

Gallagher_{LLP}

December 19, 2025

VIA EMAIL & FEDERAL EXPRESS MAIL

Ms. Deanna Dunn
Health Facilities Coordination Officer
Maryland Health Care Commission
4160 Patterson Avenue
Baltimore, Maryland 21215-2299

**Re: Ruxton SurgiCenter, LLC Responses to Completeness Questions
dated 12-05-2025 to Establish an Ambulatory Surgical Facility
Docket No.: 25-03-2474**

Dear Ms. Dunn:

On behalf Ruxton SurgiCenter, LLC (“RSC”), we are submitting an electronic version, and four (4) hard copies of its Responses to Completeness Questions dated December 5, 2025 and related exhibits. We will be providing a WORD version of the responses and an updated EXCEL file of the MHCC tables under separate email.

We hereby certify that a copy of this submission has also been forwarded to the appropriate local health planning agency as noted below.

If you have questions about the information provided above, please contact us at your convenience.

Sincerely,



Mallory Regenbogen



Alison Lutich

cc: via email

Douglas Jacobs, MD, Executive Director, MHCC

Wynee Hawk, Director, Center for Health Care Facilities Planning & Development, MHCC

#968854

Gallagher LLP

Ms. Deanna Dunn
December 19, 2025
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Amani Miles, Program Manager, Certificate of Need, MHCC
Alexa Bertinelli, Esq., Assistant Attorney General, MHCC
Caitlin E. Tepe, Assistant Attorney General, MHCC
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Robin Luxon, Interim President, UM SJMC
Laura Doody, Senior Vice President, Hospital Finance, UM SJMC
Rebecca Daley, Chief Transactions and Regulatory Counsel, UMMS
Christopher Tully, Senior Associate Counsel, Corporate Governance
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Jeanette Cross, Managing Director, Berkeley Research Group
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Steve Madsen, Covalus
Rob Sanz, Wilmot Sanz

Ruxton SurgiCenter, LLC
Certificate of Need to Establish a New Ambulatory Surgical Facility
Matter No.25-03-2474

Responses to Completeness Questions Dated December 5, 2025

Patient Safety

1. **As it relates to Ruxton's compliance with American National Standards Institute (ANSI) standards: Ruxton's proposed design complies with the 2018 Facility Guidelines Institute (FGI) for Outpatient Facilities and applicable ANSI standards. The relevant State Health Plan (SHP) standard requires Ruxton to comply with the design requirements (and patient safety features) that are consistent with the *current* FGI Guidelines. The current FGI Guidelines are from 2022. Confirm that the applicant will modify its design, as necessary, to be consistent with the 2022 Guidelines.**

[Applicant Response](#)

Ruxton has contacted MHCC staff for additional guidance on the project's design and the FGI Guidelines in relation to the Design Requirements standard. Ruxton will provide a supplemental response to this question once MHCC's guidance is received.

2. **The Commission does not have sufficient information to assess the availability of resources necessary to implement the project. The Commission requires one of the following:**

As previously requested: the applicant is required to submit one of the following forms of documentation to substantiate financial feasibility:

- a. **Audited financial statement.**
- b. **Letter signed by an independent CPA that details the financial information considered to conclude that adequate funds are available for this project.**

Alternatively, the applicant can provide all three of the documentation below:

- c. **Financial information (i.e., a CPA letter or audited financials) for the past two years from direct and indirect owners to attest to the financial condition of the entities and availability of the equity contribution.**
- d. **A letter of credit from direct and indirect owners from a prospective bank toward the debt financing involved in the project to provide credit support to the applicant.**
- e. **A written copy of the lease or intent to lease that includes the lease terms and articulates the rent amount, payment schedule, duration, renewal terms, tenant improvements, and maintenance responsibilities—to document the financial obligations between the tenant and landlord.**

Please note that failure to provide documentation may result in MHCC dismissing the application as incomplete.

[Applicant Response](#)

Ruxton diligently sought an independent CPA firm to assist with providing the letter requested by MHCC staff related to the Viability standard. The CPA firm, Solomon & Nislow, P.A., has been engaged to assist with providing this assessment letter. Due to competing demands at this time of year, Solomon & Nislow anticipates that it will complete its review and provide such letter by mid-January 2026.

4. In Exhibit 16 - Revised MHCC tables, the Project Budget (Table E) under Source of Funds (Section B) shows a revised cash line item of \$1,435,101 which is a 300% increase from the initial cash funding of \$351,632 reported in the initial CON Table E.

- **Explain the reason and assumptions behind this revision.**

[Applicant Response](#)

Ruxton revised Table E in its response to the MHCC's first set of completion questions to add gross interest during the construction period. Attached as **Exhibit 19** is a budget comparison worksheet showing the original budget and the revised budget. Gross interest was calculated based on the assumptions of a \$15,163,225 loan amount, 8% interest rate, and 10-year term. The interest during construction was assumed to be 11 months equaling \$1,083,469. Ruxton updated its Sources of Funds in Table E to add this amount to the existing cash of \$351,362 for a total of \$1,435,101, to reflect that interest for the project would be funded through cash, rather than added to the loan balance. The funding for the interest during the construction period will be paid using operating income of Ruxton.

- **Explain why the debt financing component of the project remains \$15,163,225 despite the increase in the equity component.**

[Applicant Response](#)

As described above, Ruxton intends to pay for the interest during construction from cash from operations and does not intend to add this amount to the loan balance, which remains at \$15,163,225.

- **Submit documentation to support the revised amount of funds available for this project.**

[Applicant Response](#)

See **Exhibit 18**, Table E. The Sources of Funds in Table E reflect the funding sources for this project. Tables 3 and 4 have been revised to adjust the interest payments to begin prior to 2028 to demonstrate how Ruxton will pay for the interest using its operating income.

10.24.01.08G(3)(g) - Health Equity

5. **What percentage of the Ruxton's patients served (e.g., in CY 2024 or CY 2023) were referred through the UM SJMC St. Clare Medical Outreach Program?**

Applicant Response

Ruxton does not track this information so it cannot provide the percentage of patients referred. All patients referred through the St. Clare Medical Outreach Program, however, receive charity care, and charges for these cases are reflected in the historical charity care reported in Table 3.

6. **In response to Clarification Question 45, the applicant acknowledges that Medicaid beneficiaries face limited access to outpatient orthopedic care. Specify the strategies that will be implemented to expand access or increase awareness of Ruxton's services to Medicaid beneficiaries.**

Applicant Response

Ruxton, together with its referring physician practices, will support access for Medicaid beneficiaries through several existing strategies designed to promote transparency and ensure Medicaid beneficiaries are informed of available services. Discussions regarding access to services for Medicaid beneficiaries begin when patients are seen by Ruxton's referring physician practices. Initial insurance screening and referral for ambulatory surgery services occurs at the practice level, where a number of strategies have been implemented to ensure Medicaid beneficiaries are aware that Ruxton provides orthopedic care to this patient population:

- **Insurance transparency:** Ruxton's referring physician practices maintain insurance matrices that clearly list Maryland Medical Assistance as an accepted plan for ASC procedures at Ruxton.
- **Website visibility:** Towson Orthopaedic Associates, which is a primary referring practice of Ruxton, publicly posts all accepted insurance plans, including Medicaid, allowing patients to confirm coverage in advance. A link to the website is available here: <https://www.towsonortho.com/patient-resources/billing-insurance/>. The Towson Orthopaedic Associates website also includes a link to Ruxton, and patients are informed that Ruxton accepts the same insurance as the practice. Maryland Pain Specialists, another primary referring practice of Ruxton, also publicly posts its Financial Policy on its website, which lists all accepted insurances, including Medicaid. The Financial Policy is available through this webpage: <https://www.marylandpainspecialists.com/for-patients.html>. Patients of Maryland Pain Specialists are also informed that Ruxton accepts Medicaid.
- **Screening at the point of appointment:** Patients are screened for insurance eligibility at the time they schedule their appointment in the practice. Medicaid beneficiaries are informed that Ruxton accepts Medicaid as a general matter. When a Medicaid patient is determined to be eligible for ambulatory surgery services, the patient is referred to Ruxton and accepted for services without discrimination.

These steps are designed to ensure that Medicaid beneficiaries are informed about their coverage, aware that Ruxton will accept and treat them, and have a clear pathway to access services at Ruxton.

7. Detail the transportation assistance that Ruxton provides and will provide.

Applicant Response

Ruxton and its referral partners help patients address barriers to care prior to surgery, including patients who lack reliable transportation to and from their surgeries. When patients are seen by their practice and referred for surgery at Ruxton, the practices engage in a collaborative process to identify patients who may need assistance obtaining transportation and address those needs. This process includes discussing available options, such as whether a patient has a caregiver or supportive friend or family member who can assist in providing transportation and connecting patients to resources if not. Ruxton does not provide direct financial assistance for transportation, but rather engages in a collaborative process with patients to support those who experience this barrier to care.

INDEX OF EXHIBITS

Exhibit	Description
18	Updated MHCC Tables
19	Budget Comparison Worksheet

I hereby declare and affirm under the penalties of perjury that the facts stated in the Responses to Completeness Questions dated December 5, 2025, and the attachments are true and correct to the best of my knowledge, information, and belief.

12/17/2025

Date

DocuSigned by:

Robin L. Luxon

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Robin Luxon, RN, BSN, MBA,
FACHE
Interim President
University of Maryland St. Joseph
Medical Center

I hereby declare and affirm under the penalties of perjury that the facts stated in the Responses to Completeness Questions dated December 5, 2025, and the attachments are true and correct to the best of my knowledge, information, and belief.

12/17/2025

Date

Signed by:

Laura Doody

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Laura Doody, MBA

Senior Vice President, Hospital
Finance

University of Maryland St. Joseph
Medical Center

I hereby declare and affirm under the penalties of perjury that the facts stated in the Responses to Completeness Questions dated December 5, 2025, and the attachments are true and correct to the best of my knowledge, information, and belief.

12/18/2025

Date

DocuSigned by:

Jennifer Ash

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Jennifer Ash, BA, BSN, RN
Surgical Administrator and Director of
Nursing Services
Ruxton SurgiCenter

I hereby declare and affirm under the penalties of perjury that the facts stated in the Responses to Completeness Questions dated December 5, 2025, and the attachments are true and correct to the best of my knowledge, information, and belief.

12/19/2025

Date

Signed by:

Joshua L. Baumgardner

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Joshua L. Baumgardner, AIA, NCARB
Project Manager
Wilmot Sanz

EXHIBIT 18

TABLE C. CONSTRUCTION CHARACTERISTICS

INSTRUCTION: If project includes non-hospital space structures (e.g., parking garages, 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)*		
Class A	<input type="checkbox"/>	<input type="checkbox"/>
Class B	<input type="checkbox"/>	<input type="checkbox"/>
Class C	<input type="checkbox"/>	<input checked="" 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		1

*As defined by Marshall Valuation Service

	List Number of Feet, if applicable	
PROJECT SPACE	Total Square Feet	
Total Square Footage		
Basement		N/A
First Floor		N/A
Second Floor		N/A
Third Floor		N/A
Fourth Floor		22,145
Average Square Feet		
Perimeter in Linear Feet	Linear Feet	
Basement		N/A
First Floor		N/A
Second Floor		N/A
Third Floor		N/A
Fourth Floor		805'
Total Linear Feet		
Average Linear Feet		
Wall Height (floor to eaves)	Feet	
Basement		N/A
First Floor		N/A
Second Floor		N/A
Third Floor		N/A
Fourth Floor		15'
Average Wall Height		
OTHER COMPONENTS		
Elevators	List Number	
Passenger		N/A
Freight		N/A
Sprinklers	Square Feet Covered	
Wet System		22,145
Dry System		
Other	Describe Type	
Type of HVAC System for proposed project	Overhead Fully-Ducted VAV System with Reheat (Central A	
Type of Exterior Walls for proposed project	Load-bearing tilt-up concrete panels	

TABLE E. PROJECT BUDGET

INSTRUCTION: Estimates for Capital Costs (1.a-e), 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.

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.d as a use of funds and on line B.8 as a source of funds

	Hospital Building	Other Structure	Total
A. USE OF FUNDS			
1. CAPITAL COSTS			
a. New Construction			
(1) Building			\$0
(2) Fixed Equipment			\$0
(3) Site and Infrastructure			\$0
(4) Architect/Engineering Fees			\$0
(5) Permits (Building, Utilities, Etc.)			\$0
SUBTOTAL	\$0	\$0	\$0
b. Renovations			
(1) Building	\$7,267,398		\$7,267,398
(2) Fixed Equipment (not included in construction)	\$0		\$0
(3) Architect/Engineering Fees	\$907,362		\$907,362
(4) Permits (Building, Utilities, Etc.)	\$98,862		\$98,862
SUBTOTAL	\$8,273,622	\$0	\$8,273,622
c. Other Capital Costs			
(1) Movable Equipment	\$4,395,467		\$4,395,467
(2) Contingency Allowance	\$1,365,074		\$1,365,074
(3) Gross interest during construction period	\$1,083,469		\$1,083,469
(4) Other (Specify/add rows if needed)			\$0
4a. Low Voltage/IT	\$871,821		
4b. Furniture	\$257,241		
SUBTOTAL	\$7,973,072	\$0	\$7,973,072
TOTAL CURRENT CAPITAL COSTS	\$16,246,693	\$0	\$16,246,693
d. Land Purchase	\$0		\$0
e. Inflation Allowance	\$0		\$0
TOTAL CAPITAL COSTS	\$16,246,693	\$0	\$16,246,693
2. Financing Cost and Other Cash Requirements			
a. Loan Placement Fees	\$151,632		\$151,632
b. Bond Discount			\$0
c. CON Application Assistance			
c1. Legal Fees	\$100,000		\$100,000
c2. Other (Specify/add rows if needed)	\$100,000		
d. Non-CON Consulting Fees			
d1. Legal Fees			\$0
d2. Other (Specify/add rows if needed)			\$0
e. Debt Service Reserve Fund			\$0
f. Other (Specify/add rows if needed)			\$0
SUBTOTAL	\$351,632	\$0	\$351,632
3. Working Capital Startup Costs			\$0
TOTAL USES OF FUNDS	\$16,598,326	\$0	\$16,598,326
B. Sources of Funds			
1. Cash	\$1,435,101		\$1,435,101
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	\$15,163,225		\$15,163,225
7. Grants or Appropriations			
a. Federal			\$0
b. State			\$0
c. Local			\$0
8. Other (Specify/add rows if needed)			\$0
TOTAL SOURCES OF FUNDS	\$16,598,326	\$0	\$16,598,326
	Hospital Building	Other Structure	Total
Annual Lease Costs (if applicable)			
1. Land			\$0
2. Building	\$1,321,350		\$1,321,350
3. Major Movable Equipment			\$0
4. Minor Movable Equipment			\$0
5. Other (Specify/add rows if needed)			\$0

* Describe the terms of the lease(s) below, including information on the fair market value of the item(s), and the number of years, annual cost, and the interest rate for the lease.

TABLE L. WORKFORCE INFORMATION 2030

Administration <i>(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
Direct Care Staff <i>(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
Support Staff <i>(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 <i>(State method of calculating benefits below) :</i>												
11% of Salary Costs			342,219			109,179						451,398
TOTAL COST	30.6		\$3,208,663	10.3		\$529,741	0.0		\$0	40.9		\$4,232,330

UPDATED

CY or FY (Circle)	Projected Years					
	(Ending with first full year at full utilization)					
	2027	2028	2029	2030	2031	2032
1. Revenues						
a. Inpatient Services	-	-	-	-	-	-
b. Outpatient Services	-	61,922,200	87,109,993	88,417,127	89,758,277	91,138,300
c. Gross Patient Services Revenue	-	61,922,200	87,109,993	88,417,127	89,758,277	91,138,300
d. Allowance for Bad Debt	-	(619,222)	(871,100)	(884,171)	(897,583)	(911,383)
e. Contractual Allowance	-	(37,737,867)	(53,088,316)	(53,884,936)	(54,702,286)	(55,543,327)
f. Charity Care	-	(140,000)	(140,000)	(140,000)	(140,000)	(140,000)
g. Net Patient Care Service Revenues	-	23,425,111	33,010,577	33,508,020	34,018,408	34,543,590
h. Other Operating Revenues (Specify)	-	-	-	-	-	-
i. Net Operating Revenue	-	23,425,111	33,010,577	33,508,020	34,018,408	34,543,590
2. Expenses						
a. Salaries, Wages, and Professional Fees, (including fringe benefits)	-	3,642,243	4,118,535	4,232,330	4,349,086	4,469,226
b. Contractual Services	-	1,295,415	1,692,859	1,717,947	1,743,687	1,770,173
c. Interest on Current Debt	-	-	-	-	-	-
d. Interest on Project Debt	1,175,766	1,090,120	997,364	896,910	788,119	670,297
e. Current Depreciation	-	-	-	-	-	-
f. Project Depreciation	-	935,574	935,574	935,574	935,574	935,574
g. Current Amortization	-	-	-	-	-	-
h. Project Amortization	-	-	-	-	-	-
i. Supplies	-	7,086,454	10,605,495	10,733,719	10,865,281	11,000,656
j. Other Expenses (Specify)	-	2,006,762	2,035,745	2,046,469	2,057,473	2,068,795
k. Total Operating Expenses	1,175,766	16,056,568	20,385,573	20,562,950	20,739,219	20,914,722
3. Income						
a. Income from Operation	(1,175,766)	7,368,543	12,625,004	12,945,070	13,279,189	13,628,868
b. Non-Operating Income						
c. Subtotal	(1,175,766)	7,368,543	12,625,004	12,945,070	13,279,189	13,628,868
d. Income Taxes						
e. Net Income (Loss)	(1,175,766)	7,368,543	12,625,004	12,945,070	13,279,189	13,628,868
4. Patient Mix:						
A. Percent of Total Revenue						
1. Medicare	n/a	43%	43%	44%	42%	43%
2. Medicaid	n/a	2%	2%	2%	2%	2%
3. Commercial Insurance	n/a	53%	52%	52%	53%	53%
4. Self-Pay	n/a	1%	1%	1%	1%	1%
5. Other (Specify)	n/a	2%	2%	2%	2%	2%
6. TOTAL	n/a	100%	100%	100%	100%	100%

UPDATED

B. Percent of Patient Days/Visits/Procedures (as applicable)						
1. Medicare	n/a	43%	43%	44%	42%	43%
2. Medicaid	n/a	2%	2%	2%	2%	2%
3. Commercial Insurance	n/a	53%	52%	52%	53%	53%
4. Self-Pay	n/a	1%	1%	1%	1%	1%
6. Other (Worker's Comp, Tricare and EHP)	n/a	2%	2%	2%	2%	2%
6. TOTAL	n/a	100%	100%	100%	100%	100%

EXHIBIT 19

Comparison of Project Budgets

		Original ASF Budget	Revised ASF Budget	Variance
A. USE OF FUNDS				
1.	CAPITAL COSTS			
a.	New Construction			
(1)	Building			
(2)	Fixed Equipment			
(3)	Site and Infrastructure			
(4)	Architect/Engineering Fees			
(5)	Permits (Building, Utilities, Etc.)			
	SUBTOTAL	\$0	\$0	\$0
b.	Renovations			
(1)	Building	\$7,366,260	\$7,267,398	-\$98,862
(2)	Fixed Equipment (not included in construction)	\$0	\$0	\$0
(3)	Architect/Engineering Fees	\$907,362	\$907,362	\$0
(4)	Permits (Building, Utilities, Etc.)	\$0	\$98,862	\$98,862
	SUBTOTAL	\$8,273,622	\$8,273,622	\$0
c.	Other Capital Costs			
(1)	Movable Equipment	\$4,395,467	\$4,395,467	\$0
(2)	Contingency Allowance	\$1,365,074	\$1,365,074	\$0
(3)	Gross interest during construction period	\$0	\$1,083,469	\$1,083,469
(4)	Other (Specify/add rows if needed)			\$0
	4a. Low Voltage/IT	\$871,821	\$871,821	\$0
	4b. Furniture	\$257,241	\$257,241	\$0
	SUBTOTAL	\$6,889,603	\$7,973,072	\$1,083,469
	TOTAL CURRENT CAPITAL COSTS	\$15,163,224	\$16,246,693	\$1,083,469
d.	Land Purchase	\$0	\$0	\$0
e.	Inflation Allowance	\$0	\$0	\$0
	TOTAL CAPITAL COSTS	\$15,163,224	\$16,246,693	\$1,083,469
2.	Financing Cost and Other Cash Requirements			
a.	Loan Placement Fees	\$151,632	\$151,632	\$0
b.	Bond Discount			\$0
c.	CON Application Assistance			\$0
	c1. Legal Fees	\$100,000	\$100,000	\$0
	c2. Other (Specify/add rows if needed)	\$100,000	\$100,000	\$0
d.	Non-CON Consulting Fees			\$0
	d1. Legal Fees			\$0
	d2. Other (Specify/add rows if needed)			\$0
e.	Debt Service Reserve Fund			\$0
f.	Other (Specify/add rows if needed)			\$0
	SUBTOTAL	\$351,632	\$351,632	\$0
3.	Working Capital Startup Costs			
	TOTAL USES OF FUNDS	\$15,514,856	\$16,598,326	\$1,083,469
B. Sources of Funds				
1.	Cash	\$351,632	\$1,435,101	\$1,083,469
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	\$15,163,225	\$15,163,225	\$0
7.	Grants or Appropriations			\$0
a.	Federal			\$0
b.	State			\$0
c.	Local			\$0
8.	Other (Specify/add rows if needed)			\$0
	TOTAL SOURCES OF FUNDS	\$15,514,856	\$16,598,326	\$1,083,469
		<i>Original ASF Budget</i>	<i>Revised ASF Budget</i>	<i>Variance</i>
Annual Lease Costs (if applicable)				
1.	Land			\$0
2.	Building	\$1,321,350	\$1,321,350	\$0
3.	Major Movable Equipment			\$0
4.	Minor Movable Equipment			\$0
5.	Other (Specify/add rows if needed)			\$0

* Describe the terms of the lease(s) below, including information on the fair market value of the item(s), and the number of years, annual cost, and the interest rate for the lease.

*Ruxton SurgiCenter intends to enter a lease with UMMS once the Ambulatory Building is under construction and this project receives approval.