

BAKER DONELSON

100 LIGHT STREET · BALTIMORE, MARYLAND 21202 · 410.685.1120 · bakerdonelson.com

HOWARD L. SOLLINS, SHAREHOLDER

Direct Dial: 410-862-1101

Direct Fax: 443-263-7569

E-Mail Address: hsollins@bakerdonelson.com

August 30, 2024

Eric N. Baker
Program Manager
Maryland Health Care Commission
4160 Patterson Avenue,
Baltimore, MD 21215

Re: **SurgCenter at National Harbor, LLC dba Harborside Surgery Center
Application for Certificate of Need to Convert a Procedure
Room to an Operating Room**

Dear Mr. Baker:

On behalf of SurgCenter at National Harbor, LLC dba Harborside Surgery Center (“Harborside”), I am responding to your letter of August 20, 2024, with a second request for additional information regarding the Certificate of Need (“CON”) application requesting approval for Harborside to operate the center as an ambulatory surgical facility (“ASF”) with three total operating rooms and two procedure rooms through the conversion of one procedure room to an operating room.

1. Are the surgeons of the total nineteen listed on p. 17 of your response also members of the Anderson Orthopaedic practice?

Response:

No. Not all nineteen listed are members of the Anderson Orthopaedic practice. We have added their practice groups to the table below.

Surgeon	Surgical Specialty	Practice
Azer, Nigel	Orthopedics	Anderson Orthopaedic Practice
Branche, George	Orthopedics	Anderson Orthopaedic Practice
Engl, Charles	Orthopedics	Anderson Orthopaedic Practice
Fricka, Kevin	Orthopedics	Anderson Orthopaedic Practice
Gallagher, Brian	Orthopedics	Anderson Orthopaedic Practice
Gandhi, Rikesh	Orthopedics	Anderson Orthopaedic Practice

Gebrelul, Aaron	Orthopedics	Anderson Orthopaedic Practice
Hamilton, William	Orthopedics	Anderson Orthopaedic Practice
Kittredge, Ben	Orthopedics	Ortho Virginia
McAsey, Craig	Orthopedics	Anderson Orthopaedic Practice
Nagda, Sameer	Orthopedics	Anderson Orthopaedic Practice
Nathan, Michael	Otolaryngology	Associates in Otolaryngology
Narvaez, Michael	Orthopedics	Anderson Orthopaedic Practice
Root, Cassie	Orthopedics	Nirschl Orthopedic Institute
Saddler, Stephen	Orthopedics	Anderson Orthopaedic Practice
Sershon, Robert	Orthopedics	Anderson Orthopaedic Practice
Wallach, Corey	Orthopedics	Anderson Orthopaedic Practice
Weintritt, David	General Surgery	Virginia Cancer Specialists
Wolff, Andrew	Orthopedics	Washington Orthopaedic Sports Medicine

2. **Re: Question #6A** At <https://harborsidesurgcenter.com/for-patients/>, the Harborside Surgical Center website does not provide any information regarding “Information Regarding Charges” or “Charity Care and Financial Assistance.” When will this information and these links be live on the website?

Response:

Prior to first use, Harborside will post live links to the website.

3. **Re: Question #6B** Explain why Harborside cannot provide a copy of its current patient brochure and will only have one available prior to the applicant’s request for First Use. Please provide a copy of the patient brochure currently distributed.

Response:

We had attached a brochure to the CON application as Attachment # 5, inadvertently, only one side was sent. Please see attached to this letter, a full copy of our current brochure distributed to patients.

4. **Re: Question 17** The Projected *Total Cases in ORs (2025-2028)* under TABLE 2: STATISTICAL PROJECTIONS - PROPOSED PROJECT (231, 531, 814, 888, respectively, on page 60) are inconsistent with Total Cases in ORs under TABLE 1: STATISTICAL PROJECTIONS - ENTIRE FACILITY (2376, 2676, 2959 and 3032, respectively). However, the values under Total Cases in Table 7 Operating Room Capacity and Needs Assessment (COMAR 10.24.11.06) are consistent and tie with projections under Table 1.

Please reconcile these numbers and explain any inconsistencies.

Response:

The apparent inconsistencies identified in Question 4 are not the result of inconsistencies in the underlying data. They represent different purposes and means of presenting the data in the application.

The essential data elements are the projected OR cases in current and future years. These projections are shown in the table below. This information is presented consistently in the application.

	Year ending December 31,				
	2024	2025	2026	2027	2028
Projected OR Cases	2,145	2,376	2,676	2,959	3,032

Source: Table 6 (p. 41), TABLE 1 (p.60)

Specifically, Tables 1 and 6, reproduced below, reflect the same OR cases in each year.

TABLE 1: STATISTICAL PROJECTIONS - ENTIRE FACILITY

CY or FY (Circle)	Two Most Recent Years (Actual)		Current Year Projected	Projected Years (ending with first full year at full utilization)			
	2022	2023	2024	2025	2026	2027	2028
a. Number of operating rooms (ORs)	1	2	2	3	3	3	3
• Total Procedures in ORs	4,679	5,360	6,219	6,885	7,745	8,566	8,778
• Total Cases in ORs	1,151	1,846	2,145	2,376	2,676	2,959	3,032
• Total Surgical Minutes in ORs**	99,327	159,164	186,130	208,038	235,989	262,558	269,935
b. Number of Procedure Rooms (PRs)	1	3	3	2	2	2	2
• Total Procedures in PRs	2,824	3,167	4,007	4,233	4,511	4,837	4,992

● Total Cases in PRs	1,081	1,200	1,434	1,500	1,595	1,689	1,737
● Total Minutes in PRs**	62,026	73,459	91,636	96,417	101,778	108,531	111,862

**Do not include turnover time.

Table 6							
Harborside Surgery Center							
Operating Room Capacity and Needs Assessment (COMAR 10.24.11.06)							
Entire Facility							
	Actual		Projected				
	CY2022	CY2023	CY2024	CY2025	CY2026	CY2027	CY2028
Total Cases	1,151	1,846	2,145	2,376	2,676	2,959	3,032
Total Surgical Minutes in OR	99,327	159,164	186,130	208,038	235,989	262,558	269,935
OR Turnaround Minutes, 25 minutes per case	28,775	46,150	53,625	59,400	66,900	73,975	75,800
Total OR Minutes, including Turnaround	128,102	205,314	239,755	267,438	302,889	336,533	345,735
Total Hours (minutes/60)	2,135.03	3,421.90	3,995.92	4,457.30	5,048.15	5,608.88	5,762.25
Optimal Capacity, Hours	1,632.00	3,264.00	3,264.00	4,896.00	4,896.00	4,896.00	4,896.00
Utilization, Percent	130.8%	104.8%	122.4%	91.0%	103.1%	114.6%	117.7%
OR Need (Total Hours/1632)	1.3	2.1	2.4	2.7	3.1	3.4	3.5

Note: Optimal Capacity is 1,632 hours per year.

The calculations in Table 6 (p. 41) employ the projected OR cases to show that according to the standards of COMAR 10.24.11.06 there is an aggregate need for three operating rooms at Harborside.

In Table 7 (p. 42 of the application and repeated below), the values for “Total Cases” in Table 6 are divided by three to show that there would be a need for one operating room as if Harborside were making an application for a single operating room based the volume of surgeries per OR. The projected cases per OR in Table 7 do not affect any other tables or projections.

Table 7				
Harborside Surgery Center				
Operating Room Capacity and Needs Assessment (COMAR 10.24.11.06)				
Project Only				
	Projected			
	CY2025	CY2026	CY2027	CY2028
Total Cases	792	892	986	1,011
Total Minutes (includes turnaround time @ 25 minutes)	89,146	100,963	112,178	115,245
Total Hours (minutes/60)	1,485.77	1,682.72	1,869.63	1,920.75
OR Need (Based on Optimal Capacity)	0.91	1.03	1.15	1.18
Utilization, Percent	91.0%	103.1%	114.6%	117.7%
<i>Note: Optimal Capacity is 1,632 hours per year.</i>				

The projected ‘Total Cases in ORs’ in TABLE 2: STATISTICAL PROJECTIONS – PROPOSED PROJECT (p. 60 and repeated below) provided the projected incremental growth in volume from 2024 on which TABLE 4: REVENUE AND EXPENSES – PROPOSED PROJECT (pp. 68) is based. Note that these projections are not for the entire facility and represent the projected increase in incremental volume at Harborside, not the total volume of cases presented in Tables 1 and 6.

TABLE 2: STATISTICAL PROJECTIONS - PROPOSED PROJECT

(INSTRUCTION: All applicants should complete this table.)

CY or FY (Circle)	Projected Years (Ending with first full year at full utilization)			
	2025	2026	2027	2028
a. Number of operating rooms (ORs)	1	1	1	1
• Total Procedures in ORs	665	1,525	2,347	2,559
• Total Cases in ORs	231	531	814	888
• Total Surgical Minutes in ORs**	21,907	49,858	76,428	83,804
b. Number of Procedure Rooms (PRs)	0	0	0	0
• Total Procedures in PRs	0	0	0	0

● Total Cases in PRs	0	0	0	0
● Total Minutes in PRs**	0	0	0	0

*Do not include turnover time

The number of projected cases in TABLE 2 agree, in fact, to the projections (‘Shift from Other Facilities and Future Growth’) presented in Table 9 of the CON application. Table 9 appears on page 44 and is repeated below.

Table 9					
Harborside Surgery Center					
Source of Projected Surgical Cases					
	Projected				
	CY2024	CY2025	CY2026	CY2027	CY2028
Total Surgical Cases	2,145	2,376	2,676	2,959	3,032
Shift from Other Facilities and Future Growth		231	531	814	887
Cases, Baseline		2,145	2,145	2,145	2,145

Table 9 makes it clear that the projected cases in TABLE 2 are intended to reflect an increase from a baseline value, in this case in the volume of cases projected for 2024. There is a round-off difference (888 versus 887) in CY2028, which has no material impact on the financial projections in TABLE 4.

5. **Re: Question 17 Total Surgical Minutes in ORs and Total Minutes in PRs stated for 2022 under Table 1 do not match the Total OR hours and Total PR hours submitted in the 2022 FASF survey (https://mhcc.maryland.gov/public_use_files/amsurgdownload.html).**

Table 1 in CON adds up to 99237+62026 =161,353 versus the ones in the FASF 2022 file which works out to be (1349*60) + (1289*60) = 158,280. Please reconcile these numbers and explain any inconsistencies.

Response:

The difference in the OR and PR minutes in Table 1 and the FASF survey is a result of two different components of Harborside’s information system. The data shown in Table 1 are maintained by a surgical module that collects data by physician, which was the basis for the projections in Table 1. The FASF survey data is taken from Harborside’s patient accounting module. There may be timing issues between when a procedure is performed and when it is

billed that may result in small differences during a particular fiscal year between the two modules.

We believe that physician specific data reflected in Table 1 accurately reflects the actual minutes used in the performance of OR/PR cases at Harborside. We noted the same difference in the minutes in Table 1 and Harborside’s 2023 FASF survey, as reflected in the following table.

	2022	2023
Table 1		
Minutes in ORs	99,327	159,164
Minutes in PRs	62,026	73,459
Total	161,353	232,623
From FASF Surveys		
Total Minutes Reported	158,280	229,261
Difference		
Difference (Minutes)	3,073	3,362
% Difference	1.9%	1.4%

The small variation in the OR/PR minutes is not material to the analyses presented in the application.

- 2022 is not the basis for any of the projections of future utilization at Harborside. These projections are based on Harborside’s 2023 experience as well -as physician-specific projected increase in case volumes detailed in the application
- Using either source of OR/PR minutes (Table 1 or FASF surveys) would not change the projected need for one additional OR at Harborside given the minimal difference.
- Minutes are not the basis for the financial projections presented in Table 3; instead, these projections are based on the projected number of cases.

6. **Re: Question 23** The "Current Year Total Cost of Workforce" is stated at \$3,820,416 and the "Projected Entire Facility Through Last Year" is stated at \$4,584,650 in Table L (page 248, application), which does not match with numbers stated under “Salaries, Wages, and Professional Fees” (including fringe benefits) + “Contractual Services” under ‘*TABLE 3: REVENUES AND EXPENSES - ENTIRE FACILITY (including proposed project)*’ (page 65, application) for the year 2024 (\$4,595,194.9 + \$1,083,722.17) and 2028 (\$6,198,313.00 + \$1,420,565.28).

The same is the case with the "Projected Year Total Cost" for the year 2025. It is stated as \$764,234.00 in Table L, which does not tie with “Salaries, Wages, and Professional Fees” (including fringe benefits) + “Contractual Services” under *TABLE 4: REVENUES*

AND EXPENSES - PROPOSED PROJECT' (page 68) for the year 2025 (\$ 621,457.95 + \$72,200).

Please explain the variances in these two cases.

Response:

First, "Contractual Services" does not represent labor costs and are not related to the "Salaries, Wages, and Professional Fees reflected in Table L. Expenses represented in this Contractual Services category include Billing and Collection Services, Janitorial, Waste Disposal, Linen, Office Maintenance, IT services and software licenses, transcription, etc. "Contractual Services" do not represent "contractor" expenses that supplement the workforce. Contractor expenses are included in the "Salaries, Wages and Professional Fees" line item.

Secondly, "Salaries, Wages and Professional Fees" in Table 3 includes benefit expenses are not included in Table L (only salary and wages). As a result, the comparison should be between Table L to just the Salaries & Wages in the forecast (see below for a breakout of Salaries & Wages vs. Benefit expenses included in Table 3 projections).

Salaries, Wages, And Professional Fees (including fringe benefits)	2022	2023	2024	2025	2026	2027	2028
Salaries & Wages (Consistent with Table L)	\$ 2,124,256	\$ 3,008,612	\$ 3,444,173	\$ 3,929,615	\$ 4,333,799	\$ 4,559,635	\$ 4,696,424
Paroll Taxes - Non-Physician	\$ 194,818	\$ 257,069	\$ 309,976	\$ 353,666	\$ 390,042	\$ 410,367	\$ 422,678
Medical Benefits - NonPhysician	148,074	199,898	258,313	294,721	325,035	341,973	352,232
Dental Benefits - NonPhysian	4,190	8,172	6,389	7,289	8,039	8,458	8,712
401K Benefits - NonPhysician	54,587	38,949	84,385	96,279	106,181	111,715	115,066
Disability and Supplemental - NonPhysician	3,232	9,880	3,183	3,632	4,005	4,214	4,340
Bonus	28,000	52,200	47,012	53,638	59,155	62,238	64,105
PTO Expense	121,147	204,818	224,758	256,436	282,813	297,550	306,477
Overtime	17,380	33,706	31,007	35,377	39,016	41,049	42,280
Contract Labor - Direct Patient Care	9,833	128,750	186,000	186,000	186,000	186,000	186,000
Total Benefits and Other Payroll Expenses	\$ 581,261	\$ 933,443	\$ 1,151,022	\$ 1,287,038	\$ 1,400,286	\$ 1,463,562	\$ 1,501,889
Salaries, Wages, and Professional Fees (Consistent with TABLE 3	\$ 2,705,517	\$ 3,942,055	\$ 4,595,195	\$ 5,216,653	\$ 5,734,085	\$ 6,023,197	\$ 6,198,313

We did discover that Table L shows "Projected Entire Facility Through Last Year" as \$4,584,650, which is a 2.4% difference compared to the \$4,696,424 in 2028 in the table above. We have amended Table L to be consistent with the \$4,696,424 figure. This change does not affect the financial projections in Table 3, which reflect the correct amounts for salaries, wages, and fringe benefits in each year. A revised Table L and supporting spreadsheet are attached.

As for the "Current Year Total Cost of Workforce" of \$3,820,416 in Table L not tying to Table 3, 2023/2024, Table L represents the annual salaries and wages of the current workforce if all FTEs were employed for the entire year, whereas the 2024 figure in Table 3 (\$3,444,173.20 of just salaries and wages) represents total expenses actually incurred for the year. New staff members were added during 2024; therefore, actual salaries for 2024 were less than the total annual salaries of the FTEs reflected in Table L, which assumed all FTEs were employed for the entire year.

- 7. Re: Question #25 Please provide more detail regarding Harborside's efforts at outreach with the Prince George's Department of Health to the residents in this jurisdiction in an effort to improve access of surgical services offered at Harborside to residents of the county.**

Response:

Harborside spoke with Dr. Mathew Levy's assistant, Isatu Kanu, on August 27. We shared our request to meet with Dr. Levy to discuss a proposed coordination aimed at developing an annual community musculoskeletal screening program for residents of Prince George's County. A follow up email was sent on August 29th, 2024, to confirm our request to meet.

Please see the attached signed attestations by the individuals assisting in preparing this response.

Sincerely,



Howard L. Sollins

HLS/lam

Enclosures

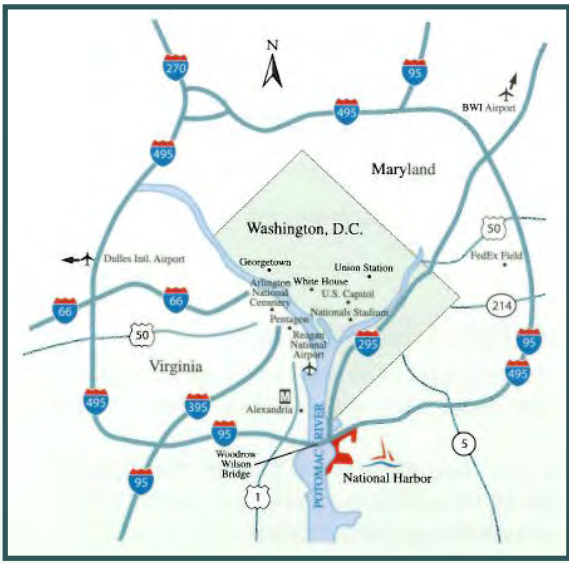
cc: Jeanne-Marie Gawel, MHCC
Bill Chan, MHCC
Ruby Potter, MHCC
Deanna Dunn, MHCC
Matthew Levy, MD, MPH,
Health Officer Prince George's County Health Department
Jane Falk
Sandra Gateau
Daniel Sullivan
John Hill
John J. Eller, Esquire

LIST OF ATTACHMENTS

Complete copy of current patient brochure

Amended Table L

Affirmations



Directions

Virginia

- Take National Harbor Exit 2A. If traveling to National Harbor from Virginia via the Woodrow Wilson Bridge, please follow the signs that indicate “local lanes.”

Maryland

- The lanes will divide after you pass Exit 4. Make sure you stay in the right lanes in order to follow the “local lanes.”
- Take National Harbor Exit 2A.

Washington, DC

- Take National Harbor Exit 1B.

**Parking is located on Potomac Passage in the garage opposite the main entrance. PLEASE BRING YOUR PARKING TICKET FOR VALIDATION.*



125 Potomac Passage, Suite 200
Oxon Hill, MD 20745



HARBORSIDE
SURGERY CENTER
125 Potomac Passage
Suite 200
Oxon Hill, MD 20745

Please Remember...

Unless you have been told otherwise.

**DO NOT EAT OR DRINK ANYTHING
AFTER MIDNIGHT THE NIGHT
BEFORE YOUR SURGERY.**

Your surgery is scheduled for:

Date: _____

Time: _____

Physician: _____

**Please Call 240-493-6110
With Any Questions**



HARBORSIDE
SURGERY CENTER

SPECIALTIES

ENT
General Surgery
Orthopedics
Pain Management
Spine

125 Potomac Passage
Suite 200
Oxon Hill, MD 20745

Phone 240-493-6110



General Information

The Harborside Surgery Center is licensed by the State of Maryland and accredited by AAAHC.

The Harborside Surgery Center was established in 2012 by hospital and clinical personnel to offer safe, high-quality surgical care.

You will find that because the center specializes in outpatient surgery, our patients enjoy many advantages including personalized service and excellent medical care.

Please note some of our private practitioner physicians have joint ownership of the surgery center.

Before Your Surgery

A nurse from the center will contact you prior to your surgery to review your health history, medications and pre-operative instructions.

Notify your surgeon if there is a change in your physical condition such as cold, fever or respiratory problems.

Do not eat or drink anything after midnight the night before your operation, including no hard candy, or cigarettes. If your child is the patient, please be careful to enforce this. Also, please follow any other special instructions your surgeon may have given you. Failure to follow these instructions may result in cancellation of your surgery.

Please be sure to tell your surgeon if you are on any type of blood thinners or aspirin. Please do not take any medications after midnight unless instructed by your surgeon or the nurse at our center.

It is extremely important to arrange for a responsible adult to accompany you to the Surgery Center and remain with you the first 24 hours after surgery.

The Day of Surgery

Wear loose, comfortable clothing that is big enough to accommodate a large bandage after surgery. Wear comfortable shoes such as slip-on, no high heels.

You will need to change into a surgical gown.

Do not wear any jewelry (including body piercing), makeup or cologne. Do not bring any valuables with you.

Bring your drivers license, all insurance cards and your co-pay with you. We accept co-pay by check, cash or credit card.

Wearing contact lenses is NOT advised. We provide containers for removable dentures and bridgework.

If your child is having surgery, feel free to bring a favorite stuffed animal or security blanket for added assurance.

After Your Surgery

You will be discharged to your car by wheelchair. **If anesthesia has been administered, you must have a responsible adult present to drive you home and to care for you following surgery.**

Your physician will provide post-operative instructions regarding diet, rest, exercise and medications. You will be provided with a written summary of these discharge instructions.

A nurse from the Surgery Center will attempt to call you the day after your surgery to check on your progress and discuss any questions

you may have. If you have any unexpected problems, please call your doctor. If he/she does not respond, please go to the nearest emergency room.

Thank you for choosing the Harborside Surgery Center.

Helpful Reminders

Please limit the number of family or friends who come with you. Seating is very limited.

If you are driving more than 30 minutes, put one or two pillows in your car so you can elevate the operative extremity.

Females will need to give a urine sample for a pregnancy test pre-operatively.

If you or your family need the services of a foreign-language or hearing impaired interpreter, please call to arrange for one at no cost to you, **prior to the day of surgery.**

Billing Information

You will be informed about any coinsurance due for your surgery during your pre-operative call. This amount is due prior to, or on the day of your surgery. Please remember to bring a form of payment with you. We accept cash, checks and major credit cards. The Surgery Center also participates with Care Credit, a health care expense financing company.

After surgery Harborside Surgery Center, will submit your bill to your insurance company. You will receive a separate bill from your doctor, anesthesiologist and/or pathologist.

Please do not hesitate to contact our business office with any concerns or questions regarding your coinsurance obligation and/or payment options.

TABLE L. WORKFORCE INFORMATION (AMENDED)

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 uninflated projections in Tables F and G.

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 (should be consistent with projections in Table G)
1. Regular Employees											
<i>Administration (List general categories, add rows if needed)</i>											
ASC Administrator	1.0	\$160,000	\$160,000			\$0			\$0	1.0	\$160,000
Office Manager	1.0	\$118,998	\$118,998			\$0			\$0	1.0	\$118,998
Total Administration	2.0	\$139,499	\$278,998			\$0			\$0	2.0	\$278,998
<i>Direct Care Staff (List general categories, add rows if needed)</i>											
Charge Nurse OR	1.0	\$119,870	\$119,870			\$0			\$0	1.0	\$119,870
Charge Nurse Pre Op Pacu	1.0	\$114,234	\$114,234			\$0			\$0	1.0	\$114,234
Operating Room Nurse	6.0	\$99,332	\$595,991	2.0	\$113,860	\$227,719			\$0	8.0	\$823,711
Pre/Post Operative Nurse	13.5	\$95,821	\$1,293,589	4.0	\$109,836	\$439,343			\$0	17.5	\$1,732,933
Radiology Technologist	0.5	\$91,520	\$45,760			\$0			\$0	0.5	\$45,760
Surgical Tech Supervisor	1.0	\$105,934	\$105,934			\$0			\$0	1.0	\$105,934
Surgical Technologist	5.5	\$91,142	\$501,282	2.0	\$104,472	\$208,944			\$0	7.5	\$710,226
Total Direct Care	28.5	\$97,427	\$2,776,661	8.0	\$109,501	\$876,007			\$0	36.5	\$3,652,668
<i>Support Staff (List general categories, add rows if needed)</i>											
Sterile Technician Dept Supervisor	1.0	\$109,262	\$109,262			\$0			\$0	1.0	\$109,262
Sterile Processing Technician	3.0	\$68,556	\$205,667			\$0			\$0	3.0	\$205,667
Surgery Scheduler	1.0	\$59,072	\$59,072			\$0			\$0	1.0	\$59,072
Medical Receptionist	2.5	\$51,612	\$129,029			\$0			\$0	2.5	\$129,029
Materials Manager	1.0	\$93,122	\$93,122			\$0			\$0	1.0	\$93,122

TABLE L. WORKFORCE INFORMATION

Administration (List general categories, add rows if needed)											
			\$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 (List general categories, add rows if needed)											
			\$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 (List general categories, add rows if needed)											
			\$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 (State method of calculating benefits below):											
TOTAL COST	42.5		\$3,820,416	8.0		\$876,007	0.0		\$0		\$4,696,423.67

AFFIRMATION

I hereby declare and affirm under the penalties of perjury that the facts stated in this application and attachments are true and correct to the best of my knowledge, information and belief.

By: *M Jane Falk*

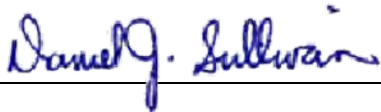
Printed Name: M. Jane Falk RN, BSN, MHA

Title: Senior Vice President, Clinical Programs

Date: 8/29/2024

AFFIRMATION

I hereby declare and affirm under the penalties of perjury that the facts stated in this application and attachments are true and correct to the best of my knowledge, information and belief.

By: 

Printed Name: Daniel J. Sullivan

Title: President

Date: 8/28/24

AFFIRMATION

I hereby declare and affirm under the penalties of perjury that the facts stated in this application and attachments are true and correct to the best of my knowledge, information and belief.

By: John F. Hill

Printed Name: JOHN F. HILL

Title: Consultant

Date: August 26, 2024

TABLE L. WORKFORCE INFORMATION (AMENDED)

INSTRUCTION: List the facility's existing staffing and changes required by this project. Include all major job categories under each heading. Total cost should be calculated on the basis of 2,080 paid hours per year equals one FTE. In an attachment to the application, explain any factors that affect the projections in this table are consistent with expenses provided in uninflated projections in Tables F and G.

Job Category	CURRENT ENTIRE FACILITY			PROJECTED CHANGES AS A RESULT OF THE PROPOSED PROJECT 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).
1. Regular Employees						
<i>Administration (List general categories, add rows if needed)</i>						
ASC Administrator	1.0	\$160,000	\$160,000			\$0
Office Manager	1.0	\$118,998	\$118,998			\$0
Total Administration	2.0	\$139,499	\$278,998			\$0
<i>Direct Care Staff (List general categories, add rows if needed)</i>						
Charge Nurse OR	1.0	\$119,870	\$119,870			\$0
Charge Nurse Pre Op Pacu	1.0	\$114,234	\$114,234			\$0
Operating Room Nurse	6.0	\$99,332	\$595,991	2.0	\$99,332	\$198,664
Pre/Post Operative Nurse	13.5	\$95,821	\$1,293,589	4.0	\$95,821	\$383,286
Radiology Technologist	0.5	\$91,520	\$45,760			\$0
Surgical Tech Supervisor	1.0	\$105,934	\$105,934			\$0
Surgical Technologist	5.5	\$91,142	\$501,282	2.0	\$91,142	\$182,284
Total Direct Care	28.5	\$97,427	\$2,776,661	8.0	\$95,529	\$764,234
<i>Support Staff (List general categories, add rows if needed)</i>						
Sterile Technician Dept Supervisor	1.0	\$109,262	\$109,262			\$0
Sterile Processing Technician	3.0	\$68,556	\$205,667			\$0
Surgery Scheduler	1.0	\$59,072	\$59,072			\$0
Medical Receptionist	2.5	\$51,612	\$129,029			\$0
Materials Manager	1.0	\$93,122	\$93,122			\$0
Insurance Verifications Clerk	2.0	\$56,098	\$112,195			\$0
Housekeeper	1.5	\$37,606	\$56,410			\$0
Total Support	12.0	\$63,730	\$764,758			\$0
REGULAR EMPLOYEES TOTAL	42.5	\$89,892	\$3,820,416	8.0	\$95,529	\$764,234
2. Contractual Employees						
<i>Administration (List general categories, add rows if needed)</i>						
			\$0			\$0
			\$0			\$0
			\$0			\$0

			\$0			\$0
Total Administration			\$0			\$0
Direct Care Staff <i>(List general categories, add rows if needed)</i>						
			\$0			\$0
			\$0			\$0
			\$0			\$0
			\$0			\$0
Total Direct Care Staff			\$0			\$0
Support Staff <i>(List general categories, add rows if needed)</i>						
			\$0			\$0
			\$0			\$0
			\$0			\$0
			\$0			\$0
Total Support Staff			\$0			\$0
CONTRACTUAL EMPLOYEES TOTAL			\$0			\$0
Benefits <i>(State method of calculating benefits below) :</i>						
TOTAL COST	42.5		\$3,820,416	8.0		\$764,234

ending provided in the table. The number of Full Time Equivalents (FTEs) used in converting paid hours to worked hours. Please ensure that the

OTHER EXPECTED CHANGES IN OPERATIONS THROUGH THE LAST YEAR OF PROJECTION (CURRENT DOLLARS)			PROJECTED ENTIRE FACILITY THROUGH THE LAST YEAR OF PROJECTION (CURRENT DOLLARS) *	
FTEs	Average Salary per FTE	Total Cost	FTEs	Total Cost <i>(should be consistent with projections in Table G)</i>
		\$0	1.0	\$160,000
		\$0	1.0	\$118,998
		\$0	2.0	\$278,998
		\$0	1.0	\$119,870
		\$0	1.0	\$114,234
		\$0	8.0	\$794,655
		\$0	17.5	\$1,676,875
		\$0	0.5	\$45,760
		\$0	1.0	\$105,934
		\$0	7.5	\$683,566
		\$0	36.5	\$3,540,895
		\$0	1.0	\$109,262
		\$0	3.0	\$205,667
		\$0	1.0	\$59,072
		\$0	2.5	\$129,029
		\$0	1.0	\$93,122
		\$0	2.0	\$112,195
		\$0	1.5	\$56,410
		\$0	12.0	\$764,758
		\$0	50.5	\$4,584,650
		\$0	0.0	\$0
		\$0	0.0	\$0
		\$0	0.0	\$0

