



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>
Reply-To: hscrc.trustees@maryland.gov
To: hscrc.trustees@maryland.gov

Mon, Jun 13, 2022 at 10:00 AM

DATE OF STATEMENT: 6/13/2022**PERIOD COVERED: FROM:** 01/01/2021 **TO:** 12/31/2021**TRUSTEE, DIRECTOR, OR OFFICER NAME:** Charles Tapp**TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS:** [606 Greenville Ave, Staunton, VA 24401](#)**HOSPITAL NAME:** Adventist HealthCare Shady Grove Medical Center**HOSPITAL ADDRESS:** [9901 Medical Center Dr Rockville, MD 20850](#)**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME:** Potomac Conference Corporation**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS:** [606 Greenville Ave, Staunton, VA 24401](#)**MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** The Potomac Conference Corporation exists to grow health-disciple making churches**TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY:** President**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:** Space was leased with respect to the Imaging center off of Cherry Hill Rd. in Silver Spring.**MONETARY VALUE OF THE BUSINESS TRANSACTION(S) TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** 291669.09**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:** Charles Tapp



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Tue, Mar 15, 2022 at 3:56 PM

DATE OF STATEMENT: 3/15/2022**PERIOD COVERED: FROM:** 1/1/2021 **TO:** 12/31/2021**TRUSTEE, DIRECTOR, OR OFFICER NAME:** Brett Gamma**TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS:** [9901 Medical Center Drive, Rockville, MD](#) 20858**HOSPITAL NAME:** Adventist HealthCare Shady Grove Medical Center**HOSPITAL ADDRESS:** [9901 Medical Center Drive, Rockville, MD](#), 20850**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME:** US ACUTE CARE SOLUTION**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS:** [4535 Dressler Road, NW, Canton, OH](#), 44718**MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** Professional Physician Providers for Hospital Services**TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY:**
Assistant Medical Director, Shady Grove Medical Center, USACS East**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:** USACS
Provides physician coverage for Adventist Healthcare's Emergency Medicine, Hospitalist Medicine, Critical Care Medicine Departments, and Alternate Care Site**MONETARY VALUE OF THE BUSINESS TRANSACTION(S) TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** \$24,678,744.51**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:** Brett Gamma



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

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Thu, Apr 7, 2022 at 11:52 AM

DATE OF STATEMENT: 4/7/2022**PERIOD COVERED: FROM:** 01/01/2021 **TO:** 12/31/2021**TRUSTEE, DIRECTOR, OR OFFICER NAME:** Paul Alpuche, Jr.**TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS:** [7600 Wisconsin Avenue, Suite 700, Bethesda, MD 20814](#)**HOSPITAL NAME:** Adventist HealthCare Shady Grove Medical Center**HOSPITAL ADDRESS:** [9901 Medical Center Drive, Rockville, MD 20850](#)**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME:** Lerch, Early & Brewer**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS:** [7600 Wisconsin Avenue, Suite 700, Bethesda, MD 20814](#)**MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** Lerch, Early & Brewer**TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY:** Owner**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:** Legal Services**MONETARY VALUE OF THE BUSINESS TRANSACTION(S) TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** \$422,986.77**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:** Paul Alpuche, Jr.



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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, Apr 10, 2022 at 4:55 PM

Reply-To: hscrc.trustees@maryland.gov

To: hscrc.trustees@maryland.gov

DATE OF STATEMENT: 4/10/2022**PERIOD COVERED: FROM:** 01/01/2021 **TO:** 12/31/2021**TRUSTEE, DIRECTOR, OR OFFICER NAME:** Nicolas Cacciabeve MD**TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS:** [9901 Medical Center Drive Rockville MD](#)**HOSPITAL NAME:** Adventist HealthCare Shady Grove Medical Center**HOSPITAL ADDRESS:** [9901 Medical Center Drive Rockville MD](#)**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME:** Advanced Pathology Associates**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS:** [9901 Medical Center Drive Rockville MD](#)**MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** Professional Pathology Services**TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY:**
Managing Member**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 Director of Laboratory Professional Pathology Services**MONETARY VALUE OF THE BUSINESS TRANSACTION(S) TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** 1,017,937.13 Dollars**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:** Nicolas CSacciabeve