

GALLAGHER

GALLAGHER EVELIUS & JONES
ATTORNEYS AT LAW

December 17, 2020

VIA EMAIL & U.S. MAIL

Mr. Ben Steffen
Executive Director
Maryland Health Care Commission
4160 Patterson Avenue
Baltimore, Maryland 21215

Ruby Potter
Health Facilities Coordination Officer
Maryland Health Care Commission
4160 Patterson Avenue
Baltimore, Maryland 21215

**Re: Emergency Certificate of Need Application – UM Capital Region
Health – Addition of Ten Behavioral Health Beds at Remote Location
of UM Prince George’s Hospital Center**

Dear Mr. Steffen and Ms. Potter:

On behalf of Dimensions Health Corporation d/b/a University of Maryland Capital Region Health (“UM CRH”), a not-for-profit health system owned by the University of Maryland Health System (“UMMS”), and pursuant to COMAR 10.24.01.20, we write to seek an Emergency Certificate of Need (“CON”) to add ten behavioral health beds to the temporary remote location of University of Maryland Prince George’s Hospital Center (“UM PGHC”) at UM Laurel Medical Center, 7400 Van Dusen Road, Laurel, Maryland. Prior to the pandemic, this location was an outpatient provider-based department of UM PGHC operating as a freestanding medical facility (“FMF”).¹ On March 22, 2020, the Maryland Health Care Commission granted an emergency CON to establish a temporary remote location of UM PGHC at UM Laurel Medical Center with 135 MSGA beds.

¹ Upon the grant by the Commission of an exemption from CON review, the former UM Laurel Regional Hospital (“UM LRH”) converted to an FMF known as University of Maryland Laurel Medical Center, effective January 1, 2019. The FMF currently operates on the first and second floor of the former hospital building, and will move to a new building on the campus in late 2021 or 2022. The inpatient remote location of UM PGHC operates on the third, fourth, and fifth floors of the building. The FMF includes the following services: emergency care, observation services, diagnostic imaging services, behavioral health outpatient services, two sterile operating rooms, two non-sterile procedure rooms, a laboratory, a pharmacy, and other ancillary services. These services are available to patients of the remote location of UM PGHC.

#723741
013849-0006

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Ms. Ruby Potter
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As you know, due to a world-wide outbreak of a coronavirus known as SARS-CoV-2 (“COVID-19”), the President of the United States declared a national state of emergency, the Secretary of the United States Department of Health and Human Services declared a public health emergency, and on March 5, 2020, the Governor of the State of Maryland, Lawrence J. Hogan, Jr., declared a state of emergency and catastrophic health emergency. Additionally, on March 16, 2020, the Governor issued an Executive Order directing the Maryland Department of Health to work with health care facilities and providers to reopen closed hospital facilities across the state and to take other measures necessary to immediately increase statewide hospital capacity. COVID-19 infections are currently surging again, presenting immediate hazard to the health of patients statewide, and particularly in Prince George’s County, which currently has the greatest number of COVID-19 confirmed cases. This requires immediate action pursuant to your authority under COMAR 10.24.01.20B and consistent with Governor Hogan’s Executive Order to increase inpatient hospital capacity to accommodate potential surge capacities related to COVID-19.

UM CRH hereby applies for an Emergency CON for the purpose of adding ten behavioral health beds to the temporary remote location of UM PGHC at UM Laurel Medical Center, which is currently licensed to operate 135 MSGA beds. If approved, UM CRH would operate the ten behavioral health beds for COVID-19 positive patients only for so long as necessary, and authorized, to address the need for inpatient hospital services as a result of the pandemic. Through recent email communication with David Marcozzi, MD, COVID-19 Incident Commander for UMMS, Secretary Dennis Shrader of the Maryland Department of Health has expressed support and encouragement to provide the proposed behavioral health capacity at UM Laurel Medical Center.

The proposed ten-bed unit would be located on Unit 4A, as shown on the floor plan attached as **Exhibit 1**. This space is well-suited for these beds and related services as it was used for behavioral health services prior to the conversion of UM LRH to an FMF.

The cost of the project will not exceed the hospital capital threshold requiring a CON from the Maryland Health Care Commission under MARYLAND CODE, HEALTH-GENERAL § 19-120(a)(4). The total project cost, including facilities work and purchase of equipment, is estimated to be approximately \$500,000, and UM CRH intends to use available cash to fund the project. If the proposed project is approved, UM CRH will proceed expeditiously with preparations to commence inpatient behavioral health services.

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UM CRH also seeks a waiver from the Executive Director or designee pursuant to COMAR 10.24.01.10A(2) such that: (1) the requirement under COMAR 10.24.01.20C for the Emergency CON applicant to file a formal CON application be suspended until at least thirty (30) days after the declared state of emergency of March 5, 2020 is terminated; and (2) that any Emergency CON granted pursuant to this Emergency CON application not expire until thirty (30) days after the declared state of emergency of March 5, 2020 is terminated or 165 days after its issuance, whichever is later.

We respectfully request you to act on this request as soon as possible so that UM CRH can begin work on this critically important project. Please let us know if you need any additional information regarding the requested Emergency CON Application.

Sincerely,



Thomas C. Dame



James C. Buck



Mallory Regenbogen

Mr. Ben Steffen
Ms. Ruby Potter
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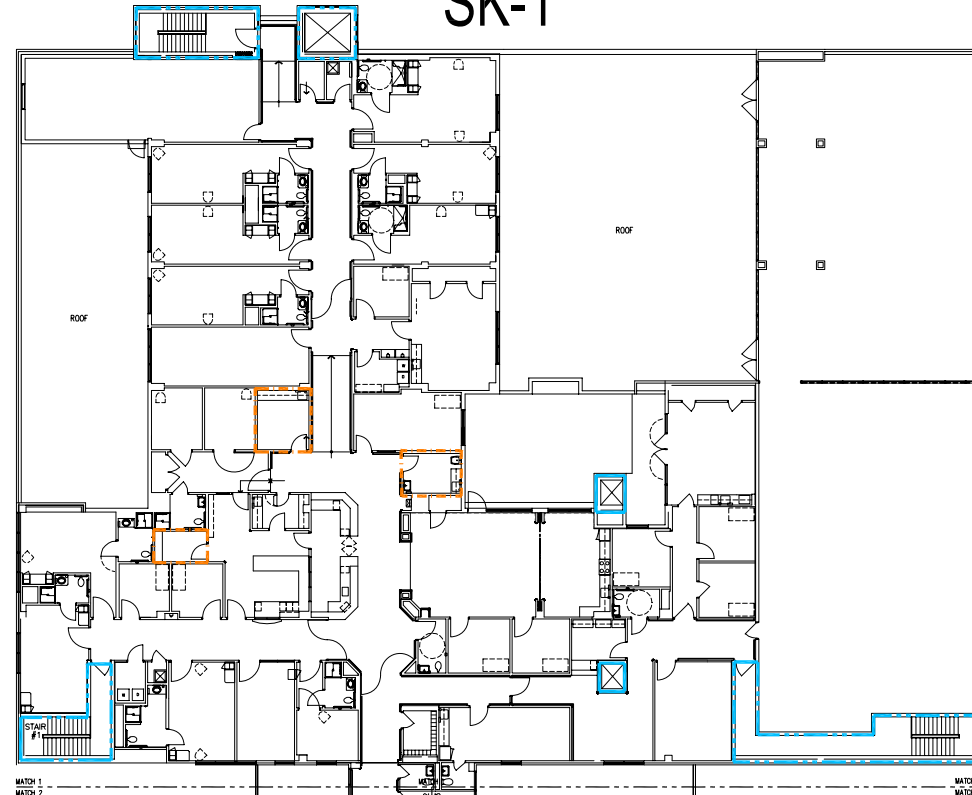
cc: via email

Dennis R. Schrader, Secretary, Maryland Department of Health
Andrew N. Pollak, M.D. Chairman, Maryland Health Care Commission
Randolph S. Sergent, Esq., Vice Chairman, Maryland Health Care Commission
Katie Wunderlich, Executive Director, Maryland Health Services Cost Review Commission
Patricia T. (Tricia) Nay, M.D. Director, Office of Health Care Quality
Renee Webster, Assistant Director for Hospitals, Laboratories and Patient Safety, OHCQ
Paul Parker, Director, Center for Health Care Facilities Planning & Development
Kevin McDonald, Chief, Certificate of Need
Suellen Wideman, Esq., Assistant Attorney General
Ernest L. Carter, M.D., Ph.D. Prince George's County Health Officer
Mohan Suntha, MD, President and CEO, UMMS
Aaron Rabinowitz, Esq., General Counsel, UMMS
Sandra H. Benzer, Esq., General Counsel, UM Capital Region Health
Kristin Jones-Bryce, Chief of Staff and Senior VP, External Affairs, UMMS
Donna Jacobs, Senior VP, Government, Regulatory Affairs & Community Health, UMMS
Joseph L. Wright, MD, MPH, FAAP, Interim President & CEO, UM Capital Region Health
Jay Mittal, Vice President, UM Capital Region Health

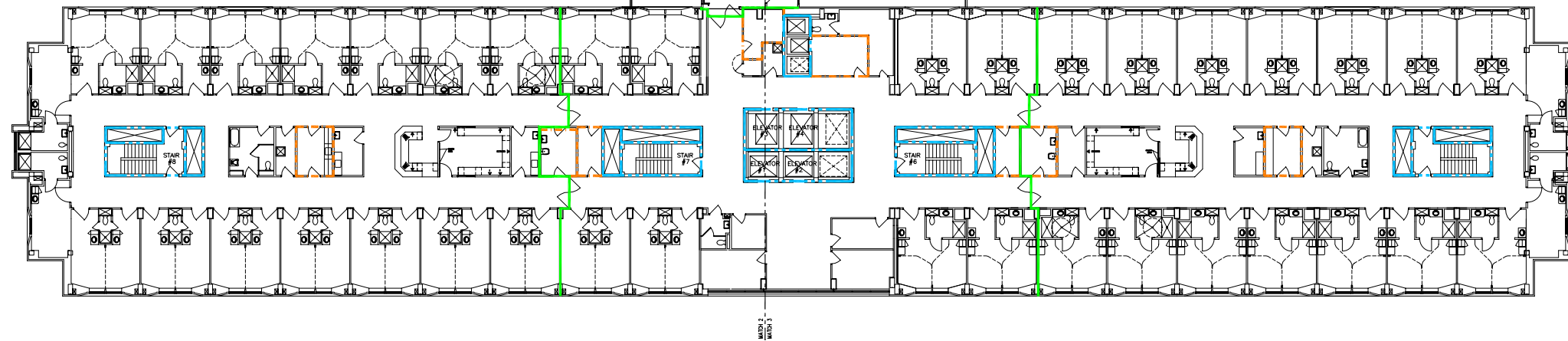
EXHIBIT 1

SK-1





- GENERAL NOTES:**
1. BUILDING IS FULLY SPRINKLER PROTECTED.
 2. ENTIRE FLOOR EVALUATED BASED ON CHAPTER 19 OF THE LIFE SAFETY CODE FOR EXISTING HEALTH CARE.
 3. EXIT ACCESS CORRIDOR WALLS THAT ARE "SMOKE RESISTING" PARTITIONS ARE NOT SHOWN FOR CLARITY.

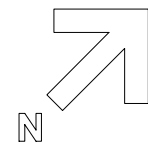



SK-2

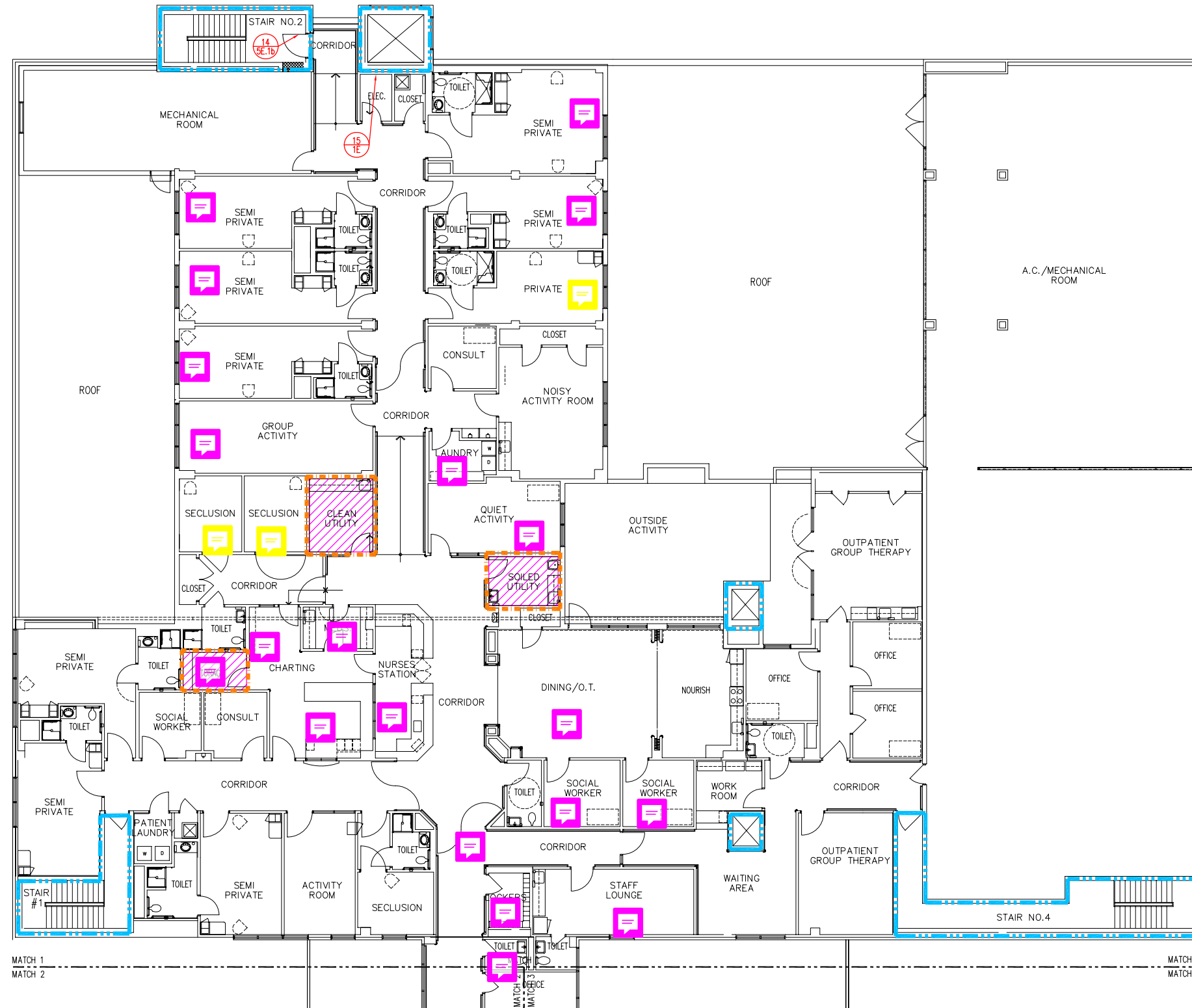


SK-3

RATED WALL LEGEND	
	1-HR. FIRE RATED WALL
	2-HR. FIRE RATED WALL
	SMOKE BARRIER
	SMOKE PARTITION



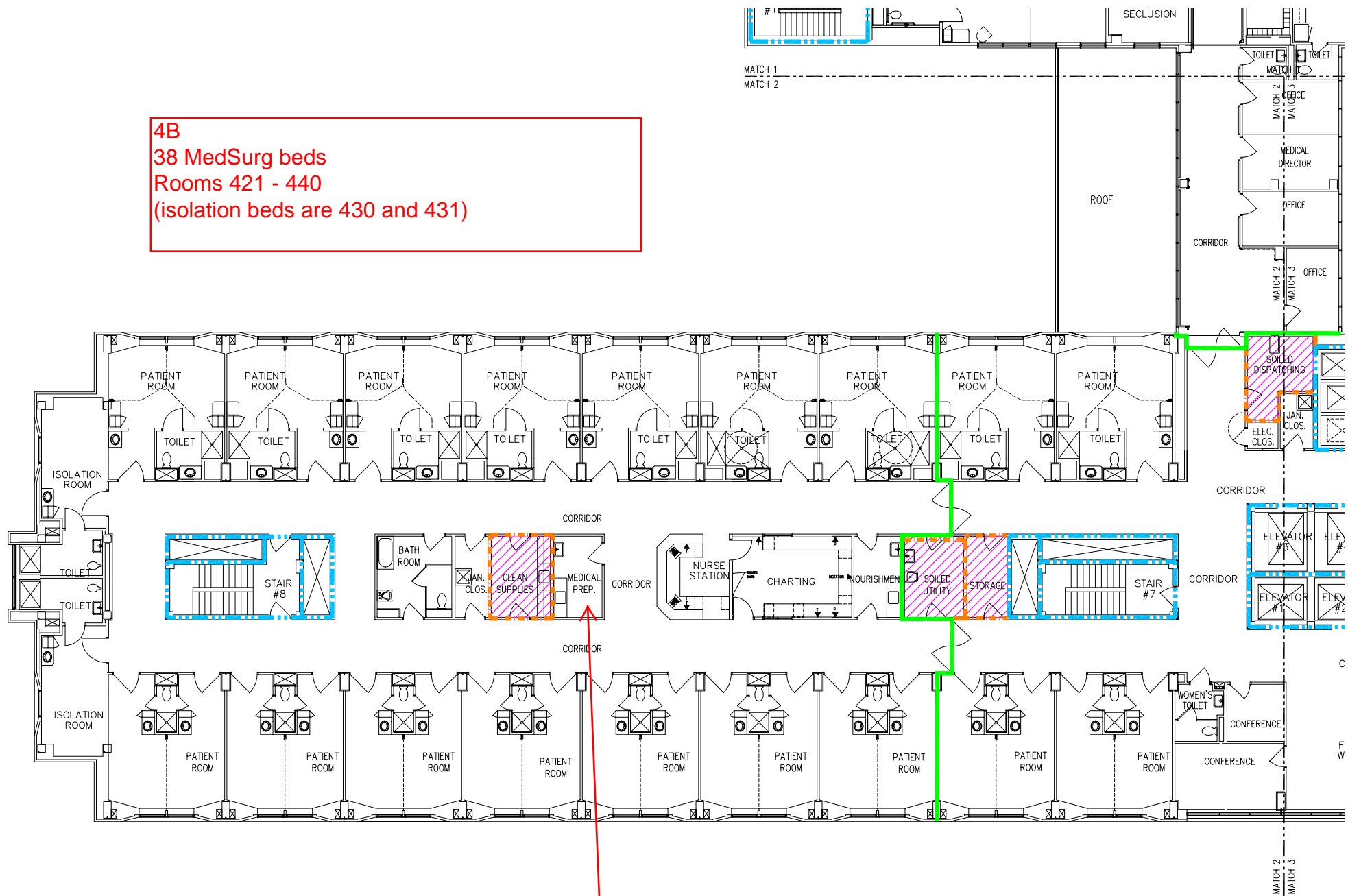
FLOOR FOURTH FLOOR		PLAN KEY PLAN		DRAWN BY M.W.	
 DIMENSIONS HEALTHCARE SYSTEMS LAUREL REGIONAL HOSPITAL LAUREL, MARYLAND		377 E. BUTTERFIELD RD., STE. 900 LOMBARD, IL 60148 www.otginc.com		8005 HARFORD RD., BALTIMORE, MD 21234-5701 www.eblengineers.com	
				CHECKED BY B.S.	
				SHEET KEY-1 OF 1	



LIFE SAFETY LEGEND		DEFICIENCY ATTRIBUTE ID# (see reports) SOC#
	1-HR. FIRE RATED WALL	
	2-HR. FIRE RATED WALL	
	SMOKE BARRIER	
	SMOKE PARTITION	
	SUITE BOUNDARY	
	HAZARDOUS ROOM	

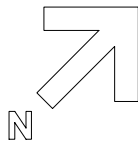
FLOOR FOURTH FLOOR	PLAN LIFE SAFETY PLAN	DRAWN BY M.W.
		CHECKED BY B.S.
DIMENSIONS HEALTHCARE SYSTEMS LAUREL REGIONAL HOSPITAL LAUREL, MARYLAND <small>ADVANCED TECHNOLOGIES GROUP, INC. 377 E. BUTTERFIELD RD., STE. 900 LOMBARD, IL 60148 www.atginc.com</small>		SHEET SK-1 OF 3
<small>8005 HARFORD RD., BALTIMORE, MD 21234-5701 www.eblengineers.com</small>		EBL FIRE ENGINEERING
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4B
 38 MedSurg beds
 Rooms 421 - 440
 (isolation beds are 430 and 431)

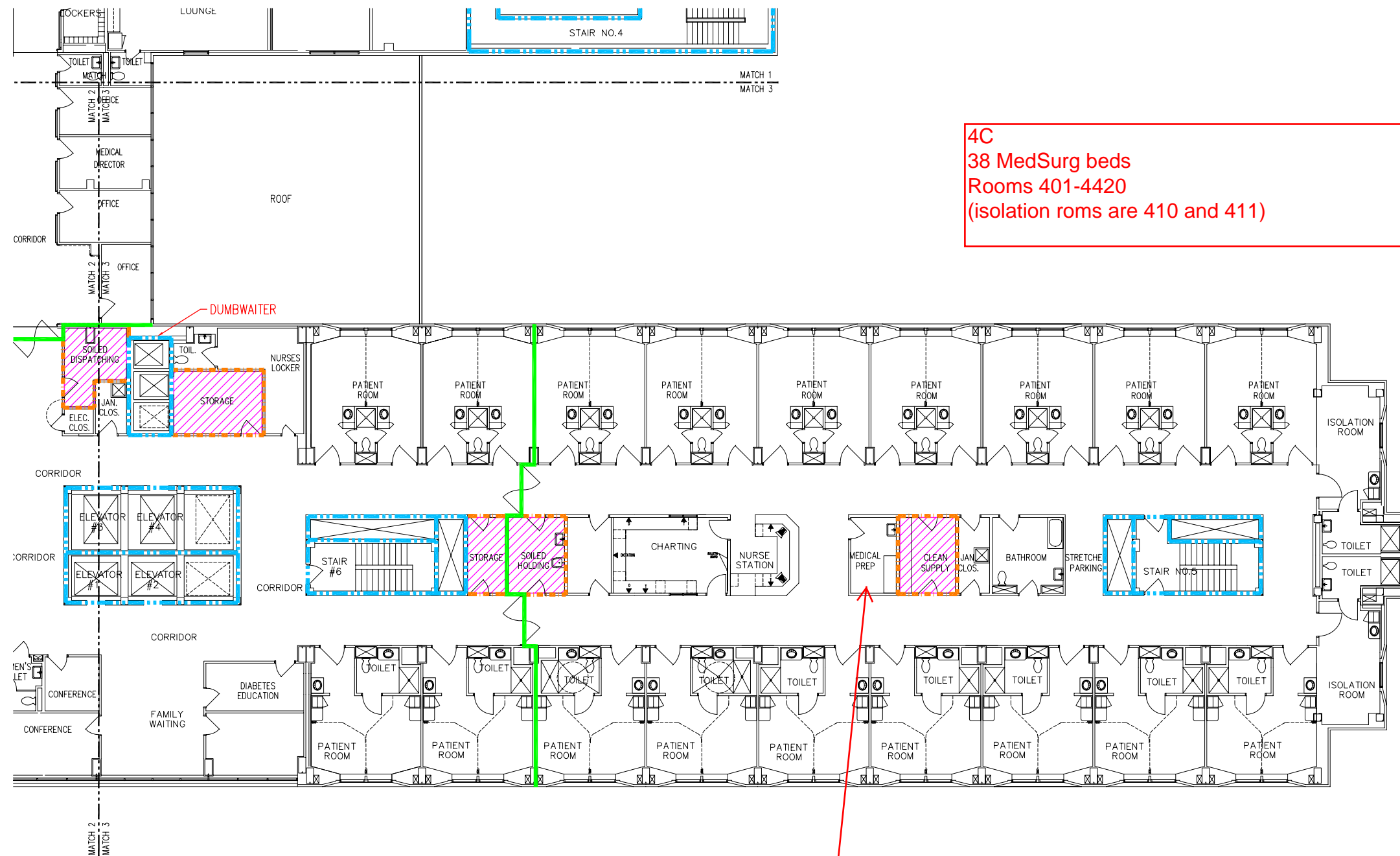


MEDICATION ROOM

LIFE SAFETY LEGEND		DEFICIENCY ATTRIBUTE ID# (see reports) SOC#
	1-HR. FIRE RATED WALL	
	2-HR. FIRE RATED WALL	
	SMOKE BARRIER	
	SMOKE PARTITION	
	SUITE BOUNDARY	
	HAZARDOUS ROOM	



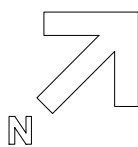
FLOOR FOURTH FLOOR	PLAN LIFE SAFETY PLAN	DRAWN BY M.W.
DIMENSIONS HEALTHCARE SYSTEMS LAUREL REGIONAL HOSPITAL LAUREL, MARYLAND <small>ADVANCED TECHNOLOGIES GROUP, INC. 377 E. BUTTERFIELD RD., STE. 900 LOMBARD, IL 60148 www.atginc.com</small>		CHECKED BY B.S.
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4C
 38 MedSurg beds
 Rooms 401-4420
 (isolation rooms are 410 and 411)

MEDICATION ROOM

LIFE SAFETY LEGEND		DEFICIENCY ATTRIBUTE ID# (see reports) SOC#
	1-HR. FIRE RATED WALL	
	2-HR. FIRE RATED WALL	
	SMOKE BARRIER	
	SMOKE PARTITION	
	SUITE BOUNDARY	
	HAZARDOUS ROOM	



FLOOR FOURTH FLOOR	PLAN LIFE SAFETY PLAN	DRAWN BY M.W.
DIMENSIONS HEALTHCARE SYSTEMS LAUREL REGIONAL HOSPITAL LAUREL, MARYLAND ADVANCED TECHNOLOGIES GROUP, INC. 377 E. BUTTERFIELD RD., STE. 900 LOMBARD, IL 60148 www.atginc.com		CHECKED BY B.S. SHEET SK-3 OF 3
EBL FIRE ENGINEERING 8005 HARFORD RD., BALTIMORE, MD 21234-5701 www.eblengineers.com		
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DEPARTMENT OF HEALTH

Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Dennis R. Schwader, Acting Secretary

Office of Health Care Quality
7120 Samuel Morse Drive, Second Floor
Columbia, MD 21046

December 17, 2020

Ben Steffen, Executive Director
Maryland Health Care Commission
4160 Patterson Avenue
Baltimore, MD 21215

Dear Mr. Steffen,

As you are aware, on March 5, 2020, Governor Hogan issued a proclamation that a state of emergency and a catastrophic health emergency exists in Maryland, due to the COVID-19 outbreak. Based on the increased need for acute general hospital beds due to the COVID-19 pandemic, the Office of Health Care Quality is requesting that the Maryland Health Care Commission apply its authority under COMAR 10.24.01.20 to grant an emergency certificate of need to University of Maryland Capitol Regional Health – Prince George’s Medical Center.

University of Maryland Capitol Regional Health – Prince George’s Medical Center has requested approval and licensure for a 10 (ten) inpatient bed psychiatric unit for COVID positive patients to be located in the alternate care site located at the facility previously licensed as Laurel Regional Medical Center. The unit is being renovated and should become operational no later than January 15, 2021.

The Office of Health Care Quality recommends this certificate of need should be approved on an emergency basis, and based on the information provided by the hospital, these 10 (ten) beds can be provisionally licensed as part of University of Maryland Capitol Regional Health –Prince George’s Medical Center.

Sincerely,

Renee B. Webster

Renee B. Webster, Deputy Director, Federal Programs

MARYLAND HEALTH CARE COMMISSION

Emergency Certificate of Need

TO: Mohan Suntha, M.D., President & CEO
University of Maryland Medical System Corporation
250 W. Pratt Street
Baltimore, Maryland 21201

December 18, 2020
Date

Nathaniel Richardson, Jr., President & CEO
University of Maryland Capital Region Health System
3001 Hospital Drive
Cheverly, Maryland 20785

RE: Establishment of a Temporary 10-Bed Acute Inpatient
Psychiatric Unit for COVID-19 Positive Patients at the
Temporary Remote Location of UM Prince George's
Hospital Center at UM Laurel Medical Center

EM-H20-16-039
Docket No.

DESCRIPTION OF EMERGENCY PROJECT

This Emergency Certificate of Need authorizes Dimensions Health Corporation d/b/a University of Maryland (UM) Capital Region Health to establish temporary inpatient bed capacity consisting of ten acute inpatient psychiatric beds for COVID-19 positive patients at the temporary remote location of the UM Prince George's Hospital Center¹ at the facility currently known as UM Laurel Medical Center, 7400 Van Dusen Road, Laurel (Prince George's County), Maryland (the Site). The ten beds will be located on Unit 4A of the Site, which previously was used for behavioral health services prior to the conversion of the former UM Laurel Regional Hospital to a freestanding medical facility. The total project cost, including facilities work and purchase of equipment, is estimated to be approximately \$500,000, which UM Capital Region Health intends to fund with available cash. UM Capital Region Health anticipates that the ten acute inpatient psychiatric beds will be operational no later than January 15, 2020 and states that it will only operate the 10-bed inpatient psychiatric unit for COVID-19 positive patients only as long as the beds are needed.

¹¹ On March 22, 2020, the Executive Director of the Maryland Health Care Commission (MHCC or Commission) issued an Emergency Certificate of Need (Docket No. EM-H20-16-004) to Dimensions Health Corporation d/b/a UM Capital Region Health for the establishment of a 135-bed temporary remote location of UM Prince George's Hospital Center at the facility previously known as Laurel Regional Hospital. The Emergency Certificate of Need was confirmed by the Commission at a public meeting on April 3, 2020.

ORDER

Upon consideration of the request of UM Capital Region Health, suitably detailed information provided by the Office of Health Care Quality (OHCQ) and others, and consultation with the Chairman of the Maryland Health Care Commission, Ben Steffen, MHCC Executive Director, determined that the lack of sufficient inpatient bed capacity at Maryland general hospitals resulting from COVID-19 presents a hazard to patients and/or employees, as provided in COMAR 10.24.01.20A.

Therefore, it is, on December 18, 2020, ordered by the Executive Director that an Emergency Certificate of Need issue for the project. It is further ordered that the requirement in COMAR 10.24.01.20C that UM Capital Region Health file an application for Certificate of Need for the inpatient beds established in this Emergency Certificate of Need is suspended by the Executive Director pursuant to COMAR 10.24.01.10A(2) until at least 30 days after the termination of the state of emergency declared by Governor Lawrence J. Hogan, Jr. on March 5, 2020.

Approvals by Maryland Department of Health

This Emergency Certificate of Need does not constitute a license or replace any approvals for other aspects of the project that are required by the OHCQ or other divisions of the Maryland Department of Health to operate inpatient bed capacity at the Site.

Further Action

This Emergency Certificate of Need will be considered for confirmation by the Maryland Health Care Commission at its next scheduled meeting on January 21, 2021. This Emergency Certificate of Need initially remains in effect for a maximum of 165 days, as provided in COMAR 10.24.01.20C, or until 30 days after the termination of the state of emergency declared by Governor Lawrence J. Hogan, Jr. on March 5, 2020. The Emergency CON may be extended beyond that date for good cause shown.

CONDITION OF EMERGENCY CERTIFICATE OF NEED

Because it is important that the Maryland Health Care Commission and the Office of Health Care Quality know when the inpatient beds approved in this Emergency Certificate of Need are available for patients, it is further

ORDERED that UM Capital Region Health shall advise MHCC staff and OHCQ staff when the inpatient beds become operational at the Site, disclosing: (1) the number of beds in this Emergency CON that become available for patients; and (2) the date the beds become available. The hospital shall: notify MHCC staff by sending an email with this information to ruby.potter@maryland.gov; and notify OHCQ staff of this temporary increase in its licensed bed

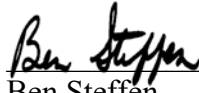
Docket No. EM-H-16-039

December 18, 2020

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capacity by completing OHCQ's Application for Temporary Adjustment of Hospital Beds, which is located at: <https://app.smartsheet.com/b/form/c7e6598943c84dd2ba9e39859a9f3383>.

MARYLAND HEALTH CARE COMMISSION



Ben Steffen
Executive Director

cc: Dennis R. Schrader, Acting Secretary of Health
Patricia T. Nay, M.D., Executive Director, Office of Health Care Quality
Renee Webster, Deputy Director, Federal Programs, Office of Health Care Quality
Katie Wunderlich, Executive Director, HSCRC
Ernest L. Carter, M.D., Health Officer, Prince George's County
Thomas C. Dame, Esquire
James C. Buck, Esquire
Mallory Regenbogen, Esquire



Mr. Ben Steffen
Executive Director
Maryland Health Care Commission
4160 Patterson Avenue
Baltimore, Maryland 21215

Re: Atlantic General Hospital Corporation: Request for Emergency Certificate of Need to Expand Licensed Bed Capacity at Berlin Nursing and Rehabilitation Center

Dear Mr. Steffen:

Pursuant to the Maryland Health Care Commission (“Commission”) regulations at COMAR 10.24.01.20, I am writing you to request an Emergency Certificate of Need (“ECON”) for Atlantic General Hospital Corporation (“AGH”) to annex additional MSGA licensed bed capacity by converting existing space at an existing adjacent health care facility (rehabilitation facility). This request is prompted by the proactive steps initiated by Governor Hogan, Secretary Neal, the Commission and others with the March 5, 2020 Declaration of State of Emergency and Existence of Catastrophic Health Emergency – COVID-19 by Governor Hogan.

AGH received an ECON previously for the same alternate care site on April 14, 2020 (Docket Number: EM-H20-23-025). That ECON was subsequently relinquished in July, 2020.

Current AGH Certificate of Need and Licensed Bed Capacity

AGH was granted a Certificate of Need (CON) by the Maryland Health Resources Planning Commission (predecessor to the Commission) on July 16, 1991 (Docket No. 88-23-1488). This CON approved 62 hospital beds for the new facility. Currently, AGH is licensed for 66 MSGA acute care beds through a temporary emergency increase in the licensed bed capacity by the Office of Healthcare Quality (OCHQ). This temporary increase in bed licensure consumes all of the hospital bed capacity inside the AGH facility.

Annexation of 16 Additional Beds at Adjacent Facility

AGH hereby applies for an ECON for the purpose of establishing a temporary alternate care site of AGH in an existing, currently closed, semi-private, first floor unit at Berlin Nursing and Rehabilitation Center (BNRC), located adjacent to AGH at 9715 Healthway

Drive, Berlin, MD 21811. *Attachment 1* is an executed Letter of Agreement between AGH and BNRC, allowing for AGH to rent and utilize the proposed space for this purpose. This unit at BNRC has the capacity for up to 16 semi-private, MSGA acute hospital beds. If this ECON is approved and the additional beds established, AGH intends to operate the temporary remote location as an inpatient hospital department of AGH for the duration of the State of Emergency declaration by Governor Hogan for the COVID-19 pandemic.

The temporary beds will be occupied by low-acuity medical surgical patients providing more COVID-19 patient capacity in the hospital. Since the new temporary beds are planned for an existing health care facility, and since facility modifications were made in April, 2020 for the ECON that was previously approved, current modifications will only be in the way of equipment relocation and preparation. It is anticipated that the medical surgical beds can be available for occupancy by January 8, 2021, in preparation for the anticipated post-holidays COVID-19 surge peak. Upon ECON approval and subsequent licensure of these proposed hospital beds through the OHCQ, AGH's bed capacity will increase to 82 beds.

Estimated Project Cost

The cost of the project will not exceed the hospital capital threshold requiring a CON from the Maryland Health Care Commission under MARYLAND CODE, HEALTH-GENERAL § 19- 120(a)(4). The total project costs, including facilities work, and purchase of equipment, added operational cost due to facility services, etc., are estimated to be approximately \$166,320. This cost is itemized as follows:

Capital Costs:

Minor equipment (Including IT Equipment):	\$10,000
Other Capital equipment (IV Pumps, Oxygen Regulators, etc.):	\$25,000

Operating Costs – Facility (assumes 4 months, 81% occupancy):

BNRC Rental Agreement (\$7,750 per month, 12 Months):	\$93,000
\$22/day per patient x 13 patients x 120 days =	\$34,320
Imaging equipment rental (assuming 4 months):	<u>\$4,000</u>

Total Costs: \$166,320

We understand that based on guidance you have issued on the Commission's behalf, the requirement under COMAR 10.24.01.20C for AGH to file a full Certificate of Need application is suspended until at least thirty (30) days after the initially declared and subsequently extended State of Emergency of March 5, 2020 is terminated, and that any

Ben Steffen, Executive Director

December, 2020

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ECON does not expire until thirty (30) days after the declared state of emergency is terminated or 165 days after its issuance, whichever is later.

I welcome any questions you have regarding this application, and I look forward to your prompt action.

Sincerely,



Michael A. Franklin, FACHE
President/CEO

cc: Katie Wunderlich, Executive Director, HSCRC
Suellen Wideman, Assistant Attorney General

Ben Steffen, Executive Director
December, 2020
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Attachment 1



December 16, 2020

Atlantic General Hospital Corporation
9733 Healthway Drive
Berlin, MD 21811
Attention: Michael Franklin, FACHE President/CEO

Re: Future Alternate Care Site Agreement

Dear Mr. Franklin:


To follow up on our previous discussions, this letter confirms our mutual understanding that in the event Atlantic General Hospital Corporation ("Hospital") requires additional beds due to a surge in COVID-19 cases, Berlin Health Care, LLC will work with Hospital to provide beds pursuant to an *Alternate Care Site Agreement*. If and when Hospital's need for additional beds arises, both parties agree to enter into an *Alternate Care Site Agreement* that is substantially similar to the enclosed letter agreement.

Please sign below and return a copy to me to indicate your understanding and agreement with the contents of this letter.


Very truly yours,

Angie Gozali
Administrator
Berlin Health Care, LLC

Enclosure

By: 
Name: Angie Gozali
Title: Administrator

Accepted and agreed:

Atlantic General Hospital Corporation
By: 
Name: Michael Franklin, FACHE
Title: President/CEO

9715 Healthway Dr • Berlin, MD 21811
P: 410.641.4400 • F: 410.641.0011
www.berlinnursingandrehab.com

12/17/2020

Atlantic General Hospital Corporation
9733 Healthway Drive
Berlin, MD 21811
Attention: Michael Franklin, FACHE
President/CEO

Re: Alternate Care Site

Dear Mr. Franklin:

This will confirm the agreement (this "Agreement") between Berlin Health Care, LLC ("Facility Operator") and Atlantic General Hospital Corporation (the "Hospital") regarding the terms and conditions upon which the Hospital shall be permitted to utilize a portion of the Berlin Nursing and Rehabilitation Center, located at 9715 Healthway Drive, Berlin, MD 21811 (the "Facility"), as an alternate care site ("ACS") for the transfer of general medical (non-COVID-19, non-ICU) patients during the current public health emergency.

1. The parties hereby designate that portion of the first floor of the Facility highlighted in yellow on the floor plan attached as Exhibit "A" hereto as the ACS for purposes of this Agreement. Hospital personnel, patients, and visitors shall enter and exit the ACS only through the exit door directly adjoining the ACS as shown on Exhibit "A" and shall not have access to any other areas within the Facility. Hospital has inspected the ACS and accepts the ACS in its "as-is" condition.

2. The ACS shall be made available for use by the Hospital for a term (the "Term") commencing on **January 1, 2021** (the "Commencement Date"), and ending on the earlier of (i) the one year anniversary of the date of this Agreement, and (ii) the date as of which this Agreement shall have been terminated by either party as set forth below.

3. The Hospital shall be solely responsible for the medical treatment and care of all patients in the ACS, as well as all ancillary services pertaining to such care, including without limitation, all medications and pharmacy services, x-ray, laboratory, wound care, and patient transportation, all of which treatment and services shall be performed by Hospital staff under Hospital's supervision. All oxygen requirements for the ACS, all medical and non-medical supplies, and all necessary office and medical equipment for the ACS shall be furnished by the Hospital. Hospital also shall be responsible for the proper collection, pickup and disposal of all medical waste generated by the ACS, utilizing bins supplied by the Hospital. Hospital shall identify and designate a Hospital employee to manage the ACS activities, and shall provide the Facility Operator with such employee's contact information.

4. The Facility Operator shall provide all housekeeping, laundry, utilities and internet service to the ACS. All utilities and internet service shall be in accordance with the existing service available within the ACS. Facility Operator shall provide food services to the ACS in accordance with dietary specifications to be provided by the Hospital, provided that any special dietary requirements outside the customary food services of the Facility will be the responsibility of the Hospital. The Facility Operator shall provide Hospital with contact information for the Facility's administrator.

5. Prior to any use or occupancy of the ACS, Hospital shall provide to the Facility Operator evidence of general and professional liability insurance, naming Facility Operator as an additional insured, as well as workers' compensation insurance. Hospital agrees to indemnify and hold harmless Facility Operator, its officers, directors, parent companies and affiliates from and against (i) any claims, proceedings, investigations, and liabilities (including reasonable attorneys' fees) arising out of the Hospital's use and/or occupancy of the ACS, and (ii) any reduction of the Facility's reimbursed per diem capital rate as a direct result of the Hospital's use and/or occupancy of the ACS. This indemnification obligation shall survive the expiration or any termination of this Agreement.

6. The Hospital shall provide all required notifications and filings to governmental authorities, and obtain all necessary governmental approvals and authorizations, for the operation of the ACS by the Hospital.

7. In order to cover the ACS's allocable portion of the lease rent, taxes, insurance, housekeeping, and maintenance costs of the Facility, Hospital shall pay to Facility Operator a fixed rent charge in monthly installments of Seven Thousand Seven-Hundred Fifty Dollars (\$7,750.00) which installments shall be due and payable in advance beginning on the Commencement Date and continuing on the first business day of each calendar month thereafter during the Term; provided, however, if the Commencement Date or the date on which this Agreement terminates occurs on a day which is not the first or the last day of a calendar month, as the case may be, then the fixed rent for the month in which this Lease commences or terminates shall be prorated.

8. In order to compensate Facility Operator for the cost of providing laundry and food services to the ACS, Hospital shall pay to Facility Operator, in addition to the fixed rent amount set forth above, a services charge in the amount of \$22.00 per patient day, which amount shall be billed by Facility Operator monthly in arrears and shall be paid by Hospital within thirty (30) days after presentation of Facility Operator's invoices for same. Hospital agrees to provide Facility Operator, within ten (10) days after the close of each calendar month during the Term, and within ten (10) days after the termination of this Agreement, a statement of the daily patient census of the ACS for the month (or partial month, in the case of the termination or expiration hereof) then ended.

9. This Agreement may be terminated at any time by either party hereto upon thirty (30) days' written notice to the other party hereto. Any such termination shall not affect the rights and obligations of the respective parties hereunder with respect to periods prior to the effective date of such termination. On termination, Hospital shall remove all of its moveable

equipment and supplies, and shall leave the ACS in good, broom-clean condition, reasonable wear and tear excepted. Hospital shall repair any damage beyond normal wear and tear.

Please indicate your agreement with the foregoing by signing and returning to the undersigned a copy of this Agreement. This Agreement may be executed in two counterparts, which taken together shall constitute one and the same instrument and any of the parties or signatories hereto may execute this Agreement by signing any such counterpart. Copies of original signatures sent by facsimile, portable document format (.pdf), or other electronic imaging means shall be deemed to be originals for all purposes of this Agreement.

Very truly yours,

Berlin Health Care, LLC

By: _____

Name: _____

Title: _____

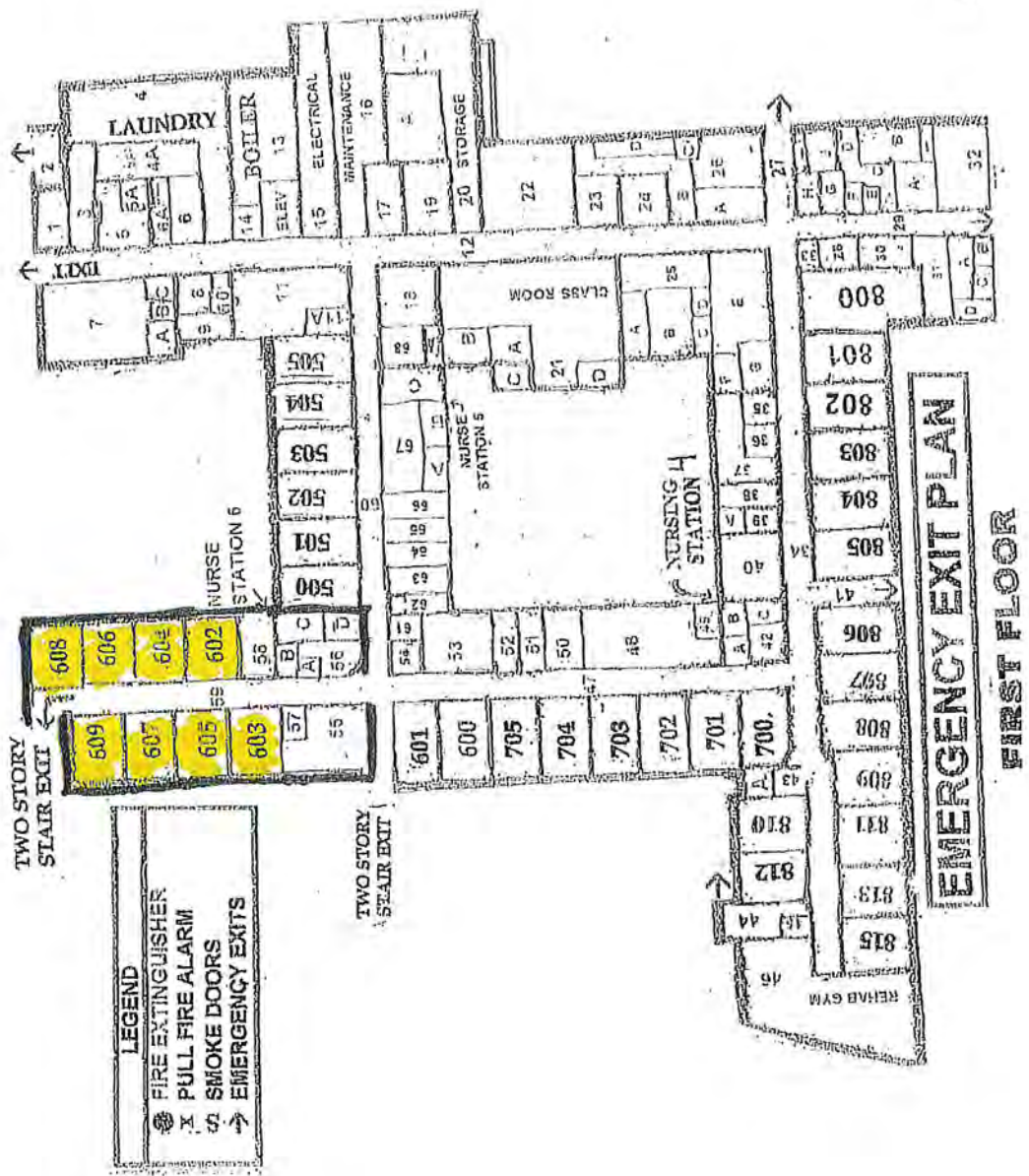
Accepted and agreed:

Atlantic General Hospital Corporation

By:  _____

Name: Michael Franklin, FACHE

Title: President/CEO





Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Robert R. Neall, Secretary

Office of Health Care Quality
7120 Samuel Morse Drive, Second Floor
Columbia, MD 21046

December 31, 2020

Ben Steffen, Executive Director
Maryland Health Care Commission
4160 Patterson Avenue
Baltimore, MD 21215

Dear Mr. Steffen,

As you are aware, on March 5, 2020, Governor Hogan issued a proclamation that a state of emergency and a catastrophic health emergency exists in Maryland, due to the COVID-19 outbreak. Based on the increased need for acute general hospital beds due to the COVID-19 pandemic, the Office of Health Care Quality is requesting that the Maryland Health Care Commission apply its authority under COMAR 10.24.01.20 to grant an emergency certificate of need to Atlantic General Hospital.

Atlantic General Hospital has requested approval and licensure for 16 inpatient MSGA beds for low acuity patients to be located in 8 semi-private rooms located at the adjacent Berlin Nursing and Rehabilitation Center at 9715 Healthway Drive in Berlin. The hospital has entered into an agreement with BNRC to lease and operate these 16 beds. These beds will be available for operation by April 30, 2020.

The Office of Health Care Quality recommends this certificate of need should be approved on an emergency basis, and based on the information provided by the hospital, these beds can be provisionally licensed as part of Atlantic General Hospital.

Please contact me if you have any questions at (410)402-8116 or (443)681-0278.

Sincerely,

Renee B. Webster

Renee B. Webster, Deputy Director, Federal Programs

MARYLAND HEALTH CARE COMMISSION

Emergency Certificate of Need

TO: Michael A. Franklin, FACHE
President/CEO
Atlantic General Hospital
9733 Healthway Drive
Berlin, Maryland 21811

January 4, 2021
Date

RE: Atlantic General Hospital
Establishment of Up To 16 Additional
Inpatient Beds at Berlin Nursing and
Rehabilitation Center

EM-H21-23-040
Docket No.

DESCRIPTION OF EMERGENCY PROJECT

This Emergency Certificate of Need (Emergency CON) authorizes Atlantic General Hospital to establish additional inpatient bed capacity consisting of up to 16 semi-private medical/surgical/ gynecological/addictions (M/S/G/A) beds for low acuity patients to be located in a first floor unit of Berlin Nursing and Rehabilitation Center (Berlin N&R), 9715 Healthway Drive, Berlin (Worcester County) (the Site), which is adjacent to Atlantic General Hospital. The total capital costs of the project are estimated to be \$35,000, with operating costs including rental costs for the Site and equipment bringing the total costs to an estimated \$166,320. This is the same project that was approved by the Executive Director of the Maryland Health Care Commission (Commission) in an Emergency CON (Docket No. EM-H20-23-025) that issued on April 14, 2020 and was confirmed by the Commission on May 21, 2020. Although the hospital completed some facility modifications at the Site, the beds were not needed by Atlantic General Hospital, which subsequently relinquished the April 14, 2020 Emergency CON. Berlin N&R has been granted temporary delicensure of its eight single occupancy CCF beds so that the hospital can again lease the space for 16 temporary M/S/G/A beds. The hospital anticipates that the additional inpatient beds will be brought online by January 8, 2021.

ORDER

Upon consideration of the request of Atlantic General Hospital, suitably detailed information provided by the Office of Health Care Quality (OHCQ) and others, and consultation with the Chairman of the Commission, Ben Steffen, Executive Director, determined that the lack of sufficient inpatient bed capacity at Maryland general hospitals resulting from COVID-19 presents a hazard to patients and/or employees, as provided in COMAR 10.24.01.20A.

Therefore, it is, on January 4, 2021, ordered by the Executive Director that an Emergency Certificate of Need issue for the project. It is further ordered that the requirement in COMAR 10.24.01.20C that Atlantic General Hospital file an application for Certificate of Need for the inpatient beds established in this Emergency Certificate of Need is suspended by the Executive

Director pursuant to COMAR 10.24.01.10A(2) until at least 30 days after the termination of the state of emergency declared by Governor Lawrence J. Hogan, Jr. on March 5, 2020.

Approvals by Maryland Department of Health

This Emergency Certificate of Need does not constitute a license or replace any approvals for other aspects of the project that are required by the OHCQ or other divisions of the Maryland Department of Health to operate inpatient bed capacity at the Site.

Duration of Emergency CON; Further Action

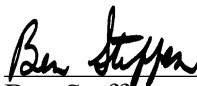
This Emergency Certificate of Need will be considered for confirmation by the Maryland Health Care Commission at its meeting on January 21, 2021, or on another date of which you will be notified. This Emergency Certificate of Need initially remains in effect for a maximum of 165 days, as provided in COMAR 10.24.01.20C, or until 30 days after the termination of the state of emergency declared by Governor Lawrence J. Hogan, Jr. on March 5, 2020. The Emergency CON may be extended beyond that date for good cause shown.

CONDITION OF EMERGENCY CERTIFICATE OF NEED

Because it is important that the Maryland Health Care Commission and the Office of Health Care Quality know when the inpatient beds approved in this Emergency Certificate of Need are available for patients, it is further

ORDERED that Atlantic General Hospital shall advise MHCC staff and OHCQ staff when the inpatient beds become operational at the Site, disclosing: (1) the number of beds in this Emergency CON that become available for patients; and (2) the date the beds become available. The hospital shall: notify MHCC staff by sending an email with this information to ruby.potter@maryland.gov; and notify OHCQ staff of this temporary increase in its licensed bed capacity by completing OHCQ's Application for Temporary Adjustment of Hospital Beds, which is located at: <https://app.smartsheet.com/b/form/c7e6598943c84dd2ba9e39859a9f3383>.

MARYLAND HEALTH CARE COMMISSION



Ben Steffen
Executive Director

cc: Dennis Schrader, Acting Secretary of Health
Renee Webster, Deputy Director, Federal Programs, Office of Health Care Quality
Katie Wunderlich, Executive Director, HSCRC
Rebecca Jones, RN, BSN, Health Officer, Worcester County

Lisa Ishii, MD, MHS
Senior VP of Operations, JHHS
10803 Falls Rd, Suite 2500
Lutherville, MD 21093
410-616-7196 T
410-367-2297 F



Mr. Ben Steffen
ben.steffen@maryland.gov
410-764-3565
Executive Director
Maryland Health Care Commission
4160 Patterson Avenue
Baltimore, Maryland 21215

December 18, 2020

Ruby Potter
ruby.potter@maryland.gov
410-764-3276
Program Manager
Maryland Health Care Commission
4160 Patterson Avenue
Baltimore, Maryland 21215

RE: Emergency Certificate of Need – Activate Green Spring Station Surgery Center Operating Room #6

Dear Mr. Steffen and Ms. Potter:

Pursuant to COMAR 10.24.01.20, the Johns Hopkins Surgery Center Series (JHSCS), requests that the Maryland Health Care Commission (“MHCC”) grant an Emergency Certificate of Need (“CON”) to permit the Green Spring Station Surgery Center (GSSSC) to temporarily activate its 6th operating room. This request is in response to the current state of emergency declared by Governor Lawrence J. Hogan Jr. on March 5, 2020 in response to the COVID-19 pandemic, and his Executive Order of March 16, 2020 directing the Maryland Department of Health and health care facilities to take necessary measures to immediately increase statewide hospital capacity. The purpose of this request is to reduce disruptions in access to scheduled surgical services, as an increasing number of patients require hospitalization for COVID-19.

JHSCS, a Delaware Series that is jointly and equally owned by The Johns Hopkins University and The Johns Hopkins Health System Corporation, owns GSSSC. GSSSC, located at 10803 Falls Road, Pavilion 3, Suite 3100, Lutherville, MD, 21093, obtained a CON on September 20, 2016 to establish an ambulatory surgical facility (“ASF”) comprised of five operating rooms, four non-sterile procedure rooms, as well as shell space for an additional, sixth operating room.

Project Description & Where

JHSCS requests authorization to activate GSSSC’s currently-shelled Operating Room #6, on a temporary basis, in an effort to maximally shift scheduled surgical procedures, appropriate for an

ambulatory setting, currently scheduled at The Johns Hopkins Hospital (JHH), to GSSSC. JHH is actively managing surgical schedules and operating room capacity on the JHH campus, while seeking to maintain sufficient surge capacity. By shifting surgical cases to GSSSC, JHH will be able to reduce the postponement of time-sensitive surgical procedures that can be safely performed in an ambulatory setting. JHSCS estimates the additional OR capacity could enable JHH to shift 25-30 cases to GSSSC per week.

When

JHSCS's request for authorization to activate Operating Room #6 is immediate. The operating room could be ready for use as early as Monday, January 11th, 2021.

Approximate Cost

JHSCS estimates it will cost approximately \$200,000 to equip Operating Room #6 for use on a temporary basis.

Status of Existing Unused Bed Space

Not applicable.

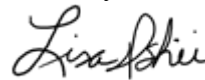
Additional Information

Please see the attached architectural drawing, from GSSSC's CON application, detailing the physical layout of the ASF. Operating Room #6 is shaded in yellow, labeled "Shell (Future OR) 437.00 SF."

I acknowledge that MHCC guidelines state that an Emergency CON is valid for 165 days or until 30 days after the termination of the State of Emergency declared by Governor Hogan, but may be extended for good cause shown. I acknowledge that should JHSCS seek to activate GSSSC's Operating Room #6 on a permanent basis, a formal CON application is required.

Thank you for your consideration. I am available if you have any questions or would like additional information.

Sincerely,



Lisa Ishii, M.D.
Senior Vice President of Operations
Johns Hopkins Health System

cc: via email

Paul Parker, Director, Center for Health Care Facilities Planning & Development

Kevin McDonald, Chief, Certificate of Need

Suellen Wideman, Esq., Assistant Attorney General

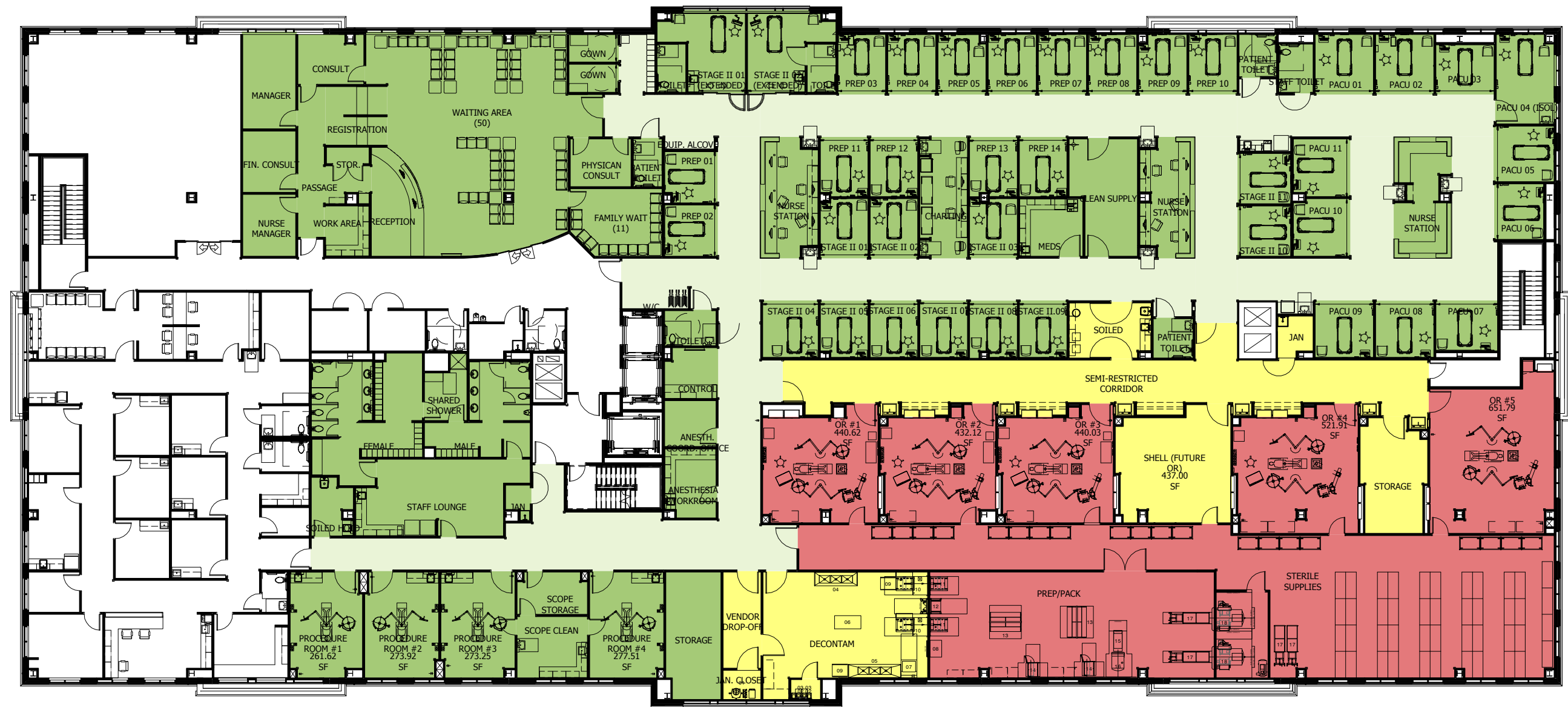
Katie Wunderlich, Executive Director, Maryland Health Services Cost Review Commission

Patricia T. (Tricia) Nay, M.D. Director, Office of Health Care Quality

Renee Webster, Assistant Director for Hospitals, Laboratories and Patient Safety, OHCQ

Gregory Wm. Branch, M.D., MBA, CPE, FACP, Health Officer, Baltimore County

Kevin Sowers, President of the Johns Hopkins Health System



Green Spring Station Surgery Center

CON Submission
August 7, 2015

WILMOT SANZ
ARCHITECTURE
PLANNING





Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Dennis R. Schrader, Acting Secretary

Office of Health Care Quality
7120 Samuel Morse Drive
Second Floor
Columbia, MD 21046-3422

January 5, 2021

Ben Steffen, Executive Director
Maryland Health Care Commission
4160 Patterson Avenue
Baltimore MD 21215

Dear Mr. Steffen,

As you are aware, on March 5, 2020, Governor Hogan issued a proclamation that a state of emergency and a catastrophic health emergency exists in Maryland, due to the COVID-19 outbreak. Based on the increased need for acute general hospital beds due to the COVID-19 pandemic, the Office of Health Care Quality is requesting that the Maryland Health Care Commission apply its authority under COMAR 10.24.01.20 to grant an emergency certificate of need to Green Spring Station Surgery Center to activate and operate an additional operating room.

Green Spring Surgery Center has a certificate of need and license to operate five operating rooms. It has unused shell space for a sixth operating room. The facility is requesting to activate and equip a sixth operating room to divert qualifying surgical cases from The Johns Hopkins Hospital to Green Spring Station Surgery Center during the pandemic. The new operating room will be equipped and operational as of January 11, 2021.

The Office of Health Care Quality recommends this certificate of need should be approved on an emergency basis, for the expansion to six operating rooms at Green Spring Station Surgery Center hospital.

Please contact me if you have any questions at (410)402-8116 or (443)681-0278.

Sincerely,

Renee B. Webster

Renee B. Webster, Deputy Director, Federal Programs

Cc: Leon Carlton, OHCQ

MARYLAND HEALTH CARE COMMISSION

Emergency Certificate of Need

TO: Kevin Sowers, President
Johns Hopkins Health System

January 6, 2021
Date

Lisa Ishii, M.D.
Senior Vice President of Operations
Johns Hopkins Health System

RE: Johns Hopkins Surgery Center Series
Establishment of One Additional Operating
Room at Green Spring Station Surgery Center
10803 Falls Road, Suite 3100
Lutherville, Maryland 21093

EM-MISC21-03-001
Docket No.

DESCRIPTION OF EMERGENCY PROJECT

This Emergency Certificate of Need authorizes Johns Hopkins Surgery Center Series (JHSCS) to establish for temporary use one additional operating room (OR) at Green Spring Station Surgery Center (GSSSC), 10803 Falls Road, Suite 3100, Lutherville, Maryland (the Site). On September 20, 2016, the Maryland Health Care Commission (MHCC) a Certificate of Need (Docket No. 15-03-2369) to JHSCS to establish a five-OR ambulatory surgical facility (ASF) at the Site, and build shell space for a sixth OR, which JHSCS could not complete without returning to the MHCC. JHSCS states that temporary activation of the shelled OR at GSSSC will allow The Johns Hopkins Hospital (JHH) to shift approximately 25-30 surgeries per week to GSSSC, thereby reducing “the postponement of time-sensitive surgical procedures that can be safely performed in an ambulatory setting.” JHSCS estimates that the cost of equipping the operating room on a temporary basis is approximately \$200,000 and that the OR can be ready on January 11, 2021.

ORDER

Upon consideration of the request of JHSCS, suitably detailed information provided by the Office of Health Care Quality (OHCQ) and others, and consultation with the Chairman of the Maryland Health Care Commission, Ben Steffen, MHCC Executive Director, determined that the postponement of time-sensitive surgeries as a result of increasing hospitalization of COVID-19 positive patients at JHH presents a hazard to patients and/or employees, as provided in COMAR 10.24.01.20A.

Therefore, it is, on January 6, 2021, ordered by the Executive Director that an Emergency Certificate of Need issue for the project. It is further ordered that the requirement in COMAR 10.24.01.20C that JHSCS file an application for Certificate of Need for the inpatient beds established in this Emergency Certificate of Need is suspended by the Executive Director pursuant

to COMAR 10.24.01.10A(2) until at least 30 days after the termination of the state of emergency initially declared by Governor Lawrence J. Hogan, Jr. on March 5, 2020.

Approvals by Maryland Department of Health

This Emergency Certificate of Need does not constitute a license or replace any approvals for other aspects of the project that are required by OHCQ or other divisions of the Maryland Department of Health regarding an additional temporary operating room at the Site.

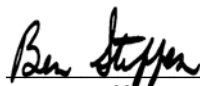
Further Action

This Emergency Certificate of Need will be considered for confirmation by the Maryland Health Care Commission at its next scheduled meeting on January 21, 2021 or at an earlier date of which the hospital is notified. This Emergency Certificate of Need initially remains in effect for a maximum of 165 days, as provided in COMAR 10.24.01.20C, or until 30 days after the termination of the state of emergency initially declared by Governor Lawrence J. Hogan, Jr. on March 5, 2020. The Emergency CON may be extended beyond that date for good cause shown.

CONDITION OF EMERGENCY CERTIFICATE OF NEED

Because it is important that the Maryland Health Care Commission and the Office of Health Care Quality know when the operating room approved in this Emergency Certificate of Need becomes available, it is further ORDERED that JHSCS shall advise Commission staff and OHCQ staff at first use of the temporary sixth operating room at the Site.

MARYLAND HEALTH CARE COMMISSION



Ben Steffen
Executive Director

- cc: Dennis Schrader, Acting Secretary of Health
Renee Webster, Deputy Director, Federal Programs, Office of Health Care Quality
Katie Wunderlich, Executive Director, HSCRC
Gregory Wm. Branch, M.D., Health Officer, Baltimore County

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

January 7, 2021

Mr. Ben Steffen
Executive Director
Maryland Health Care Commission
4160 Patterson Avenue
Baltimore, Maryland 21215

**Re: Adventist HealthCare White Oak Medical Center: Alternate Care Site
in Takoma Park: Docket Number EM-H20-15-036: Request for
Supplemental Emergency Certificate of Need**

Dear Mr. Steffen:

I am writing on behalf of Adventist HealthCare, Inc. d/b/a Adventist HealthCare White Oak Medical Center (“WOMC”), pursuant to the Maryland Health Care Commission (“Commission”) regulations at COMAR 10.24.01.20, to request a supplemental emergency certificate of need (“ECON”), to incorporate and expand on the May 20, 2020 ECON EM-H20-15-036 issued to WOMC (the “May 20, 2020 ECON”). This request is further prompted by the proactive steps initiated by Governor Hogan, Secretary Neal, the Commission and others to respond to COVID 19, pursuant to the state of emergency and catastrophic health emergency.

The May 20, 2020 ECON stated:

This Emergency Certificate of Need authorizes Adventist HealthCare, Inc. d/b/a Adventist Health Care White Oak Medical Center (White Oak) to establish additional inpatient bed capacity consisting of 200 medical/surgical/gynecological/addictions (MSGA) beds as an Alternate Care Site in a temporary remote location on the first through fifth floors and the lower level 1 floor of the former Washington Adventist Hospital, 700 Avenue, Takoma Park (Montgomery County) (the Site).

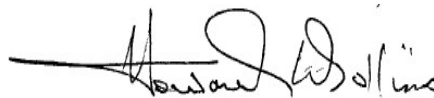
In this request for a supplemental ECON, WOMC wishes to expand the approval to include additional 16 intensive care unit beds to be located in the ACS in Takoma Park.

The Commission's regulation limits an ECON to a capital budget that does not exceed the Commission's statutory Hospital capital threshold under Health—General Article, Section 19-120(a)(4), otherwise triggering a certificate of need requirement. WOMC represents that the total capital cost will be less than \$500,000.00.

We understand, based on guidance you have issued on the Commission's behalf that the requirement under COMAR 10.24.01.20C for the WOMC to file a certificate of need application is suspended until at least thirty (30) days after the declared state of emergency of March 5, 2020 (as extended) is terminated and that any ECON does not expire until thirty (30) days after the declared state of emergency of is terminated or 165 days after its issuance, whichever is later.

We request issuance of this ECON approval to enable WOMC to put these 16 intensive care unit acute hospital beds into service as soon as possible.

Sincerely,



Howard L. Sollins

cc: Dennis R. Schrader, Acting Secretary, Maryland Department of Health
Katie Wunderlich, Executive Director, Maryland Health Services Cost Review Commission
Tricia Nay, M.D. Director, Office of Health Care Quality
Renee Webster, Assistant Director for Hospitals, Laboratories and Patient Safety, Office of Health Care Quality
Paul Parker, Director, Center for Health Care Facilities Planning & Development
Kevin McDonald, Chief, Certificate of Need
Suellen Wideman, Esq., Assistant Attorney General
Ruby Potter, Health Facilities Coordination Office
Travis A. Gayles, MD, PhD, Montgomery County Health Officer
Terry Forde, President and CEO, Adventist HealthCare
John Sackett, Executive VP and COO, Adventist HealthCare
Anthony Stahl, President, Adventist HealthCare White Oak Medical Center
Andrew Nicklas, Esq., Adventist Health Care



Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Dennis R. Schrader, Acting Secretary

Office of Health Care Quality
7120 Samuel Morse Drive, Second Floor
Columbia, MD 21046

January 9, 2021

Ben Steffen, Executive Director
Maryland Health Care Commission
4160 Patterson Avenue
Baltimore, MD 21215

Dear Mr. Steffen,

As you are aware, on March 5, 2020, Governor Hogan issued a proclamation that a state of emergency and a catastrophic health emergency exists in Maryland, due to the COVID-19 outbreak. Based on the increased need for acute general hospital beds due to the COVID-19 pandemic, the Office of Health Care Quality is requesting that the Maryland Health Care Commission apply its authority under COMAR 10.24.01.20 to grant an emergency certificate of need to Adventist HealthCare White Oak Medical Center to establish an intensive care unit.

Adventist HealthCare White Oak Medical Center has requested approval and licensure for a 16 bed intensive care unit located at the alternate care site previously licensed as Washington Adventist Hospital. The unit is being renovated and equipped and should be available for operation by the middle of January 2021.

The Office of Health Care Quality recommends this certificate of need should be approved on an emergency basis, and based on the information provided by the hospital, these 16 beds can be licensed as part of Adventist HealthCare White Oak Medical Center.

Sincerely,

Renee B. Webster

Renee B. Webster, Deputy Director, Federal Programs

MARYLAND HEALTH CARE COMMISSION

Emergency Certificate of Need

TO: Terry Forde, President & CEO
Adventist Health Care, Inc.

January 10, 2021
Date

Anthony Stahl, President
AHC White Oak Medical Center

RE: Establishment of a 16-bed Intensive Care Unit for COVID-19 Positive Patients at the Alternative Care Site and Temporary Remote Location of Adventist HealthCare, Inc. d/b/a Adventist HealthCare White Oak Medical Center at the Former Site of Washington Adventist Hospital in Takoma Park, Maryland

EM-H21-15-041
Docket No.

DESCRIPTION OF EMERGENCY PROJECT

This Emergency Certificate of Need authorizes Adventist HealthCare, Inc. d/b/a Adventist HealthCare White Oak Medical Center (White Oak) to establish an intensive care unit (ICU) comprised of 16 medical/surgical/gynecological/addictions (MSGA) beds at its remote location, an Alternate Care Site located at the former Washington Adventist Hospital, 7600 Carroll Avenue, Takoma Park (Montgomery County), Maryland (the Site). The Executive Director has previously approved and the Maryland Health Care Commission has affirmed two Emergency Certificates of Need (E-CONs) for White Oak's remote site at Takoma Park. The project in the first E-CON (Docket No. EM-H20-15-008; April 4, 2020) for 63 MSGA beds on the fifth floor¹ of the remote location was not initiated by White Oak as a result of its and the State's ongoing discussions that recognized a greater need for MSGA beds and for an additional Alternate Care Site in the Capital Region Area. On May 19, 2020, White Oak applied for and, on May 20, 2020, the Executive Director issued a second E-CON (Docket No. EM- H20-15-036) approving the establishment of the 200-bed Alternate Care Site at the Site.²

The 16-bed ICU in this third E-CON will be located on the first floor of the Site in space that was an ICU at the former hospital. White Oak estimates that the ICU will be brought online by January 15, 2021, at an estimated cost³ of \$100,000, which will be borne by the State of Maryland.

¹ Of the 63 MSGA beds approved in the first E-CON, 42 were to be located in space on the fifth floor (then and currently) occupied by the separately licensed Adventist Rehabilitation Hospital, with the remaining 21 MSGA beds to be located in a former MSGA inpatient unit on that floor.

² Of the 200 MSGA beds approved for the Alternate Care Site, 123 beds on the third and fourth floors are currently operational and available for patients. Sixty-one of the remaining beds could be make available for patients with non-extensive work. As noted, White Oak states that the 16 beds in the current E-CON application to establish an ICU can be available for inpatients by January 15, 2021.

³ Primarily for equipment.

ORDER

Upon consideration of the request of White Oak, suitably detailed information provided by the Office of Health Care Quality (OHCQ) and others, and consultation with the Chairman of the Maryland Health Care Commission (MHCC), Ben Steffen, MHCC Executive Director, determined that the lack of sufficient inpatient bed capacity at Maryland general hospitals resulting from COVID-19 presents a hazard to patients and/or employees, as provided in COMAR 10.24.01.20A.

Therefore, it is, on January 10, 2021, ordered by the Executive Director that an Emergency Certificate of Need issue for the project. It is further ordered that the requirement in COMAR 10.24.01.20C that White Oak file an application for Certificate of Need for the inpatient beds established in this Emergency Certificate of Need is suspended by the Executive Director pursuant to COMAR 10.24.01.10A(2) until 30 days after the termination of the state of emergency declared by Governor Lawrence J. Hogan, Jr. on March 5, 2020. This application filing date may be extended by the Executive Director.

Approvals by Maryland Department of Health

This Emergency Certificate of Need does not constitute a license or replace any approvals for other aspects of the project that are required by the OHCQ or other divisions of the Maryland Department of Health to operate inpatient bed capacity at the Site.

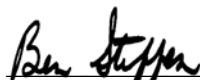
Further Action

This Emergency Certificate of Need will be considered for confirmation by the Maryland Health Care Commission at its next scheduled meeting on June 18, 2020. This Emergency Certificate of Need initially remains valid for a maximum of 165 days, as provided in COMAR 10.24.01.20C, or until 30 days after the termination of the state of emergency declared by Governor Lawrence J. Hogan, Jr. on March 5, 2020. The Emergency CON may be extended beyond that date for good cause shown.

CONDITION OF EMERGENCY CERTIFICATE OF NEED

Because it is important that the Maryland Health Care Commission and the Office of Health Care Quality know when the ICU approved in this Emergency Certificate of Need is available for patients, it is further ORDERED that White Oak shall advise MHCC staff and OHCQ staff of first use of the ICU.

MARYLAND HEALTH CARE COMMISSION



Ben Steffen
Executive Director

Docket No.EM-H21-15-041

January 10, 2021

Page 3

cc: Dennis R. Schrader, Acting Secretary of Health
Patricia T. Nay, M.D., Executive Director, Office of Health Care Quality
Renee Webster, Deputy Director, Federal Programs, Office of Health Care Quality
Katie Wunderlich, Executive Director, HSCRC
Travis A. Gayles, M.D., Ph.D., Health Officer, Montgomery County