



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

Fri, Oct 25, 2019 at 9:52 AM

DATE OF STATEMENT: 10/25/2019

PERIOD COVERED: FROM: 7/1/2018 **TO:** 6/30/2019

TRUSTEE, DIRECTOR, OR OFFICER NAME: Tracy A. Harris, Ph.D.

TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS: [5825 Radio Station Road, La Plata 20646](#)

HOSPITAL NAME: Medstar St. Mary's Hospital

HOSPITAL ADDRESS: [25500 Point Lookout Road](#)

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME: College of Southern Maryland

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS: [22950 Hollywood Road, Leonardtown MD 20650](#)

MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: MedStar St. Mary's Hospital

TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY: Vice President of Student Equity and Success

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: The hospital provides academic scholarships and program support for the our health sciences program. I am not involved in the awarding or the administration of this funding.

MONETARY VALUE OF THE BUSINESS TRANSACTION(S) TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: \$26,572.00

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: Tracy A. Harris

COMPLETED BY: Tracy A. Harris, taharris1@csmd.edu, 240-538-5995



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Reply-To: hscrc.trustees@maryland.gov
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Mon, Oct 28, 2019 at 3:24 PM

DATE OF STATEMENT: 10/28/2019

PERIOD COVERED: FROM: 07/01/2018 **TO:** 07/01/2019

TRUSTEE, DIRECTOR, OR OFFICER NAME: Krishna Jayaraman

TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS: Jayaraman Medical Associates LLC [28227 three notch rd. Mechanicsville MD 20659](#)

HOSPITAL NAME: Medstar St. Mary's Hospital

HOSPITAL ADDRESS: Leonardtown MD 20650

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME: Jayaraman Medical Associates LLC

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS: [28227 three notch rd Mechanicsville](#) Nd 20659

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:
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: Hospital medical coverage

MONETARY VALUE OF THE BUSINESS TRANSACTION(S) TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: 239,285

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: Krishna Jayaraman

COMPLETED BY: Krishna Jayaraman, krishna50@yahoo.com, 3014817889