Maryland

HSCRC Trustees -MDH- <hscrc.trustees@maryland.gov>

Response for survey 'Maryland Health Services Cost Review Commission Trustee Disclosure of Interest Statement'

1 message

hscrc.trustees@maryland.gov <hscrc.trustees@maryland.gov> Thu, Sep 25, 2025 at 2:30 PM
Reply-To: hscrc.trustees@maryland.gov
To: hscrc.trustees@maryland.gov

DATE OF STATEMENT: 9/25/2025

PERIOD COVERED: FROM: 07/01/2024 **TO:** 06/30/2025

TRUSTEE, DIRECTOR, OR OFFICER NAME: Daniela Mihova, MD

TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS: 400 W 7th street, Frederick, MD 21701

HOSPITAL NAME: Frederick Health

HOSPITAL ADDRESS: 400 W 7th street, Frederick, MD 21701

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME: Frederick Health Hospital

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS: 400 W 7th street, Frederick, MD 21701

MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: Healthcare

TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY: Vice Chief of Staff

TYPE OR NATURE OF BUSINESS TRANSACTIONS, DEALINGS, OR SERVICES BY AND BETWEEN THE HOSPITAL TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY HAVING AN ACTUAL OR IMPUTED VALUE OR WORTH OF $10,000 OR MORE TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: Performing the duties of vice chief of staff by being responsible for chairing Quality Coordinating Council and working on multiple multidisciplinary performance improvement projects and initiatives, reporting to Medical Executive Committee, participating in providers credentialing and order set committee.

MONETARY VALUE OF THE BUSINESS TRANSACTION(S)TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: $27,996

DECLARATION OF TRUSTEE, DIRECTOR, OR OFFICER THAT THE STATEMENT IS TRUE TO THE BEST OF HIS/HER KNOWLEDGE, INFORMATION, AND BELIEF THAT THIS STATEMENT IS TRUE AND CORRECT UNDER PENALTIES OF PERJURY:

PRINTED NAME OF TRUSTEE, DIRECTOR, OR OFFICER: Daniela Mihova, MD

Maryland

HSCRC Trustees -MDH- <hscrc.trustees@maryland.gov>

Response for survey 'Maryland Health Services Cost Review Commission Trustee Disclosure of Interest Statement'

1 message

hscrc.trustees@maryland.gov <hscrc.trustees@maryland.gov> Fri, Sep 26, 2025 at 10:16 AM
Reply-To: hscrc.trustees@maryland.gov
To: hscrc.trustees@maryland.gov

DATE OF STATEMENT: 9/26/2025

PERIOD COVERED: FROM: 7/1/2024 **TO:** 6/30/2025

TRUSTEE, DIRECTOR, OR OFFICER NAME: Thomas A Kleinhanzl

TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS: 400 West 7th Street, Frederick, MD 21701

HOSPITAL NAME: Frederick Health

HOSPITAL ADDRESS: 400 West 7th Street, Frederick, MND 21701

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME: Frederick Health

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS: Same

MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: >$10,000

TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY: Served as CEO

TYPE OR NATURE OF BUSINESS TRANSACTIONS, DEALINGS, OR SERVICES BY AND BETWEEN THE HOSPITAL TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY HAVING AN ACTUAL OR IMPUTED VALUE OR WORTH OF $10,000 OR MORE TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: As CEO of the company, I earn a salary greater than $10,000.

MONETARY VALUE OF THE BUSINESS TRANSACTION(S)TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: >$10,000

DECLARATION OF TRUSTEE, DIRECTOR, OR OFFICER THAT THE STATEMENT IS TRUE TO THE BEST OF HIS/HER KNOWLEDGE, INFORMATION, AND BELIEF THAT THIS STATEMENT IS TRUE AND CORRECT UNDER PENALTIES OF PERJURY:

PRINTED NAME OF TRUSTEE, DIRECTOR, OR OFFICER: Thomas Kleinhanzl

Maryland

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Response for survey 'Maryland Health Services Cost Review Commission Trustee Disclosure of Interest Statement'

1 message

hscrc.trustees@maryland.gov <hscrc.trustees@maryland.gov> Sun, Sep 28, 2025 at 10:31 PM
Reply-To: hscrc.trustees@maryland.gov
To: hscrc.trustees@maryland.gov

DATE OF STATEMENT: 9/28/2025

PERIOD COVERED: FROM: 07/01/2024 **TO:** 06/30/2025

TRUSTEE, DIRECTOR, OR OFFICER NAME: Mihir Jani, MD

TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS: 400 West 7th Street Frederick, MD 21701

HOSPITAL NAME: Frederick Health

HOSPITAL ADDRESS: 400 West 7th Street Frederick, MD 21701

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME: Frederick Health Hospital

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS: 400 West 7th Street Frederick, MD 21701

MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: Physician Orthopedics & Sports Medicine

TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY: Past Chief of Staff

TYPE OR NATURE OF BUSINESS TRANSACTIONS, DEALINGS, OR SERVICES BY AND BETWEEN THE HOSPITAL TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY HAVING AN ACTUAL OR IMPUTED VALUE OR WORTH OF $10,000 OR MORE TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: Physician Orthopedics & Sports Medicine Frederick Health Medical Group

MONETARY VALUE OF THE BUSINESS TRANSACTION(S)TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: $529,130

DECLARATION OF TRUSTEE, DIRECTOR, OR OFFICER THAT THE STATEMENT IS TRUE TO THE BEST OF HIS/HER KNOWLEDGE, INFORMATION, AND BELIEF THAT THIS STATEMENT IS TRUE AND CORRECT UNDER PENALTIES OF PERJURY:

PRINTED NAME OF TRUSTEE, DIRECTOR, OR OFFICER: Mihir Jani, MD

Maryland

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Response for survey 'Maryland Health Services Cost Review Commission Trustee Disclosure of Interest Statement'

1 message

hscrc.trustees@maryland.gov <hscrc.trustees@maryland.gov> Mon, Sep 29, 2025 at 1:31 PM
Reply-To: hscrc.trustees@maryland.gov
To: hscrc.trustees@maryland.gov

DATE OF STATEMENT: 9/25/2025

PERIOD COVERED: FROM: 07/01/2024 **TO:** 06/30/2025

TRUSTEE, DIRECTOR, OR OFFICER NAME: Michele Ghim, MD

TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS: 400 West 7th Street, Frederick, MD 21701

HOSPITAL NAME: Frederick Health

HOSPITAL ADDRESS: 400 West 7th Street, Frederick, MD 21701

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME: Frederick Health Hospital

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS: 400 West 7th Street, Frederick, MD 21701

MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: Physician

TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY: Chief of Staff

TYPE OR NATURE OF BUSINESS TRANSACTIONS, DEALINGS, OR SERVICES BY AND BETWEEN THE HOSPITAL TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY HAVING AN ACTUAL OR IMPUTED VALUE OR WORTH OF $10,000 OR MORE TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: Medical Staff Leadership and representative

MONETARY VALUE OF THE BUSINESS TRANSACTION(S)TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: 69,006

DECLARATION OF TRUSTEE, DIRECTOR, OR OFFICER THAT THE STATEMENT IS TRUE TO THE BEST OF HIS/HER KNOWLEDGE, INFORMATION, AND BELIEF THAT THIS STATEMENT IS TRUE AND CORRECT UNDER PENALTIES OF PERJURY:

PRINTED NAME OF TRUSTEE, DIRECTOR, OR OFFICER: Michele Ghim, MD

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Response for survey 'Maryland Health Services Cost Review Commission Trustee Disclosure of Interest Statement'

1 message

hscrc.trustees@maryland.gov <hscrc.trustees@maryland.gov> Tue, Oct 14, 2025 at 8:23 AM
Reply-To: hscrc.trustees@maryland.gov
To: hscrc.trustees@maryland.gov

DATE OF STATEMENT: MD

PERIOD COVERED: FROM: 07/01/2024 **TO:** 6/30/2025

TRUSTEE, DIRECTOR, OR OFFICER NAME: Nicolette J. Moberly

TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS: 10033 Pine Tree Road

HOSPITAL NAME: Frederick Health

HOSPITAL ADDRESS: 400 West 7th Street, Frederick, MD 21701

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME: Big Breakthroughs

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS: 10033 Pine Tree Road Woodsboro, MD 21798

MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: Leadership Development Company

TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY: Founder | Executive Coach

TYPE OR NATURE OF BUSINESS TRANSACTIONS, DEALINGS, OR SERVICES BY AND BETWEEN THE HOSPITAL TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY HAVING AN ACTUAL OR IMPUTED VALUE OR WORTH OF $10,000 OR MORE TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: Provide Executive Coaching to executives

MONETARY VALUE OF THE BUSINESS TRANSACTION(S)TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: $24,000

DECLARATION OF TRUSTEE, DIRECTOR, OR OFFICER THAT THE STATEMENT IS TRUE TO THE BEST OF HIS/HER KNOWLEDGE, INFORMATION, AND BELIEF THAT THIS STATEMENT IS TRUE AND CORRECT UNDER PENALTIES OF PERJURY:

PRINTED NAME OF TRUSTEE, DIRECTOR, OR OFFICER: Nicolette J. Moberly

Maryland

HSCRC Trustees -MDH- <hscrc.trustees@maryland.gov>

Response for survey 'Maryland Health Services Cost Review Commission Trustee Disclosure of Interest Statement'

1 message

hscrc.trustees@maryland.gov <hscrc.trustees@maryland.gov> Tue, Oct 21, 2025 at 11:34 AM
Reply-To: hscrc.trustees@maryland.gov
To: hscrc.trustees@maryland.gov

DATE OF STATEMENT: 10/21/2025

PERIOD COVERED: FROM: 07/01/2025 **TO:** 06/30/2026

TRUSTEE, DIRECTOR, OR OFFICER NAME: Jason Lee

TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS: 8420 Gas House Pike Suite E Frederick MD 21701

HOSPITAL NAME: Frederick Health

HOSPITAL ADDRESS: 400 W 7th St Frederick Md 21701

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME: Lee Building Maintenance

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS: 8420 Gas House Pike Suite E Fredrick MD 21701

MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: Service Company

TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY: CEO

TYPE OR NATURE OF BUSINESS TRANSACTIONS, DEALINGS, OR SERVICES BY AND BETWEEN THE HOSPITAL TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY HAVING AN ACTUAL OR IMPUTED VALUE OR WORTH OF $10,000 OR MORE TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: Providing cleaning support and labor to the hospital

MONETARY VALUE OF THE BUSINESS TRANSACTION(S)TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: 1,950,000

DECLARATION OF TRUSTEE, DIRECTOR, OR OFFICER THAT THE STATEMENT IS TRUE TO THE BEST OF HIS/HER KNOWLEDGE, INFORMATION, AND BELIEF THAT THIS STATEMENT IS TRUE AND CORRECT UNDER PENALTIES OF PERJURY:

PRINTED NAME OF TRUSTEE, DIRECTOR, OR OFFICER: Jason E Lee

Maryland

HSCRC Trustees -MDH- <hscrc.trustees@maryland.gov>

Response for survey 'Maryland Health Services Cost Review Commission Trustee Disclosure of Interest Statement'

1 message

hscrc.trustees@maryland.gov <hscrc.trustees@maryland.gov> Thu, Oct 23, 2025 at 2:39 PM
Reply-To: hscrc.trustees@maryland.gov
To: hscrc.trustees@maryland.gov

DATE OF STATEMENT: 10/23/2025

PERIOD COVERED: FROM: 07/01/2024 **TO:** 06/30/2025

TRUSTEE, DIRECTOR, OR OFFICER NAME: Lisa Y. Coblentz

TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS: 7470 New Technology Way

HOSPITAL NAME: Frederick Health

HOSPITAL ADDRESS: 7470 New Technology Way

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME: Marvatemp Inc dba Manpower

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS: 7470 New Technology Way

MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: Marvatemp Inc dba Manpower

TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY: Marvatemp Inc dba Manpower

TYPE OR NATURE OF BUSINESS TRANSACTIONS, DEALINGS, OR SERVICES BY AND BETWEEN THE HOSPITAL TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY HAVING AN ACTUAL OR IMPUTED VALUE OR WORTH OF $10,000 OR MORE TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: My organization provides staffing assistance to Frederick Health in the form of contract associates who perform a variety of short-term or temp-to-perm work for Frederick Health while on my payroll.

MONETARY VALUE OF THE BUSINESS TRANSACTION(S)TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: $195,817 to Marvatemp Inc dba Manpower

DECLARATION OF TRUSTEE, DIRECTOR, OR OFFICER THAT THE STATEMENT IS TRUE TO THE BEST OF HIS/HER KNOWLEDGE, INFORMATION, AND BELIEF THAT THIS STATEMENT IS TRUE AND CORRECT UNDER PENALTIES OF PERJURY:

PRINTED NAME OF TRUSTEE, DIRECTOR, OR OFFICER: Lisa Y. Coblentz