

APP. EXHIBIT# 1

CASE: 2023-0118-S

DATE: 9/5/23

**Special Exception
Cecil Avenue Building, LLC
Special Exception
899 Cecil Ave, Millersville, MD 21108
Case No. 2023-0118-S**

Affidavit of Posting

I, the undersigned, being over the age of eighteen and competent to testify to the matters contained herein do solemnly declare and affirm under the penalties of perjury the following:

- (1) That I posted the notice signs on the property that is the subject of Case No. 2023-0118-S in the name of BHRE Investors, LLC (the "Property");
- (2) That the signs were posted on August 21, 2023;
- (3) That the signs have been posted continuously since that date;
- (4) That the location of the signs that I posted are not more than 10 feet from the boundary of the Property that abuts a public road and are posted as follows: (1) sign is posted along the frontage of the property adjacent and facing Cecil Avenue and (1) sign is posted along Nancy Avenue.

Signature of Affiant:



Kimberly Morgan
Vice President, Land Development
The LANDTECH Corporation
201 Defense Highway
Annapolis, MD 21401

Date:

8/29/2023

BHRE Investors (MD) LLC
Cecil Avenue Building LLC
Case No. 2023-0118-S

APP. EXHIBIT# 2
CASE: 2023-0118-S
DATE: 9/5/23



Thomas J. McNulty, Pharm. D.
559 Chaparral Court
Altadena, CA 91001
(818) 209-5011

Education: Philadelphia College of Pharmacy and Science, 1980.
B.S. Pharmacy

University of the Pacific, School of Pharmacy, 1985.
Doctor of Pharmacy

Experience:
2020-Present

Emend Health: Founder and Partner:

Emend Health is a consolidator in the behavioral health space that includes Empower Recovery Center, New Perspective Recovery, Benchmark Transitions in Redlands and Montclair California and 13 Chapters compassing residential and outpatient facilities. All of which are Joint Commission on Accreditation of Healthcare Organizations (JCAHO) accredited, evidenced based treatment centers serving patients with mental health, eating disorders and substance use disorders in the southern California, west Florida and Maryland areas.

2015-2020

The Gooden Center

Chief Executive Officer

The Gooden Center (TGC) is a healthcare facility specializing in the treatment of men who are suffering from mental health challenges including substance use disorders (SUDs), depression, bipolar disorder and dual diagnosis issues involving SUD. As CEO responsibilities include fiscal, clinical and operational performance as

well as staff, fund and alumni development. Responsibilities also include all compliance with regulatory entities as well as successful accreditation achievement and maintenance

2012-2014

HealthCarePays, Inc.

Chief Clinical Officer

HealthcarePays mission is to bring “on-line banking” to health insurers, hospitals and physicians. The end goal is to eliminate redundant, unnecessary, and wasteful healthcare costs in all healthcare industry financial transactions by creating a payer collaborative network. Reporting to the CEO, The Chief Clinical Officer’s responsibilities included creating the clinical positions and offering of the organization, interfacing with senior payer management, creating data management tools that sift through the enormous data bases creating usable information for employers, payers, providers and other healthcare stakeholders.

2010-2014

Novologix, Inc. (Formerly Ancillary Care Management)

Member, Board of Directors

2006-2015

The Gooden Center

Member, Board of Directors

2001-2010

Ancillary Care Management, Inc., Los Angeles, CA

Chief Clinical Officer, Member of Board of Directors

Ancillary Care Management (ACM) has continued to develop its function as the first of its kind as a medical pharmacy benefits and home infusion specialty and

homecare network manager. Revenues eventually grew to 468 million annually. Responsibilities included:

- Call Center Operations
- Specialty Program Development
- Quality Assurance
- Regulatory and Compliance
- Client Support
- Clinical Reporting
- New Client Implementation
- Clinical Sale Support
- Drug Review
- Accreditation
- Licensure

Health Integration Strategies, Pasadena, CA

1995-
2001

Founding Partner and President,

Health Integration Strategies is a health data management and consulting company specializing in the alternate care practice setting. Consulting services include:

JCAHO Preparation
Business Plan Development
Start Up Planning and Direction
Materials Management and Acquisition Strategies
Sales and Marketing Support
Utilization and Outcome Reporting and Development
Clinical Operations Management
Cost of Goods/Service Analysis
Information Systems
Capitation Development and Preparation
Performance Improvement
General Organizational Management
Department Management
Risk Assessment

Curaflex Health Services, Ontario, CA

1992-1995

Vice President, Department of Clinical Services
Reporting directly to the President and CEO, final responsibility for Pharmacy and Nursing operations generating 100 Million dollars of infusion revenue.

Integral responsibility at Senior Executive level for various additional functions of company operations including:

- JCAHO Accreditation for 28 sites.
- All aspects of Licensure and Regulatory compliance
- Managed Care Sales and Outcome Support
- Medical Advisor Relationships
- Merger and/or Acquisition of 14 sites
- Product standardization and cost of goods analysis with
- National Contracts implications
- Cost of Service analysis and staff modeling
- Quality improvement management
- Drug, Clinical and Sales information

Associations

Representation for Trade and Professional

- Staff Development and Education
- Facility Design and workflow evaluation
- Information systems development

Curaflex Health Services, Ontario, CA

Dec. 1989-
Nov. 1992

National Director of Pharmacy Services

First National Director of Pharmacy Services with responsibilities including development of the Pharmacy Services Manual, Pharmacy Quality Assurance indicators, development of medication protocols, Pharmacist selection, orientation and training, coordination with Materials Management, Drug information, Pharmacy regulatory and licensure compliance and implementation of all necessary criteria for JCAHO accreditation.

Preferred Care Health Services, Santa Fe Springs, Ca.

1989-1989

Director of Pharmacy Services

Duties included final responsibility for all pharmacy functions as well as coordination of nursing services. Pharmacy functions included but were not limited to: narcotic control, management of staff Pharmacists, technicians and delivery personnel, Precepting of Pharmacy interns, all aspects of Quality Assurance, maintenance of patient medical records, and preparation for successful JCAHO accreditation.

Clinical services included:

Aminoglycoside and Vancomycin Pharmacokinetic dosing
Metabolic assessment and TPN dosing
Policy and Procedure development
Drug protocol development
Drug Information
Selection of appropriateness of home care patients
In-Service of nursing staff and nursing agencies
Participation on Drug Utilization Review Committee

Queen of Angels Medical Center, Los Angeles, CA

Jan. 1986-
Feb. 1989

Clinical Pharmacist

Aminoglycoside and Vancomycin pharmacokinetic monitoring, Metabolic Support Service, Drug Utilization Review, computerized unit dose inpatient dispensing, hospital and community drug information, supervision of pharmacy technician and intern staff, Sterile IV Admixture and outpatient consulting and dispensing.

InnerCommunity Medical Center, Covina, CA

1982-
1984

Staff Pharmacist

Aminoglycoside and Vancomycin pharmacokinetic dosing, TPN monitoring, Sterile IV Admixture, unit dose based inpatient and outpatient consulting and dispensing. Supervision of technician and intern staff.

White Memorial Medical Center, Los Angeles, CA

1981-
1982

Staff Pharmacist (Night Shift)

TPN and Sterile IV Admixture including neonatal formulations, outpatient consultation and dispensing, inpatient unit dosed dispensing and hospital narcotic control.

Arcadia Methodist Medical Center, Arcadia, CA

1980-
1981

Intern Pharmacist

Cardiopulmonary and Chemotherapy rotations,
counseling, Sterile IV Admixture, unit dose
discharge
dispensing.

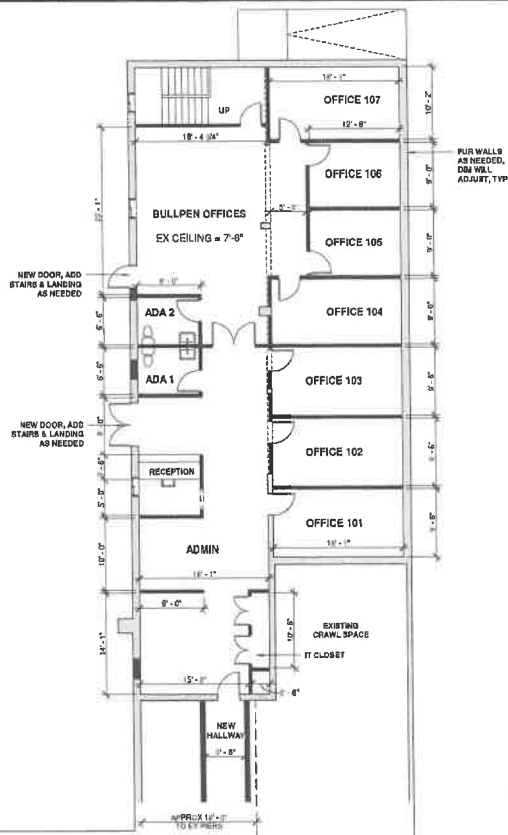
Associations:

- American Society of Health Systems Pharmacists
 - Sig: Home Infusion Therapy, Professional Practice Committee
- California Society of Health Systems Pharmacists
- San Gabriel Valley of Hospital Pharmacists
- American Society of Parenteral and Enteral Nutrition
- National Association of Vascular Access Networks
- Home Infusion Therapy Coalition of California

References: Available upon request

STAPLE EDGE

APP. EXHIBIT# 4
CASE: 2023-0118-S
DATE: 9/5/23



SEE NORTH WING



NEW - LEVEL 1 - SOUTH WING
1/8" = 1'-0"

DONNY ANKRI ARCHITECTS
donnyankri.com | 443.929.2377

EATING DISORDER FACILITY
899 CECIL AVENUE
MILLERSVILLE, MD
21108

PROFESSIONAL CERTIFICATION: I CERTIFY THAT THESE DOCUMENTS WERE PREPARED OR APPROVED BY ME, AND THAT I AM A DULY LICENSED ARCHITECT UNDER THE LAWS OF THE STATE OF MARYLAND, LICENSE NUMBER 11036, EXPIRATION DATE 12/31/2024.



REVISIONS		
NUMBER	DESCRIPTION	DATE

NOT FOR PERMIT OR CONSTRUCTION

Date	08/10/2023
Scale	As Indicated
Job No.	XXXX
Drawn By	DA

LEVEL 1 - SOUTH WING

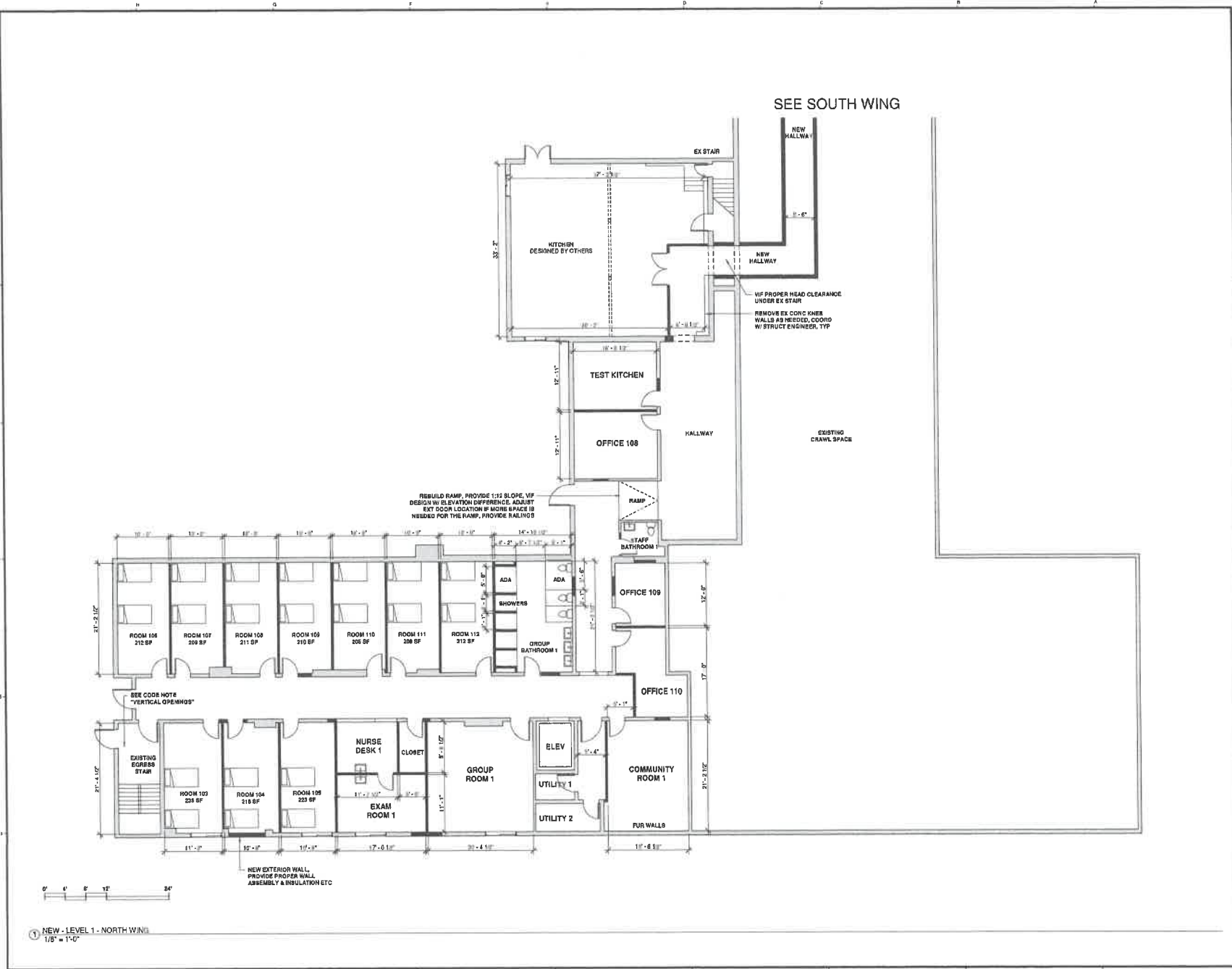
Drawing No. **A1.00**

STAPLE EDGE

STAPLE EDGE

STAPLE EDGE

EATING DISORDER FACILITY
899 CECIL AVENUE
MILLERSVILLE, MD
21108



SEE SOUTH WING

"PROFESSIONAL CERTIFICATION, I CERTIFY THAT THESE DOCUMENTS WERE PREPARED OR APPROVED BY ME, AND THAT I AM A DULY LICENSED ARCHITECT UNDER THE LAWS OF THE STATE OF MARYLAND, LICENSE NUMBER 17268, EXPIRATION DATE 10/30/2024."



REVISIONS		
NUMBER	DESCRIPTION	DATE

NOT FOR PERMIT OR CONSTRUCTION

Date	06/10/2023
Scale	As Indicated
Job No.	XXXX
Drawn By	Author

LEVEL 1 - NORTH WING

Drawing No. **A1.01**

① NEW - LEVEL 1 - NORTH WING
 1/8" = 1'-0"

EATING DISORDER FACILITY
899 CECIL AVENUE
MILLERSVILLE, MD
21108

"PROFESSIONAL CERTIFICATION I CERTIFY THAT THESE DOCUMENTS WERE PREPARED OR APPROVED BY ME, AND THAT I AM A FULLY LICENSED ARCHITECT UNDER THE LAWS OF THE STATE OF MARYLAND. LICENSE NUMBER 17088 EXPIRATION DATE 10/30/2024"



REVISIONS		
NUMBER	DESCRIPTION	DATE

NOT FOR PERMIT OR CONSTRUCTION

Date	09/10/2023
Scale	As Indicated
Job No.	X55X
Drawn By	DA

LEVEL 2 - SOUTH WING

Drawing No. **A2.00**

STAPLE EDGE

STAPLE EDGE

NEW BATHROOM LAYOUT

- 1) "DN1" = RESIDENT BEDROOM BATHROOMS - ALL TO BE RECONFIGURED TO TYPICAL LAYOUT IN PLAN
- 2) "DNF" = WET WALL TYP FLOOR TO CBILING CWT/CWB
- 3) "DN-1" = TYP CFT - SEE SHEET A0.00



A1 NEW - LEVEL 2 - SOUTH WING
 1/8" = 1'-0"

STAPLE EDGE

EATING DISORDER FACILITY
899 CECIL AVENUE
MILLERSVILLE, MD
21108

PROFESSIONAL CERTIFICATION I CERTIFY THAT THESE DOCUMENTS WERE PREPARED OR APPROVED BY ME, AND THAT I AM A DULY LICENSED ARCHITECT UNDER THE LAWS OF THE STATE OF MARYLAND, LICENSE NUMBER 17081706 EXP. 07/01/2024.



REVISIONS		
NUMBER	DESCRIPTION	DATE

NOT FOR PERMIT OR CONSTRUCTION	
Date	08/10/2023
Scale	As Indicated
Job No.	XXXX
Drawn By	Author

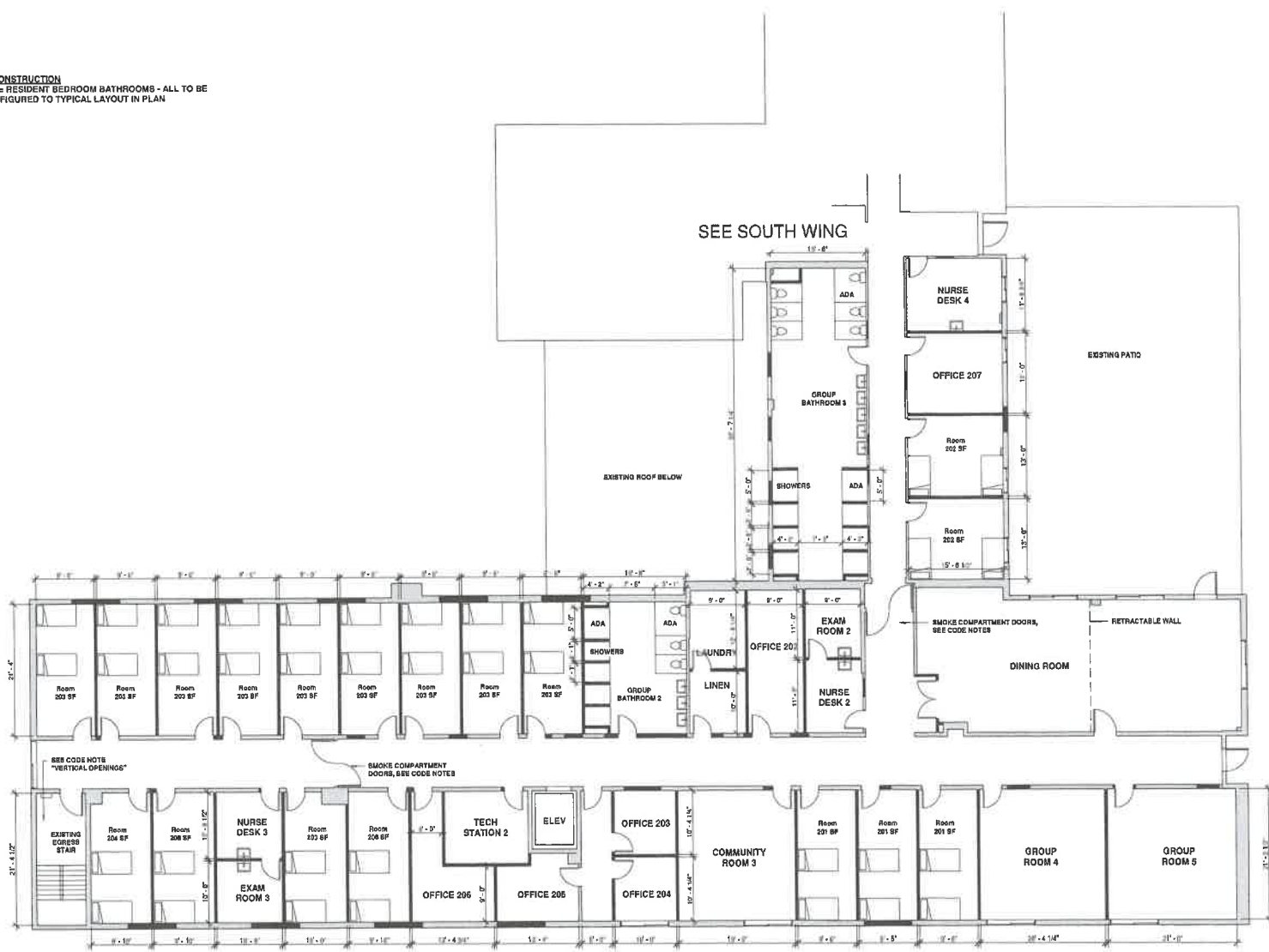
LEVEL 2 - NORTH WING
Drawing No. **A2.01**

NEW CONSTRUCTION
2) DNT1 = RESIDENT BEDROOM BATHROOMS - ALL TO BE RECONFIGURED TO TYPICAL LAYOUT IN PLAN

SEE SOUTH WING

EXISTING ROOF BELOW

EXISTING PATIO

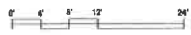


SEE CODE NOTE "VERTICAL OPENINGS"

SMOKE COMPARTMENT DOORS, SEE CODE NOTES

SMOKE COMPARTMENT DOORS, SEE CODE NOTES

RETRACTABLE WALL



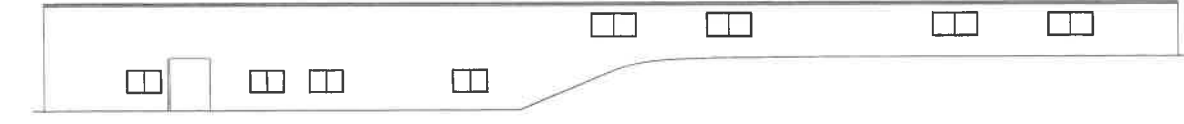
NEW - LEVEL 2 - NORTH WING
1/8" = 1'-0"

STAPLE EDGE

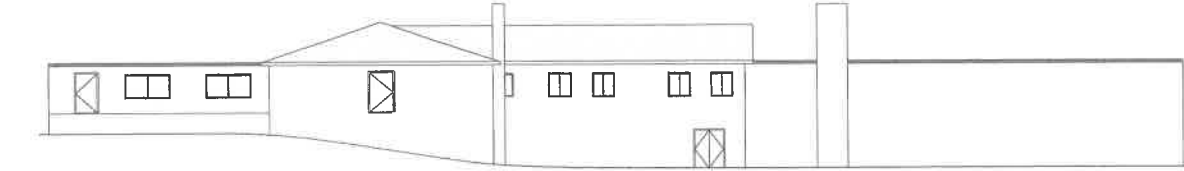
STAPLE EDGE

STAPLE EDGE

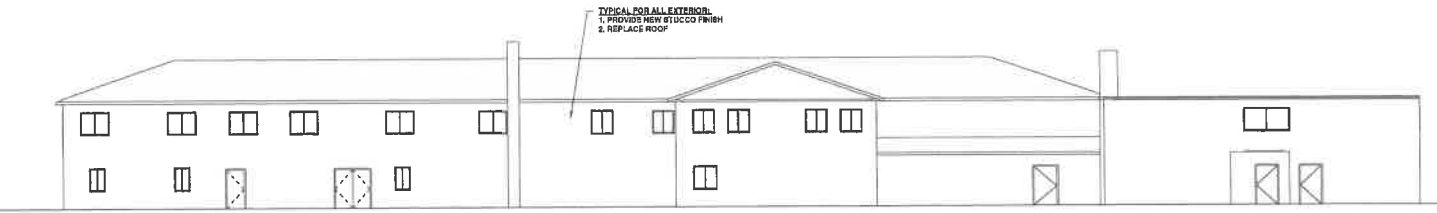
NOTES:
1. ELEVATIONS ARE SCHEMATIC
2. NOT ALL DETAILS ARE SHOWN



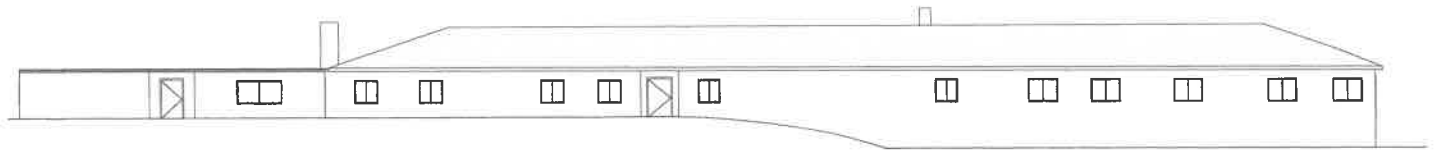
WEST
1" = 10'-0"



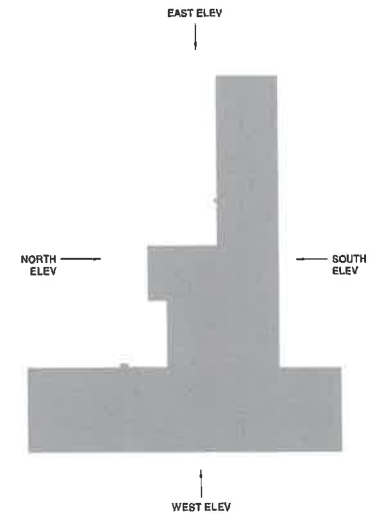
EAST ELEVATION
1" = 10'-0"



NORTH ELEVATION
1" = 10'-0"



SOUTH ELEVATION
1" = 10'-0"



ELEVATION KEY
3/16" = 1'-0"

DA DONNY ANKRI ARCHITECTS

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EATING DISORDER FACILITY
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MILLERSVILLE, MD
21108



REVISIONS		
NUMBER	DESCRIPTION	DATE

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Date	09/10/2023
Scale	As Indicated
Job No.	2300X
Drawn By	DAA

EXTERIOR ELEVATIONS

Drawing No. **A4.00**

Kimberly Morgan
 Vice President, Land Development

Firm Name	Location	Education	Years of Experience
Landtech Corporation	Annapolis, MD	BS/Civil Engineering West Virginia University	w/Current Firm 25

Total Years of Experience
 39

Experience & Role

Ms. Morgan has 39 years of experience in Land Development Engineering and Project Management. She has completed a wide variety of developments to include several golf courses, commercial retail centers, mixed use developments and industrial sites and all types of residential projects from single family detached units, townhouse, condominiums and apartments.

Selected project experience

Eisenhower Golf Course, Crownsville, Maryland

Ms. Morgan was the Senior Project Manager for the redesign of this 18-hole public golf course located in Crownsville, Maryland. This was a project for the Anne Arundel County Department of Public Works as a Capital Improvement Project. The project entailed working closely with the Environmental Consultant, the gold course Architect and the local reviewing agencies. All 18 holes were redesigned. Wetland and floodplain areas were incorporated into the design as amenities and obstacles. SWM was designed using Environmental Site Design to the Maximum Extent Practicable.

Mill Branch Crossing, Bowie, Maryland

Ms. Morgan is the Senior Project Manager for the land planning and engineering plans necessary for the approval and construction of the Mill Branch Crossing Mixed Use Development. This includes 190 Townhouse units, 408 Apartment units, a 150-room hotel, Convenience Store/Gas Station and approximately 71,000 SF of retail pad sites. The project requires the extension for approximately 2700 linear feet of 12-inch sanitary sewer along the east side of the northbound lanes of Route 301, the removal of an archeology site, wetland mitigation plans and permitting through the MDE and the ACOE.

899 Cecil Ave, Millersville, Maryland

Ms. Morgan is the Senior Project Manager that directed the construction plans that were required to convert the existing vacant facility from an 87-bed nursing home to the proposed 78 unit eating disorder treatment facility. As the property is located within the R-1 zoning district, the project required a Special Exception. Once approved construction drawings were completed and processed through the Site Development Plan process in Anne Arundel County. The work included obtaining a Demolition permit for the interior of the building, a grading permit for the work associated with the exterior property, approval of Landscape Plans. This project also included several citizens meetings with the local residents.

West Nursery Road Retail Development, Linthicum Maryland

Ms. Morgan is the Senior Project Manager directing the construction plans for this retail development which includes 10,688 SF of retail space located in the C-1 Zone, Anne Arundel County. Due to the proximity of the project with BWI Airport coordination is required with MDOT MAA at BWI Marshall Airport. The construction drawings include the retail building, associated parking, water quality requirements in accordance with MDE, as well as, the water quality requirements of the Airport and an underground SWM facility. This facility is required as the existing storm drain system in West Nursery Road is not adequate for the proposed stormwater runoff from the site.

EDUCATION

Bachelor of Science, University of Florida, May 2015

CERTIFICATIONS, MEMBERSHIPS & ACHIEVEMENTS

- HCCA: Healthcare Compliance Association
- Board Member, National Council: Diversity, Inclusion and Belonging (DIB)-(prev.)
- Member: Society of Corporate Ethics and Compliance
- Member: Associate of Record Managers and Administrators

WORK EXPERIENCE

Mission Consulting Group LLC, March 2022 to Present

- **Managing Partner & Co-Founder**
 - Strategic Leadership: Develop and communicate the firm's strategic vision, mission, and goals to guide its growth and direction in the behavioral healthcare consulting industry.
 - Business Development: Identify and pursue new business opportunities, cultivate relationships with potential clients, and engage in business development activities to expand the firm's client base.
 - Client Engagement: Oversee client engagements, ensuring high-quality service delivery and maintaining strong client relationships to drive client satisfaction and retention.
 - Financial Management: Manage the firm's financial resources, including budgeting, financial planning, and resource allocation, to ensure financial stability and growth.
 - Operational Oversight: Oversee day-to-day operations, including project management, resource allocation, and process optimization, to ensure the efficient functioning of the firm.
 - Team Leadership: Lead and mentor a team of consultants, providing guidance and support to enhance their skills and expertise in the behavioral healthcare domain.
 - Talent Acquisition and Development: Oversee recruitment efforts, hiring the right talent with expertise in behavioral healthcare, and implement training and development programs to build a competent and motivated team.
 - Quality Assurance: Establish and maintain high-quality standards for consulting services, implementing quality assurance measures to monitor and improve service delivery.
 - Thought Leadership: Represent the firm as a subject matter expert in the behavioral healthcare industry, participating in industry events, conferences, and publishing articles to establish thought leadership.
 - Marketing and Branding: Develop and implement marketing strategies to promote the firm's services, enhance its brand reputation, and position it as a trusted name in behavioral healthcare consulting.
 - Partnerships and Alliances: Identify and foster strategic partnerships and alliances with relevant organizations to expand the firm's reach and service offerings.
 - Regulatory Compliance: Ensure the firm complies with all relevant laws, regulations, and ethical standards applicable to the behavioral healthcare industry.
 - Crisis Management: Lead the firm in times of crisis, making informed decisions and implementing contingency plans to mitigate adverse impacts on the firm and its clients.
 - Data Analytics and Insights: Utilize data analytics to gather insights into industry trends and client needs, using this information to inform business strategies and service enhancements.
 - Innovation and Research: Promote a culture of innovation within the firm, encouraging research and staying updated with the latest developments in behavioral healthcare consulting.
 - Continuous Improvement: Continuously evaluate and improve internal processes, leveraging technology and best practices to optimize firm operations and enhance client outcomes.
 - Networking: Actively participate in industry forums, networking events, and professional associations to stay connected with industry peers and potential clients.
 - Community Engagement: Engage with the behavioral healthcare community, supporting initiatives that align with the firm's values and social responsibility.
 - Long-Term Growth: Develop and execute long-term growth strategies for the firm, exploring opportunities for expansion and diversification in the behavioral healthcare consulting market.

Arrow Consulting LLC, January 2022 to March 2022

- **Chief Operating Officer/Co-Founder**

- the firm's long-term strategic goals and objectives.
- Operational Management: Oversee day-to-day operations, ensuring smooth functioning of all departments and processes within the consulting firm.
- Financial Management: Manage the firm's financial resources, budgeting, and financial reporting, ensuring financial stability and growth.
- Project Management: Supervise consulting projects, from initiation to completion, ensuring that they are delivered on time, within budget, and meet client expectations.
- Quality Assurance: Maintain high-quality standards for the services provided, implementing quality assurance measures to monitor and enhance service delivery.
- Business Development: Identify new business opportunities, cultivate client relationships, and actively participate in business development efforts to expand the firm's client base.
- Talent Management: Oversee human resources functions, including recruitment, training, and development of staff, to build a competent and motivated team.
- Process Optimization: Continuously evaluate and improve internal processes, leveraging technology and best practices to enhance efficiency and productivity.
- Risk Management: Identify potential risks and implement risk management strategies to safeguard the firm's reputation and minimize financial and operational liabilities.
- Client Satisfaction: Ensure exceptional client service by fostering a client-centric culture, addressing client concerns, and proactively seeking feedback for continuous improvement.
- Performance Metrics: Establish key performance indicators (KPIs) to measure the firm's performance and track progress towards organizational goals.
- Compliance and Regulatory Adherence: Ensure that the firm complies with all relevant healthcare laws, regulations, and industry standards.
- Cross-Functional Collaboration: Foster effective communication and collaboration among different teams and departments to achieve integrated and cohesive operations.
- Technology Adoption: Stay abreast of technological advancements and industry trends, identifying opportunities to leverage technology for better service delivery.
- Professional Development: Stay updated with the latest developments in healthcare and consulting industries, participating in conferences and workshops to enhance knowledge and expertise.
- Reporting to the Board: Provide regular updates and reports to the Board of Directors on the firm's operational and financial performance.
- Crisis Management: Lead the organization in times of crisis, making informed decisions and implementing contingency plans to mitigate adverse impacts.
- Company Culture: Promote a positive and inclusive company culture, fostering teamwork, creativity, and a commitment to the firm's mission and values.
- Mergers and Acquisitions: Participate in due diligence and integration efforts when the firm is involved in mergers, acquisitions, or strategic partnerships.
- Thought Leadership: Represent the firm at industry events, conferences, and speaking engagements, establishing the firm's thought leadership in the healthcare consulting domain.

Eating Recovery Center and Pathlight Behavioral Health, September 2019 to December 2021

- **Quality, Compliance and Risk Manager (01/21- 12/21) Grievance Officer (01/21- 12/21)**
 - Served as leader of the Health System's Risk Management and Compliance Program, improving quality and safety across the east and mid-west regions, through collaboration with all departments, stakeholders, Executive Leadership, and external parties
 - Developed and standardized policies and procedures to reduce exposures, and enhance the culture of safety
 - Lead a cross functional team through the audit process to obtain licensure and accreditation by the Joint Commission (TJC) and various state-run agencies
 - Launched several healthcare facilities, in multiple states nationwide, successfully completing licensing research, applications and site surveys to obtain full licensure and accreditation
 - Developed a scalable incident reporting system, utilized across all regions, to ensure safety and compliance, in conjunction with applicable rules and regulations
 - Supervised multidisciplinary team in implementation of validated tools for assessing safety and quality services, resulting in a substantial decrease in liability claims
 - Created and executed a fall reduction protocol for patients, which decreased falls by 16% nationwide, resulting in a reduction of injuries throughout the company's facilities

Ohio DPH, Wisconsin DOH and Maryland OCHQ

- Conducted Root Cause Analysis (RCA), Common Cause Analysis (CCA) and Failure Mode and Effects Analysis (FMEA) and Hazard Vulnerability Analysis (HVA) annually, to identify risk and develop mitigation plans for each facility throughout the region
- Chaired Quality Assurance Committees, audit committee and provided regulatory compliance training to new employees
- **Quality, Compliance and Risk Management Specialist (09/19- 12/20); Patient Advocate (09/19- 12/20)**
 - Maintained compliance and oversight of daily operations across various levels of psychiatric care
 - Conducted investigations and created report of findings in response to Quality of Care inquiries in collaboration with the Utilization Review department.
 - Conducted S.W.O.T. analysis and Root Cause Analysis' to meet the varying needs of the company and to insulate from risk and liability
 - Lead training and education process for new employees during New Employee Orientation, including creation and management of material
 - Organized annual review(s) and revision of facility's policies & procedures, to meet and exceed regulatory standards
 - Initiated investigation into all incidences to ensure staff are operating in a legal, ethical, and compliant manner
 - Prepared critical occurrence reports for the State of Colorado and/or TJC in the event criteria is met
 - Assisted with psychiatric legal proceedings, such as clinical review panels and involuntary admissions hearings

Mednax Services, Inc, October 2016 to September 2019

- **Compliance Specialist**
 - Conducted investigations into alleged privacy violations and provided reports to the Chief Compliance Officer
 - Lead the annual review of compliance department policies and procedures to meet the needs of the organization and ensure patient safety.
 - Developed, prepared, and submitted disclosure reports quarterly to the Compliance Committee
 - Completed the annual review, corrections, and re-publishing of required Compliance trainings, in accordance with FL DOH, FL DPH and CMS rules/regulations.

- **References:**

Carmen Tejada CHC, CHPC: Director, Privacy & HIPAA

(954) 854-1305

Matthew Compton, JD: Director of Quality, Compliance & Risk Management

(303) 746-3536

Deborah Naas IGM, CRA: Director, Records & Information Management

(209) 304-7063

Nancy Noy RN: Corporate Manager, External Payor Audits Compliance

(786) 208-5662

SOCIAL & ECONOMIC COST OF EATING DISORDERS IN MARYLAND

APP. EXHIBIT# 7
 CASE: 2023-0118-S
 DATE: 9/5/23

Report by the Strategic Training Initiative for the Prevention of Eating Disorders, Academy for Eating Disorders, and Deloitte Access Economics



[LINK TO REPORT](#)



PREVALENCE & MORTALITY

Source: <https://hsph.harvard.edu/striped/report/economic-costs-of-eating-disorders/>



531,930

Nine percent of Marylanders (531,930 people), will have an eating disorder in their lifetime

10,200 deaths per year nationally as a direct result of an eating disorder, equating to 1 death every 52 minutes



EATING DISORDERS AFFECT EVERYONE:



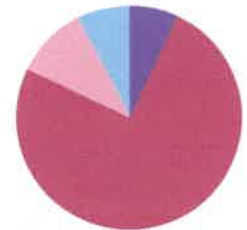
- All ages, starting as young as 5 years old to over 80 years old
- All races, however, people of color with eating disorders are **half as likely to be diagnosed or to receive treatment**¹
- All genders, with females being **2x more likely to have an eating disorder**
- All sexual orientations

COST TO ECONOMY & SOCIETY IN MARYLAND

\$1.2 Billion } Yearly economic cost of eating disorders

Additional loss of wellbeing per year **\$6 Billion**

Cost Breakdown:
 Productivity Losses (\$897.6M)
 Informal Care (\$123.7M)
 Efficiency Losses (\$88.7M)
 Health System (\$85M)



COST TO HOSPITAL SYSTEMS:

995 ER visits



costing **\$541,165**

435 inpatient hospitalizations



costing **\$3.9M**

LOSS PER GROUP:



\$434M Individuals & Families

Caregivers provide 6 weeks of informal, unpaid care per year



\$326.9M Government



\$301.1M Employers



\$131.1M Society

¹Sonneville KR, Lipson SK. Disparities in eating disorder diagnosis and treatment according to weight status, race/ethnicity, socioeconomic background, and sex among college students. International Journal of Eating Disorders 2018: 1-9. Note: State-level data are estimates based on U.S. Census Bureau population statistics (2018). [Link to data.](#)

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