

**Statement of Justification**  
**Adventist HealthCare White Oak Medical Center**  
**Request for Subdivision Regulations Waiver**  
**May 17, 2024**

Our firm represents Adventist Healthcare, Inc. (the "Applicant"), the owner of the ±48.86 acre property located along the west side of Plum Orchard Drive, approximately 400 feet south of Broadbirch Drive (the "Property"). On behalf of the Applicant, we provide this Statement of Justification in support of a Request for a Subdivision Regulations Waiver ("Waiver") in connection with a reinstatement and extension of the Adequate Public Facilities ("APF") determination for the Property. This Statement of Justification addresses the findings for (1) the Waiver request to reinstate expired APF as set forth Section 50.9 of the Subdivision Regulations and (2) the APF extension request criteria in Section 50.4.3.J.7.e of the Subdivision Regulations. If the Waiver request is approved, the APF extension would be reviewed concurrently with Site Plan Amendment No. 82008021L for the implementation of a new 61,750 medical office building on the northern portion of the Property, using the APF finding set forth in Section 59.7.3.4.E.2.h of the Zoning Ordinance. Per Planning Staff's direction, the materials for the Application are being submitted electronically and no plan drawings are required.

**I. Site Description and Vicinity**

The Property is currently improved with the White Oak Medical Center ("WOMC" or "Hospital"), a modern healthcare campus consisting of an 8-story main Hospital building (including 254 beds), a 7-story ancillary Hospital facility/medical pavilion, the South Parking Garage, Healing Way private street (formerly Street B-5), a helipad, and surface parking facilities. More specifically, the Property consists of Parcels BB, CC, RR, SS, and MMM in the West\*Farm Technology Park Subdivision. The Property is currently classified in the LSC (Life Sciences Center) 1.0, H-200 Zone.

The Property (outlined in red in Figure 1 below) is located within the 2014 White Oak Science Gateway Master Plan (the "Master Plan") area and is surrounded by industrial, technology, and commercial-retail uses within the West\*Farm Technology Park. The Master Plan rezoned the Property from the I-1 (Light Industrial) and I-3 (Technology and Business Park) Zones to the Life Sciences Center (LSC) 1.0, H-200 Zone.

Abutting to the south are the Global Lifesci (Percontee) property and the County Site II property, both zoned Commercial Residential (CR-1.0, C-1.0, R-0.5, H-220) and

part of the mixed-use development known as Viva White Oak. Opposite the Hospital to the east across Plum Orchard Drive is the loading area for several big-box retail uses (Target, Kohl's, and PetSmart) in the Orchard Shopping Center, which is zoned CR-0.75, C-0.75, R-0.25, H-75. The remaining parcels to the south and east of the Property comprise the U.S. Postal Service distribution facility, the State Highway Administration ("SHA") maintenance facility, and a Marriott hotel. Additional office and technology uses are located directly west of the site, where they front on Bournefield Way via Broadbirch Drive. South of Bournefield Way and west of the Property is the Washington Suburban Sanitary Commission ("WSSC") property with the water tower. North of the Property are other office uses in West\*Farm Technology Park.



**Figure 1 – The Property and Vicinity Map (2020 Site Plan Amendment 82008021K)**

The Property is within the Paint Branch watershed and drops in grade significantly from Plum Orchard Drive to the west to reach a tributary of the Paint Branch. That tributary flows along the western portion of the Property and through an existing stormwater management facility wet pond that provides stormwater quantity control for the uses in the West\*Farm Technology Park. The entire pond, embankment, and control structures lie

within the Property. Associated with the stream are forested areas within the 100-year floodplains, and stream buffers.

## **II. Applicable Prior Approvals & Adequate Public Facilities History**

The Hospital has a long history of preliminary plan and site plan approvals and amendments, but only the most recent, relevant approvals are described below.

### **A. Preliminary Plan Background**

A summary of relevant Preliminary Plan approvals for the Property (Parcels BB, CC, RR, SS, and MMM in the West\*Farm Technology Park Subdivision) is provided below:

West\*Farm Technology Park lies in the southeast quadrant of the intersection of US Route 29 and Cherry Hill Road. The land comprising West\*Farm Technology Park was previously classified in two zones, the I-1 Zone and the I-3 Zone. Generally, the western part of West\*Farm Technology Park was in the I-1 Zone Sector and the eastern part was in the I-3 Zone Sector. Each Sector was originally subject to its own preliminary plan of subdivision.

On October 26, 1982 all of the parcels located in the prior I-3 Zone Sector of the West\*Farm Technology Park—including Parcels BB, CC, RR, and SS—were created by Preliminary Plan No. 1-82068. (In most cases, the original parcel designations have changed due to subsequent record plats). Nine years later, in 1991, Parcels RR and SS, among others, were separated from Preliminary Plan No. 1-82068 through Preliminary Plan No. 1-91039, which covered all the I-3 lots still owned by the original developer. Parcels BB and CC, having been previously sold, remained subject to the original preliminary plan.

The approval of Preliminary Plan 1-91039 on August 1, 1991, reduced the amount of the previously approved density and thereby established a new commencement point for the 12-year APF validity period for the Property.<sup>1</sup> The parcels located in the I-1 Sector, including parcel MMM, also had a new, 12-year APF validity period commence on August 1, 1991, through the approval of Preliminary Plan No. 1-91038. All the lots covered by Preliminary Plans 1-91038 and 1-91039, including Parcels RR, SS, and MMM, were replatted in 1991 to reflect the new allowable densities under the Preliminary Plans. Parcels BB and CC were not subject to a new preliminary plan, but remained subject to Preliminary Plan 1-82068, whose 12-year APF validity remained running from 1989.

In sum, the currently-recorded parcels in the West\*Farm Technology Park were approved under three different Preliminary Plans: 119820680, 119910380, and 119910390

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<sup>1</sup> The 12-year APF validity period standard was established in July 1989, replacing the original unlimited duration of an APF approval.

for the approximately 140 acres on the west side of Cherry Hill Road, approximately 2,000 feet southeast of its intersection with US Route 29.

During the regulatory review of the Hospital, the traffic capacity for the Property was quantified as a vehicle trip cap as 1,212 for the morning peak hour and 1,080 for the evening peak hour. (That traffic capacity was derived from the approved uses for the parcels. For Parcels BB and CC, the specific trips for the uses were set forth in the agreements for the development. For Parcels RR and SS, trips were derived from the office density under the approved site plans.) The total trips of the cap set the framework within which the Hospital's trips had to fit.

### **B. Adequate Public Facilities**

The original APF approvals for West\*Farm Technology Park were unlimited until 1989. On August 1, 1991, the Planning Board approved Preliminary Plans 119910380 and 119910390, which established a new 12-year APF validity period for three parcels (RR, SS, and MMM) (now part of the Property) to July 31, 2003. The other parcels (BB, and CC) already had validity periods established until July 25, 2001. In 1999 and 2001, these validity periods were further extended for an additional six years to 2009 and 2007, respectively.

On May 9, 2008, the Planning Board granted an Adequate Public Facilities (“APF”) extension for the Hospital, and established that period until July 25, 2013, for all five parcels associated with Preliminary Plans 119820680, 119910380, and 119910390 for 722,357 square feet of office development or its traffic equivalent.

The APF validity period, which was set to expire on July 25, 2013, was further extended eight (8) years to July 25, 2021, by four separate two-year legislative preliminary plan and APF validity extensions that the District Council granted by law.

In response to the COVID-19 Pandemic, the District Council adopted Subdivision Regulation Amendment No 20-01, which provided a two-year APF extension to existing applications approved and valid as of July 28, 2020, as well as those projects that had timely filed for an APF or Preliminary Plan extension before that date. Accordingly, based on the prior July 25, 2021 expiration date, Subdivision Regulation Amendment No. 20-01 extended the APF approval for the Property to July 25, 2023.

### **C. Hospital Special Exception & Subsequent Site Plan**

WOMC was originally approved as an 803,570 square foot Hospital Special Exception (No. S-2721) on October 27, 2008. Hospitals were not permitted by right under the Property’s prior zoning, I-1 and I-3. WOMC’s development was further complicated by the I-3 Zone requirement for site plan approval, in addition to special exception approval. As a result, WOMC obtained initial Site Plan approval (No. 820080210) on April 24, 2009.

Since that time, both the Special Exception and Site Plan have been amended several times to incorporate plan refinements necessitated by the State Certificate of Need licensing process, as well as other campus operational needs, including the addition of levels at the top of the building to accommodate the urgent need, recognized during the pandemic and otherwise, for additional hospital bed capacity. The Special Exception was abandoned after the Property was rezoned to the LSC Zone in 2014, since a Special Exception (now, a Conditional Use) is not required for a Hospital in the LSC Zone.

As of July 25, 2023 (the APF approval expiration date), the Property was approved for 803,570 square feet of Hospital use, including the main Hospital building, an ancillary hospital facility/medical pavilion, two medical office buildings, a non-denominational faith center and healing garden, two structured parking garages, a surface parking lot, a helipad, and other associated improvements. The current density associated with the Property is as follows:

**Built**

Main Hospital	424,023 sf (includes 21,857 sf of shell space on 8 <sup>th</sup> floor)
Ancillary Hospital Facility/Medical (Building A) Pavilion	169,694 (includes Hospital and medical office uses)
<b>Total</b>	<b>593,717 sf</b>

**To Be Built**

Future Hospital	39,210 sf
Center for Spiritual Life and Healing	18,000 sf
Medical Office Building 1	81,799 sf
Medical Office Building 2	9,094 sf
Medical Office Building 3 (pending)	61,750 sf
<b>Total</b>	<b>209,853 sf</b>
<b>Total for the Hospital</b>	<b>803,570</b>

As a result, the reinstatement and extension request is seeking to preserve 209,853 square feet of unbuilt density associated with the Property’s approval history.

## **D. Traffic Analysis and Infrastructure Improvements**

### **a. Traffic Capacity**

As discussed in the Traffic Impact Study Update, prepared by The Traffic Group and attached as Exhibit "A", the amount of traffic currently being generated is well below the trip cap associated with the Preliminary Plan for the Property.

Per the Preliminary Plan, the traffic capacity for the Property was identified as vehicle trip caps: 1,212 for morning peak hour and 1,080 for the evening peak hour. The Traffic Group determined the amount of traffic currently being generated by existing Hospital improvements (593,717 square feet, or 74% of the total approved) at key intersections, and compared that to the caps. The actual number of trips currently being generated at these key intersections is 514 morning peak hour trips and 381 evening peak hour trips. Therefore, the original trip caps are not exceeded. In fact, only 42% of the approved cap is being used thus far, and another almost 300,000 square feet of additional density could be added to these key area intersections after the Hospital uses all of its approved capacity without negative effects on traffic levels of service.

Accordingly, the Applicant's request for reinstatement and extension of only 209,853 square feet (its remaining unbuilt approved capacity) is well below the current roadway capacity of the key intersections. Even when the Hospital completes its full build-out, substantial intersection capacity remains.

### **b. Infrastructure Improvements**

Because of the unique history of the Property involving Special Exception/Site Plan approvals, the required infrastructure approvals are identified in the approved Site Plans. In particular, Site Plan Nos. 82008021E and 82008021G required the following transportation infrastructure improvements:

1. Construct Master Plan Road B-5 (Healing Way)
2. Construct Street B-5 shared use path
3. Cherry Hill Road & Plum Orchard Drive/Clover Patch Drive Intersection
  - a. Construct separate right turn lane from southbound Cherry Hill Road to westbound Plum Orchard Drive
  - b. Restripe the existing pavement to reconfigure the through lane to a right-turn/through lane from eastbound Plum Orchard Drive to southbound Cherry Hill Road/eastbound Clover Patch Drive
  - c. Upgrade existing traffic signal system as required by MCDOT
4. Restripe Plum Orchard Drive to create bike lanes and a center lane
5. Provide new traffic signal at Plum Orchard Drive and Broadbirch Drive Intersection
6. Provide deceleration lane and traffic signal at Plum Orchard Drive and Street B-5 intersection
7. Construct multi-bus pull off facility with two bus shelters on Plum Orchard Drive



These improvements have been implemented at great cost, in excess of \$3.5 million as of 2019, to the Applicant. A spreadsheet demonstrating the cost allocations is attached as Exhibit “B”. These improvements provide significant benefit to the transportation infrastructure and network in the White Oak area, especially the West\*Farm Technology Park.

The above list of improvements required through the Special Exception and Site Plans does not include those area road improvements made as a condition of the original subdivisions, all of which were constructed or contributed toward before the Applicant even acquired the Property. The Property was fully entitled relative to APF at the time of its acquisition in 2006. The cost of those previous improvements, while not called out as a line item in the purchase price, were certainly a component of the value paid for the Property. Those improvements contributed to the ability of the road network to accommodate the trip cap volume of the earlier approvals.

The infrastructure investments by the Applicant and its predecessor were completed before the Hospital opened the doors in August, 2019. But the program of construction of the Hospital components was clearly contemplated to proceed over an extended period – a period that is not completed yet. The Hospital’s development has been progressing on a deliberate path, in concert with needs of public health and safety, as well consistent with other healthcare regulatory processes unrelated to land use matters. The Hospital presents a vital public service that is provided by a private party. Since the opening of the Hospital, the public service mission has been paramount and consuming.

### **III. Reinstatement and Extension Request Summary**

The Applicant submits this request for an APF reinstatement and extension for the above-referenced preliminary plans (collectively, the “Preliminary Plan”) for West\*Farm Technology Park that affect the Property. The APF approval extension request is being submitted under Section 50.4.3.J.7.e (regarding “Application with significant infrastructure investment”), and at the same time the Applicant is requesting extension of the APF approval to enable the extension to apply retroactively to July 25, 2023, at which time the APF approval inadvertently was allowed to expire.

The circumstances of this Application justify a retroactive reinstatement and extension of the APF approval validity period. As discussed above, the APF approval has a complicated history involving multiple preliminary plans of subdivision in conjunction with several legislative extensions approved by the District Council. Although the Hospital was finished and opened to patients in 2019, the COVID-19 pandemic created chaotic clinical conditions from early 2020 through mid-2023. Also, from the moment it opened, the Hospital has been undersized to meet significant patient demands of all sorts (including being located in a medically underserved area in the East County); the Hospital has been trying to address these needs through multiple planning and construction projects. Several

temporary and permanent structure construction projects occurred between mid-2019 and the present to try to keep abreast of these rapidly evolving (and growing) patient needs. Unfortunately, the APF approval expiration date (July 25, 2023) was not flagged for renewal on a timely basis.

The inadvertent lapse of the APF approval was discovered as part of the Applicant's effort toward processing with the next project element in the ongoing development of the Property -- a new 61,750 square foot medical office building (Medical Office Building 3) on the northern portion of the Property (now pending as Site Plan No. 820008021L), submitted approximately November 30, 2023. This Application seeks to restore the technically lapsed APF approval in order to allow the overall Hospital project to continue its construction progress. Of the original density of 803,570 square feet in the APF approval for the Hospital, 593,717 square feet has been built (74%). The development capacity affected by this request is 209,853 square feet, or approximately 26% of the total approved development.

Once the APF approval lapse was realized, the Applicant worked with its consultants to confirm that a reinstatement and extension will have no negative effects on public facilities, particularly area traffic. As discussed above, the Hospital is now using only 42% of the trips for the facilities it has built to date (approximately 74% of the total approved density). The Applicant also explored the cost ramifications of the current Local Area Transportation Improvement Program ("LATIP") that would be applicable to the Property under a new APF approval (if one would be required), and discovered that payment in excess of \$1 million dollars would be required to regain the approximately 209,853 square feet of expired density. (This calculation is based on the current LATIP payment of \$5.01 per square foot of hospital use that is destined to grow larger over time. According to the Department of Transportation, the LATIP payment is expected to increase by a factor of 1.88 in the next year, which will exacerbate the development costs of future Hospital growth.)

This LATIP cost would apply even though the Hospital has already invested over \$3.5 million in area-wide infrastructure improvements as part of its Preliminary Plan obligations. In addition, the Property, when acquired for the Hospital, already had completed all of the APF-related infrastructure elements required by the original subdivision approvals from which the current APF approval arises. The Property was fully entitled at the time it was purchased by the Hospital in 2006. The above cost for improvements imposed on and made by the Hospital (\$3.5 million), were in addition to the substantial infrastructure costs of the original subdivision.



#### **IV. Basis for Adequate Public Facilities Approval Reinstatement and Extension**

##### **A. Waiver**

The Planning Board has the legal authority to reinstate an expired APF under Chapter 50 of the Subdivision Regulations through a waiver of the requirement to submit an APF extension before the applicable validity period expires. The Subdivision Regulations set forth certain criteria for granting a waiver. The Applicant qualifies for a waiver under Section 50.9.3 as follows:

*A. To grant a waiver, the Board must find that:*

- 1. due to practical difficulty or unusual circumstances of a plan, the application of a specific requirement of the Chapter is not needed to ensure the public health, safety, and general welfare;*
- 2. the intent of the requirement is still met; and*
- 3. the waiver is:*
  - a. the minimum necessary to provide relief from the requirements; and*
  - b. consistent with the purposes and objectives of the General Plan.*

As discussed above, the Applicant inadvertently allowed its APF validity period to expire in the midst of a global pandemic that required all of its attention and resources. At the same time, the Hospital expended more than \$3.5 million to construct and/or provide required transportation infrastructure to make the Hospital operational. From 2008 until August, 2019, when the Hospital opened, the Applicant planned, designed, permitted, and constructed all of the public improvements described above. These improvements accommodate all of the remaining density associated with the expired APF. No further infrastructure is needed to allow the Hospital to continue its critical growth trajectory to address the County's ever-changing healthcare needs.

The Hospital was approved in 2008 as a multi-year, multi-phased project that would evolve and require amendment over the years as the healthcare industry, technology, and patient demands changed. Substantial delays in the Maryland Certificate of Need process precluded the Hospital from starting construction until 2016—2017. As a critical piece of public interest community infrastructure, it is imperative that the Hospital maintain its ability to grow to meet patient needs in a cost efficient manner. Allowing the Hospital to continue to build out over time the remaining 209,853 square feet of approved density without requiring it to engage in an expensive, new transportation capacity process (e.g. LATIP) is clearly in the public interest. The circumstances of the APF approval expiration date being allowed to pass without the prior filing of an APF extension request are clearly understandable and merit the Planning Board's remedial, equitable action.

The Waiver is the minimum necessary to provide the requested relief as it would only allow the reinstatement of APF density that was already attributable to the Property.

## B. Extension

Assuming the Waiver is granted, the Planning Board has the legal authority to extend the validity period for a determination of adequate public facilities under Chapter 50. For the approval of an extension, the Applicant must not propose any additional development above the amount approved in the original determination. The Applicant is not proposing any new development above that approved by the Preliminary Plan (*i.e.* 803,570 square feet, of which only 209,853 square feet, or 26%, remains unbuilt).

The Subdivision Regulations set forth certain criteria for granting an extension. The Applicant qualifies for an extension under Section 50.4.3.J.7.e, as follows:

*e. Applications with significant infrastructure investment. The Board may extend an initial determination of adequate public facilities once for up to 12 more years beyond the otherwise applicable validity period if the Board finds that:*

*i. the preliminary plan or APF approval for the development required a significant commitment of funds by the applicant, amounting to at least \$3 million, as adjusted annually from February 2017 by the consumer price index, to comply with specified infrastructure conditions;*

As discussed above, the Applicant has expended more than \$3.5 million to construct and/or provide required transportation infrastructure. From 2008 until the Hospital opened in August, 2019, the Hospital planned, designed, permitted, and constructed all of the public improvements described in Section II.D above. In 2019, the estimated threshold infrastructure expenditure requirement of \$3 million, as adjusted by the consumer price index since 2017, was approximately \$3,110,000. The Applicant's infrastructure expenditures of more than \$3.5 million well exceeded this adjusted threshold.

*ii. the applicant has met or exceeded the required infrastructure conditions during the original validity period; and*

The Applicant completed the infrastructure improvements prior to the expiration of the APF approval on July 25, 2023. In fact, nearly all of them were completed by August, 2019.

*iii. the applicant's satisfaction of the required infrastructure conditions provides a significant and necessary public benefit to the County by implementing infrastructure goals of an applicable master plan.*

The extensive network of transportation related improvements described in section II above provided significant benefits to the burgeoning White Oak area, especially within the West\*Farm Technology Park. For example, a major intersection along Cherry Hill

Road (at Plum Orchard Drive) was substantially improved, a new traffic signal was installed at the intersection of Broadbirch Drive and Plum Orchard Drive, a new road (Healing Way) was constructed to enhance regional interconnectivity (including its future connection to Viva White Oak), and bike lanes were installed along the entirety of Plum Orchard Drive.

The Applicant clearly meets the criteria of Section 50.4.3.J.7 and is appropriate for an extension of the APF approval, dating from the prior expiration date of July 25, 2023. The Applicant seeks a 12-year extension of the reinstated APF until July 24, 2035 as permitted under Section 50.4.3.J.7 of the Subdivision regulations. Under Section 4.3.J.5.d of the Subdivision Regulations, any APF validity period longer than 5 years (as set by Section 4.3.J.5.c.v) may be approved if the Applicant submits a development schedule for the completion of the project that meets the following criteria:

*i. At a minimum, the proposed development schedule or phasing plan must show the minimum percentage of the project that the applicant expects to complete in the first 5 or 7 years, whichever is the applicable minimum, after the preliminary plan is approved.*

*ii. To allow a validity period longer than the specified minimum, the Board must find that the size or complexity of the subdivision warrant the extended validity period and would not be adverse to the public interest. The Board must condition a validity period longer than the specified minimum on adherence to the proposed development schedule or phasing plan, and may impose other improvements or mitigation conditions if those conditions are needed to assure adequate levels of transportation or school service during the validity period.*

Per pending Site Plan Amendment No. 82008021L, the Applicant expects to complete a medical office project comprising approximately 30% of the remaining APF available to the Property (61,750 square foot medical office ÷ 209,853 square feet of APF approval). The size and complexity of the Hospital campus build out, as demonstrated above, warrants the requested validity period. The 12-year validity period is also in the public interest to accommodate a major healthcare facility's need to grow and adjust to an evolving care delivery system. This point is illustrated perfectly by the Hospital's experience in responding to the worldwide pandemic and then determining how it should implement the lessons learned from the event.

The proposed development schedule for the remaining APF for the Hospital is at least 61,750 square feet of density would be used in the first seven years of the extended APF. The remaining 147,833 square feet of density would be used prior to the expiration of the APF in 2035.

**V. Conclusion**

For all of the reasons set forth herein, the Applicant respectfully requests the Waiver of the Subdivision Regulations that allow for the reinstatement of the APF Approval, retroactive to July 25, 2023. We further request an extension of the APF approval validity determination by twelve years per Section 50.4.3.J.7.e of the Subdivision Regulations.

We thank the Planning Board for consideration of this request. We believe this important healthcare institution's circumstances satisfy the intent and provisions of the Subdivision Regulations for waivers and extensions. The existing and planned healthcare uses are critical to the long-term success and attractiveness of Montgomery County, to both residents and businesses alike. This extension will allow the Applicant to complete and deliver additional healthcare space to further enhance and continue services in a first-class regional healthcare campus.

For all of the reasons articulated herein, we respectfully request that the Planning Board reinstate the APF Approval, to July 25, 2023 and approve this extension request.



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January 29, 2024

EXHIBIT A

Washington Adventist Hospital  
c/o Jason Klein  
820 W. Diamond Avenue, Suite 600  
Gaithersburg, MD 20878

RE: Washington Adventist Hospital – White Oak  
**TRAFFIC IMPACT STUDY UPDATE**  
Montgomery County, Maryland  
Our Job No.: 2023-1114

Dear Mr. Klein:

We conducted a “mini study” to determine how traffic is currently functioning at the White Oak facility under existing conditions, and whether additional development can occur without creating an adverse impact and causing a significant cost for additional buildings to Adventist Healthcare. The hospital’s previous intersection contributions support our findings. Re-installing the expired APF will not impact traffic.

**2023 Traffic Counts Summary**

The Traffic Group, Inc. conducted intersection turning movement counts for the existing hospital improvements (593, 717 square feet) at four locations from 6–9 AM and 3–7 PM on a Tuesday, Wednesday, and Thursday in early December 2023. We averaged the amount of trips over the three-day period.

We determined the amount of traffic currently being generated and compared that existing 2023 traffic to the Preliminary Plan of Subdivision trip caps. ***The Preliminary Plan of Subdivision cap for the morning peak hour is 1,212 and for the evening peak hour is 1,080.***

***The actual number of trips currently being generated is: morning peak hour trips = 514 and evening peak hour trips = 381.*** Therefore, the original trip cap is not exceeded. **In fact, only 42% of the approved cap is being used at the present time.**

**Trip Generation Study**

We determined that the trip rate per 1,000 sq ft for the hospital building is 0.97 trips per 1,000 sq ft during the morning peak hour and 0.72 trips per 1,000 sq ft during the evening peak hour.

### Off-Site Intersection Traffic Conditions

We conducted intersection turning movement counts from 6–9 AM and 3–7 PM on a Tuesday and Wednesday in early December 2023 at the following intersections:

- a. Cherry Hill Road and Calverton Boulevard – Broadbirch Drive
- b. Cherry Hill Road and Clover Patch Drive – Plum Orchard Drive
- c. Broadbirch Drive and Plum Orchard Drive
- d. Broadbirch Drive and Tech Road

Copies of the traffic counts for both the existing hospital and the off-site intersections, as well as LOS calculations, are available upon request.

### Results of Intersection Capacity Analyses

Intersection capacity analyses were conducted at the above noted four intersections. The results of the levels of service are shown in the table below.

#### Level of Service Results – December 2023 Conditions

Intersection	Morning Peak Hour	Evening Peak Hour
Cherry Hill Road and Calverton Boulevard – Broadbirch Drive	B	C
Cherry Hill Road and Clover Patch Drive – Plum Orchard Drive	A	B
Broadbirch Drive and Plum Orchard Drive	A	A
Broadbirch Drive and Tech Road	A	A

The existing level of service at the four intersections is shown in the table above and as a result, there is a substantial amount of capacity remaining.

We determined that additional trips would likely not trigger additional road improvements. The “work from home” phenomenon that has occurred because of a post-COVID world obviously works to the benefit of the hospital. We have found that overall traffic volumes in the DMV are reduced during the peak hour anywhere from 10% to 25%. In fact, the State of Maryland has reported that work from home post-COVID has increased from 4% to 5% in 2019 to close to 25% in 2023.

### Results and Conclusions

We determined that an additional 500,000 sq ft of space could be added to the road system that would generate 485 morning peak hour trips and 360 evening peak hour trips. The remaining unbuilt portion of the hospital project approval is 209,853 sq. ft. This amount is well below the capacity of 500,000 sq. ft. of space available in the intersections’ network.



The current trip distribution of traffic from the White Oak Hospital is attached. An analysis of an additional 500,000 sq ft of space details that likely none of the four intersections would require additional intersection improvements to maintain capacity.

In summary, the conditions in 2023 for the existing hospital and for the nearby road network are favorable to allow the hospital to continue to utilize its approved capacity to expand to meet patient needs without adverse impact to key intersections and the roadway network.

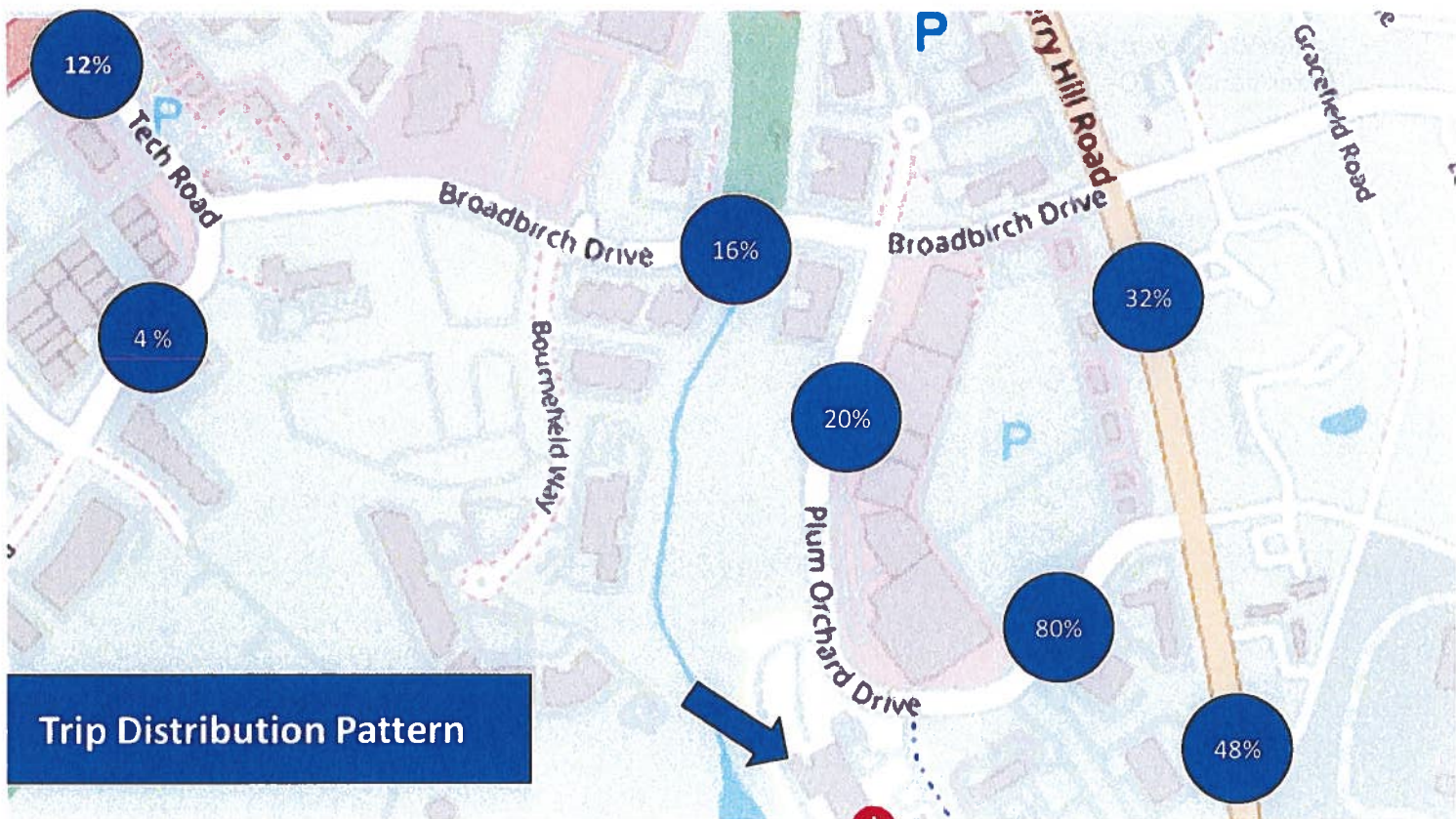
Sincerely,



John W. Guckert, PTP  
President & CEO

JWG:amr

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**White Oak Medical Center  
Costs of Off Site Work**

02 - Construction Offsite	Hospital	Garage	Medical Pavilion	Central Utility Plant	Faith Center
Allocation per Project	60%	15%	15%	5%	5%
301 Traffic Services	\$ 114,098.80	\$ 21,973.64	\$ 20,213.64	\$ 6,737.89	\$ 6,737.89
309 Civil Engineer: Off-Site	\$ 267,097.66	\$ 66,693.18	\$ 66,693.18	\$ 22,231.05	\$ 22,231.05
507 Off-Site - Testing Soils/Concrete	\$ 32,030.43	\$ 6,449.54	\$ 6,449.54	\$ 2,149.86	\$ 2,149.86
802 Off-Site Improvements	\$ 1,733,366.95	\$ 425,457.74	\$ 425,457.74	\$ 141,819.27	\$ 141,819.27
<b>Subtotal</b>	<b>\$ 2,146,593.84</b>	<b>\$ 520,574.10</b>	<b>\$ 518,814.10</b>	<b>\$ 172,938.07</b>	<b>\$ 172,938.07</b>
<b>Total</b>	<b>\$ 3,531,858.18</b>				
Expenses NOT for Roads/Off Site	\$ 23,550.00 (fountain)				
<b>Expenses for Off Site Work Only</b>	<b>\$ 3,508,308.18</b>				

VENDORS	Scope	Commitment	Notes
<b>Traffic Services</b>			
Shannon-Baum Signs & Graphics, Inc.	Signage	Per invoices	
Sunrise Safety Services, Inc.	Signage	\$ 26,042.75	
The Traffic Group	Off site	Per invoices	* comprehensive agreement
<b>Civil Engineer: Off-Site</b>			
Soltész	Off site engineering	Per Invoices	* comprehensive agreement
<b>Off-Site - Testing Soils/Concrete</b>			
Schnabel Engineering	Off site testing	Per invoices	* comprehensive agreement
<b>Off-Site Improvements</b>			
Dunning Electrical Services, Inc. -	Bus shelter electrical	\$ 4,800.00	
Florida Fountains & Equipment, LLC -	Fountain	\$ 23,550.00	*NOT road/off site
JRP Management Resources, Inc. -	Bus shelter	\$ 12,500.00	
Pepco -	Street light	\$ 92,804.00	* multiple scopes, cost per invoice
Pleasants Paving -	Roads	\$ 1,452,437.00	
Scott A. Duncan	Traffic signals	\$ 789,805.00	