



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, Oct 21, 2024 at 8:46 AM

DATE OF STATEMENT: 10/21/2024

PERIOD COVERED: FROM: 07/01/2023 **TO:** 06/30/2024

TRUSTEE, DIRECTOR, OR OFFICER NAME: Daniela Mihova

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: Provider

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: Vice chief of staff stipend Medical Laboratory Director salary Physician pathology group contracted with Frederick Health Hospital - compensation is based on the professional component of the anatomic pathology diagnoses.

MONETARY VALUE OF THE BUSINESS TRANSACTION(S) TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: more than 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: Daniela Mihova



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>

Wed, Oct 23, 2024 at 8:34 AM

Reply-To: hscrc.trustees@maryland.gov

To: hscrc.trustees@maryland.gov

DATE OF STATEMENT: 10/19/2024

PERIOD COVERED: FROM: 07/01/2023 **TO:** 06/30/2024

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

TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS: [501 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 Medical Group

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS: [501 West 7th Street, Frederick, MD 21701](#)

MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: Medical Staff Frederick Health Hospital

TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY: Chief Physician
Executive Frederick Health Medical Group

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 Stipend for Chief of Staff

MONETARY VALUE OF THE BUSINESS TRANSACTION(S) TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: more that \$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: Mihir Jani, MD MHA



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 24, 2024 at 11:02 AM

Reply-To: hscrc.trustees@maryland.gov

To: hscrc.trustees@maryland.gov

DATE OF STATEMENT: 10/9/2024**PERIOD COVERED: FROM:** 7/1/2023 **TO:** 6/30/2024**TRUSTEE, DIRECTOR, OR OFFICER NAME:** Michele Ghim, MD**TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS:** 400 W. 7th Street**HOSPITAL NAME:** Frederick Health**HOSPITAL ADDRESS:** 400 W. 7th Street**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME:** Frederick Health**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS:** 400 W. 7th Street**MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** Medical Staff of Frederick Health Hospital, Frederick Home Health**TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY:** Chief of Staff, Medical Director of Family Connects Frederick County**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 leadership of the Medical Staff. Provide clinical guidance and oversight to Family Connects Frederick County.**MONETARY VALUE OF THE BUSINESS TRANSACTION(S) TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** more than \$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:** 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>

Wed, Oct 16, 2024 at 7:55 AM

Reply-To: hscrc.trustees@maryland.gov

To: hscrc.trustees@maryland.gov

DATE OF STATEMENT: 10/16/2024

PERIOD COVERED: FROM: 10/1/2023 **TO:** 10/16/2024

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 Memorial Hospital

HOSPITAL ADDRESS: [400 W 7th St. Frederick](#)

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 Frederick](#)

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

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: Provide Cleaning Services, Staffing

MONETARY VALUE OF THE BUSINESS TRANSACTION(S) TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: 1.5 Million

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 Lee



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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>

Wed, Oct 9, 2024 at 4:02 PM

Reply-To: hscrc.trustees@maryland.gov

To: hscrc.trustees@maryland.gov

DATE OF STATEMENT: 10/9/2024

PERIOD COVERED: FROM: 07/01/2023 **TO:** 06/30/2024

TRUSTEE, DIRECTOR, OR OFFICER NAME: Thomas A Kleinhanzl

TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS: [400 West 7th St., Frederick, MD 21701](#)

HOSPITAL NAME: Frederick Memorial Hospital

HOSPITAL ADDRESS: [400 West 7th St., 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 St., 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: President and 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 health system, I receive an annual salary greater than \$10,000

MONETARY VALUE OF THE BUSINESS TRANSACTION(S) TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: Greater than \$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 A Kleinhanzl