



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: tstauch@verizon.net

Tue, Oct 22, 2019 at 7:57 PM

DATE OF STATEMENT: 10/22/2019

PERIOD COVERED: FROM: 07/01/2018 **TO:** 06/30/2019

TRUSTEE, DIRECTOR, OR OFFICER NAME: Thomas Stauch, M.D.

TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS: [510 Idlewild Ave Easton,MD 21601](#)

HOSPITAL NAME: University of Maryland - Shore Regional Health

HOSPITAL ADDRESS: [219 S.Washington St. Easton MD 21601](#)

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME: Shore Orthopedic Center

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS: [510 Idlewild Ave Easton, MD 21601](#)

MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: Professional -Clinical

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

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: Clinical Services

MONETARY VALUE OF THE BUSINESS TRANSACTION(S) TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: \$17533

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 Stauch

COMPLETED BY: Thomas Stauch, tstauch@verizon.net, 4108295628

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Tue, Oct 29, 2019 at 1:45 PM

DATE OF STATEMENT: 10/29/2019

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

TRUSTEE, DIRECTOR, OR OFFICER NAME: Keith McMahan

TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS: PO Box [465, 3941 Federalsburg Highway, Federalsburg, MD 21632](#)

HOSPITAL NAME: University of Maryland - Shore Regional Health

HOSPITAL ADDRESS: 219 South Washington Street, Easton, MD 21601

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME: Tri-Gas and Oil

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS: PO Box [465, 3941 Federalsburg Highway, Federalsburg, MD 21632](#)

MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: Major Business - Energy Utility

TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY: Chief Executive Officer

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: Backup Fuel Supplies

MONETARY VALUE OF THE BUSINESS TRANSACTION(S) TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: \$33,152

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: Keith McMahan

COMPLETED BY: Jeffrey Stavelly, Jstavelly@umm.edu, 410-328-6031



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Tue, Oct 29, 2019 at 1:40 PM

DATE OF STATEMENT: 10/29/2019

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

TRUSTEE, DIRECTOR, OR OFFICER NAME: Wayne L Gardner, Sr.

TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS: [100 Friels Place](#) PO Box 10, Queenstown, MD 21658

HOSPITAL NAME: University of Maryland - Shore Regional Health

HOSPITAL ADDRESS: 219 South Washington Street, Easton, MD 21601

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME: Best Care Ambulance

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS: [29468 Laurwayn Drive, Unit 11, Trappe, MD 21673](#)

MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: Major Business - Transportation

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: Ambulance Transportation Services

MONETARY VALUE OF THE BUSINESS TRANSACTION(S) TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: \$499,189

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: Wayne L Gardner, Sr.

COMPLETED BY: Jeffrey Stavely, Jstavely@umm.edu, 410-328-6031



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Tue, Oct 29, 2019 at 1:40 PM

DATE OF STATEMENT: 10/29/2019

PERIOD COVERED: FROM: 07/01/2018 **TO:** 06/30/2019

TRUSTEE, DIRECTOR, OR OFFICER NAME: Ona M. Kareiva, MD

TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS: PO Box 1208, Easton, MD 21601

HOSPITAL NAME: University of Maryland - Shore Regional Health

HOSPITAL ADDRESS: 219 South Washington Street, Easton, MD 21601

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY NAME: Tidewater Anesthesia

TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY ADDRESS: PO Box 1208, Easton, MD 21601

MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: Professional - Clinical

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

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: Professional Anesthesia Services

MONETARY VALUE OF THE BUSINESS TRANSACTION(S) TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: \$3,790,077

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: Ona M. Kareiva, MD

COMPLETED BY: Jeffrey Stavelly, jstavelly@umm.edu, 410-328-6031



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Tue, Oct 29, 2019 at 12:29 PM

DATE OF STATEMENT: 10/29/2019

PERIOD COVERED: FROM: 07/01/2018 **TO:** 06/30/2019

TRUSTEE, DIRECTOR, OR OFFICER NAME: Robert A. Chrencik

TRUSTEE, DIRECTOR, OR OFFICER BUSINESS ADDRESS: [250 West Pratt Street, 24th Floor Baltimore, MD 21201](#)

HOSPITAL NAME: University of Maryland - Shore Regional Health

HOSPITAL ADDRESS: [219 South Washington Street](#), Easton, MD 21601

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

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

MAJOR BUSINESS, PROFESSIONAL, OR ACADEMIC ACTIVITY OF TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: Major Business - Hospital Advocacy

TITLE, RELATIONSHIP, OR POSITION OF TRUSTEE, DIRECTOR, OR OFFICER IN THE BUSINESS ENTITY: Board 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: Membership Dues

MONETARY VALUE OF THE BUSINESS TRANSACTION(S) TO THE TRUSTEE, DIRECTOR, OR OFFICER'S BUSINESS ENTITY: \$203,583

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: Robert A. Chrencik

COMPLETED BY: Jeffrey Stavely, Jstavely@umm.edu, 410-328-6031