

# 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

April 2, 2020

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

**Re: Adventist HealthCare White Oak Medical Center:  
Request for Emergency Certificate of Need: Takoma Park Location**

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 an emergency certificate of need (“ECON”) pertaining to its Takoma Park location (“WOMC/TP”). Specifically, we are requesting an ECON to increase the WOMC acute hospital licensed beds up to an additional 63 beds specifically at Takoma Park, all of which would be put into service in at WOMC/TP (the “Additional WOMC/TP Beds”). The Additional WOMC/TP Beds would be acute hospital beds for patients who need acute hospital services given the surge in COVID-19 patients expected at WOMC.

This request is 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. In particular, 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, in furtherance of the Governor’s March 5, 2020 Proclamation declaring a state of emergency and catastrophic health emergency.

WOMC/TP is, already, licensed as part of WOMC and is actively providing outpatient hospital services under its single license and certification. We understand the Office of Health Care Quality is prepared to amend or waive existing regulations so as to

enable WOMC/TP to place the additional WOMC/TP Beds into service under the existing license.

The Additional WOMC/TP beds will be placed into service on the following units<sup>1</sup>:

- WOMC/TP hosts a 42-bed inpatient rehabilitation facility licensed under Adventist Rehabilitation Hospital of Maryland, Inc. d/b/a Adventist Healthcare Rehabilitation (“AHR”). In a separate request, AHR is seeking to place these 42 inpatient rehabilitation beds into temporary delicensure. WOMC/TP would house 42 of the Additional WOMC/TP acute hospital beds space.
- WOMC/TP would house the remaining 21 of the Additional WOMC/TP beds in space on the 5<sup>th</sup> floor that was previously used for hospital patients.

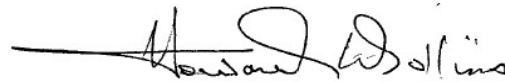
WOMC’s intention is for the additional WOMC/TP Beds to be ready for licensure, accreditation and certification within 10 days, with initiation of inpatient services promptly thereafter as needed. The Commission’s regulation limits an ECON to a capital budget that does not exceed the Commission’s statutory threshold for capital expenditures otherwise triggering a certificate of need requirement. The WOMC/TP building is being evaluated for any renovation, systems enhancement and equipment needs to implement the ECON. WOMC represents that this ECON will not involve a capital expenditure exceeding that threshold. WOMC will discuss with the Maryland Department of Health, the Health Services Cost Review Commission or any other sources of funding whether support is available for the ECON.

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 is terminated. Further, we understand that any ECON does 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. WOMC does reserve the right to determine that the additional WOMC/TP Beds should be taken out of service after the termination of the declared state of emergency and, should that be the case, wishes to have an assurance that any ECON can remain in effect during a wind down and discharge of patients without the need for a certificate of need application should that period go beyond this 30-day post-emergency period.

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<sup>1</sup> We can also share that the urgent care center Adventist HealthCare, Inc. placed into service as a condition of the certificate of need issued to WOMC is planned to be maintained during this period without limiting it to individuals presenting with symptoms that might indicate COVID 19 infection.

Sincerely,

A handwritten signature in black ink, appearing to read "Howard L. Sollins". The signature is fluid and cursive, with a long horizontal line extending to the left from the start of the name.

Howard L. Sollins

cc: Robert R. Neall, Secretary, Maryland Department of Health  
Dennis R. Schrader, Deputy Secretary for Health Care Financing & Chief  
Operating Officer  
Andrew N. Pollak, M.D. 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  
Travis A. Gayles, MD, PhD, Montgomery County Health Officer  
Ruby Potter, Health Facilities Coordination Office  
Terry Forde, President and CEO, Adventist HealthCare  
John Sackett, Executive VP and COO, Adventist HealthCare  
Anthony Stahl, President, WOMC  
Brent Reitz, Administrator WOMC/TP and President Post-Acute Services  
Robert Jepson, Vice President, WOMC



## DEPARTMENT OF HEALTH

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 21046-3422

April 3, 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 Adventist HealthCare White Oak Medical Center.

Adventist HealthCare White Oak Medical Center has requested temporary licensure for a 21 bed medical inpatient unit on the 5<sup>th</sup> Floor of the previously licensed and certified Adventist HealthCare Washington Adventist Hospital that was vacated in August 2019. The hospital would reactivate the unit and outfit it as a medical surgical unit. Additionally, the Adventist HealthCare White Oak Medical Center requests operation of 42 medical beds in its sister hospital, Adventist HealthCare Rehabilitation Hospital located within the same building. The Adventist HealthCare Rehabilitation Hospital would temporarily delicense their beds in order to increase the number of medical beds available for the COVID-19 Crisis. Both units would be available for use in 10 days or on or about April 14, 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 63 beds can be provisionally licensed as part of Adventist HealthCare White Oak Medical Center.

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

Sincerely,

Renee B. Webster, Deputy Director, Federal Programs

# MARYLAND HEALTH CARE COMMISSION

## Emergency Certificate of Need

**TO:** Terry Forde, President & CEO  
Adventist Health Care, Inc.  
820 West Diamond Avenue, Suite 600  
Gaithersburg, Maryland 20878

April 4, 2020  
Date

**RE:** Establishment of 63-Bed Temporary Remote Location of  
Adventist HealthCare, Inc. d/b/a Adventist Health Care  
White Oak Medical Center at the Former Washington  
Adventist Hospital in Takoma Park, Maryland

EM-H20-15-008  
Docket No.

### DESCRIPTION OF EMERGENCY PROJECT

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 63 medical/surgical/gynecological/addictions (M/S/G/A) beds at a temporary remote location on the former Washington Adventist Hospital, 700 Avenue, Takoma Park (Montgomery County) (the Site). The 63 M/S/G/A beds will be located at the Site as follows: 42 beds will be in space that is currently licensed as a special-hospital rehabilitation by Adventist Rehabilitation Hospital of Maryland, Inc. d/b/a Adventist Healthcare Rehabilitation; and the remaining 21 beds will be located in rooms that previously were used for hospital patients on the 5<sup>th</sup> floor. The beds are expected to be brought online by April 14, 2020, and the project's estimated cost is \$500,000.

### 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 April 4, 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 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.

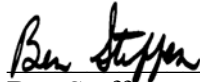
**Approvals by Maryland Department of Health**

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 April 16, 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.

**MARYLAND HEALTH CARE COMMISSION**



\_\_\_\_\_  
Ben Steffen  
Executive Director

cc: Robert R. Neall, 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

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HOWARD L. SOLLINS, SHAREHOLDER  
**Direct Dial:** 410-862-1101  
**Direct Fax:** 443-263-7569  
**E-Mail Address:** hsollins@bakerdonelson.com

April 2, 2020

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

**Re: Adventist HealthCare White Oak Medical Center:  
Request for Emergency Certificate of Need: White Oak Campus**

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 an emergency certificate of need (“ECON”) pertaining to its White Oak Campus (“WOMC/WOC”). 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.

Specifically, we are requesting an ECON to increase the WOMC acute hospital licensed beds up to an additional 59 acute inpatient hospital beds, all of which would be put into service at WOMC/WOC (the “Additional WOMC/WOC Beds”)<sup>1</sup>. The Additional WOMC/WOC Beds would be acute hospital beds, equipped to serve but not limited to, patients with COVID 19 and who need acute hospital services.

The 59 acute hospital beds will be located in existing space in the hospital as follows:

- (a) 12 beds to be located in existing space proximate to the Emergency Department, currently identified as a clinical decision unit.

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<sup>1</sup> WOMC is evaluating options for placing additional acute hospital beds into service should the need arise, as would be included in an updated ECON request.

Mr. Ben Steffen

April 2, 2020

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- (b) 16 beds to be located in space currently used as a Post-Anesthesia Care Unit.
- (c) 8 beds to be located in a current observation unit.
- (d) 23 beds to be located in existing, nonclinical space allocated among floors 2, 3, 4, 5, 6 and 7.

These spaces can readily be converted to use for acute hospital beds as described above. 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 there is no capital cost in excess of the Hospital capital expenditure threshold.

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 is terminated and that any ECON does 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 request issuance of this ECON approval because it would put 12 acute hospital beds into service at WOMC/WOC as soon as possible.

Sincerely,



Howard L. Sollins

cc: Robert R. Neall, Secretary, Maryland Department of Health  
Dennis R. Schrader, Deputy Secretary for Health Care Financing & Chief Operating Officer  
Andrew N. Pollak, M.D. 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

Mr. Ben Steffen

April 2, 2020

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Travis A. Gayles, MD, PhD, Montgomery County Health Officer

Ruby Potter, Health Facilities Coordination Office

Terry Forde, President and CEO, Adventist HealthCare

John Sackett, Executive VP and COO, Adventist HealthCare

Anthony Stahl, President, WOMC

Brent Reitz, Administrator WOMC/TP and President Post-Acute Services

Robert Jepson, Vice President, WOMC



# MARYLAND Department of Health

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

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

April 4, 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 Adventist HealthCare White Oak Medical Center. .

Adventist HealthCare White Oak Medical Center has requested temporary licensure for a 23 inpatient beds that would be added on floors 2, 3,4,5,6 and 7. The beds will be located in rooms that are currently not clinical space but will be renovated to be converted into inpatient bed space. Twelve of the beds will be available by May 31, 2020 with the remaining 11 will be available by the end of June.

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 23 beds can be provisionally licensed as part of Adventist HealthCare White Oak Medical Center.

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:** Terry Forde, President & CEO  
Adventist Health Care, Inc.  
820 West Diamond Avenue, Suite 600  
Gaithersburg, Maryland 20878

April 4, 2020  
Date

**RE:** Adventist HealthCare, Inc. d/b/a Adventist HealthCare  
White Oak Medical Center  
Establishment of 23 Acute Inpatient Beds

EM-H20-15-009  
Docket No.

### DESCRIPTION OF EMERGENCY PROJECT

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 23 medical/surgical/gynecological/addictions (M/S/G/A) beds at 11890 Healing Way, Silver Spring (Montgomery County) (the Site) that are in existing, nonclinical spaces located on floors 2, 3, 4, 5, 6 and 7.<sup>1</sup> The estimated cost of the project is \$5,000,000. Twelve beds will be ready by May 31, 2020, and the remaining 11 rest will be ready by late June 2020.

### 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 April 4, 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 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.

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<sup>1</sup> White Oak has 36 additional beds with piped gases in a Post-Anesthesia Care Unit, a clinical decision unit, and an observation unit for which it will request a temporary increase in licensed beds from OHCQ.

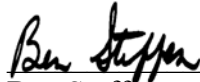
**Approvals by Maryland Department of Health**

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 April 16, 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 Hogan, on March 5, 2020. The Emergency CON may be extended beyond that date for good cause shown.

**MARYLAND HEALTH CARE COMMISSION**



\_\_\_\_\_  
Ben Steffen  
Executive Director

cc: Robert R. Neall, 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

## Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.

### Request for Emergency Alternative Care Licensing

#### Overview:

Over the next two months and into the foreseeable future, the additional demand of patients requiring hospitalization with complications from COVID-19 will likely surpass the capacity of Maryland's acute care hospitals. Governor Hogan and Secretary Neall have announced the need to build capacity of another 6000 beds.

To help address this shortfall, Kaiser Permanente has an opportunity within its delivery system to convert existing advanced clinical spaces to aid in the relief to the acute inpatient care system. By doing so, Kaiser Permanente could provide additional surge capacity, allowing our hospital partners to manage the more acute patients such as ICU and ventilator patients.

- ***What this is:*** The additional capacity would afford the community additional Med./Surg. beds to accommodate patients who require an inpatient stay but do not require the more intensive care that will become increasingly necessary at other hospitals (e.g., ICU, ventilator, etc.). The emergency use of clinical capacity would be triggered by needed capacity by partnering hospitals. In this regard, patients who require lower acuity procedures or observation for periods beyond 24 hours could receive care at the KP facility. And, recovering patients could be transferred from acute care hospitals and observed at the site.
- ***What this isn't:*** Although there may be a need for limited ventilator capacity, it would not rise to an ICU. Nor would the facility provide Labor & Delivery services or trauma services.

To offer this additional service, we are requesting temporary licensing approval to establish a General Hospital (under COMAR 10.07.01.03) for our Gaithersburg, Largo, South Baltimore, and Kensington facilities.

#### Kaiser Permanente Overview

The Kaiser Permanente -- Mid-Atlantic States Region comprises Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. (KFHP) and the Mid-Atlantic Permanente Medical Group (MAPMG). KFHP is licensed by the States of Maryland and Virginia and the District of Columbia (MAS Region) and provides prepaid health care services, which include health insurance to approximately 765,000 Kaiser Permanente members. KFHP contracts with the Mid-Atlantic Permanente Medical Group (MAPMG), a multi-specialty group practice, as well as local community hospitals to provide medical services for its members.

### **Kaiser Permanente Facilities:**

Kaiser Permanente operates 36 medical office buildings (MOBs) in the MAS Region, including six (6) multi-specialty HUB facilities to care for our members. Three of these HUBs are located within Maryland: Gaithersburg, Largo and South Baltimore. These HUBs provide clinic-based primary care and a broad array of medical and surgical specialty care as well as procedural services through their Ambulatory Surgery Centers (ASC) and outpatient procedure suites. Each HUB houses a Clinical Decision Unit (CDU) with 24/7 access designed to treat patients who require care and observation up to two midnights. Additionally, the Kensington Medical Center operates an ASC without the CDU capacity. Ancillary support from Imaging Services, on-site STAT laboratory services and an in-house pharmacy allow for comprehensive diagnostic and treatment capability at each facility.

### **Emergency Licensing Request:**

To provide surge capacity for our patients, we are requesting emergency licensing to extend the length of stay beyond 24 hours for 172 beds in Maryland:

- Gaithersburg – 49 beds;
- Largo – 68 beds; and
- South Baltimore – 45 beds;
- Kensington Medical Center – 10 beds.

***(Note: since our initial discussion, we have added the Kensington Medical Center.)***

This conversion would incorporate our Clinical Decision Units, Ambulatory Surgery Centers, and our Outpatient Procedure Suites. Each of these care areas are equipped with monitors and wall-based medical gases. Additionally, patients would have 24/7 access to the clinical staff, specialty, and ancillary support described above. ***For additional detail, please refer to Exhibits A and B.***

We anticipate that most patients presenting for treatment will be Kaiser Permanente members. However, consistent with EMTALA, we intend to triage, stabilize, treat and transfer, as appropriate, non-KP members who present to our facilities.

In alignment with existing contractual requirements, Kaiser Permanente will continue to send Encounters in EDI standard 837I files to State partners for any services rendered in our facilities to Medicaid members enrolled with Kaiser Permanente.

We appreciate your consideration of our emergency request to offer surge capacity during these unprecedented times, and we look forward to your response.

Information Requested	South Baltimore County Medical Center 1701 Twin Springs Road, Halethorpe, MD	Largo Medical Center 1221 Mercantile Lane, Largo, MD 20774	Gaithersburg Medical Center 655 Watkins Mill Road, Gaithersburg, MD	Kensington Medical Center* 10810 Connecticut Ave., Kensington, MD 20895
Types of patient treated at this facility	This facility will treat a combination of patients to include non-COVID-19 related, COVID-19 positive and negative, and Persons Under Investigation (PUI).	This facility will treat a combination of patients to include non-COVID-19 related, COVID-19 positive and negative, and Persons Under Investigation (PUI).	This facility will treat a combination of patients to include non-COVID-19 related, COVID-19 positive and negative, and Persons Under Investigation (PUI).	This facility will treat a combination of patients to include non-COVID-19 related, COVID-19 positive and negative, and Persons Under Investigation (PUI).
Types of payers served	We will serve Kaiser members across all lines of business including Kaiser privately insured, Medicare Advantage, Medicare Cost, FEHB, and Medicaid Managed Care. For KP non-members receiving services, we will bill their insurer accordingly.	We will serve Kaiser members across all lines of business including Kaiser privately insured, Medicare Advantage, Medicare Cost, FEHB, and Medicaid Managed Care. For KP non-members receiving services, we will bill their insurer accordingly.	We will serve Kaiser members across all lines of business including Kaiser privately insured, Medicare Advantage, Medicare Cost, FEHB, and Medicaid Managed Care. For KP non-members receiving services, we will bill their insurer accordingly.	We will serve Kaiser members across all lines of business including Kaiser privately insured, Medicare Advantage, Medicare Cost, FEHB, and Medicaid Managed Care. For KP non-members receiving services, we will bill their insurer accordingly.
Breakdown on the configuration of the facility: approximately how many beds in OR, Procedure rooms, PACU, etc.	<b>Total Capacity</b> 45 observational beds (+/-10%), configured accordingly: CDU: 19 ASC: 14 Procedure Rooms: 12	<b>Total Capacity</b> 68 observational beds (+/-10%), configured accordingly: CDU: 31 ASC: 27 Procedure Rooms: 10	<b>Total Capacity</b> 49 observational beds (+/-10%), configured accordingly: CDU: 33 ASC: 16	<b>Total Capacity</b> 10 observational beds (+/-10%), configured accordingly: ASC: 10
Date when the facility will come online:	On or before April 27, 2020	On or before April 27, 2020	On or before April 27, 2020	On or before April 27, 2020
Approximate cost to bring the facility on-line	\$400,000	\$600,000	\$400,000	\$99,000
Plans for this space after the end of the state of the emergency	After the state of emergency has ended, within a 30-day transitional period, the facility will revert to its current use.	After the state of emergency has ended, within a 30-day transitional period, the facility will revert to its current use.	After the state of emergency has ended, within a 30-day transitional period, the facility will revert to its current use.	After the state of emergency has ended, within a 30-day transitional period, the facility will revert to its current use.
Hospital(s) where patients will be transferred and a confirmation that transfer agreements already exist.	Transfer agreement(s) are in place: 1. Baltimore Washington MC 2. St Agnes Hospital  If there is a shortage of beds or other potential delays due to surge, patients will be appropriately transferred to the closest hospital with available beds.	Transfer agreement(s) are in place: Holy Cross Hospital - Silver Spring and Germantown  1. Doctor's Community Hospital  If there is a shortage of beds or other potential delays due to surge, patients will be appropriately transferred to the closest hospital with available beds.	Transfer agreement(s) are in place: 1. Shady Grove Adventist Hospital 2. Holy Cross Hospital - Silver Spring and Germantown  If there is a shortage of beds or other potential delays due to surge, patients will be appropriately transferred to the closest hospital with available beds.	Transfer agreement(s) are in place: 1. Holy Cross Hospital - Silver Spring  Hospital Utilized as needed: Suburban Hospital  If there is a shortage of beds or other potential delays due to surge, patients will be appropriately transferred to the closest hospital with available beds.
Your plans for staffing and equipping facility	Each bed has Oxygen, Med Air, Vacuum, Emergency Power outlet and a nurse call bell. The facility has advanced life support and other medical equipment already in use. Where a gap is identified, needed equipment will be relocated from one of Kaiser Permanente temporarily closed medical office buildings. <b>See Exhibit B</b>	Each bed has Oxygen, Med Air, Vacuum, Emergency Power outlet and a nurse call bell. The facility has advanced life support and other medical equipment already in use. Where a gap is identified, needed equipment will be relocated from one of Kaiser Permanente temporarily closed medical office buildings. <b>See Exhibit B</b>	Each bed has Oxygen, Med Air, Vacuum, Emergency Power outlet and a nurse call bell. The facility has advanced life support and other medical equipment already in use. Where a gap is identified, needed equipment will be relocated from one of Kaiser Permanente temporarily closed medical office buildings. <b>See Exhibit B</b>	Each bed has Oxygen, Med Air, Vacuum, Emergency Power outlet and a nurse call bell. The facility has advanced life support and other medical equipment already in use. Where a gap is identified, needed equipment will be relocated from one of Kaiser Permanente temporarily closed medical office buildings. <b>See Exhibit B</b>
Amount of advanced life support available, how many ventilators etc., if known?	This center will not manage high acuity or critical patients, however, if a patient rapidly deteriorates, the following is available for use while the patient is awaiting transfer to a higher level of care: <b>Anesthesia machines - 4</b> <b>Ventilators - 1</b>	This center will not manage high acuity or critical patients, however, if a patient rapidly deteriorates, the following is available for use while the patient is awaiting transfer to a higher level of care: <b>Anesthesia machines - 8</b> <b>Ventilators - 1</b>	This center will not manage high acuity or critical patients, however, if a patient rapidly deteriorates, the following is available for use while the patient is awaiting transfer to a higher level of care: <b>Anesthesia machines - 3</b> <b>Ventilators - 1</b>	This center will not manage high acuity or critical patients, however, if a patient rapidly deteriorates, the following is available for use while the patient is awaiting transfer to a higher level of care: <b>Anesthesia machines - 3</b> <b>Ventilators - 1</b>
Ability to provide encounter data to Medicaid for these hospital visits and also your plans for treating non-KP patients.	In alignment with existing contractual requirements, Kaiser Permanente will continue to send Encounters in EDI standard 837i files to State partners for any services rendered in our Clinical Space to Medicaid members enrolled with Kaiser Permanente.  We anticipate that most patients presenting for treatment will be Kaiser Permanente members. However, consistent with EMTALA we intend to triage, stabilize, and treat non-KP members who present at this medical center.	In alignment with existing contractual requirements, Kaiser Permanente will continue to send Encounters in EDI standard 837i files to State partners for any services rendered in our Clinical Space to Medicaid members enrolled with Kaiser Permanente.  We anticipate that most patients presenting for treatment will be Kaiser Permanente members. However, consistent with EMTALA we intend to triage, stabilize, and treat non-KP members who present at this medical center.	In alignment with existing contractual requirements, Kaiser Permanente will continue to send Encounters in EDI standard 837i files to State partners for any services rendered in our Clinical Space to Medicaid members enrolled with Kaiser Permanente.  We anticipate that most patients presenting for treatment will be Kaiser Permanente members. However, consistent with EMTALA we intend to triage, stabilize, and treat non-KP members who present at this medical center.	In alignment with existing contractual requirements, Kaiser Permanente will continue to send Encounters in EDI standard 837i files to State partners for any services rendered in our Clinical Space to Medicaid members enrolled with Kaiser Permanente.  We anticipate that most patients presenting for treatment will be Kaiser Permanente members. However, consistent with EMTALA we intend to triage, stabilize, and treat non-KP members who present at this medical center.

## Exhibit B

### **Staffing Plan**

To ensure that safe and appropriate care is provided to each patient, each facility (South Baltimore, Largo, Gaithersburg, and Kensington) will be staffed using a “Residency Model” and “Team Nursing Care Model” approach with safe staff compositions and patient care ratios (**See Table 1 below**). Current Kaiser Permanente staff will be reallocated from other locations based on current skills, licensure and certifications, and experience. Each team will compose of a Physician and Nurse Lead, and supported by Registered Nurses, LPN/CA, Clinical Pharmacists, Case Managers, Urgent Care Technicians, and other Ancillary Care Providers. Gaps in skills competencies will be addressed by our Clinical Educators.

	Non-COVID-19	COVID-19
<b>Lead MD   MD Ratio</b>	1:3	1:3
<b>MD   Patient Ratio</b>	1:10	1:10
<b>Lead RN   Team RN Ratio</b>	1:2	1:2
<b>RN/LPN/CA   Patient Ratio</b>	1:4	1:4

*Table 1*



# MARYLAND Department of Health

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

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

April 4, 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 Kaiser Permanente of the MidAtlantic (Kaiser).

Kaiser has requested a temporary license to operate its current patient care centers as inpatient hospitals. The facility would serve Kaiser patients who could be kept inpatient for acute medical treatment. The facility will be staffed by current Kaiser staff and specialists. It will use all current systems in place at Kaiser including medical records and equipment. The centers will serve Kaiser enrollees in but will transfer them to acute care hospitals if they require intensive care services. The Kaiser Permanente Largo Medical Center at 1222 Mercantile Lane, Largo Maryland will be able serve 31 inpatients in the Clinical Decision Unit rooms, 27 beds in the converted ambulatory surgery center and 10 in converted procedure rooms. The center requests approval for a 68 hospital beds.

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 Kaiser, these beds can be temporarily licensed as a hospital by the state of Maryland serving patients insured in a Kaiser health plan.

Please contact me if you have any questions at (410)402-8090 or (443)681-0278.

Sincerely,

*Renee B. Webster*

Renee B, Webster, Deputy Director, Federal Programs

# MARYLAND HEALTH CARE COMMISSION

## Emergency Certificate of Need

**TO:** William N. Wiechmann, Esq.  
Vice President and Regional Counsel  
Mid-Atlantic States Region  
Kaiser Foundation Hospitals / Health Plan  
2101 East Jefferson Street, 7<sup>th</sup> Floor  
Rockville, Maryland 20852

April 5, 2020  
Date

**RE:** Kaiser Permanente Largo Medical Center  
Establishment of a Temporary General Hospital with 68  
Inpatient Beds to Serve Lower Intensity Patients

EM-H20-16-010  
Docket No.

### DESCRIPTION OF EMERGENCY PROJECT

This Emergency Certificate of Need authorizes Kaiser Permanente to establish a temporary general hospital with 68 inpatient beds to be located at the Kaiser Permanente Largo Medical Center (KP Largo), 1221 Mercantile Lane, Largo (Prince George's County) (the Site) to treat a combination of patients who require an inpatient stay but do not require more intensive care available at existing general hospitals. Expected patients will include non-COVID-19 related, COVID-19 positive and negative, and Persons Under Investigation for COVID-19. KP Largo can also admit step-down patients from its hospital partners who need inpatient care, thereby making inpatient beds available for more acute patients at those hospitals.

The project will convert existing advanced clinical space consisting of the Site's clinical decision unit, ambulatory surgery center, and outpatient procedure suites. KP Largo has imaging Services, STAT laboratory services, and an in-house pharmacy on-site. Each bed has oxygen, Med Air, vacuum, an emergency power outlet, and a nurse call bell. The facility has advanced life support and other medical equipment already in use. If a gap in equipment is identified, needed equipment will be relocated from a Kaiser Permanente temporarily closed medical office building. Most patients will be KP members, including Kaiser privately insured, Medicare Advantage, Medicare Cost, FEHB, and Medicaid Managed Care. Consistent with EMTALA, KP Largo will triage, stabilize, treat, and transfer (as appropriate), non-KP members who present at the facility.

KP Largo expects to revert to its former use within 30 days of the termination of the state of emergency declared by Governor Lawrence J. Hogan, Jr. on March 5, 2020. The temporary general hospital is expected to come online on or before April 27, 2020, and has an estimated project cost of \$600,000.

## **ORDER**

Upon consideration of the request of KP Largo, 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 April 5, 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 KP Largo 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 Hogan on March 5, 2020.

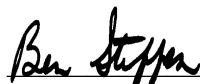
### **Approvals by Maryland Department of Health**

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 April 16, 2020. 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 Hogan on March 5, 2020. The Emergency CON may be extended beyond that date for good cause shown.

## **MARYLAND HEALTH CARE COMMISSION**



Ben Steffen  
Executive Director

cc: Robert R. Neall, 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



# MARYLAND Department of Health

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

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

April 4, 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 Kaiser Permanente of the MidAtlantic (Kaiser).

Kaiser has requested a temporary license to operate its current patient care centers as inpatient hospitals. The facility would serve Kaiser enrollees who could be kept inpatient for acute medical treatment. The facility will be staffed by current Kaiser staff and specialists. It will use all current systems in place at Kaiser including medical records and equipment. The centers will serve Kaiser enrollees in but will transfer them to acute care hospitals if they require intensive care services. Kaiser Permanente Gaithersburg Medical Center at 695 Watkins Mill Road Gaithersburg Maryland will be able serve 49 inpatients in 33 Clinical Decision Unit rooms, 16 beds in the ambulatory surgery center. The facility would have 49 inpatient beds.

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 Kaiser, the Kaiser Permanente Gaithersburg Medical Center can be temporarily licensed as a hospital by the state of Maryland serving patients insured in any Kaiser Health Plan.

Please contact me if you have any questions at (410)402-8090 or (443)681-0278.

Sincerely,

*Renee B. Webster*

Renee B, Webster, Deputy Director, Federal Programs

# MARYLAND HEALTH CARE COMMISSION

## Emergency Certificate of Need

**TO:** William N. Wiechmann, Esq.  
Vice President and Regional Counsel  
Mid-Atlantic States Region  
Kaiser Foundation Hospitals / Health Plan  
2101 East Jefferson Street, 7<sup>th</sup> Floor  
Rockville, Maryland 20852

April 5, 2020  
Date

**RE:** Kaiser Permanente Gaithersburg Medical Center  
Establishment of a Temporary General Hospital with 49  
Inpatient Beds to Serve Lower Intensity Patients

EM-H20-15-011  
Docket No.

### DESCRIPTION OF EMERGENCY PROJECT

This Emergency Certificate of Need authorizes Kaiser Permanente to establish a temporary general hospital with 49 inpatient beds to be located at the Kaiser Permanente Gaithersburg Medical Center (KP Gaithersburg) at 655 Watkins Mill Road, Gaithersburg (Montgomery County) (the Site) to treat a combination of patients who require an inpatient stay but do not require more intensive care available at existing general hospitals. Expected patients will include non-COVID-19 related, COVID-19 positive and negative, and Persons Under Investigation for COVID-19. KP Gaithersburg can also admit step-down patients from its hospital partners who need inpatient care, thereby making inpatient beds available for more acute patients at those hospitals.

The project will convert existing advanced clinical space consisting of the Site's clinical decision unit, ambulatory surgery center, and outpatient procedure suites. KP Gaithersburg has imaging Services, STAT laboratory services, and an in-house pharmacy on-site. Each bed has oxygen, Med Air, vacuum, an emergency power outlet, and a nurse call bell. The facility has advanced life support and other medical equipment already in use. If a gap in equipment is identified, needed equipment will be relocated from a Kaiser Permanente temporarily closed medical office building. Most patients will be KP members, including Kaiser privately insured, Medicare Advantage, Medicare Cost, FEHB, and Medicaid Managed Care. Consistent with EMTALA, KP Gaithersburg will triage, stabilize, treat, and transfer (as appropriate), non-KP members who present at the facility.

KP Gaithersburg expects to revert to its former use within 30 days of the termination of the state of emergency declared by Governor Lawrence J. Hogan, Jr. on March 5, 2020. The temporary general hospital is expected to come online on or before April 27, 2020, and has an estimated project cost of \$400,000.

## **ORDER**

Upon consideration of the request of KP Gaithersburg, 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 April 5, 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 KP Gaithersburg 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 Hogan on March 5, 2020.

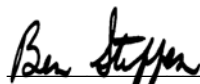
### **Approvals by Maryland Department of Health**

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 April 16, 2020. 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 Hogan on March 5, 2020. The Emergency CON may be extended beyond that date for good cause shown.

## **MARYLAND HEALTH CARE COMMISSION**



\_\_\_\_\_  
Ben Steffen  
Executive Director

cc: Robert R. Neall, 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



# MARYLAND Department of Health

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

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

April 4, 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 Kaiser Permanente of the MidAtlantic (Kaiser).

Kaiser has requested a temporary license to operate its current patient care centers as inpatient hospitals. The facility would serve Kaiser patients who could be kept inpatient for acute medical treatment. The facility will be staffed by current Kaiser staff and specialists. It will use all current systems in place at Kaiser including medical records and equipment. The centers will serve Kaiser enrollees but will transfer them to acute care hospitals if they require intensive care services. Kaiser Permanente South Baltimore County Medical Center, 1701 Twin Spring Road, Halethorpe Maryland will serve 45 inpatients in 19 Clinical Decision Unit rooms, 14 beds in the Ambulatory Surgery Center and 12 procedure rooms.

The Office of Health Care Quality recommends this certificate of need for Kaiser Permanente South Baltimore County Medical Center should be approved on an emergency basis, and based on the information provided by the Kaiser, these beds can be temporarily licensed as a hospital by the state of Maryland serving patients insured in a Kaiser Health plan.

Please contact me if you have any questions at (410)402-8090 or (443)681-0278.

Sincerely,

*Renee B. Webster*

Renee B, Webster, Deputy Director, Federal Programs

# MARYLAND HEALTH CARE COMMISSION

## Emergency Certificate of Need

**TO:** William N. Wiechmann, Esq.  
Vice President and Regional Counsel  
Mid-Atlantic States Region  
Kaiser Foundation Hospitals / Health Plan  
2101 East Jefferson Street, 7<sup>th</sup> Floor  
Rockville, Maryland 20852

April 5, 2020  
Date

**RE:** Kaiser Permanente South Baltimore County Medical Center  
Establishment of a Temporary General Hospital with 45  
Inpatient Beds to Serve Lower Intensity Patients

EM-H20-03-012  
Docket No.

### DESCRIPTION OF EMERGENCY PROJECT

This Emergency Certificate of Need authorizes Kaiser Permanente to establish a temporary general hospital with 45 inpatient beds to be located at the Kaiser Permanente South Baltimore County Medical Center (KP South Baltimore County) at 1701 Twin Springs Road, Halethorpe (Baltimore County) (the Site) to treat a combination of patients who require an inpatient stay but do not require more intensive care available at existing general hospitals. Expected patients will include non-COVID-19 related, COVID-19 positive and negative, and Persons Under Investigation for COVID-19. KP South Baltimore County can also admit step-down patients from its hospital partners who need inpatient care, thereby making inpatient beds available for more acute patients at those hospitals.

The project will convert existing advanced clinical space consisting of the Site's clinical decision unit, ambulatory surgery center, and outpatient procedure suites. KP South Baltimore County has imaging Services, STAT laboratory services, and an in-house pharmacy on-site. Each bed has oxygen, Med Air, vacuum, an emergency power outlet, and a nurse call bell. The facility has advanced life support and other medical equipment already in use. If a gap in equipment is identified, needed equipment will be relocated from a Kaiser Permanente temporarily closed medical office building. Most patients will be KP members, including Kaiser privately insured, Medicare Advantage, Medicare Cost, FEHB, and Medicaid Managed Care. Consistent with EMTALA, KP South Baltimore County will triage, stabilize, treat, and transfer (as appropriate), non-KP members who present at the facility.

KP South Baltimore County expects to revert to its former use within 30 days of the termination of the state of emergency declared by Governor Lawrence J. Hogan, Jr. on March 5, 2020. The temporary general hospital is expected to come online on or before April 27, 2020, and has an estimated project cost of \$400,000.

**ORDER**

Upon consideration of the request of KP South Baltimore County, 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 April 5, 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 KP South Baltimore County 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 Hogan on March 5, 2020.

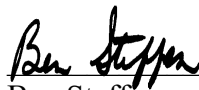
**Approvals by Maryland Department of Health**

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 April 16, 2020. 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 Hogan on March 5, 2020. The Emergency CON may be extended beyond that date for good cause shown.

**MARYLAND HEALTH CARE COMMISSION**



Ben Steffen  
Executive Director

cc: Robert R. Neall, 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  
Gregory Wm. Branch, M.D., Health Officer, Baltimore County



# MARYLAND Department of Health

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

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

April 4, 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 Kaiser Permanente of the MidAtlantic (Kaiser).

Kaiser has requested a temporary license to operate its current patient care centers as inpatient hospitals. The facility would serve Kaiser patients who could be kept inpatient for acute medical treatment. The facility will be staffed by current Kaiser staff and specialists. It will use all current systems in place at Kaiser including medical records and equipment. The centers will serve Kaiser enrollees in but will transfer them to acute care hospitals if they require intensive care services. Kaiser Permanente Kensington Medical Center at 10810 Connecticut Avenue, Kensington Maryland will be able serve 10 inpatients in the 10 beds in the licensed ambulatory surgery center..

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 Kaiser, the Kaiser Permanente Kensington Medical Center can be temporarily licensed as a hospital by the state of Maryland serving patients insured in any Kaiser Health Plan.

Please contact me if you have any questions at (410)402-8090 or (443)681-0278.

Sincerely,

*Renee B. Webster*

Renee B, Webster, Deputy Director, Federal Programs

# MARYLAND HEALTH CARE COMMISSION

## Emergency Certificate of Need

**TO:** William N. Wiechmann, Esq.  
Vice President and Regional Counsel  
Mid-Atlantic States Region  
Kaiser Foundation Hospitals / Health Plan  
2101 East Jefferson Street, 7<sup>th</sup> Floor  
Rockville, Maryland 20852

April 5, 2020  
Date

**RE:** Kaiser Permanente Kensington Medical Center  
Establishment of a Temporary General Hospital with 10  
Inpatient Beds to Serve Lower Intensity Patients

EM-H20-15-013  
Docket No.

### DESCRIPTION OF EMERGENCY PROJECT

This Emergency Certificate of Need authorizes Kaiser Permanente to establish a temporary general hospital with 10 inpatient beds to be located at the Kaiser Permanente Kensington Medical Center (KP Kensington) at 10810 Connecticut Avenue, Kensington (Montgomery County) (the Site) to treat a combination of patients who require an inpatient stay but do not require more intensive care available at existing general hospitals. Expected patients will include non-COVID-19 related, COVID-19 positive and negative, and Persons Under Investigation for COVID-19. KP Kensington can also admit step-down patients from its hospital partners who need inpatient care, thereby making inpatient beds available for more acute patients at those hospitals.

The project will convert existing advanced clinical space consisting of the Site's clinical decision unit, ambulatory surgery center, and outpatient procedure suites. KP Kensington has imaging Services, STAT laboratory services, and an in-house pharmacy on-site. Each bed has oxygen, Med Air, vacuum, an emergency power outlet, and a nurse call bell. The facility has advanced life support and other medical equipment already in use. If a gap in equipment is identified, needed equipment will be relocated from a Kaiser Permanente temporarily closed medical office building. Most patients will be KP members, including Kaiser privately insured, Medicare Advantage, Medicare Cost, FEHB, and Medicaid Managed Care. Consistent with EMTALA, KP Kensington will triage, stabilize, treat, and transfer (as appropriate), non-KP members who present at the facility.

KP Kensington expects to revert to its former use within 30 days of the termination of the state of emergency declared by Governor Lawrence J. Hogan, Jr. on March 5, 2020. The temporary general hospital is expected to come online on or before April 27, 2020, and has an estimated project cost of \$99,000.

## **ORDER**

Upon consideration of the request of KP Kensington, 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 April 5, 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 KP Kensington 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 Hogan on March 5, 2020.

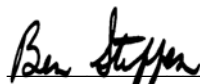
### **Approvals by Maryland Department of Health**

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 April 16, 2020. 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 Hogan on March 5, 2020. The Emergency CON may be extended beyond that date for good cause shown.

## **MARYLAND HEALTH CARE COMMISSION**



Ben Steffen  
Executive Director

cc: Robert R. Neall, 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

# GALLAGHER

GALLAGHER EVELIUS & JONES  
ATTORNEYS AT LAW

April 6, 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 – Holy Cross Hospital –  
Expansion of MSGA Bed Capacity**

Dear Mr. Steffen and Ms. Potter:

On behalf of Holy Cross Health Inc. (“Holy Cross Health”) and Holy Cross Hospital, pursuant to COMAR 10.24.01.20, we write to seek an Emergency Certificate of Need (“CON”) to expand the MSGA bed capacity by 84 new physical beds at Holy Cross Hospital located at 1500 Forest Glen Road, Silver Spring, Maryland 20910.

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 has declared a national state of emergency, the Secretary of the United States Department of Health and Human Services has 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. 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.

#697966

Mr. Ben Steffen  
Ms. Ruby Potter  
April 6, 2020  
Page 2

## **I. Project Description**

Holy Cross Health hereby applies for an Emergency CON for the purpose of expanding bed capacity at Holy Cross Hospital in preparation for an expected surge in hospital admissions related to COVID-19 infection and treatment. The proposed project would involve the addition of new capacity as well as the re-activation or conversion of existing physical capacity, for which a CON is not required.<sup>1</sup>

The project would involve establishing 84 new MSGA beds in space on the 6<sup>th</sup> and 7<sup>th</sup> floors of the hospital to create additional acute care capacity of 42 MSGA beds on each floor. These spaces, comprising approximately 25,000 square feet on each floor, were previously used for acute care services, but were decommissioned. The work would begin immediately upon approval of this application, and is estimated to be completed by May 15, 2020.

## **II. 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 cost, including facilities work and purchase of equipment, is estimated to be approximately \$11.0 million, and Holy Cross Health intends to use available cash to fund the project.

Holy Cross Health 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.

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<sup>1</sup> In addition to the new bed capacity requested in this application, the project would also involve: (1) the activation of 62 physical beds on the 5<sup>th</sup> and 6<sup>th</sup> floors of the hospital; (2) the conversion of 28 post anesthesia care unit (PACU) spaces to be used as 28 MSGA beds; and (3) the conversion of 30 beds from medical / surgical beds to ICU beds. These changes can be made without a CON by seeking temporary adjustment of bed licensure through the Office of Health Care Quality.

Mr. Ben Steffen  
Ms. Ruby Potter  
April 6, 2020  
Page 3

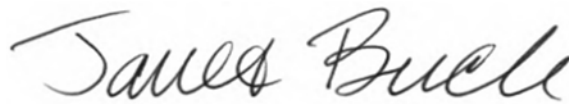
We respectfully request you to act on this request as soon as possible so that Holy Cross Health can begin work on this critically important project. Please let us know if you need any additional information regarding the requested Emergency CON Application.

Sincerely,



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Thomas C. Dame



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James C. Buck



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Mallory Regenbogen

Cc: via email

Robert R. Neall, Secretary, Maryland Department of Health  
Dennis R. Schrader, Deputy Secretary for Health Care Financing & Chief Operating Officer  
Andrew N. Pollak, M.D. 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  
Travis Gayles, M.D., Ph.D., Montgomery County Health Officer  
Norvell V. Coots, M.D., President and CEO, Holy Cross Health

Mr. Ben Steffen  
Ms. Ruby Potter  
April 6, 2020  
Page 4

Anne Gillis, CFO, Holy Cross Health  
Annice Cody, President, Holy Cross Health Network  
Louis Damiano, M.D., President, Holy Cross Hospital  
Kristin Feliciano, Chief Strategy Officer, Holy Cross Health



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 21046-3422

April 6, 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 Holy Cross Hospital.

Holy Cross Hospital will be constructing inpatient beds on the 6<sup>th</sup> and 7<sup>th</sup> floors of the hospital. Each floor will house 42 inpatient units for a total of 84 inpatient beds. The construction will be completed by May 15, 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 84 beds can be provisionally licensed as part of Holy Cross 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:** Norvell V. Coots, M.D., President & CEO  
Holy Cross Health, Inc.  
Louis Damiano, M.D., President  
Holy Cross Hospital  
1500 Forest Glen Road  
Silver Spring, Maryland 20910

April 7, 2020  
Date

**RE:** Holy Cross Hospital  
Establishment of 84 Additional Inpatient Beds

EM-H20-15-018  
Docket No.

### DESCRIPTION OF EMERGENCY PROJECT

This Emergency Certificate of Need authorizes Holy Cross Health Inc. and Holy Cross Hospital to establish additional inpatient bed capacity consisting of 84 medical/surgical/gynecological/addictions (MSGA) beds, with 42 beds to be located on the each of the 6<sup>th</sup> and 7<sup>th</sup> floors of Holy Cross Hospital, 1500 Forest Glen Road, Silver Spring (Montgomery County) (the Site).<sup>1</sup> The hospital reports that these spaces, with approximately 25,000 square feet per floor, previously were used for acute care services, but were decommissioned. The estimated cost of the project is \$11,000,000, which Holy Cross Health, Inc. intends to fund with available cash. Holy Cross Hospital anticipates that the beds will be brought online by May 15, 2020.

### ORDER

Upon consideration of the request of Holy Cross Hospital, 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 April 7, 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 Holy Cross 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.

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<sup>1</sup> Holy Cross Hospital also noted that it will seek a temporary adjustment of its licensed bed capacity from OHCQ as follows: (1) activation of 62 physical beds on the 5<sup>th</sup> and 6<sup>th</sup> floors of the hospital; (2) 28 beds resulting from the conversion of 28 post anesthesia care unit spaces; and (3) 30 ICU beds resulting from the conversion of 30 medical-surgical beds.

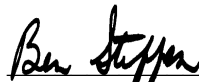
**Approvals by Maryland Department of Health**

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 April 16, 2020. 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.

**MARYLAND HEALTH CARE COMMISSION**



Ben Steffen  
Executive Director

cc: Robert R. Neall, 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  
Thomas C. Dame, Esquire  
James C. Buck, Esquire  
Mallory Regenbogen, Esquire

April 7, 2020

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

Dear Mr. Steffen:

The University of Maryland Upper Chesapeake Health (UM UCH) system is submitting the following request for an Emergency Certificate of Need to address the impending COVID-19 pandemic with the goal of being as prepared as possible for the potential surge of patients both from an acute care need and a behavioral health need perspective.

The below summary represents UM UCH's Emergency Certificate of Need request for the conversion of the Klein Family Harford Crisis Center (KFHCC) to serve as a Behavioral Health Command Center triage location for local EMS, law enforcement and alternate emergency department utilization, as well as the conversion of a portion of the current Behavioral Health urgent care setting and the utilization of the Residential beds within the KFHCC as outlined below.

Project Name:  
Behavioral Health Covid-19 Surge Plan

Description of Project:  
The Klein Family Harford Crisis center (KFHCC) currently consists of an Outpatient Clinic, a (17) bay Behavioral Health Urgent Care (UC) Walk-In Center, and an (8) bed Residential Crisis Service. It is licensed as an Outpatient Mental Health Center (OMHC) as well as a Residential Crisis Service (RCS) facility. For Phase 3 of UM Upper Chesapeake Health's (UM UCH) Covid-19 Surge Planning, the Klein Family Harford Crisis Center is requesting the ability to convert (8) RCS beds and (5) UC bays (total of 13 incremental beds) to inpatient behavioral health beds.

Additionally, during Phase 3 of Covid-19 surge planning, KFHCC will establish a Behavioral Health Command Center to triage all behavioral health patients that would require emergency department visits and/or inpatient care. This Behavioral Health Command Center would work in coordination with Law Enforcement and Emergency Medical Services to triage Behavioral Health patients.

Also during Phase 3 of Covid-19 Surge planning, UM Harford Memorial Hospital would establish (5) additional inpatient beds and (10) assessment/triage recliners (located in the Outpatient Department and Rehab Department of UM Harford Memorial Hospital) as well as an additional (3) inpatient beds on the Behavioral Health Unit for a total (8) incremental additional inpatient beds.

Location of Facility/Overview of Number of Beds:

*Klein Family Harford Crisis Center (802 Baltimore Pike, Bel Air Maryland 21014):*

- This plan will add (5) beds in the urgent care area and will convert (8) existing beds to inpatient behavioral health beds for a total of (13) incremental additional inpatient behavioral health beds.
- All patients received to KFHCC will receive a thorough health screening by a registered nurse. If medically unstable, coordination with emergency medical services to transport the patient to the UM UCMC Emergency Department. At Phase 3 of the Covid Surge Plan, the KFHCC will have a psychiatric physician or a nurse practitioner on site 24/7 and will have telemedicine connection to UM UCMC for additional support as needed.

*UM Harford Memorial Hospital (501 S. Union Avenue, Havre de Grace Maryland 21078):*

- This plan will add (5) inpatient beds and (10) recliners (*for triage purposes only*), provider sleeping space in the Outpatient Department as well as an additional (3) inpatient beds on the Behavioral Health Unit for a total (8) incremental additional inpatient beds.

Estimated Capital Cost:

- Capital expense projection: \$335,400

Projected Timeline:

Physical space changes including modification of staffing ratios and increased equipment will begin during Phase 2 of UM UCH's Covid-19 Surge Plan.

Why action cannot be delayed:

This plan has been developed as a component of UM UCH's overall surge plan specific to the inpatient behavioral health needs of our community. Additionally, due to the requirement to provide for appropriate social distancing on the inpatient Behavioral Health unit at UM HMH we needed to convert our current inpatient behavioral beds from semi-private rooms to private rooms. Furthermore, this plan also assumes there are no available behavioral health inpatient beds at high surge capacity due to high demand at UM HMH as well as no available beds at other local hospitals, full emergency departments with patient boarders, high demand for acute care needs for PUI/COVID behavioral health patients, as well as community agencies/shelters full or closed. These assumptions would exist along with the need to continue to accommodate behavioral health patients presenting to the ED, KFHCC, and UM HMH and UM UCMC. UM UCH will not turn away any person presenting to UM HMH or UM UCMC for behavioral health care needs.

Should you have any questions regarding this submission please give me a call at 443-643-3306, thank you in advance for your consideration of this emergency certificate of need request.

In Good Health,

A handwritten signature in black ink, appearing to read 'L. Sheldon', written in a cursive style.

Lyle E. Sheldon FACHE  
CEO/President  
UM Upper Chesapeake Health

cc: Suellen Wideman  
Renee Webster



# MARYLAND Department of Health

*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 21046-3422

April 8, 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 Harford Memorial Hospital.

University of Maryland Harford Memorial Hospital will be establishing an inpatient behavioral health unit at the Klein Family Harford Crisis Center at 802 Baltimore Pike Belair MD. The facility is currently licensed for residential crisis services as well as outpatient mental health services through the Behavioral Health Administration. The hospital is converting the beds associated with the crisis services to acute psychiatric beds under its current behavioral health services. The purpose of the request is to address increased community needs during the pandemic and the provision of social distancing at their existing unit in the hospital. The Klein Family Harford Crisis Center may also be used as an off campus dedicated emergency room for behavioral health patients if the hospital's ED cannot meet the demand for emergency room care. Once converted the Klein Family Harford Crisis Center will provide 13 inpatient beds for behavioral health patients under the licensure of the University of Maryland Harford Memorial Hospital.

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 13 beds can be provisionally licensed as part of University of Maryland Harford Memorial Hospital.

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

Sincerely,

A handwritten signature in cursive script, appearing to read "Renee B. Webster". The signature is written in black ink and is positioned above the typed name.

Renee B. Webster, Deputy Director, Federal Programs

# MARYLAND HEALTH CARE COMMISSION

## Emergency Certificate of Need

**TO:** Lyle E. Sheldon, FACHE  
President/CEO  
520 Upper Chesapeake Drive, Suite 405  
Bel Air, Maryland 21014

April 8, 2020  
Date

**RE:** Establishment of a 13-Bed Behavioral Health Unit  
Remote Location of UM Upper Chesapeake Health System  
Harford Memorial Hospital  
at the Klein Family Harford Crisis Center  
in Bel Air, Maryland

EM-H20-12-020  
Docket No.

### DESCRIPTION OF EMERGENCY PROJECT

This Emergency Certificate of Need authorizes University of Maryland Upper Chesapeake Health System (UM UCHS) Harford Memorial Hospital (UM Harford Memorial Hospital) to establish additional temporary inpatient bed capacity consisting of 13 acute inpatient behavioral health beds to be located at the Klein Family Harford Crisis Center (Klein Center), 802 Baltimore Pike, Bel Air (Harford County) (the Site). The Klein Center currently consists of an urgent care walk-in center (licensed as an outpatient mental health center) and an eight-bed residential crisis service (with eponymous licensure). The project will convert five urgent care center bays and the eight residential crisis bed to acute inpatient behavioral health beds.<sup>1</sup> Medically unstable patients will be transported to the emergency department at the UM Upper Chesapeake Medical Center, approximately one mile away, which will have telemedicine connection with the Klein Center to provide additional support as needed.

The UM Upper Chesapeake System anticipates that, during Phase 3 of the UM UCH's Surge Plan, it will establish a behavioral health command center at the Klein Center to work in coordination with law enforcement and MIEMSS to triage behavioral health patients. At that time, the Klein Center will have a psychiatric physician or nurse practitioner on site 24/7. The project has an estimated cost of approximately \$155,000, and can be operational by April 27, 2020, if needed.

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<sup>11</sup> UM Harford Memorial Hospital has changed the configuration of its existing inpatient psychiatric beds from semi-private to private during this COVID-19 pandemic. The hospital will create eight additional private rooms for behavioral health patients, with five created through conversion of space in its outpatient department and three created on the behavioral health unit. The number of resulting inpatient psychiatric private rooms in both Bel Air and at Havre de Grace will be 27, which is four fewer than its licensed acute psychiatric bed capacity. The anticipated cost for this conversion is approximately \$181,000.

**ORDER**

Upon consideration of the request of UM Harford Memorial Hospital, 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 April 8, 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 Harford Memorial 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.

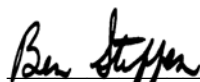
**Approvals by Maryland Department of Health**

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.

**Further Action**

This Emergency Certificate of Need will be considered for confirmation by the Maryland Health Care Commission at its next scheduled meeting on April 16, 2020. 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.

**MARYLAND HEALTH CARE COMMISSION**



Ben Steffen  
Executive Director

cc: Robert R. Neall, 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  
Russell Moy, M.D., Health Officer, Harford County

# GALLAGHER

GALLAGHER EVELIUS & JONES  
ATTORNEYS AT LAW

April 9, 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 – Stella Maris, Inc. –  
Establishment of up to 39 COVID-19 beds**

Dear Mr. Steffen and Ms. Potter:

On behalf of Stella Maris, Inc. (“Stella Maris”) and, pursuant to COMAR 10.24.01.20, we write to seek an Emergency Certificate of Need (“CON”) to expand the comprehensive care bed capacity by up to 39 new beds at Stella Maris, located at 2300 Dulaney Valley Road, Timonium, MD 21903.

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 has declared a national state of emergency, the Secretary of the United States Department of Health and Human Services has 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 April 5, 2020, the Governor issued Executive Order 20-02-05-01 directing the Maryland Department of Health to reduce the spread of COVID-19 in nursing homes and other similar facilities, and declaring it necessary to authorize actions to monitor, treat, prevent, and reduce the spread of, and suppress COVID-19 in nursing homes and other similar facilities. Pursuant to the Governor’s Executive Order, on April 5, 2020, Secretary Neall of the Department of Health issued a Directive and Order that Maryland nursing homes designate a room, unit, or floor of the nursing home to care for residents with known or suspected COVID-19.

#699953

Mr. Ben Steffen  
Ms. Ruby Potter  
April 9, 2020  
Page 2

### **Project Description**

Stella Maris hereby applies for an Emergency CON for the purpose of establishing two separate COVID-19 units. First, Stella Maris would establish an 18-bed COVID-19 unit to be located in an Adult-Day Care Center owned by Stella Maris on its campus but physically separated from its main nursing unit (the “Primary COVID-19 Unit”). Pursuant to Secretary Neall’s April 5, 2020 Directive and Order, the Primary COVID-19 Unit at Stella Maris will be used to care for and isolate Stella Maris residents who test positive for COVID-19 and to admit COVID-19 positive patients of acute general hospitals who require comprehensive care services. The Primary COVID-19 Unit has separate entrances and exits such that any new admissions and readmissions will be physically separated from the general Stella Maris nursing home population.

A second 21-bed COVID-19 unit would be established, as needed, in the Sheehan Wing Auditorium (the “Secondary COVID-19 Unit”). The Secondary COVID-19 Unit would only be established and implemented to the extent the Primary COVID-19 Unit is projected to be at capacity.

Beds at both the Primary COVID-19 Unit and Secondary COVID-19 Units will be separated by six-feet. A floor plan of the Primary COVID-19 Unit is attached as **Exhibit A**, and a floor plan of the Secondary COVID-19 Unit is attached as **Exhibit B**. Again, however, both units would be restricted to only those residents who have tested positive for COVID-19 and who require comprehensive care services. All staff will be isolated from the main nursing home unit.

If approved, the Primary COVID-19 Unit at Stella Maris will be completed within seven days hours of Emergency CON approval and would cost \$4,500 per month in rental costs associated with the beds and equipment. The Secondary COVID-19 Unit could be established within seven days of Emergency CON approval with associated costs to be borne by Stella Maris.

The proposed projects are necessary in response to the COVID-19 pandemic and in accordance with the Governor’s Executive Orders and Secretary Neall’s Executive Directive and Order.

Mr. Ben Steffen  
Ms. Ruby Potter  
April 9, 2020  
Page 3

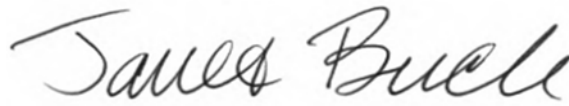
We respectfully request you to act on this request as soon as possible so that Stella Maris can open its above-described COVID-19 Units. Please let us know if you need any additional information regarding the requested Emergency CON Application.

Sincerely,



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Thomas C. Dame



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James C. Buck



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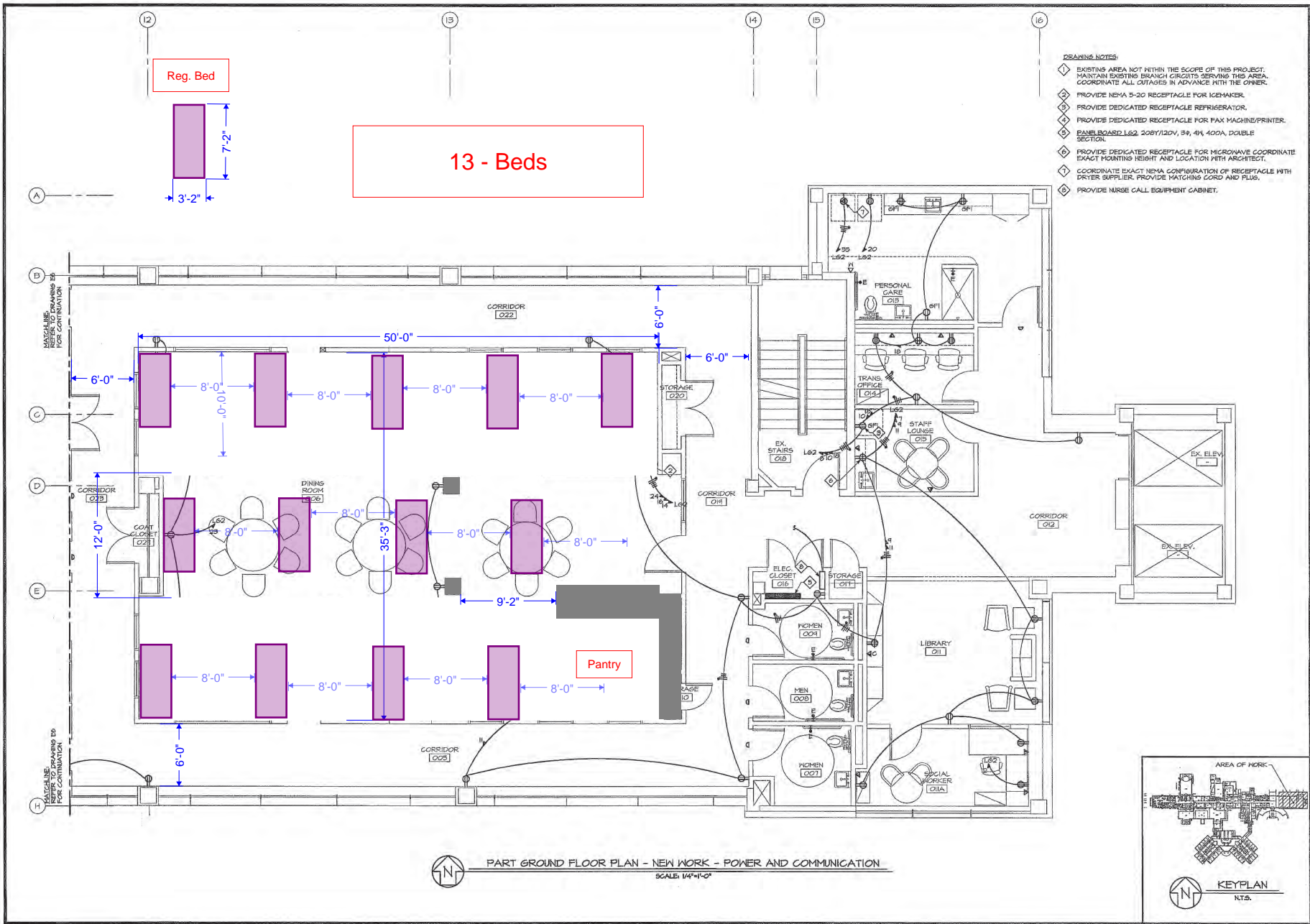
Mallory Regenbogen

Cc: via email

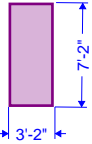
Robert R. Neall, Secretary, Maryland Department of Health  
Dennis R. Schrader, Deputy Secretary for Health Care Financing & Chief Operating Officer  
Andrew N. Pollak, M.D. Chairman, Maryland Health Care Commission  
Gregory Wm. Branch, M.D., MBA, CPE, FACP, Baltimore County Health Care Officer  
Patricia T. (Tricia) Nay, M.D. Director, Office of Health Care Quality  
David Cherry, Deputy Director, Federal Licensure Programs, Office of Health Care Quality  
Ranada Cooper, Manager, Nursing Home Program, 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  
Regina Figueroa, LNHA, MHS, Chief Administrative Officer, Stella Maris, Inc.  
Judith Weiland, Senior Vice President, Strategic/Capital Planning & Facilities,  
Mercy Health Services, Inc.

# EXHIBIT A





Reg. Bed



13 - Beds

- DRAINING NOTES:**
- ◇ EXISTING AREA NOT WITHIN THE SCOPE OF THIS PROJECT. MAINTAIN EXISTING BRANCH CIRCUITS SERVING THIS AREA. COORDINATE ALL OUTAGES IN ADVANCE WITH THE OWNER.
  - ◇ PROVIDE NEMA 5-20 RECEPTACLE FOR ICE MAKER.
  - ◇ PROVIDE DEDICATED RECEPTACLE FOR REFRIGERATOR.
  - ◇ PROVIDE DEDICATED RECEPTACLE FOR FAX MACHINE/PRINTER.
  - ◇ PANEL BOARD L62, 208Y/120V, 3Ø, 4W, 400A, DOUBLE SECTION.
  - ◇ PROVIDE DEDICATED RECEPTACLE FOR MICROWAVE. COORDINATE EXACT MOUNTING HEIGHT AND LOCATION WITH ARCHITECT.
  - ◇ COORDINATE EXACT NEMA CONFIGURATION OF RECEPTACLE WITH DRYER SUPPLIER. PROVIDE MATCHING GROUND AND PLUS.
  - ◇ PROVIDE NURSE CALL EQUIPMENT CABINET.

PART GROUND FLOOR PLAN - NEW WORK - POWER AND COMMUNICATION  
SCALE: 1/4"=1'-0"

**Stella Maris**  
A TRUSTEE OF PERKY

**MKA ASSOCIATES**  
HEALTHCARE PLANNING & DESIGN  
5000 WOODBURN  
BETHESDA, MD 20814  
TEL: 301-221-1100  
FAX: 301-221-1101

**W** Loch-Wolfe Associates, Inc.  
Structural Engineers  
100 W. WASHINGTON STREET  
ANNAPOLIS, MD 21403  
TEL: 410-293-8800  
FAX: 410-293-8807

**JGK STRUCTURAL ENGINEERS, P.C.**  
JAMES C. HANCOCK, P.E.  
8808 WALNUT STREET  
FALLS CHURCH, VIRGINIA 22046  
TEL: 703-536-8528  
FAX: 703-537-8261

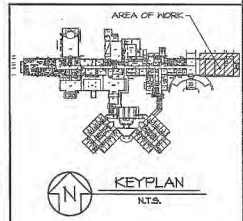
STELLA MARIS  
GROUND FL. - ADULT DAYCARE  
2300 DULANEY VALLEY ROAD  
TIMONIUM, MD 21093

DESIGNED:	DS
DRAWN:	BWA
CHECKED:	FL
APPROVED:	DED
JOB #:	
REVISIONS:	DATE:

DATE: 12-1-04  
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PART GROUND FLOOR PLAN - NEW WORK - POWER AND COMMUNICATION

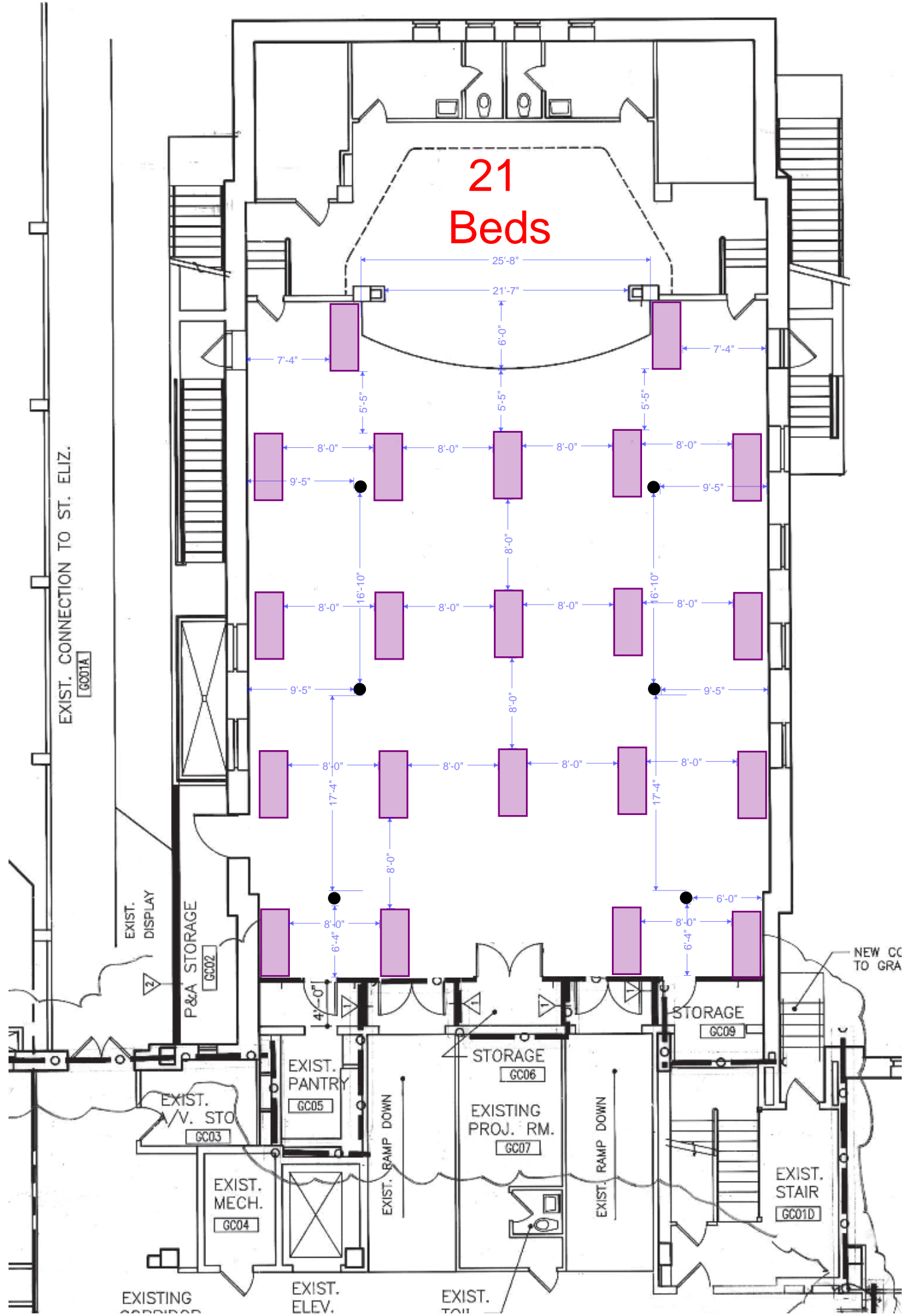
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FILENAME: E04120720.DWG PLOT SCALE: 1/4" = 1'-0", SPACE: MODEL, SAVED: 11/20/04 AT 11:22, XREFS: P:\2004\04120720\ACAD\212.DWG P:\2004\04120720\041211.DWG

# EXHIBIT B

21  
Beds



EXIST. CONNECTION TO ST. ELIZ.  
[GC001A]

EXIST. DISPLAY

P&A STORAGE  
GC002

EXIST. V. STO  
GC03

EXIST. MECH.  
GC04

EXIST. PANTRY  
GC05

STORAGE  
GC06

EXISTING PROJ. RM.  
GC07

STORAGE  
GC09

NEW CC TO GRA

EXIST. STAIR  
GC01D

1'-2"



EXISTING CORRIDOR

EXIST. ELEV.

EXIST. TOI.



## DEPARTMENT OF HEALTH

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

Office of Health Care Quality  
7120 Samuel Morse Dr., 2nd floor  
Columbia, MD 21076

April 9th, 2020

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

Dear Mr. Steffen,

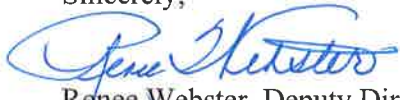
As you are aware, on March 5, 2020, Governor Hogan issued a proclamation that a state of emergency and a catastrophic health emergency exists in Maryland, due to the COVID-19 outbreak. Based on the increased need for comprehensive care beds in skilled nursing facilities due to the COVID-19 pandemic, 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 Stella Maris. This approval would repurpose existing Adult Medical Day Care space and additional Auditorium space that is unused during the COVID-19 emergency to increase private bed availability in the facility which is needed due to the growing need of hospital beds and the need for hospitals to transfer those residents who do not warrant an extended hospital stay but require an elevated level of care as well as additional isolation precautions.

Stella Maris' proposed temporary licensure change would allow this re-purposing of existing space for the purpose of offering additional private bed accommodations, create additional physical barriers to prevent spread of COVID-19 in the current population, and for use by post-acute level patients allowing for an anticipated additional twelve (39) private, comprehensive care beds at an existing certified and licensed unit. There will be an additional cost of \$4,500 per month in rental expenses for associated beds and equipment. The re-purposing proposed is estimated to take seven days from the start date.

The Office of Health Care Quality recommends this certificate of need should be approved on an emergency basis, based on the information provided by the facility. These beds would be provisionally licensed by Office of Health Care Quality due to the current COVID-19 pandemic.

Please contact me if you have any questions at (410) 402-8101 or (443) 832-7192.

Sincerely,

A handwritten signature in blue ink, appearing to read "Renee Webster". The signature is fluid and cursive, with the first name "Renee" being more prominent than the last name "Webster".

Renee Webster, Deputy Director of Federal Programs  
State of Maryland, Office of Healthcare Quality

# MARYLAND HEALTH CARE COMMISSION

## Emergency Certificate of Need

**TO:** Regina Figueroa, LNHA, MHS  
Chief Administrative Officer  
Stella Maris, Inc.  
2300 Dulaney Valley Road  
Lutherville-Timonium, Maryland 21093

April 9, 2020  
Date

**RE:** Stella Maris, Inc.  
Establishment of Up To 39 Additional Beds  
In Up To Two COVID-19 Units

EM-NH-03-002  
Docket No.

### **DESCRIPTION OF EMERGENCY PROJECT**

This Emergency Certificate of Need authorizes Stella Maris, Inc. (Stella Maris), a comprehensive care facility (CCF or nursing home) to establish additional bed capacity consisting of up to 39 additional CCF beds to be located in up to two COVID-19 units at Stella Maris, 2300 Dulaney Valley Road, Lutherville-Timonium (Baltimore County) (the Site).

Stella Maris plans initially to establish an 18-bed COVID-19 unit (Primary COVID-19 Unit) to be located in the Adult-Day Care Center owned by Stella Maris on its campus but physically separated from its main nursing unit. In this unit, Stella Maris will care for and isolate its residents who test positive for COVID-19 and will also admit COVID-19 positive patients discharged from acute general hospitals who require CCF care. The Primary COVID-19 Unit has separate entrances and exits, assuring that new admissions and readmissions will be physically separated from the general nursing home population. If the Primary COVID-19 Unit is projected to be at capacity, Stella Maris will establish a second 21-bed COVID-19 unit (Secondary COVID-19 Unit) in the Sheehan Wing Auditorium

The Primary COVID-19 Unit can be completed within seven days and will cost \$4,500 per month in rental costs associated with beds and equipment. The Secondary COVID-19 Unit could be established within seven days of Emergency CON, with associated costs to be borne by Stella Maris.

### **ORDER**

Upon consideration of the request of Stella Maris, 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, in accordance with COAR 10.24.01.20A, this additional CCF bed capacity will lessen hazards presented to residents and/or employees because the additional beds will: (1) permit more private rooms, thereby lessening the opportunity for transmission of the novel coronavirus; (2) quarantine residents with mild COVID-19 cases; and/or (3) receive patients discharged from acute general hospitals for post-acute care.

Therefore, it is, on April 9, 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 Stella Maris file an application for Certificate of Need for the 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.

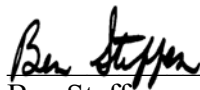
### **Approvals by Maryland Department of Health**

This Emergency Certificate of Need does not constitute a license or replace any approvals for other aspects of the project that are required by OHCQ or other divisions of the Maryland Department of Health to operate CCF 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 April 16, 2020. This Emergency Certificate of Need 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.

### **MARYLAND HEALTH CARE COMMISSION**



Ben Steffen  
Executive Director

cc: Robert R. Neall, Secretary of Health  
Patricia T. Nay, M.D., Executive Director, OHCQ  
David Cherry, Deputy Director, Long Term Care Unit, OHCQ  
Gregory Wm. Branch, M.D., Health Officer, Baltimore County  
Judith Weiland, Sr Vice President, Strategic/Capital Planning & Facilities,  
Mercy Health Services, Inc.