

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

1 message

hscrc.trustees@maryland.gov <hscrc.trustees@maryland.gov>

Wed, Apr 23, 2025 at 11:15 AM

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

DATE OF STATEMENT: 4/23/2025

PERIOD COVERED: FROM: 01/01/2024 TO: 12/31/2024

TRUSTEE, DIRECTOR, OR OFFICER NAME: Cynthia Plate, MD

TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS: 11886 Healing Way, Suite 701, Silver Spring, MD 20904

**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: Maryland Oncology Hematology

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS: 11886 Healing Way, Suite 701, Silver Spring, MD

20904

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

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

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: Salary support for clinical staff working on various research project, Call coverage

MONETARY VALUE OF THE BUSINESS TRANSACTION(S)TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: \$281,643.50

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: Cynthia Plate, MD



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

1 message

hscrc.trustees@maryland.gov <hscrc.trustees@maryland.gov>

Wed, Mar 26, 2025 at 3:45 PM

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

**DATE OF STATEMENT: 3/26/2025** 

**PERIOD COVERED: FROM:** 01/01/2024 **TO:** 12/31/2024

TRUSTEE, DIRECTOR, OR OFFICER NAME: Safy John

TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS: 4535 Dressler Rd NW, Canton, OH 44718

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 Solutions

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS: 4535 Dressler Rd NW, Canton, OH 44718

MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: Provide Physician and Advanced Practice Provider Staffing

TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY: Medical Director, Critical Care

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 practitioner staffing for emergency medicine, hospitalist Medicine, critical Care Medicine, observation Medicine, palliative Care Medicine, and medical care off behavioral health patients

MONETARY VALUE OF THE BUSINESS TRANSACTION(S)TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: \$7,998,004.35

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: Safy John



# 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, Mar 31, 2025 at 4:30 PM

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

**DATE OF STATEMENT: 3/31/2025** 

PERIOD COVERED: FROM: 01/01/2024 TO: 01/31/2024

TRUSTEE, DIRECTOR, OR OFFICER NAME: Brett Gamma

TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS: 4535 Dressler Rd NW, Canton, OH 44718

**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 SOLUTIONS

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS: 4535 Dressler Rd NW, Canton, OH 44718

MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: Provide physician and advanced practice practitioner staffing to hospitals.

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

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 physician and advanced practice practitioner staffing for emergency medicine, hospitalist and critical care medicine services that also involves medical care of behavioral health patients.

MONETARY VALUE OF THE BUSINESS TRANSACTION(S)TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: \$664,429,39

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



# 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, Apr 3, 2025 at 9:02 AM

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

**DATE OF STATEMENT: 4/3/2025** 

PERIOD COVERED: FROM: 01/01/2024 TO: 12/31/2024

TRUSTEE, DIRECTOR, OR OFFICER NAME: Charles A 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 of SDA

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: to grow healthy 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: Potomac Conference Corporation of SDA rents space to Adventist HealthCare, Inc. in Silver Spring, MD to support the delivery of imaging services to patients.

MONETARY VALUE OF THE BUSINESS TRANSACTION(S)TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: 179865.17

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 A Tapp



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

1 message

hscrc.trustees@maryland.gov <hscrc.trustees@maryland.gov>

Wed, Apr 9, 2025 at 7:40 AM

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

DATE OF STATEMENT: 4/9/2025

PERIOD COVERED: FROM: 01/01/2024 TO: 12/31/2024

TRUSTEE, DIRECTOR, OR OFFICER NAME: Laura Khandagle

TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS: 11886 HEALING WAY STE 505

**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: Khandagle Medical Associates

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS: 11886 Healing Way; Suite 505; Silver Spring, MD

20904

MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: Primary Care Physician - Internal Medicine

TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY: Managing Partner/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: administrator/medical staff support at hospital system and personal business in quality program that cms monies are paid to hospital system and then dispersed to my practice based on our performance with quality program

MONETARY VALUE OF THE BUSINESS TRANSACTION(S)TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: 37,448.27

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: Laura Khandagle, MD