



HSCRC Trustees -MDH- &lt;hscrc.trustees@maryland.gov&gt;

---

## 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 2:00 PM

Reply-To: hscrc.trustees@maryland.gov

To: hscrc.trustees@maryland.gov

**DATE OF STATEMENT:** 10/16/2024

**PERIOD COVERED: FROM:** 07/01/2023 **TO:** 6/30/2024

**TRUSTEE, DIRECTOR, OR OFFICER NAME:** Meredith Chaiken

**TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS:** 3430 2nd St.

**HOSPITAL NAME:** Medstar Harbor Hospital

**HOSPITAL ADDRESS:** [3001 S Hanover St., Baltimore, MD 21225](#)

**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME:** Greater Baybrook Alliance

**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS:** 3430 2nd St. Suite 300

**MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** nonprofit community development corporation

**TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY:** Executive Director

**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:** MedStar Harbor Hospital made grant payments to the Greater Baybrook Alliance, Inc.

**MONETARY VALUE OF THE BUSINESS TRANSACTION(S) TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** \$571,000

**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:** Meredith Chaiken



HSCRC Trustees -MDH- &lt;hscrc.trustees@maryland.gov&gt;

---

## 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 17, 2024 at 11:27 PM

Reply-To: hscrc.trustees@maryland.gov

To: hscrc.trustees@maryland.gov

**DATE OF STATEMENT:** 10/17/2024

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

**TRUSTEE, DIRECTOR, OR OFFICER NAME:** Dawn M. Gretz

**TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS:** [1405 Madison Park Drive Glen Burnie, MD 21061](#)

**HOSPITAL NAME:** Medstar Harbor Hospital

**HOSPITAL ADDRESS:** [3001 S. Hanover Street Baltimore, MD 21225](#)

**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME:** Dawn M. Gretz, DPM, P.A.

**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS:** [1405 Madison Park Drive Glen Burnie, MD 21061](#)

**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:** 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:** I was President of the Medical Staff

**MONETARY VALUE OF THE BUSINESS TRANSACTION(S) TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** 20,000

**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:** Dawn M. Gretz



HSCRC Trustees -MDH- &lt;hscrc.trustees@maryland.gov&gt;

---

## 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, Oct 18, 2024 at 1:48 PM

Reply-To: hscrc.trustees@maryland.gov

To: hscrc.trustees@maryland.gov

**DATE OF STATEMENT:** 10/18/2024

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

**TRUSTEE, DIRECTOR, OR OFFICER NAME:** Dawn Gretz

**TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS:** [1405 Madison Park Drive Glen Burnie, MD 21061](#)

**HOSPITAL NAME:** Medstar Harbor Hospital

**HOSPITAL ADDRESS:** [3001 S. Hanover Street Baltimore, MD 21225](#)

**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME:** Dawn Gretz

**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS:** [1405 Madison Park Drive Glen Burnie, MD 21061](#)

**MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** Professional Health Services

**TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY:** President of Medical 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:** Medstar Harbor Hospital paid Dr Dawn Gretz to serve as President of the Medical Staff.

**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:** Dawn Gretz



HSCRC Trustees -MDH- &lt;hscrc.trustees@maryland.gov&gt;

---

## 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, Oct 11, 2024 at 8:01 AM

Reply-To: hscrc.trustees@maryland.gov

To: hscrc.trustees@maryland.gov

**DATE OF STATEMENT:** 10/11/2024

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

**TRUSTEE, DIRECTOR, OR OFFICER NAME:** Savas Karas

**TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS:** [6116 Executive Blvd, Suite 100, North Bethesda, MD 20852](#)

**HOSPITAL NAME:** Medstar Harbor Hospital

**HOSPITAL ADDRESS:** [3001 Hanover St., Baltimore, MD 21225](#)

**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME:** Maryland Hospital Association

**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS:** [6820 Deerpath Rd, Elkridge, MD 21075](#)

**MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** Advocacy and Policy Development

**TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY:** Board Director

**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:** Maryland Harbor Hospital paid membership dues to the Maryland Hospital Association (MHA) in FY2024

**MONETARY VALUE OF THE BUSINESS TRANSACTION(S) TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** 113,604

**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:** Savas Karas



HSCRC Trustees -MDH- &lt;hscrc.trustees@maryland.gov&gt;

## 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, Oct 14, 2024 at 9:56 AM

Reply-To: hscrc.trustees@maryland.gov

To: hscrc.trustees@maryland.gov

**DATE OF STATEMENT:** 10/14/2024**PERIOD COVERED: FROM:** 07/01/2023 **TO:** 06/30/2024**TRUSTEE, DIRECTOR, OR OFFICER NAME:** Jill Donaldson, FACHE**TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS:** [3001 S. Hanover Street, Baltimore, MD 21225](#)**HOSPITAL NAME:** Medstar Harbor Hospital**HOSPITAL ADDRESS:** [3001 S. Hanover Street, Baltimore, MD 21225](#)**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME:** South Baltimore Gateway Partnership**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS:** [101 W. Dickman Street, Baltimore, MD 21230](#)**MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** Community Development**TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY:** Board Director**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:** MedStar Harbor Hospital received grant funding from South Baltimore Gateway Partnership**MONETARY VALUE OF THE BUSINESS TRANSACTION(S) TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** \$49,628**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:** Jill Donaldson, FACHE



HSCRC Trustees -MDH- &lt;hscrc.trustees@maryland.gov&gt;

## 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, Oct 18, 2024 at 5:24 PM

Reply-To: hscrc.trustees@maryland.gov

To: hscrc.trustees@maryland.gov

**DATE OF STATEMENT:** 10/18/2024**PERIOD COVERED: FROM:** 07/01/2023 **TO:** 06/30/2024**TRUSTEE, DIRECTOR, OR OFFICER NAME:** DAVID GHADISHA M.D.**TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS:** [3001 S. HANOVER ST, BALTIMORE, MD 21225](#)**HOSPITAL NAME:** Medstar Harbor Hospital**HOSPITAL ADDRESS:** [3001 S. HANOVER ST BALTIMORE, MD 21225](#)**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME:** DAVID GHADISHA M.D.**TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS:** [3001 S.HANOVER ST BALTIMORE, MD 21225](#)**MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY:** PROFESSIONAL HEALTH SERVICES**TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY:** PRESIDENT OF MEDICAL STAFF AT MEDSTAR HARBOR HOSPITAL**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:** MEDSTAR HARBOR HOSPITAL PAID DR GHADISHA TO SERVE AS PRESIDENT OF MEDICAL STAFF**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:** DAVID GHADISHA M.D.