17321	Fawn Grove, PA	York	1
17322	Felton, PA	York	1
17325	Gettysburg, PA	Adams	1
17327	Glen Rock, PA	York	1
17329	Glenville, PA	York	1
17331	Hanover, PA	York	18
17339	Lewisberry, PA	York	2
17340	Littlestown, PA	Adams	4
17349	New Freedom, PA	York	4
17350	New Oxford, PA	Adams	2
17352	New Park, PA	York	1
17356	Red Lion, PA	York	1
17360	Seven Valleys, PA	York	4
17361	Shrewsbury, PA	York	2
17362	Spring Grove, PA	York	2
17363	Stewartstown, PA	York	4
17364	Thomasville, PA	York	1
17401	York, PA	York	1
17402	York, PA	York	9
17403	York, PA	York	5
17404	York, PA	York	3
17406	York, PA	York	4
17408	York, PA	York, PA	3
17512	Columbia, PA	Lancaster	1
17516	Conestoga, PA	Lancaster	1
17551	Millersville, PA	Lancaster	1

17552	Mount Joy, PA	Lancaster	1
17560	New Providence, PA	Lancaster	2
17601	Lancaster, PA	Lancaster	1
17602	Lancaster, PA	Lancaster	1
17603	Lancaster, PA	Lancaster	1
17631	Shresbury, PA	Lancaster	1
17751	Mill Hall, PA	Clinton	1
19134	Philadelphia, PA	Philadelphia	1
19151	Philadelphia, PA	Philadelphia	2
19152	Philadelphia, PA	Philadelphia	1
19320	Coatesville, PA	Chester	1
19382	West Chester, PA	Chester	1
19390	West Grove, PA	Chester	1
19468	Royersford, PA	Montgomery	1
19709	Middletown, DE	New Castle	3
19734	Townsend, DE	New Castle	1
19901	Dover, DE	Kent	1
19934	Camden Wyoming, DE	Kent	1
19970	Ocean View, DE	Sussex	2
19975	Selbyville, DE	Sussex	1
20002	Washington, DC	Washington, DC	2
20005	Washington, DC	Washington, DC	2
20007	Washington, DC	Washington, DC	1
20008	Washington, DC	Washington, DC	1
20011	Washington, DC	Washington, DC	3
20111	Manassas Park, VA	Manassas	1
20117	Middleburg, VA	Dover	1
20120	Centreville, VA	Fairfax	1
20152	Chantilly, VA	Loudoun	1
20155	Gainesville, VA	Prince William	1
20164	Sterling, VA	Loudoun	1
20165	Sterling, VA	Loudoun	1
20170	Herndon, VA	Fairfax	1
20186	Warrenton, VA	Fauquier	1
20602	Waldorf, MD	Charles County	1
20609	Avenue, MD	St. Mary's County	1
20613	Brandywine, MD	Prince George's County	1
20619	California, MD	St. Mary's County	3
20634	Great Mills, MD	St. Mary's County	1
20636	Hollywood, MD	St. Mary's County	1
20637	Hughesville, MD	Charles County	1
20639	Huntingtown, MD	Charles County	2
20646	La Plata, MD	Charles County	2
20650	Leonardtwn, MD	St. Mary's County	2
20653	Lexington Park, MD	St. Mary's County	2
20678	Prince Frederick, MD	Calvert County	1
20695	White Plains, MD	Charles County	1
20706	Lanham, MD	Prince George's County	2
20707	Laurel, MD	Prince George's County	1
20708	Laurel, MD	Prince George's County	2
20715	Bowie, MD	Prince George's County	1
20716	Bowie, MD	Prince George's County	4
20723	Laurel, MD	Howard County	3
20724	Laurel, MD	Howard County	1
20735	Clinton, MD	Prince George's County	1
20736	Owings, MD	Calvert County	1
20737	Riverdale, MD	Prince George's County	1
20740	College Park, MD	Prince George's County	2

20744	Fort Washington, MD	Prince George's County	3
20745	Oxon Hill, MD	Prince George's County	1
20747	District Heights, MD	Prince George's County	2
20755	Fort George G Meade, MD	Anne Arundel County	2
20759	Fulton, MD	Howard County	3
20772	Upper Marlboro, MD	Prince George's County	2
20774	Upper Marlboro, Md	Prince George's County	3
20776	Harwood, MD	Anne Arundel County	2
20777	Highland, MD	Howard County	1
20783	Hyattsville, MD	Prince George's County	1
20785	Hyattsville, MD	Prince George's County	1
20794	Jessup, MD	Howard County	3
20815	Chevy Chase, MD	Montgomery County	2
20817	Bethesda, MD	Montgomery County	1
20833	Brookeville, MD	Montgomery County	1
20839	Beallsville, MD	Montgomery County	1
20850	Rockville, MD	Montgomery County	3
20851	Rockville, MD	Montgomery County	1
20852	Rockville, MD	Montgomery County	1
20861	Ashton, MD	Montgomery County	1
20871	Clarksburg, MD	Montgomery County	3
20877	Gaithersburg, MD	Montgomery County	1
20878	Gaithersburg, MD	Montgomery County	2
20879	Gaithersburg, MD	Montgomery County	1
20886	Montgomery Village, MD	Montgomery County	3
20895	Kensington, MD	Montgomery County	1
20902	Silver Spring, MD	Montgomery County	1
20904	Silver Spring, MD	Montgomery County	1
20906	Silver Spring, MD	Montgomery County	2
20910	Silver Spring, MD	Montgomery County	3
20912	Takoma Park, MD	Montgomery County	2
21001	Aberdeen, MD	Harford County	6
21005	Aberdeen Proving Ground, MD	Harford County	1
21009	Abingdon, MD	Harford County	16
21012	Arnold, MD	Anne Arundel County	1
21013	Baldwin, MD	Baltimore County	6
21014	Bel Air, MD	Harford County	1
21014-2750	Bel Air, MD	Harford County	31
21015	Bel Air, MD	Harford County	3
21017	Belcamp, MD	Harford County	1
21022	Brooklandville, MD	Baltimore County	6
21028	Churchville, MD	Harford County	4
21029	Clarksville, MD	Harford County	14
21030	Cockeysville, MD	Baltimore County	5
21032	Crownsville, MD	Anne Arundel County	1
21034	Darlington, MD	Harford County	1
21035	Davidsonville, MD	Anne Arundel County	4
21037	Edgewater, MD	Anne Arundel County	3
21040	Edgewood, MD	Harford County	4
210402172	Edgewood, MD	Harford County	1
21041	Ellicott City, MD	Howard County	1
21042	Ellicott City, MD	Howard County	9
21043	Ellicott City, MD	Howard County	5
21044	Columbia, MD	Howard County	10
21044-4196	Columbia, MD	Howard County	1
21045	Columbia, MD	Howard County	6
21046	Columbia, MD	Howard County	2
21047	Fallston, MD	Harford County	13



21048	Finksburg, MD	Carroll County	11
21050	Forest Hill, MD	Harford County	10
21052	Fort Howard, MD	Baltimore County	1
21053	Freeland, MD	Baltimore County	1
21054	Gambrills, MD	Anne Arundel County	5
21057	Glen Arm, MD	Baltimore County	8
21060	Glen Burnie, MD	Anne Arundel County	7
21061	Glen Burnie, MD	Anne Arundel County	13
21074	Hampstead, MD	Carroll County	10
21075	Elkridge, MD	Howard County	11
21076	Hanover, MD	Harford County	8
21078	Havre De Grace, MD	Baltimore County	9
21082	Hydes, MD	Baltimore County	1
21084	Jarrettsville, MD	Harford County	4
21085	Joppa, MD	Harford County	5
21087	Kingsville, MD	Baltimore County	2
21090	Linthicum Heights, MD	Anne Arundel County	6
21093	Lutherville Timonium, MD	Baltimore County	28
21102	Manchester, MD	Ca	3
21104	Marriottsville, MD	Carroll County	6
21108	Millersville, MD	Anne Arundel County	4
21111	Monkton, MD	Baltimore County	1
21113	Odenton, MD	Anne Arundel County	12
21114	Crofton, MD	Anne Arundel County	3
21117	Owings Mills, MD	Baltimore County	37
21120	Parkton, MD	Baltimore County	9
21122	Pasadena, MD	Anne Arundel County	22
21128	Perry Hall, MD	Baltimore County	13
21131	Phoenix, MD	Baltimore County	9
21132	Pylesville, MD	Harford County	4
21133	Randallstown, MD	Baltimore County	12
21136	Reisterstown, MD	Baltimore County	29
21144	Severn, MD	Anne Arundel County	7
21146	Severna Park, MD	Anne Arundel County	9
21152	Sparks Glencoe, MD	Baltimore County	3
21154	Street, MD	Harford County	3
21155	Upperco, MD	Carroll County	3
21156	Upper Falls, MD	Baltimore County	1
21157	Westminster, MD	Carroll County	19
21158	Westminster, MD	Carroll County	7
21160	Whiteford, MD	Harford County	2
21161	White Hall, MD	Harford County	5
21162	White Marsh, MD	Baltimore County	8
21163	Woodstock, MD	Howard County	3
21201	Baltimore, MD	Baltimore City	3
21202	Baltimore, MD	Baltimore City	6
21204	Towson, MD	Baltimore County	13
21205	Baltimore, MD	Baltimore City	1
21206	Baltimore, MD	Baltimore City	10
21207	Gwynn Oak, MD	Baltimore County	12
21208	Pikesville, MD	Baltimore County	23
21209	Baltimore, MD	Baltimore County	20
21210	Baltimore, MD	Baltimore City	4
21211	Baltimore, MD	Baltimore City	6
21212	Baltimore, MD	Baltimore City	18
21213	Baltimore, MD	Baltimore City	2
21214	Baltimore, Md	Baltimore City	5
21215	Baltimore, MD	Baltimore City	10

21216	Baltimore, MD	Baltimore City	3
21218	Baltimore, MD	Baltimore City	8
21219	Sparrows Point, MD	Baltimore County	12
21220	Middle River, MD	Baltimore County	22
21221	Essex, MD	Baltimore County	16
21222	Dundalk, MD	Baltimore County	28
21223	Baltimore, MD	Baltimore City	2
21224	Baltimore, MD	Baltimore City	32
21225	Brooklyn, MD	Baltimore City	5
21226	Curtis Bay, MD	Anne Arundel County	1
21227	Halethorpe, MD	Baltimore County	3
21228	Catonsville, MD	Baltimore County	6
21229	Baltimore, MD	Baltimore City	3
21230	Baltimore, MD	Baltimore City	18
21230-4488	Baltimore, MD	Baltimore City	1
21231	Baltimore, MD	Baltimore City	7
21233	Baltimore, MD	Baltimore City	1
21234	Parkville, MD	Baltimore County	18
21236	Nottingham, MD	Baltimore County	22
21237	Rosedale, MD	Baltimore County	16
21239	Baltimore, MD	Baltimore City	6
21240	Towson, MD	Baltimore County	1
21244	Windsor Mill, MD	Baltimore County	13
21286	Towson, MD	Baltimore County	8
21401	Annapolis, MD	Anne Arundel County	7
21403	Annapolis, MD	Anne Arundel County	2
21617	Centreville, MD	Queen Anne's County	3
21619	Chester, MD	Queen Anne's County	1
21620	Chestertown, MD	Kent County	1
21629	Denton, MD	Caroline County	1
21638	Grasonville, MD	Caroline County	1
21643	Hurlock, MD	Dorchester County	1
21651	Millington, MD	Kent County	1
21663	Saint Michaels, MD	Talbot County	1
21666	Stevensville, MD	Queen Anne's County	2
21701	Frederick, MD	Frederick County	6
21702	Frederick, MD	Frederick County	5
21703	Frederick, MD	Frederick County	1
21710	Adamstown, MD	Frederick County	2
21723	Cooksville, MD	Washington County	1
21727	Emmitsburg, MD	Frederick County	1
21737	Gleneig, MD	Howard County	5
21738	Glenwood, MD	Howard County	4
21740	Hagerstown, MD	Washington County	1
21750	Hancock, MD	Washington County	1
21754	Ijamsville, MD	Frederick County	1
21756	Keedysville, MD	Washington County	1
21769	Middletown, MD	Frederick County	1
21770	Monrovia, MD	Frederick County	1
21774	New Market, MD	Frederick County	5
21776	New Windsor, MD	Carroll County	1
21784	Sykesville, MD	Carroll County	20
21787	Taneytown, MD	Carroll County	2
21791	Union Bridge, MD	Carroll County	1
21793	Walkersville, MD	Frederick County	2
21794	West Friendship, MD	Howard County	5
21795	Williamsport, MD	Washington County	1
21797	Woodbine, MD	Howard County	4

21801	Salisbury, MD	Wicomico County	2
21804	Salisbury, MD	Wicomico County	1
21842	Ocean City, MD	Wicomico County	1
21901	North East, MD	Cecil County	3
21903	Perryville, MD	Cecil County	2
21904	Port Deposit, MD	Cecil County	2
21911	Rising Sun, MD	Cecil County	2
21917	Colora, MD	Cecil County	1
21918	Conowingo, MD	Cecil County	1
21921	Elkton, MD	Cecil County	1
22025	Dumfries, VA	Prince William County	1
22066	Great Falls, VA	Fairfax County	1
22152	Springfield, VA	Fairfax County	1
22181	Vienna, VA	Fairfax County	1
22192	Woodbridge, VA	Prince William County	2
22201	Arlington, VA	Arlington County	1
22202	Arlington, VA	Arlington County	2
22303	Alexandria, VA	Fairfax County	1
22304	Alexandria, VA	Alexandria city	1
22312	Alexandria, VA	Fairfax County	1
22314	Alexandria, VA	Alexandria city	1
22485	King George, VA	King George County	1
22554	Stafford, VA	Stafford County	1
23322	Chesapeake, VA	Chesapeake city	1
23669	Hampton, VA	Hampton city	1
24450	Lexington, VA	Rockbridge County	1
25403	Martinsburg, WV	Berkeley County	1
25405	Martinsburg, WV	Berkeley County	3
25420	Gerrardstown, WV	Berkeley County	1
25430	Kearneysville, WV	Jefferson County	1
26719	Fort Ashby, WV	Mineral County	1
26753	Ridgeley, WV	Mineral County	3
27609	Raleigh, NC	Wake County	1
27612	Raleigh, NC	Wake County	1
28202	Charlotte, NC	Mecklenburg County	2
28445	Holly Ridge, NC	Onslow County	1
29579	Myrtle Beach, SC	Horry County	1
30309	Atlanta, GA	Fulton County	1
32086	St. Augustine, FL	St. Johns County	1
33140	Miami Beach, FL	Miami-Dade County	1
34114	Naples, FL	Collier County	1
37075	Hendersonville, TN	Sumner County	1
44077	Painesville, OH	Lake County	1
48064	Casco, MI	St. Clair County	1
54636	Holmen, WI	La Crosse County	1

Current Block Calendar

	Monday	Tuesday	Wednesday	Thursday	Friday
Week 1					
OR 1	Vela	Cohen	Vela	Cohen	Cohen
OR 2	Rottman	Vela	Rottman	Rottman	Sultan
Week 2					
OR 1	Robertson	Cohen	Vela	Cohen	Sultan
OR 2	Rottman	Sultan	Rottman	Rottman	Sultan
Week 3					
OR 1	Vela	Cohen	Vela	Cohen	Cohen
OR 2	Rottman	Sultan	Rottman	Rottman	Sultan
Week 4					
OR 1	Rottman	Cohen	Vela	Cohen	Sultan
OR 2	Rottman	Sultan	Rottman	Rottman	Sultan

Proposed Block Schedule

	Monday	Tuesday	Wednesday	Thursday	Friday
Week 1					
OR 1	Vela	Cohen	Vela	Cohen	Cohen
OR 2	Rottman	Vela	Rottman	Rottman	Sultan
OR 3	McMillan	Rottman	Robertson	Rottman	Rottman
Week 2					
OR 1	Robertson	Cohen	Vela	Cohen	Sultan
OR 2	Rottman	Sultan	Rottman	Rottman	Sultan
OR 3	Cohen	McMillan	Sultan	Rottman	Rottman
Week 3					
OR 1	Vela	Cohen	Vela	Cohen	Cohen
OR 2	Rottman	Sultan	Rottman	Rottman	Sultan
OR 3	McMillan	Rottman	Robertson	Rottman	Rottman
Week 4					
OR 1	Robertson	Cohen	Vela	Cohen	Sultan
OR 2	Rottman	Sultan	Rottman	Rottman	Sultan
OR 3	Cohen	McMillan	Sultan	Vela	Rottman

Physician	Cohen	Vela	Robertson	Sultan	McMillan
Total Block Days	10	7	4	2	0
Wait List in Months	5	3	2	2	0
****With 3rd OR****					
Additional Days per Month Requested	2	2	2	2	4
Average Case Count Per Day	3	3	1	2	2
Additional Cases Per Month	6	6	2	4	8
Total Additional Cases Per Year	72	72	24	48	96
Average Case Duration (in Minutes)	137	136	120	150	154
Minutes in 3rd OR	9864	9792	2880	7200	14798
Hours in 3rd OR	164.4	163.2	48	120	247

TOTAL 3RD HOUR HOURS (YEAR 1)

1433

552

Physician	New Surgical Cases to CSC	Total Increase in Cases to CSC
Dr. Michael Cohen	18	18
Dr. Gary Vela	96	96
Dr. Bradley Robertson	48	48
Dr. Nadia Mostovych	24	24
Dr. Steven Rottman	144	144
Dr. Ronald Schuster	96	96
Dr. Babar Sultan	48	48
Dr. McMillan	96	96
<b>NEW CASE TOTAL</b>	<b>570</b>	<b>570</b>

Attachment B

**Brief Description of the Project**

The Clarkview Surgery Center (formerly the Cosmetic Surgery Center of Maryland) is requesting an additional Operating Room to our existing facility. Currently the Clarkview Surgery Center (“CSC”) has a Certificate Of Need (Docket No 13-03-2344) for 2 Operating Rooms and 2 non-sterile procedure rooms.

**Rationale for the project**

At this time, we are at capacity for the number of cases/ hours that our center can handle. Recently, a local hospital removed their established Cosmetic Surgery Program which has resulted in multiple surgeons requesting time at our facility and we have a need for an additional room to be able to accommodate. Additionally, we have a new surgeon joining our practice in September 2022 who will also need surgical time.

2020	2021	2022 Projection
690 Cases	938 Cases	1100 Cases

**Cost of Implementing the project**

CSC proposes to add a third operating room (“OR”) through renovation of existing space. Thus, this project will be defined as an expansion of a current ambulatory surgical facility. The space used by CSC is leased from Continental Realty. The third operating room will be in the same operating room suite.

The project consists of renovation of 500 square feet of existing building space that currently serves as a waiting room. The renovation will not impact the current operating or procedure rooms.

The total estimated cost of the project is \$500,000. Building renovations, including architect/engineering fees/permits, etc., constitutes the bulk of the expenditures at \$450,000, the remaining \$50,000 is for major movable equipment. The source of the funds for the renovation is cash provided by the CSC. The project is anticipated to be completed within 6 months of the start of renovation due to difficulty in securing the needed HVAC components.

**Comprehensive Project Description**

Construction, renovation, and demolition plans

- Please see Attachment B1 and B2 for full construction, renovation, and demolition plans.

Changes in square footage of departments and units

- The square footage of the facility remains the same. The 500 square feet that is to be used for the OR is being repurposed from the existing waiting room.

Physical plant or location changes- NA

**Changes to affected services following completion of the project**

CSC will remain a multispecialty ambulatory surgical center focusing primarily on Cosmetic Plastic Surgery outpatient procedures. The addition of the 3<sup>rd</sup> operating room will allow for a greater volume of cases to be completed as well as eliminating the surgical waiting list. Currently our credentialed surgeons are posting cases through the month of September due to the lack of operating room availability at the surgical center. This addition will also provide the opportunity for more surgeons to be granted block time at our facility, which currently we have had to deny.

Outline of Project Schedule

**For new construction or renovation projects.**

Project Implementation Target Dates

- A. Obligation of Capital Expenditure   1   months from approval date.
- B. Beginning Construction       6       months from capital obligation.
- C. Pre-Licensure/First Use       7       months from capital obligation.
- D. Full Utilization       36       months from first use.



**MEDICARE**



April 11, 2022

CLARKVIEW SURGERY CENTER LLC  
ATTN ANGEL HYATT  
4126 SELLMAN DR  
HAMPSTEAD MD 210742153

Reference # 3220550306

Dear CLARKVIEW SURGERY CENTER LLC,

Novitas Solutions, Inc. assessed your initial Medicare enrollment application and forwarded it to the Centers for Medicare & Medicaid Services (CMS) PHILADELPHIA Regional Office for a final review.

A survey may be conducted by a State Survey Agency or deemed accrediting organization approved by CMS to ensure compliance.

We will contact you when we have a decision.

**Medicare Enrollment Information**

Legal Business Name (LBN): CLARKVIEW SURGERY CENTER LLC  
Doing Business As (DBA): N/A  
Provider/Supplier Type: AMBULATORY SURGICAL CENTER  
National Provider Identifier (NPI): 1932732773

For questions concerning the application, contact MARYLAND State Agency at (410) 402-8229.

Sincerely,

Paige Stone



Provider Enrollment Representative  
Novitas Solutions, Inc.

CC: PHILADELPHIA RO and MARYLAND State Agency

**TABLE L. 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 uninfiliated projections in Tables F and G. See additional instruction in the column to the right of the table.

Job Category	CURRENT ENTIRE FACILITY			PROJECTED CHANGES AS A RESULT OF THE PROPOSED PROJECT THROUGH THE LAST YEAR OF PROJECTION (CURRENT DOLLARS)			OTHER EXPECTED CHANGES IN OPERATIONS THROUGH THE LAST YEAR OF PROJECTION (CURRENT DOLLARS)			PROJECTED ENTIRE FACILITY THROUGH THE LAST YEAR OF PROJECTION (CURRENT DOLLARS)	
	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
<b>1. Regular Employees</b>											
Administration (List general categories, add rows if needed)											
Administration/Management	0.3	\$70,000	\$21,000	0.0	\$0	\$0	0.0	\$0	\$0	0.3	\$21,000
			\$0			\$0			\$0	0.0	\$0
			\$0			\$0			\$0	0.0	\$0
			\$0			\$0			\$0	0.0	\$0
<b>Total Administration</b>			\$21,000			\$0			\$0	0.3	\$21,000
Direct Care Staff (List general categories, add rows if needed)											
Nursing	5.0	\$76,790	\$383,950	2.0	\$76,790	\$153,580	0.0	0.0	\$0	7.0	\$537,530
Surgical Technicians	3.0	\$55,400	\$166,200	1.0	\$55,400	\$55,400	0.0	0.0	\$0	4.0	\$221,600
Physician Assistants	0.0	\$0	\$0	1.0	\$120,000	\$120,000	0.0	0.0	\$0	1.0	\$120,000
			\$0			\$0			\$0	0.0	\$0
<b>Total Direct Care</b>			\$550,150			\$328,980			\$0	0.0	\$879,130
Support Staff (List general categories, add rows if needed)											
Concierge/Support Staff	0.0	\$0	\$0	1.0	\$36,400	\$36,400	0.0	\$0	\$0	1.0	\$36,400
			\$0			\$0			\$0	0.0	\$0
			\$0			\$0			\$0	0.0	\$0
			\$0			\$0			\$0	0.0	\$0
<b>Total Support</b>			\$0			\$36,400			\$0	0.0	\$36,400
<b>REGULAR EMPLOYEES TOTAL</b>			\$571,150			\$365,380			\$0	0.0	\$936,530
<b>2. Contractual Employees</b>											

**TABLE L. WORKFORCE INFORMATION**

<b>Administration (List general categories, add rows if needed)</b>										
NA	0.0	\$0	\$0	0.0	\$0	\$0	0.0	\$0	\$0	\$0
										\$0
										\$0
										\$0
										\$0
<b>Total Administration</b>										\$0
<b>Direct Care Staff (List general categories, add rows if needed)</b>										
NA	0.0	\$0	\$0	0.0	\$0	\$0	0.0	\$0	\$0	\$0
										\$0
										\$0
										\$0
										\$0
<b>Total Direct Care Staff</b>										\$0
<b>Support Staff (List general categories, add rows if needed)</b>										
NA	0.0	\$0	\$0	0.0	\$0	\$0	0.0	\$0	\$0	\$0
										\$0
										\$0
										\$0
										\$0
<b>Total Support Staff</b>										\$0
<b>CONTRACTUAL EMPLOYEES TOTAL</b>										\$0
<b>Benefits (State method of calculating benefits below) :</b>										
										\$0
<b>TOTAL COST</b>	<b>0.0</b>	<b>\$571,150</b>	<b>\$365,380</b>	<b>0.0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$936,530</b>