CAPITAL COMMITTEE
MEETING AGENDA

September 12, 2019

11:00 AM

125 Worth Street, Room 532
5th Floor Board Room

CALL TO ORDER — **José Pagán**

- **ADOPTION OF MINUTES – July 11, 2019** — **José Pagán**
- **SENIOR VICE PRESIDENT'S REPORT** — **Christine Flaherty**

ACTION ITEMS

- **Resolution** — **Frederick Covino**
  Authorizing the New York City Health and Hospitals Corporation (the "System") to execute a five-year revocable license agreement with the New York City Human Resources Administration ("HRA") to operate its Medical Assistance Program ("MAP") at five System facilities (the "Facilities") in a total of approximately 11,438 square feet of space for a total annual occupancy fee of approximately $741,247.78 based on the facility Institutional Cost Reimbursement Rate ("ICR"), ranging between $46.77 per square foot and $84.19 per square foot as shown on the attached spreadsheet and to be escalated by 2% per year and further authorizing

  The System to negotiate with HRA to change the location of some MAP offices within the Facilities to accommodate program and construction initiatives as they develop and to make any appropriate adjustment to the occupancy fees charged.

  Vendex & EEO: NA.

- **Resolution** — **Maureen McClusky/Charles Barron**
  Authorizing the New York City Health and Hospitals Corporation (the "System") to execute a thirty year sublease agreement with Camelot of Staten Island, Inc. ("Camelot") for the operation of a residential Substance Use Disorder ("SUD") program on the campus of Sea View Hospital and Rehabilitation Center (the "Facility") on a parcel of land measuring approximately 24,080 square feet including the approximately 20,000 square foot Administration Building at an annual rent of $250,000, or $12.50 per square foot to be escalated by 2.5% per year for a total rent amount over the thirty year initial term of $10,975,676.

  Vendex: Approved.
  EEO: Pending

- **Resolution** — **Jeremy Berman/Dave Chokshi**
  Authorizing the New York City Health and Hospitals Corporation (the "System") to execute a three year contract with New York Legal Assistance Group ("NYLAG") with two one-year options to renew exercisable only by the System to provide free legal services to the System's patients at the System's acute care hospitals and such other locations as are agreed upon at an annual cost of $921,000 and increasing during the term to reach an annual cost of $1,060,111 in the fifth year for a total not-to-exceed cost over the five year period of $5,113,646; provided, however, the cost of the contract may increase if any other funding source determines to fund additional NYLAG staff or related functions.

Vendex: Approved.
EEO: NA

- **Resolution** **Israel Rocha**
Authorizing the New York City Health and Hospitals Corporation (the "System") to execute a one year revocable license agreement with two one-year options to renew exclusive to the System with Bright Horizons Children's Centers LLC ("BHC") for its use and occupancy of approximately 1,900 square feet of space on the ground floor in NYC Health + Hospitals/Elmhurst (the "Facility") to operate a daycare center with discounted rates for Facility staff and the occupancy fee waived; provided, however, the System shall not exercise its renewal options unless BHC enrollment is at least 50% children of staff by the end of the first year.

  Vendex: Approved
  EEO: NA

- **Resolution** **William Hicks**
Authorizing the New York City Health and Hospitals Corporation (the "System") to execute a five year revocable license agreement with Bellevue Day Care Center, Inc. (the "Licensee") for its continued use and occupancy of 3,031 square feet in the C&D Building at NYC Health + Hospitals/Bellevue Hospital Center (the "Facility") to operate a daycare center with the occupancy fee waived.

  Vendex: Approved.
  EEO: NA

- **Resolution** **Christine Flaherty**
Authorizing the New York City Health and Hospitals Corporation (the "System") to amend the resolution adopted by the Board of Directors of New York City Health and Hospitals Corporation on July 26, 2018 authorizing the execution of a Job Order Contract ("JOC") with Mac Fhionnghaile & Sons Electrical Contractors, Inc. ("Mac & Sons"), which was procured through the System's public bid process, to provide electrical construction services on an as-needed basis with such amendment increasing the $6,000,0000 not to exceed contract limit for Mac & Sons by $6,000,000 to bring the total not to exceed limit to $12,000,000.

  Vendex: Approved.
  EEO: Approved.

- **Resolution** **Christine Flaherty**
Authorizing the New York City Health and Hospitals Corporation (the "System") to execute a contract with Carrier Corporation ("the contractor"): that was selected through a Request For Proposals ("RFP") process, to provide HVAC/Chiller maintenance services on pre-determined schedule at various facilities throughout the System. The contract shall be for a term of three (3) years with the option for two (2) one year extensions, for an amount not to exceed $6,000,000. The total authorized value of this contract would be $6,000,000.

  Vendex: Pending.
  EEO: Approved.

- **Resolution** **Theodore Long, MD**
Authorizing the New York City Health and Hospitals Corporation (the "System") to execute a five year lease extension agreement with LSS Leasing Limited Liability Company (the "Landlord") for 5,120 square feet of space at 59-17 Junction Boulevard, Borough of Queens, to house the Women's Medical Center (the "Center"), operated by NYC Health + Hospitals/Gotham Health ("Gotham Health") at an initial rent of $271,360 per year or $53 per square foot to increase at a rate of 3% per year for a five year total of $1,440,687.

Vendex: Pending
EEO: NA.

- **Resolution** **Theodore Long, MD**
  Authorizing the New York City Health and Hospitals Corporation (the "System") to execute a five year sublease agreement with Pediatric Specialties of Queens (the "Subtenant") for 2,560 square feet of space at 59-17 Junction Boulevard, Borough of Queens, to house the Subtenant's pediatric program at an initial rent of $135,680 per year or approximately $53 per square foot to increase at a rate of 3% per year but in no event less than half of all of the Corporation's occupancy costs at the premises.

  Vendex: Pending
  EEO: NA.

- **Resolution** **Alfonso Pistone**
  Authorizing the New York City Health and Hospitals Corporation ("NYC Health + Hospitals") to execute a five year revocable license agreement with Verizon Wireless (the "Licensee") to operate a cellular communications system in approximately 300 square feet of space on the roof of the "C Building" at NYC Health + Hospitals/Coler Rehabilitation and Nursing Care Center (the "Facility") at an annual occupancy fee of $50,000 per year or $167 per square foot to be escalated by 2% per year for a five year total of $260,202.

  Vendex: Approved.
  EEO: NA

- **Resolution** **Christine Flaherty**
  Amending the resolution adopted in September 29, 2017 by the Board of Directors of the New York City Health and Hospitals Corporation ("NYC Health + Hospitals") to authorizing an extension of existing agreements with Arcadis U.S., Inc. ("Arcadis") and with Parsons Brinckerhoff, Inc. ("Parsons") for a term of five years for an amount not to exceed $1,277,702.94 for both of such contractors drawing on funds left unused from the prior contract with such amendment authorizing an increase in the not-to-exceed amount by an additional $450,000 without further extending the term for a total amount of $1,727,702.94.

  Vendex: Approved
  EEO: Pending

OLD BUSINESS

NEW BUSINESS

ADJOURNMENT

CAPITAL COMMITTEE MEETING MINUTES

July 11, 2019

MINUTES

Capital Committee

<u>Meeting Date: July 11, 2019</u>

<u>Time: 10:00 A.M.</u>

<u>Location: Board Room</u>

<u>Board of Directors:</u>
Members of the Capital Committee
José Pagán, Chairman of the Board
Feniosky Peña-Mora
Mitchell Katz, President, Chief Executive Officer

<u>HHC Staff:</u>
<u>Christine Flaherty – Senior Vice President Capital and Design</u>
Jeremy Berman – Deputy Counsel, Office of Legal Affairs
Christine Flaherty – Senior Vice President, Colicia Hercules – Chief of Staff, Office of the Chairman
Shahriar Kahn – Assistant Vice President, Post-Acute Care Operations
Theodore Long, MD - Vice President, Ambulatory Care
Christopher Mastomano – Executive Director, NYC Health + Hospitals / Jacobi
Maureen McClusky – Senior Vice President, Post-Acute Care Operations
Sharon McPherson – Executive Secretary, Office of the Chairman
Alfonso Pistone – Associate Executive Director, NYC Health + Hospitals / Coler Rehabilitation and Nursing Care Center
Brenda Schultz – Senior Assistant Vice President, Finance
Cyril Toussaint –Director, Office of Facilities Development
Leithland Tulloch – Senior Director, Office of Facilities Development
Roslyn Weinstein – Vice President, President's Office
Dion Wilson –Director of Real Estate, Office of Legal Affairs
Elizabeth Youngbar – Assistant Director, Office of Facilities Development

<u>Outside Representatives:</u>
Fawad Rashid – New York City Police Department (NYPD)
Crystal Rojas – New York State Nurses Association (NYSNA)

CALL TO ORDER

The meeting was called to order by José Pagán, Chairman of the Board, at 10:02 A.M.

On motion, the Committee voted to adopt the minutes of the March 19, 2019, Capital Committee meeting.

VICE PRESIDENT'S REPORT

Christine Flaherty, Senior Vice President, advised that since her arrival on May 20, 2019, she had been getting to know the New York City Health + Hospitals system, as she had the opportunity to participate in in-depth tours at ten of the systems' major facilities - Jacobi, North Central Bronx, Bellevue, Elmhurst, Kings County, Coney Island, Metropolitan, Coler, Queens and Seaview. Additionally, she had the opportunity to tour three new primary care sites that Theodore Long, MD, Vice President, Ambulatory Care, would be briefing members of the Committee on later in the meeting. She noted that she had the chance to do a quick stop in at Woodhull and had many major facility tours on her calendar for the coming weeks. She explained that she was working on getting to know the entire senior leadership team. She thanked Matthew Siegler, Senior Vice President, Managed Care and Patient Growth and Ebone Carrington, Chief Executive Officer, NYC Health + Hospitals / Harlem, for their initial work in launching the Office of Facilities Development (OFD) Council with hospital designated operations executives, to identify resource gaps and opportunities for improvements in operations, process, procedures, and reporting, and to increase collaboration across the system. She noted that as the council moved forward, she looked forward to working with Mitchell Katz, MD, President/Chief Executive Officer, the Capital Committee, and the Board of Directors to provide educational sessions around feedback, recommendations and strategic decisions to align services with the needs of the system.

Ms. Flaherty added that on June 27, 2019, Coney Island Hospital and the OFD team hosted a construction site-visit focused on the Coney Island resiliency projects funded by Federal Emergency Management Agency (FEMA) funds, including the systems' largest current construction project - the construction of the new Coney Island Hospital. Mrs. Flaherty thanked the Board Chair, José Pagán and Capital Chair Feniosky Peña-Mora as well as Board member Freda Wang for participating in the discussion and tour.

That concluded her report.

ACTION ITEMS

- Amending the resolution approved by the Board of Directors of the New York City Health and Hospitals Corporation (the "System") at its October 2018 meeting authorizing the execution of a lease with Master Lease LLC (the "Landlord") for ground floor space at 1920 Webster Avenue to house a community health clinic to be operated by the System under the NYC Health + Hospitals/Gotham Health FQHC structure, a copy of which is attached, to correct the floor area of the Premises from "approximately 21,236 square feet" to "approximately 21,643 square feet" while not changing the statement of the total rent payable.

  and

Further amending the resolution to correct the name of the Landlord from “Master Lease LLC” to “TR Master Lease LLC.”

and

Further amending the resolution to add approximately 1,500 square feet of ground floor space to the lease which will increase the total floor area leased to 23,143 square feet (the “Premises”) with the result that the initial rent, charged at $42.50 per square foot, will be $63,750 per month and $983,578 per year and, as before, will be escalated by 3% per year thereby bringing the total rent for the Premises over the 15 year term after factoring in eight months of free rent to $17,626,267.

Feniosky Peña-Mora, Chair, Capital Committee, read the resolution into the record. Theodore Long, MD, Vice President, Ambulatory Care, and Shahriar Khan, Assistant Vice President, Post-Acute Care Operations, were present to discuss the item.

Dr. Long narrated a presentation outlining the overall strategy for Primary Care expansion. He started with background on the guiding principles for the approach to the Primary Care expansion, access and engagement, value and growth, the way that need and opportunity were identified, and the new service model.

Dr. Long explained that he would like to focus on two specifics related to the planned expansion that made it different from prior efforts. Frist, how H+H selected the properties and defined need and opportunity.

Dr. Long said that the team looked at various factors, including; where patients would benefit the most from Primary Care, where were patients with the most room for improvement, where were patients with the most social determinants of health, for which we could make the biggest difference?

Other factors were, where are all the patients in New York City that do not have Primary Care now? Accessibility of public transit was also important to ensure accessibility. Dr. Long noted that maps in the presentation showed the sites and their nearest transit options, as well as where MetroPlus enrollees were.

Dr. Long explained that there were areas of Bushwick, Brooklyn that had a 20 fold difference in availability to Primary Care services than areas of Manhattan. Citizens cannot get the care they need if they do not have access to the services, he said.

Dr. Long explained that the heat map included in the presentation showed shaded green areas, representing the confluence of all the factors discussed, with dark green identifying areas of greatest need, and light green or no green showed little to no need.

The locations being presented were located in or near the dark green areas. Dr. Long stated that the clinics were not situated directly inside all the darkest areas for various reasons. For example, he noted that a section on the map, near lower Manhattan, was not targeted because it was near NYC Health + Hospitals / Gouveneur, which already provides Primary Care services and so a plan would be developed to expand services at that existing location.

The final factor was any limitation with regards to the actual physical space: cost of rent, type of building/structure, etc.

Dr. Long explained that, at present, families sometimes have to visit multiple locations to receive all necessary health services, be it for pediatrics, adults, geriatrics, dental, optometry, pharmacy, lab-work, etc. He said that the new H+H vision was to have enough square-footage to provide all those services in one location. Being able to access care for optometry, radiology, mammography, dexiscan, x-ray, pharmacy, etc. We want to remove barriers for families that want and need to be healthy, said Dr. Long.

Dr. Long noted that NYC Health + Hospitals/Woodhull was located a few blocks away from the 815 Broadway site, in Brooklyn, meaning that patients could be referred to the hospital site for specialties.

Dr. Long reminded the Committee that resolutions for the approval of the three selected sites has been brought before the Committee and full Board of Directors in October of 2018, but an increase in the square footage at the 1920 Webster Avenue site, provided an opportunity to come back and provide a refresh on the new plan to new leadership.

Mitchel Katz, MD, President, Chief Executive Officer, referring to the heat map discussed earlier, said that he was familiar with public organizations that would make similar style maps, indicating catchment areas that were instead based on the number of insured in the area. The dark green would represent the highly insured (instead of uninsured and underserved) and that would be the institutions desired area. Quite a different method of service, he noted.

Dr. Long advised on status of the real estate agreements for the three sites. The lease was signed for the space at 815 Broadway, Brooklyn, the lease for space at 71-17 Roosevelt Avenue, Queens, was under review by the Law Department. The third lease is being presented now to revise the space at 1920 Webster Avenue for an increase in square-footage, change in landlord and correction of original square footage with no additional cost. He noted that Perkins Eastman had been retained as an architect to provide scope and preliminary design for the sites.

José Pagán, Chairman of the Board, said the presentation was very informative and he appreciated the breadth of it.

Mr. Peña-Mora asked for an explanation of Dr. Long’s prior statements about locating sites near existing facilities and the seeming contradiction when noting the benefit of Woodhull being located near 815 Broadway but also determining that a site was not needed near lower Manhattan because Gouverneur was nearby.

Dr. Long explained that services at Woodhull and Gouverneur differed, and Gouverneur provided primary care services along the lines of those being presented in the new plan. The idea was to expand existing services at Gouverneur, whereas, services at Woodhull were more specialty care, and would complement the primary care services available at the new sites.

Dr. Katz explained that Gouverneur previously functioned as a hospital but was now a primary care facility so there was common confusion about the types of services provided.

Mr. Peña-Mora asked if perhaps that statement could be clarified moving forward, with regards to the benefit of existing facilities. Dr. Long said yes.

Mr. Peña-Mora asked for clarification on the comparable rates provided with regards to the rent at the 1920 Webster Avenue site. Dr. Long said that would be provided.

Mr. Peña-Mora asked if it would be possible to show existing H+H facilities on the existing heat map, so that it was clear where existing services were being provided. Dr. Long said that would be provided prior to the full Board of Directors meeting, and added that the distance of Woodhull to the 815 Broadway site, was by far the closest of the new sites to an existing facilities. On the other end of the spectrum was the site in the Bronx, 1920 Webster Avenue, which was great distance from any existing H+H facilities, falling almost equidistant between Jacobi and North Central Bronx. In that instance, said Dr. Long, the primary care sites would refer to the closest facilities for specialty services not covered in primary care clinic.

Mr. Peña-Mora supported the plan and expressed appreciation for the presentation.

Mr. Pagán encouraged the team to focus on care coordination moving forward. Dr. Long said that the core model for care was developed at a population level but there were indeed services and specialties that were of higher need in certain neighborhoods or with certain ethnic groups, and that was being discussed with the Gotham Health Board, and Community Boards as well. Dr. Long acknowledged that was a very important component of care. He provided an explanation of success in that area, on Staten Island, where there are concerns about the opioid crisis and trauma care and in response the Vanderbilt Clinic on Staten Island responded by ensuring that all providers were waivered to provide associated services. That came as a direct result of interaction with the community. The trauma care concern was being addressed by continuing education of staff, but both efforts were attributable to community engagement and communication.

There being no further questions or comments, the Committee Chair offered the matter for a Committee vote.

On motion by the Chair, the Committee approved the resolution for the full Board's consideration.

Feniosky Peña-Mora, Chair, Capital Committee, read the resolution into the record

- Authorizing New York City Health and Hospitals Corporation (the "System") to execute a 30 year lease with Camelot of Staten Island, Inc. ("Camelot") with Camelot holding a 19 year renewal option for the operation of a residential Substance Use Disorder ("SUD") program on the campus of NYC Health + Hospitals/Sea View (the "Facility") on a parcel of land measuring approximately 24,080 sq. ft. including the approximately 20,000 sq. ft. Administration Building at an annual rent of $250,000, or $12.50/sq. ft. to be escalated by 2.5% per year for a total rent over the 30 year initial term of $10,975,676.

. Maureen McClusky, Senior Vice President, Post-Acute Care Operations, and Jeremy Berman, Deputy Council, Legal Affairs, were present to discuss the item.

Ms. McClusky noted that Dr. Long's comments on Staten Island's concerns with the opioid crisis were an appropriate segue to discussing the Camelot lease. Ms. McClusky explained that Camelot had originally developed a 35-bed male substance abuse facility on the NYC Health + Hospitals / Sea View campus in 2012. That facility was well maintained and successful and strongly supported by the Borough President and the community.

Ms. McClusky explained that this new request was to take another part of the campus, the old administration building, and convert that into a 25-bed female facility. The renovation would be subsidized by Office of Alcoholism and Substance Abuse Services (OASAS) and Camelot would run the facility, and pay for utilities and maintenance. The annual occupancy fee was $250,000.

Dr. Katz asked if the rent was at market value. Mr. Berman said yes, and explained that the rate was much lower than that for the new Primary Care sites because of location and type of structure. The proposed site was an old building on the campus of Sea View, in the center of Staten Island (not easily accessible), and requires a complete renovation.

Mr. Peña-Mora asked if the terms of the lease were standard terms. Mr. Berman said yes, it was in the interest of all parties to have a longer-term lease. Ms. McClusky noted that the prior agreement with Camelot had established a trusting, committed relationship. Mr. Berman added that there was no established process for selling land under the jurisdiction of Health + Hospitals so long term leases were often done, sometimes for a term of 99 years.

Dr. Katz asked if this was sometimes a savings to the system. Mr. Berman said yes, we no longer have to maintain the structure as another entity is taking responsibility and maintaining.

Mr. Berman noted that the public hearing was held in February of 2018. Dr. Katz asked why it took so long for the item to come before the Committee and Board if the hearing went well.

Mr. Berman explained that there was some back and forth between OASAS and Camelot regarding rent rates and necessary inspections. There were on-going negotiations between OASAS and Camelot that happened after the Public Hearing.

Dr. Katz noted that there was a huge difference between how the State was involved here in New York, versus their involvement in these types of service arrangements in California. A very interesting, and different way of functioning, he noted.

Mr. Peña-Mora asked if Camelot was a not-for-profit. Ms. McClusky said yes.

There being no further questions or comments, the Committee Chair offered the matter for a Committee vote.

On motion by the Chair, the Committee approved the resolution for the full Board's consideration.

Feniosky Peña-Mora, Chair, Capital Committee, read the resolution into the record.

- Authorizing New York City Health and Hospitals Corporation (the "System") to execute a short-term six month extension of the existing agreement with Johnson Controls, Inc. ("JCI") to manage and maintain the System's building management system ("BMS") and fire alarm monitoring system (“Fire System”) at a cost not to exceed $1,425,000, for a total contract spend of $6,100,000.

Christine Flaherty, Senior Vice President, Office of Facilities Development, and Jeremy Berman, Deputy Council, Legal Affairs, were present to discuss the item.

Mrs. Flaherty provided some background to the resolution, explaining that an original contract with Johnson Controls had been executed in 2012, for a large number of services. Over time, a number of those services had been reduced, and at present, the remaining functions for which they were contracted include maintenance of Heating, Ventilation and Air Conditioning (HVAC) systems, Building Maintenance System (BMS) services and fire alarm monitoring, at various facilities. This resolution was to extend services related to BMS and fire alarm monitoring.

Dr. Katz asked for details of the original engagement and why it had been determined that the relationship was not beneficial.

Ms. Flaherty explained that at the time the contract was initiated there was an ongoing effort to lower costs throughout the system and outsourcing facilitates management services and equipment contracts was identified as way to reduce spend. JCI was brought on board under a ten (10) year contract to provide a large number of services including taking on and managing every trade person, in every facility. It covered a large amount of contracts under one umbrella. Over time, approximately five (5) years, it was realized that going to one single provider was not helping the system and all the necessary in-house expertise required for the various aspects of running a healthcare system was not there. H+H needs were not being met and so various contracts have since been siphoned off and separately outsourced with other providers. JCI was retained and became part of CB Richard Ellis (CBRE) and they are still under contract for certain select services, including the maintenance contracts being discussed.

Ms. Flaherty noted that the system was working to slowly carve out all of the services originally under the JCI contract.

Dr. Katz said, at some point in time leadership made the decision to contract out management services, with the intention of saving money. Was there a savings to H+H?

Mr. Berman explained that this contract was initiated under a previous administration, as part of their transformation process. That process was designed based on a report that was provided by consultants to senior staff, and City Hall, and determinations were made that the outsourcing of non-core services; dietary, linen, plant maintenance, and environmental services, would provide a savings. He noted that other outsourcing efforts, such as dietary or linen for instance, had been successful and that was partly because those service areas are very well defined. The contracts were more coherent. JCI was the attempt to outsource plant maintenance but that turned out to be a more difficult field then we realized.

Mr. Berman said it eventually became clear that JCI was not providing the expertise needed to perform in our healthcare environments.

Ms. Flaherty noted that those simple services, linen or dietary, are common services to be outsourced in a hospital environment, but facilities management is not.

Mr. Berman explained that JCI was a very established vendor, with a number of services and it was possible that H+H may continue to use them for some specific services where the relationship had been successful, but the original contract was for wrap-around services, including management services, and that was the problem.

Mr. Peña-Mora asked if the system was now parceling out services and returning management to the facilities, was there still the expertise in place throughout the system?

Ms. Flaherty said there were some strong staff members in place that had been hired through the Office of Facilities Development, as well as facilities management staff within the individual facilities, and there was continuing work through the OFD Council, to determine the correct balance of trades required to appropriately and efficiently provide services. She explained that as industry standards were reviewed it became clear that New York City is unique and that outsourcing of facilities management is not really done in City healthcare like it is in other areas.

Ms. Weinstein explained that another piece of the original contract was that when JCI had supervision of management, related services were provided under their nationwide contracts. What H+H found was that when we do our own independent contracting, without the middle man, we get a savings. It allows us to negotiate and to ensure that those contracts work best for us.

Mr. Berman explained that the management contract was terminated two (2) years ago, but some individual service contracts remained under JCI.

Mr. Peña-Mora asked if JCI provided elevator services or if those services had been split from the contract. Ms. Weinstein said that there was a new contract in place with Kone, Inc., presented to the Capital Committee in October, 2018, to provide system-wide service. She noted that there had been a decrease in down time of elevators and a quicker response time since Kone took over, but advised that there were modernization project that needed to be completed as well, to keep things functioning at their most efficient.

Dr. Katz said he understood the outsourcing of services such as elevators, that is not the specialty of a hospital, but he did not support the outsourcing of management. Why hire someone from outside to manage instead of training and utilizing your staff? That is very different from contracting for a specialized service. I am not in favor of giving a little group authority over our organization, he said. We should run things. I do not believe that in civil service systems there should be outside management.

Mr. Peña-Mora asked that metrics be carefully created in future contracts, so that tracking of success is more easy to identify.

Dr. Katz said that he had received complaints about services provided by Crothall, and whether they provide the proper equipment and supplied, but noted that it was unclear whether that was fact or opinion and that was the difficulty of outsourcing. The organization is no longer managing those services or that staff and so you do not have the expertise to weigh in. I do not know if that is good or bad, he said, but it makes me uncomfortable.

Mr. Peña-Mora said the system needs to be sure that performance was where it should be and there was satisfaction with the service. Make sure that performance criteria, and how they treat and support workers meet the H+H value system.

Mr. Pagán recommended that future changes, dependent on the type of service, perhaps be tested at a single site prior to rollout system-wide.

Mr. Peña-Mora agreed that a pilot program may be beneficial, but acknowledged that each site was different so there was a possibility that a pilot could go well somewhere and not go as well at another location.

Ms. Flaherty said that communication, engagement of management, and on site skillset were large factors of that success or failure. Mr. Peña-Mora agreed.

Mr. Peña-Mora said that clearly, outsourcing can be beneficial in certain areas but it is definitely dependent on the type of service. Ms. Flaherty agreed.

Ms. Flaherty explained that an analysis of the entire contract and the possible savings recognized under that contract was ongoing. There was immediate savings recognized, simply from the elimination of all the staff that was no longer on the payroll, but looking at the long term, and what was promised regarding services, is a lengthy and difficult process.

Mr. Peña-Mora said that this highlights the importance of being able to terminate a contract.

In closing, Ms. Flaherty noted that this resolution was requesting an extension of services for the BMS and fire alarm monitoring, an extension approved by the Contract Review Committee (CRC) in June. She explained that by the time the extension expires, H+H intends to have new contracts in place. She said an RFP had been issued and selection was complete for HVAC services, and there were BMS and fire safety RFPs that were being opened. All the new service contracts will be presented to the committee prior to contract execution, as action or information items.

There being no further questions or comments, the Committee Chair offered the matter for a Committee vote.

On motion by the Chair, the Committee approved the resolution for the full Board's consideration.

Feniosky Peña-Mora, Chair, Capital Committee, read the resolution into the record.

- Authorizing the New York City Health and Hospitals Corporation ("NYC Health + Hospitals") to execute a five year revocable license agreement with Verizon Wireless (the "Licensee") to operate a cellular communications system in approximately 300 square feet of space on the roof of the "C Building" at NYC Health + Hospitals/Coler Rehabilitation and Nursing Care Center (the "Facility") at an annual occupancy fee of $50,000 per year or $167 per square foot to be escalated by 2% per year for a five year total of $260,202.

Alfonso Pistone, Associate Executive Director, Coler Rehabilitation and Nursing Care Center, was present to discuss the item.

Mr. Pistone explained that the request would provide permission to Verizon Wireless to install a wireless antenna on the roof of Coler. He noted that the location was currently vacant and therefore the annual occupancy fee would present an opportunity for revenue where there was none.

There being no further questions or comments, the Committee Chair offered the matter for a Committee vote.

On motion by the Chair, the Committee approved the resolution for the full Board's consideration.

Feniosky Peña-Mora, Chair, Capital Committee, read the resolution into the record.

- Authorizing the New York City Health and Hospitals Corporation (the "System") to execute a revocable five year license agreement with the New York City Police Department ("NYPD" or "Licensee") for its use and occupancy of approximately 300 square feet of space in Building No. 1 to operate radio communications equipment at Jacobi Medical Center (the "Facility") with the occupancy fee waived.

Christopher Mastromano, Executive Director, Jacobi Medical Center, was present to discuss the item. Mr. Mastromano was joined by Fawad Rashid, New York City Police Department.

Mr. Mastromano noted that there would be no impact on space or hospital operations and there would be a possible enhancement to public safety.

There being no questions or comments, the Committee Chair offered the matter for a Committee vote.

On motion by the Chair, the Committee approved the resolution for the full Board's consideration.

There being no further business, the meeting was adjourned at 11:04 A.M.

LICENSE AGREEMENT

HUMAN RESOURCES ADMINISTRATION (HRA)
MEDICAL ASSISTANCE PROGRAM (MAP)

VARIOUS LOCATIONS

RESOLUTION

Authorizing the New York City Health and Hospitals Corporation (the "System") to execute a five-year revocable license agreement with the New York City Human Resources Administration ("HRA") to operate its Medical Assistance Program ("MAP") at five System facilities (the "Facilities") in a total of approximately 11,438 square feet of space for a total annual occupancy fee of approximately $741,247.78 based on the facility Institutional Cost Reimbursement Rate ("ICR"), ranging between $46.77 per square foot and $84.19 per square foot as shown on the attached spreadsheet and to be escalated by 2% per year and further authorizing

The System to negotiate with HRA to change the location of some MAP offices within the Facilities to accommodate program and construction initiatives as they develop and to make any appropriate adjustment to the occupancy fees charged.

WHEREAS, HRA's MAP attempts to enroll those patients of the System that are eligible for Medicaid but not yet enrolled and in doing so the MAP serves the System's interests; and

WHEREAS, in September 2014 the System's Board of Directors authorized the execution of a five-year agreement with HRA to operate MAP at various Facilities; and

WHEREAS, the System has been hosting MAP services since 1991; and

WHEREAS, the ICR is calculated separately for each Facility and takes into account the cost of operating each Facility including depreciation of capital assets and thus the rate varies across the System based on historic capital expenditures; and

WHEREAS, the System desires to continue to allow the HRA MAP to occupy space and provide services to individuals and families seeking Medicaid insurance coverage.

NOW, THEREFORE, be it

RESOLVED, that the New York City Health and Hospitals Corporation (the "System") be and hereby is authorized to execute a five-year revocable license agreement with the New York City Human Resources Administration to operate its Medical Assistance Program at five System facilities in a total of approximately 11,438 square feet of space for a total annual occupancy fee of approximately $741,247.78 per year based on the facility Institutional Cost Reimbursement Rate ranging between $46.77 per square foot and $84.19 per square foot as shown on the attached spreadsheet to be escalated by 2% per year.

AND IT IS FURTHER RESOLVED that the System may negotiate with HRA to accommodate program and construction initiatives as they develop and to make any appropriate adjustment to the occupancy fees charged.

EXECUTIVE SUMMARY

LICENSE AGREEMENT
NEW YORK CITY HUMAN RESOURCES ADMINISTRATION
MEDICAL ASSISTANCE PROGRAM

OVERVIEW:	The New York City Human Resources Administration ("HRA") operate its Medical Assistance Program ("MAP") to enroll eligible individuals in Medicaid. MAP has been operating in System Facilities since 1991. Normally, programs like MAP around the country rent space and the rental costs are reimbursed by Medicaid to the program. Because MAP operates largely in System Facilities, in 2014, HRA and the System realized that it was appropriate for the System to charge rent for the MAP offices which HRA submits for Medicaid reimbursement. The System seeks authorization to execute a renewal of its revocable license agreement with HRA for the continued operation of MAP at various System Facilities with the right to negotiate with HRA to relocate certain MAP offices, to free the original locations, with appropriate adjustments in the occupancy fees.
NEED/ PROGRAM:	MAP works together with System staff to facilitate the enrollment of eligible individuals in Medicaid. It is important to enroll as many eligible individuals as possible in Medicaid. The new license agreement will provide for MAP sites at NYC Health + Hospitals/Kings, NYC Health + Hospitals/Lincoln, NYC Health + Hospitals/Metropolitan, NYC Health + Hospitals/North Central Bronx and NYC Health + Hospitals/Gotham/Morrisania.
TERMS:	HRA will use and occupy approximately 11,438 square feet of space at a total occupancy fee of approximately $741,247.78 per year calculated using the ICR for each Facility. The rates will be escalated by 2% per year. The Facilities shall provide electricity, housekeeping, and security to the licensed space. The ICR is calculated separately for each Facility and takes into account the cost of operating each Facility including depreciation of capital assets and thus the rate varies across the System based on historic capital expenditures The term of the license agreement will be five years and will be revocable by either party on thirty days' written notice.

MAP SITES

Facility	Location	Floor Area (sf)	ICR ($)	Annual Occupancy Fee ($)
Kings Cty.	T-Bldg., 1st Floor	2,175	$84.19	$183,113.25
Lincoln	Basement	4,352	$67.66	$294,456.32
Metropolitan	OPD Bldg., 1st Floor	2,149	$59.03	$126,855.47
NCB	Rm 1A-05	1,462	$46.77	$68,377.74
Morrisania	Basement	1,300	$52.65	$68,445.00
Total		11,438		$741,247.78

License Agreement with NYC Human Resources Administration to provide space for Medical Assistance Program at five H+H locations

Capital Committee
September 12th, 2019

Frederick Covino, Vice President Finance

Program Background

- NYC HRA administers the Medicaid program for residents who are age 65 and older and for people of any age who are seeking public health insurance based on a disability.

- The Medical Assistance Program (MAP) Offices assist New Yorkers who want to apply for public health programs, most notably Medicaid.

- MAP offices services including: assisting in filing new applications, collecting annual renewal applications and documentation, updating existing cases as well as answering questions related to Medicaid eligibility, application process and application status.

- Statistics:

H+H MAP Location	Average Monthly Visitors	Approx. Medicaid Applications
Kings County	1,200	350
Lincoln	3,800	380
Metropolitan	1,200	180
North Central Bronx	2,100	250
Morrisania	1,800	210

NYC HEALTH+ HOSPITALS

Financial Summary

- Rates are based on the each facility's Institutional Cost Report (ICR) which are submitted annually in accordance with Medicaid regulations
- ICR's are calculated separately for each facility and take into account the cost of operations which include the depreciation of capital assets. As a result, rates vary across the system based on historic capital expenditures.

H+H MAP Location	Floor Area (Sq. Ft)	Rate (ICR)	Annual Occupancy Fee	Location
Kings County	2,175	$ 84.19	$ 183,113.25	T Building, 1st Floor
Lincoln	4,352	$ 67.66	$ 294,456.32	Basement
Metropolitan	2,149	$ 59.03	$ 126,855.47	OPD Building, 1st floor
North Central Bronx	1,462	$ 46.77	$ 68,377.74	Room 1A-05
Morrisania	1,300	$ 52.65	$ 68,445.00	Basement
Total	11,438		$ 741,247.78	

Conclusion

- HRA has operated MAP offices within the System since 1991. The MAP offices provide a valuable service to the System and our patients.

- Since 2014, H+H has been reimbursed for the program's space based on the System's Institutional Cost Reports. The rental costs associated with the program are reimbursable under Medicaid.

- The five year renewal of the license agreement would provide over $741k in income in year one and increase by two percent annually.

SUBLEASE AGREEMENT

CAMELOT OF STATEN ISLAND

SUBSTANCE USE DISORDER PROGRAM

NYC HEALTH + HOSPITALS / SEA VIEW

RESOLUTION

Authorizing New York City Health and Hospitals Corporation (the "System") to execute a 30 year lease with Camelot of Staten Island, Inc. ("Camelot") with Camelot holding a 19 year renewal option for the operation of a residential Substance Use Disorder ("SUD") program on the campus of NYC Health + Hospitals/Sea View (the "Facility") on land measuring approximately 24,080 sq. ft. including the approximately 20,000 sq. ft. Administration Building at an annual rent of $250,000, or $12.50/sq. ft. to be escalated by 2.5% per year for a total rent over the 30 year initial term of $10,975,676.

WHEREAS, Camelot is a not-for-profit formed in 1971, licensed under Article 32 of the Mental Hygiene law to operate outpatient and intensive residential rehabilitation programs; and

WHEREAS, Camelot operates 2 intensive residential programs – 1 for adolescent males, and 1 for adult males; and 4 out-patient programs – one on Staten Island and 3 out-patient clinics located in Homes for the Homeless Inc. Tier II Family Shelters in Queens and the Bronx; and

WHEREAS, since 2012 Camelot has operated a 35-bed adult male residential program on the Facility's campus in the Camelot-renovated "Group Building;" and

WHEREAS, the proposed 25-bed residential SUD program will treat women only because research indicates that gender-responsive rehabilitation is more effective; and

WHEREAS, the program will be housed in the now vacant Administration Building to be renovated by Camelot at its own expense; and

WHEREAS, there is an acute need for SUD programs on Staten Island and SUD programs for women, in particular; and

WHEREAS, the New York State Office of Alcohol and Substance Abuse Services (OASAS) confirms that Camelot complies with OASAS program requirements, which includes medication and monitoring; and

WHEREAS, Camelot provides Methadone and Buprenorphine-based treatments to all patients with opioid use disorder and connects patients to maintenance treatment with medication following completion of residential treatment; and

WHEREAS, Camelot also provides out-patient intensive counseling and family treatment programs to which the System will refer

WHEREAS, a Public Hearing was held on February 27, 2018, in accordance with the requirements of the System's Enabling Act, and, prior to lease execution, the proposed sublease is subject to the approval of the City Council and the Office of the Mayor.

NOW, THEREFORE, be it

RESOLVED, that the New York City Health and Hospitals Corporation be and hereby is authorized to execute a 30 year lease with Camelot of Staten Island, Inc. with Camelot holding a 19 year renewal option for the operation of a residential Substance Use Disorder program on the campus of NYC Health + Hospitals/Sea View on a parcel of land measuring approximately 24,080 sq. ft. including the approximately 20,000 sq. ft. Administration

Building at an annual rent of $250,000, or $12.50 per sq. ft. to be escalated by 2.5% per year for a total rent amount over the 30 year term of $10,975,676.

EXECUTIVE SUMMARY

LEASE WITH CAMELOT OF STATEN ISLAND, INC.
NYC HEALTH + HOSPITALS/SEA VIEW

OVERVIEW:

The New York City Health and Hospitals Corporation (the "System") seeks authorization from its Board of Directors to execute a lease with Camelot of Staten Island, Inc. ("Camelot"), for the operation of a residential Substance Use Disorder ("SUD") program on the campus of NYC Health + Hospitals/Sea View ("Sea View") in the approximately 20,000 square foot Administration Building. A Public Hearing was held on February 27, 2018, in accordance with the requirements of the System's enabling act. Prior to lease execution, the proposed sublease is subject to the approval of the City Council and the Office of the Mayor.

Camelot is a not-for-profit corporation formed in 1971 and licensed under Article 32 of the Mental Hygiene law to operate outpatient and intensive residential rehabilitation programs. Camelot currently operates two intensive residential programs – one for adolescent males, and one for adult males; and four out-patient programs – one on Staten Island and three out-patient clinics located in Homes for the Homeless Inc. Tier II Family Shelters in Queens and the Bronx. Since 2012, Camelot has operated a 35-bed adult male residential program on Sea View's campus in the Camelot-rehabilitated "Group Building.

PROGRAM/ NEED:

According to the NYS Department of Health, SUD are found on Staten Island at rates higher than the rest of New York City. Individuals with SUD represent approximately 33% of Medicaid beneficiaries on Staten Island and 32% of these are hospitalized at least once each year, which is twice the rate of those without SUD. Roughly 30% of these are women. There are no residential treatment programs on Staten Island for women with SUD. The proposed 25-bed residential SUD program will treat women only because research indicates that gender-responsive rehabilitation is more effective. It will be housed in the now vacant Administration Building to be renovated by Camelot at its own expense.

Camelot maintains that acute detoxification services either alone or in combination with short-term 21 day inpatient rehabilitation is effective for less than 25% of patients and ongoing outpatient treatment is also effective for only a limited percentage of patients. Thus, longer duration programs are necessary. Women entering the Camelot program will remain as long as nine months.

The Camelot facility will accept referrals from the System and from a range of health and social service agencies on Staten Island including members of the Staten Island DSRIP PPS. Each Camelot patient will have a primary counselor and will receive treatment for SUD, mental health issues, trauma-related experiences and post-discharge planning with respect to employment and housing. Each resident will receive a medical and psychiatric evaluation and medications will be prescribed for any chronic conditions. Camelot projects that 80% of its patients will achieve recovery.

PROCUREMENT: Camelot responded to an RFP issued by OASAS on February 13, 2017 for developers/operators of residential SUD treatment facilities in Bronx, Kings and Richmond County and was awarded funding and a contract to develop the Administration Building and operate the program. Also during this time period, the New York City Economic Development Corporation ("EDC") issued a Request for Expressions of Interest in the development of portions of the Sea View campus not being used for the operation of the facility. Camelot responded to the RFEI on April 24, 2017 with support, from among others, the Borough President, James Oddo. Although the Camelot proposal does not provide a comprehensive plan for the entire Sea View campus, EDC concluded that the proposed use of the Administration Building would complement the other proposed plans and that Camelot's independent funding would help to anchor either of the other two leading proposers.

TERMS: Camelot will lease a parcel of land measuring approximately 24,080 square feet including the Administration Building which is approximately 20,000 gross square feet over two floors and a cellar. The building is currently not in use. The renovation work for the Administration Building will include installation of a new elevator, new interior finishing, new windows, doors, roofing, mechanical and fire protection systems. The construction will be managed by the Dormitory Authority of the State of New York and will be entirely funded by OASAS at an estimated cost of approximately $9 million. The term of the lease will be 30 years. Camelot will pay annual rent of $250,000, or $12.50 per square foot to be escalated by 2.5% per year for a total rent over the thirty year term of $10,975,676. The sublease will contain one nineteen year renewal option. The annual base rent for the option term will be set at 95% of the property's appraised value. Camelot will be responsible for its operating expenses associated with the Administration Building including utilities, interior and exterior maintenance, and structural and non-structural repairs

Camelot will indemnify and hold harmless the System and the City of New York from any and all claims arising by virtue of its use of the property, and will also provide appropriate insurance naming each as additional insured.

SUMMARY OF ECONOMIC TERMS

SITE:	NYC Health + Hospitals/Sea View 460 Brielle Avenue Borough of Staten Island Block 955, Lot 1
TENANT:	Camelot Counseling, Inc. 4442 Arthur Kill Road, Suite No. 4 Staten Island, N.Y. 10309
BUILDING SIZE:	Approximately 20,000 square feet
PARCEL SIZE:	Approximately 24.080 square feet
TERM:	30 year initial term
RENEWAL OPTIONS:	One 19 year option. The annual base rent for the option term will be set at 95% of the property's appraised value and will escalate at 2.5% thereafter.
RENT:	$250,000 per year in the first year of the term
ESCALATION:	2.5% per year
UTILITIES:	The cost of all utilities will be the tenant's responsibility.
MAINTENANCE:	The tenant will responsible for all interior and exterior structural and non-structural maintenance and repairs to the facility.
FINANCING:	Funding will be provided by the New York State Office of Alcohol and Substance Abuse Services.

NYC
HEALTH+
HOSPITALS

Keith Tallbe
Senior Counsel, Office of Legal Affairs
160 Water Street, 13th Floor
New York, NY 10038
Keith.Tallbe@nychhc.org
646-458-2034

To: Colicia Hercules
Chief of Staff, Office of the Chair

From: Keith Tallbe
Senior Counsel
Office of Legal Affairs

Re: Vendor Responsibility, EEO and MWBE status for Board review of contract

Vendor: Camelot of Staten Island, Inc.

Date: September 5, 2019

The below chart indicates the vendor's status as to vendor responsibility, EEO and MWBE:

Vendor Responsibility	EEO	MWBE
Approved	Pending	N/A

The above status is consistent and appropriate with the applicable laws, regulations, and operating procedures to allow the Board of Directors to approve this contract.

LONG TERM LEASE TO CAMELOT OF STATEN ISLAND, INC. SEA VIEW HOSPITAL ADMINSTRATION BUILDING FOR CONVERSION TO WOMENS' RESIDENTIAL SUBSTANCE ABUSE PROGRAM

CAPITAL COMMITTEE
SEPTEMBER 12, 2019

Maureen McClusky - Senior Vice President
Christine Flaherty, Senior Vice President, Capital and Design
Charles Barron, Deputy Chief, MPA Behavioral Health Administrator

Background -- Camelot

- Not-for-profit formed in 1971
- Art 32 Mental Health Law license to operate outpatient and residential substance use disorder (SUD) programs
- Now operates 35-bed men's residential SUD program at Sea View under another long term lease
- Focuses on Staten Island where incidence of SUD is higher than elsewhere in City and where 30% of patients are women

Camelot SUD Program

- Funded by NY State Office of Alcohol and Substance Abuse Services (OASAS)
- OASAS confirms Camelot complies with OASAS Program Requirements, which includes medication and monitoring
- Provides Methadone and Buprenorphine-based treatments as well as abstinence-based treatments
- Provides out-patient intensive counseling and family treatment programs to which NYC H+H will refer
- Collaboration with Gotham Vanderbilt Staten Island Site

Proposed Camelot Program

- 25 bed residential program for women and their children
- Residents will remain in the program for up to 9 months
- Will accept referrals from NYC Health + Hospital facilities among others
- Residents will be offered drug maintenance programs (Methadone and Buprenorphine) as well as abstinence-based treatments

Proposed Lease of Admin. Building

- 30 year term
- Land is 24,080 sf; Building is 20,000 sf
- Building currently dilapidated and unused
- Rent starts at $12.50/ft. or $250,000/yr.
- Increases at 2.5%/yr.; total rent over term is $10,975,676
- Renovation costs paid entirely by Camelot and funded by OASAS

CONTRACT APPROVAL

NEW YORK LEGAL ASSISTANCE GROUP (NYLAG)

VARIOUS LOCATIONS

RESOLUTION

Authorizing the New York City Health and Hospitals Corporation (the "System") to sign a two year revocable license agreement with a one year renewal option exercisable solely by the System with New York Legal Assistance Group ("NYLAG") for part-time, non-exclusive use and occupancy of space at all of the System's acute care hospitals and at the other large facilities as indicated in attachment "A" to this Resolution (the "Facilities") to provide legal services to patients and training to System staff at a fee payable by System to NYLAG for the services to be performed over the potential three year term not to exceed $3,998,424 and without any payment by NYLAG for the use of the space; provided however, if any other source provides funds for the NYLAG services, the total value of the contract may increase correspondingly.

WHEREAS, NYLAG is a not-for-profit provider of legal services to, among others, hospital patients in need of counseling in various areas of the law, including, but not limited to, immigration, domestic relations, child support and custody, and benefit entitlements; and

WHEREAS, NYLAG also trains hospital staff to identify patients with legal issues that would benefit from legal representation; and

WHEREAS, the System has been working with NYLAG continuously since 2002 when its services were limited to NYC Health + Hospitals/Elmhurst;

WHEREAS, since its start at Elmhurst, NYLAG expanded its services to all of the System's acute care hospitals as well as NYC Health + Hospitals/Coler and NYC Health + Hospitals /Henry J. Carter; and

WHEREAS, during the last several years, both the New York City Council and the Mayor's Office of Immigrant Affairs have added funds to the pre-existing NYLAG contracts to fund additional NYLAG staff or to expand NYLAG services; and

WHEREAS, previously the NYLAG agreements were viewed primarily as license agreements reflecting the view that NYLAG operated its program fairly independently of the System and the System's role was merely to furnish space in which NYLAG could operate but as the contract has grown, the System has come to regard the predominant nature of the relationship as that of a service agreement; and

WHREREAS, with the changed emphasis, the contract will be structured as a services agreement, centrally managed and the System will assert itself more by requiring more detailed reports and exercising greater control over the nature of the services, how they are staffed, where within the System NYLAG resources are assigned and which services are emphasized; and

WHEREAS, the Vice President for Population Health shall be responsible for the administration of the proposed agreement.

NOW, THEREFORE, be it

RESOLVED, that the New York City Health and Hospitals Corporation (the "System") to sign a two year revocable license agreement with a one year renewal option exercisable solely by the System with New York Legal Assistance Group ("NYLAG") for part-time, non-exclusive use and occupancy of space at all of the System's acute care hospitals and at the other large facilities as indicated in attachment "A" to this Resolution (the "Facilities") to provide legal services to patients and training to System staff at a fee payable by System to NYLAG for the services to be performed over the potential three year term not to exceed $3,998,424 and without any payment by NYLAG for the use of the space provided however, if any other source provides funds for the NYLAG services, the total value of the contract may increase correspondingly.

EXECUTIVE SUMMARY

NEW YORK LEGAL ASSISTANCE GROUP
CONTRACT TO PROVIDE *PRO BONO* LEGAL SERVICES

OVER-VIEW Since 2002, NYLAG has been providing *pro bono* legal services to the System's patients. The relationship started small at only Elmhurst Hospital but grew steadily to its current size which includes representation at each of the System's acute care facilities and numerous other large facilities. NYLAG's representation spans the range of patients' needs but is focused primarily on immigration, housing, benefit entitlement and family law matters. NYLAG has a long history of obtaining legal status for patients entitling them to Medicaid coverage and thereby permitting the System to collect payment for its services.

From 2002, the NYLAG relationship with the System was treated as primarily a real estate one where the System provided space to an independent entity for the operation of its program. On this basis, prior NYLAG agreements were space license agreements although they all included provisions as to the nature of the services to be provided. With the growth in the size of the NYLAG contract and the increased awareness of the importance of social determinants of health, the System has come to appreciate the importance of the services performed by NYLAG and the need to structure and focus them to integrate with the System's own attempts to address social determinants and to maximize the benefits of the services. Accordingly, the contract is proposed to be a services contract and its administration is to be centralized although still with a space license element.

NEED: There continues to be great need for *pro bono* legal services for the System's patients. There is particular demand for immigration related legal services. This kind of work often benefits the System financially in that it may establish a payor for health care services provided.

PROGRAM: The proposed contract will be for three years with the System holding two one-year options to renew. Over the full three year term, the cost will not exceed $3,998,424. However, it is likely that in the course of the contract, the New York City Council and or the Mayor's Office of Immigrant Affairs will give the System a grant to be used to add funding for additional services thereby increasing its total cost.

FUNDING: The fees payable by the System to NYLAG will come out of operating funds. In the first year, the fee will be $921,000. In the second year, the fee will be $1,347,313. In the option year, the fee will be $1,730,111. The three year total will be $3,998,424. Such fees do not cover the entire cost of the program with funds raised from other sources, including the Robin Hood Foundation making up the difference. Additionally, the City Council and the Mayor's Office of Immigrant Affairs have provided further funding for additional immigration representation. The benefits to the System in Medicaid payments for patients qualified for Medicaid coverage by NYLAG immigration work has more than paid for the System's costs during prior years.

POPULATION HEALTH SERVICES AGREEMENT WITH SPACE LICENSE COMPONENT NEW YORK LEGAL ASSISTANCE GROUP (NYLAG)

CAPITAL COMMITTEE
SEPTEMBER 12, 2019

Dave Chokshi – Vice President Population Health
Emily Foote – Sr. Director Population Health

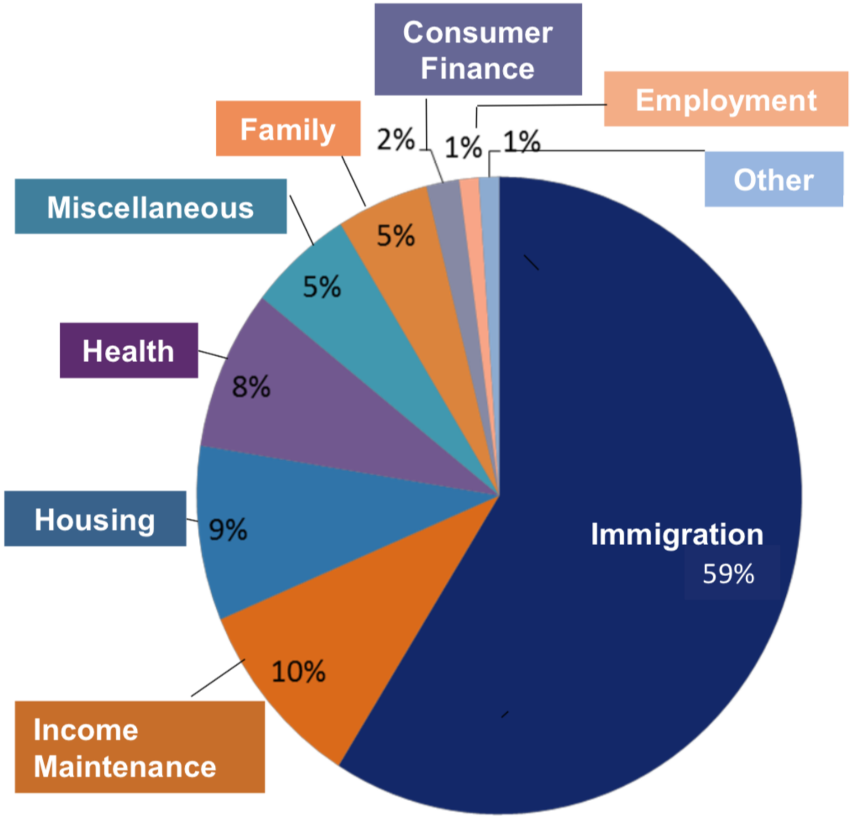
NYC HEALTH + HOSPITALS

Overview – LegalHealth at NYC H+H

- LegalHealth is a division of NYLAG, a nonprofit legal services provider founded in 1991 that partners with over 600 health and human services agencies across NYC to combat social and economic injustice for low-income, medically underserved, and other vulnerable New Yorkers*
- NYC Health + Hospitals operates one of the country's oldest and largest medical-legal partnerships with NYLAG's LegalHealth division – H+H provides physical space to NYLAG attorneys to serve patients at sites on matters related to immigration, housing, income maximization, family law, and more.
- Began at Elmhurst in 2002; later expanded to all acute care facilities, as well as select post-acute and larger Gotham facilities.
- NYLAG receives funding from other sources, including the Robin Hood Foundation, which combines with the System's payments to cover the full cost of the program.
- 4,375 patient cases were handled by NYLAG attorneys in 2018.

* A System-Level Approach to Address Health-Harming Legal and Social Needs: A Case Study of the NYC Health + Hospitals and LegalHealth Medical-Legal Partnership

LegalHealth Case Load at NYC H+H



Other: Juvenile, Education, Unspecified, Individual Rights (disability/other)

Examples of specific matters:

- Housing: Eviction prevention
- Health: Establishing PRUCOL status as a pathway to Medicaid eligibility
- Income Maintenance: Handling a Social Security Disability appeal
- Employment: Handling a reasonable accommodation in the workplace
- Immigration: Processing visa / other application for family members for the purposes of organ donation

Proposed Resolution

- License agreement with provision for services
- Attorneys on-site at all 11 acute care hospitals as well as select post-acute and Gotham sites between 1-2 days per week
- New contract will be administered centrally by the Office of Population Health
  - Integrate with System's social determinants strategy
  - Coordinate NYLAG's legal resources with flexibility to shift legal staff across the system to support spikes in volume
  - Population Health will manage payments, rather than each facility independently

LICENSE AGREEMENT

BRIGHT HORIZONS CHILDREN'S CENTERS, LLC

NYC HEALTH + HOSPITALS / ELMHURST

RESOLUTION

Authorizing the New York City Health and Hospitals Corporation (the “System”) to execute a one year revocable license agreement with two one-year options to renew exclusive to the System with Bright Horizons Children’s Centers LLC (“BHC”) for its use and occupancy of approximately 1,900 square feet of space on the ground floor in NYC Health + Hospitals/Elmhurst (the “Facility”) to operate a daycare center with discounted rates for Facility staff and the occupancy fee waived; provided, however, the System shall not exercise its renewal options unless BHC enrollment is at least 50% children of staff by the end of the first year.

WHEREAS, BHC has been operating a daycare center providing care for infants, toddlers and preschoolers at the Facility for close to ten years; and

WHEREAS, such daycare center has been open to staff at the Facility as well as members of the public, however, in the past, usage by Facility staff has been low; and

WHEREAS, the Facility leadership has been willing to continue the relationship with BHC only if the tuition pricing is adjusted to attract more staff of the Facility, if BHC actively markets the center to staff, and if more staff enroll their children in the center; and

WHEREAS, BHC has agreed to the discounted tuition for staff indicated in the attached Summary of Economic Terms and the Facility has wanted to continue the relationship for only a single year to see if additional staff enroll their children with the expectation that if staff enrollment does not increase, the relationship will not be continued but if it does increase sufficiently, then the option to renew will be exercised; and

WHEREAS, the Facility has adequate space to house BHC’s program; and

WHEREAS, the proposed license agreement will be administered by the Executive Director of the Facility.

NOW, THEREFORE, be it

RESOLVED, that New York City Health and Hospitals Corporation (the “System”) be and hereby is authorized to execute a one year revocable license agreement with two one-year options to renew exclusive to the System with Bright Horizons Children’s Centers LLC (“BHC”) for its use and occupancy of approximately 1,900 square feet of space on the ground floor in NYC Health + Hospitals/Elmhurst to operate a daycare center with discounted rates for staff with the occupancy fee waived; provided, however, the System shall not exercise its renewal options unless BHC enrollment is at least 50% children of staff by the end of the first year.

EXECUTIVE SUMMARY

LICENSE AGREEMENT
BRIGHT HORIZON CENTER
NYC HEALTH + HOSPITALS/ELMHURST

BACKGROUND: New York City Health and Hospitals Corporation (the “System”) seeks authorization from its Board of Directors to execute a one year revocable license agreement with Bright Horizons Children’s Centers LLC (“BHC””) for its use and occupancy of approximately 1,900 square feet of space on the first floor of NYC Health + Hospitals/Elmhurst (the “Facility”) to operate a daycare center providing care for infants, toddlers and preschoolers.

NEED: Having an on-site day care center available to all employees helps attract young employees and retain them following childbirth by offering a clean, safe and caring environment for their infants, toddlers and preschoolers in a location adjacent to their workplace. The proximity of this resource to Facility employees will appeal to employees looking to build both families and careers. BHC manages its licensing requirements, compliance, safety, curriculum as well as all staffing issues.

BHC: BHC, headquartered in Watertown, MA, is an organization founded in 1986 that provides on-site workplace child care. It has been recognized as one of Fortune’s best workplaces for diversity and is used by more than 1,000 of the world’s top employers to provide on-site child care to help attract and retain employees. BHC employs over 32,000 employees worldwide. They operate in the US, Canada, UK, the Netherlands and India.

PROGRAM: There are now 30 children in BHC’s “Little Elms” program. The program is licensed for 33 children. Currently there are seven hospital employees families enrolled (23% hospital enrollment) with the remainder being families from the community. The program is operated between 7 am to 6 pm and provides an environment and experience to each child that captures the joys of childhood, nurtures each child’s individual growth and development, paving the way for future success in school and life.

TERMS: BHC does not pay an occupancy fee, but in lieu thereof it provides a discount to Facility staff. The proposed discount is on a sliding scale so that staff earning less than $55,000 get a 60% discount, those earning between $55,000-$70,000 get a 45% discount, those earning between $70,000 - $90,000 get a 35% discount and those making more than $90,000 get a 25% discount. Additional details are given in the attached Summary of Economic Terms. The term of the license will be one year and shall be revocable by either party on 90 days’ notice. The System will have the right to extend the license for two one-year terms; provided, however, the System shall not exercise its renewal options unless BHC enrollment is at least 50% children of staff by the end of the first year. BHC will indemnify and hold harmless the System and the City of New York from any claims arising by virtue of its use of the licensed space and will also provide appropriate insurance naming each of the parties as additional insureds.

SUMMARY OF ECONOMIC TERMS

LICENSE AGREEMENT
BRIGHT HORIZON CENTER
NYC HEALTH + HOSPITALS/ELMHURST

CURRENT MONTHLY TUITION	COMMUNITY	ELMHURST STAFF	SAVINGS
Infants	$2,515	$1,755	$760
Toddlers	$2,391	$1,663	$728
Preschool	$2,199	$1,538	$661

The staff discount represents a 15% decrease from 2017 staff rates

PROPOSED GREATER DISCOUNTS

	Income < $55K	$55K-$70K	$70K-$90K	>$90K
Staff Discount from Community rates	60%	45%	35%	25%
Infant	$957	$1,383	$1,634	$1,886
Toddler	$880	$1,315	$1,554	$1,794
Preschool	$880	$1,209	$1,429	$1,649

OCCUPANCY FEE: The occupancy fee is waived.

NYC
HEALTH+
HOSPITALS

Keith Tallbe
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Keith.Tallbe@nychhc.org
646-458-2034

To: Colicia Hercules
Chief of Staff, Office of the Chair

From: Keith Tallbe
Senior Counsel
Office of Legal Affairs

Re: Vendor Responsibility, EEO and MWBE status for Board review of contract

Vendor: Bright Horizons

Date: September 5, 2019

The below chart indicates the vendor's status as to vendor responsibility, EEO and MWBE:

Vendor Responsibility	EEO	MWBE
Approved	NA	NA

The above status is consistent and appropriate with the applicable laws, regulations, and operating procedures to allow the Board of Directors to approve this contract.

Elmhurst
Little Elms Daycare Center
One Year Lease Renewal

Capital Committee, September 12, 2019

Israel Rocha, Vice President, One City Health

NYC HEALTH+ HOSPITALS

Little Elms Daycare Center at Elmhurst Hospital

- In January 2009, Elmhurst Hospital issued an RFP for the management of a childcare center it was developing for the benefit of its employees.
- Bright Horizons was selected through RFP Process (#07-065) in 2009 to manage the onsite daycare center at Elmhurst Hospital.
- The daycare center occupies approximately 2,616 square feet at Elmhurst Hospital.
- Elmhurst provides utility and maintenance services to the daycare center.
- The occupancy fee has been waved in exchange for tuition discounts for employees and in recognition of the benefits the daycare center has to residents of the surrounding community.
- In October 2017, facility administration reviewed the daycare center’s tuition structure with daycare management.
- As the result of this review, in January 2018, the daycare center reduced tuition for employees by an additional 15%, for a total discount over community rates of 30% to attract more employees.

NYC HEALTH+ HOSPITALS

Little Elms Daycare Center at Elmhurst Hospital (Cont'd)

- While the additional tuition reduction in 2018 increased the number of employees utilizing the daycare center, it fell short of expectations.
- The facility worked again with daycare center management to revamp the tuition structure and make the daycare center more affordable to employees.
- The new tuition structure would feature tiers and discounts that are based on employee household income to make the center more affordable to all employees.
- The one year renewal is contingent on the implementation of the new tuition structure.
- The % of employees that use the center will be used as the basis to evaluate the efficacy of the new tuition structure and will be assessed to determine whether to continue the operation of the center beyond the one year renewal being sought.

NYC HEALTH+ HOSPITALS

Areas of Focus

- Little Elms Staffing and Hours
- Tuition Fee Structure
  - Current
  - Historical
  - New
- Summary

Bright Horizons

Staffing and Teacher Composition

- 1 Center Director
- 1 Administrative Assistant / Associate Teacher
- 2 Preschool Teachers
- 2 Toddler Teachers
- 2 Infant Teachers
- 2 Float Teachers

Total: 10 Staff and Teachers at Little Elms Child Care Center

Hours of Operation are 7am-6pm

Value

- FMV values the space at $49 per sq. ft.
- Using the gross sq. ft. of 2600 sq. ft. the per sq. ft. savings value is;
  - Lowest value based on 21% (current occupancy) at new rates is $32.40 per sq. ft.
  - Median value based on 50% occupancy at new rates is $70.26 per sq. ft.
  - Highest value based on 100% occupancy at new rates is $124.13 per sq. ft.

NYC HEALTH+ HOSPITALS

Summary

- The center has a total of 33 slots, with 7 slots filled by employees.
- The goal of the new tuition structure is to have 50% employee/subsidized enrollment within a year of implementation and the long-term goal is to have 100% employee/subsidized enrollment.
- The total value of annual tuition savings/subsidy, at the initial targeted level of client enrollment is $195,000.
- Hospital employees are unlikely to find comparable, quality child care at these tuition rates, combined with the convenient location at the hospital.
- New tuition rates will be implemented within 30 days of a fully executed agreement between NYCHHC and BH, though there may be a waiting period if spaces are currently filled.
- BH would work with Elmhurst Hospital on a marketing strategy to attract additional hospital families to Little Elms.

NYC HEALTH+ HOSPITALS

Current Tuition and Savings Summary

	Current Rates Community	Current Rates Client*	Savings in Dollars
Infant	$2,515	$1,755	$760
Toddler	$2,391	$1,663	$728
Preschool	$2,199	$1,538	$661

*Current rate structure provides a 30% discount from community rates

- There are currently 7 client families enrolled at Little Elms (3 Infants, 1 Toddler, 3 PreSchool)
- The total value of annual tuition savings, based on currently enrolled client families, is $60k

NYC HEALTH+ HOSPITALS

History of Tuition Restructuring

	2017 Rates Client	2018 - Present Rates Client
Infant	$2,065	$1,755
Toddler	$1,956	$1,663
PreSchool	$1,809	$1,538

- In January 2018, Bright Horizons *decreased* client rates by 15%, which remain in effect, as of today
- In February 2019, Bright Horizons increased community rates by 7%, and increased teacher wages by 13%, *while holding client tuition rates flat*
- The new, income-based tuition structure, will *further reduce* tuition rates for Hospital employees

NYC HEALTH+ HOSPITALS

New Tuition Structure

	Client HH Income <55k	Client HH Income 55k-70k	Client HH Income 70k-90k	Client HH Income >90k
Discount from Community:	60%	45%	35%	25%
Infant	$957	$1,383	$1,634	$1,886
Toddler	$880	$1,315	$1,554	$1,794
PreSchool	$880	$1,209	$1,429	$1,649

- The new tuition structure will allow *unlimited* client enrollment in the top tier (greater than 90k); families in this tier, if currently enrolled, will see a 5% tuition increase
- The new tuition structure will allow a total of 9 client enrollments in the lowest two tiers (less than 55k, and 55k-70k, respectively), and a total of 3 client enrollments in remaining tier (70k-90k)
- All tuition rates are based on full-time enrollment, assuming 9 hours of care; extended-day care, up to 11 hours, is available for an additional fee

Tuitions: Household Income <55K

HH <55K									
	Infant			Toddler			Preschool		
	5 days	3 days	2 days	5 days	3 days	2 days	5 days	3 days	2 days
Part-time 0 - 6.0 hours	$756	$567	$401	$695	$521	$368	$695	$521	$368
Full-time 6.01 - 9.00 hours	$957	$718	$507	$880	$660	$466	$880	$660	$466
Extended hours 9.01+ hours	$995	$746	$527	$915	$686	$485	$915	$686	$485

- Tuitions in this tier have been reduced by an average of 45% from current tuition discount & represent a discount of an average of 56% from current community rates.

NYC HEALTH+ HOSPITALS

Tuitions: Household Income 55-70K

HH 55-70K									
	Infant			Toddler			Preschool		
	5 days	3 days	2 days	5 days	3 days	2 days	5 days	3 days	2 days
Part-time 0 - 6.0 hours	$1,093	$819	$579	$1,039	$779	$551	$955	$716	$506
Full-time 6.01 - 9.00 hours	$1,383	$1,037	$733	$1,315	$986	$697	$1,209	$907	$641
Extended hours 9.01+ hours	$1,438	$1,079	$762	$1,368	$1,026	$725	$1,257	$943	$666

- Tuitions in this tier have been reduced by an average of 21% from current tuition discount & represent a discount of 37% from current community rates.

NYC HEALTH+ HOSPITALS

Tuitions: Household Income 71-90K

HH 71 - 90K+									
	Infant			Toddler			Preschool		
	5 days	3 days	2 days	5 days	3 days	2 days	5 days	3 days	2 days
Part-time 0 - 6.0 hours	$1,291	$968	$684	$1,228	$921	$651	$1,129	$847	$598
Full-time 6.01 - 9.00 hours	$1,634	$1,226	$866	$1,554	$1,166	$824	$1,429	$1,072	$757
Extended hours 9.01+ hours	$1,699	$1,275	$901	$1,616	$1,212	$857	$1,486	$1,115	$788

- Tuitions in this tier have been reduced by an average of 7% from current tuition discount & represent a discount of 26% from current community rates.

NYC HEALTH + HOSPITALS

Tuitions: Household Income 90K +

HH 90K+									
	Infant			Toddler			Preschool		
	5 days	3 days	2 days	5 days	3 days	2 days	5 days	3 days	2 days
Part-time 0 - 6.0 hours	$1,490	$1,117	$790	$1,417	$1,063	$751	$1,303	$977	$690
Full-time 6.01 - 9.00 hours	$1,886	$1,415	$1,000	$1,794	$1,346	$951	$1,649	$1,237	$874
Extended hours 9.01+ hours	$1,961	$1,471	$1,040	$1,866	$1,399	$989	$1,715	$1,286	$909

- Tuitions in this tier have been increased by an average of 8% from current tuition discount, however represent a discount of 14% from current community rates.

Thank You!

LICENSE AGREEMENT

BELLEVUE DAYCARE CENTER

NYC HEALTH + HOSPITALS / BELLEVUE

RESOLUTION

Authorizing the New York City Health and Hospitals Corporation (the “System”) to execute a five year revocable license agreement with Bellevue Day Care Center, Inc. (the “Licensee”) for its continued use and occupancy of 3,031 square feet in the C&D Building at NYC Health + Hospitals/Bellevue Hospital Center (the “Facility”) to operate a daycare center with the occupancy fee waived.

WHEREAS, the Licensee is a not-for profit organization created in 1971 by the three auxiliary organizations to Bellevue, and is experienced in the provision of childcare services to Bellevue Hospital employees and the New York City community; and

WHEREAS, since 2001, the Licensee has provided childcare services to the Facility’s employees and the New York City community from the Facility’s C&D Building under a succession of license agreements with the Corporation; and

WHEREAS, in May 2014 the System’s Board of Directors authorized a license agreement with the Licensee and the Facility has determined that there continues to be a need for childcare services; and

WHEREAS, the Corporation recognizes the benefit conferred upon it by having the Licensee’s program located on the Facility’s campus; and

WHEREAS, the System desires to allow the Licensee to continue to occupy space at the Facility and operate its childcare center.

NOW, THEREFORE, be it

RESOLVED, that the New York City Health and Hospitals Corporation (the “System”) be and hereby is authorized to execute a five year revocable license agreement with Bellevue Day Care Center, Inc. (the “Licensee”) for its continued use and occupancy of 3,031 square feet in the C&D Building at NYC Health + Hospitals/Bellevue Hospital Center to operate a daycare center with the occupancy fee waived.

EXECUTIVE SUMMARY

LICENSE AGREEMENT
BELLEVUE DAY CARE CENTER, INC.
BELLEVUE HOSPITAL CENTER

OVERVIEW: The New York City Health and Hospitals Corporation (the "System") seeks authorization from the System Board of Directors to execute a revocable license agreement with Bellevue Day Care Center, Inc. (the "Center") for its continued use and occupancy of space to operate a childcare center at NYC Health + Hospitals/Bellevue Hospital Center ("Bellevue").

PROGRAM/
NEED: The Center is a not-for profit organization created in 1971 by the three Bellevue auxiliaries. Since 2001, the Center has operated in Bellevue's C&D Building, providing services to the community and Bellevue staff. The program was established to address the shortage of on-site childcare for Bellevue employees. In May of 2014 the System Board of Directors authorized the license agreement with the Center.

The proposed agreement gives Bellevue employees access to affordable on-site childcare. The Center will be open from 7:00 a.m. to 7:00 p.m., Monday through Friday. The program aims to reduce employee absenteeism related to childcare issues while increasing staff productivity and satisfaction. The program also helps retain professional staff. The service will also be available to members of the Community. In case of a disaster, the Center will provide childcare for essential staff and other emergency service staff.

Because of the benefits accruing to Bellevue staff, and to the surrounding community, the occupancy fee from the Center is waived. The majority of the childcare slots will be allocated to Bellevue employees who will receive a 10% discount. In addition to the 10% discount, some staff may be eligible for a further discount through a program offered by the New York City Administration for Children's Services ("ACS").

The Center is licensed for 41 spots including: 8 infants, 12 children ages 1-3, 21 children ages 3-5. The proposed rates will be $1,975/month for non-Bellevue staff and $1,875 for Bellevue staff. Currently 24 of the slots are filled with children of Bellevue staff, 4 slots are vacant and the rest are filled with non-Bellevue staff children. The 4 empty slots are all reserved for Bellevue staff. There is a waiting list for the Bellevue staff slots and so there is no doubt that all the vacancies will be filled with children of Bellevue staff at which point the children of Bellevue will comprise close to 70% of the total.

TERMS: Bellevue Day Care will be granted the continued use and occupancy of approximately 3,031 square feet of space in the C&D Building. The occupancy fee will be waived. Bellevue will provide electricity, hot and cold water, heating, air conditioning, refuse removal and structural maintenance. Bellevue Day Care will be responsible for housekeeping, food service, routine maintenance and security.

The Center will be required to indemnify and hold harmless the System and the City of New York from any and all claims arising out of its use of the Licensed Space and will provide appropriate insurance naming the System and the City of New York as additional insured parties.

The license agreement will not exceed five (5) years and will be revocable by either party upon ninety (90) days prior written notice.

NYC
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HOSPITALS

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646-458-2034

To: Colicia Hercules
Chief of Staff, Office of the Chair

From: Keith Tallbe
Senior Counsel
Office of Legal Affairs

Re: Vendor Responsibility, EEO and MWBE status for Board review of contract

Vendor: Bellevue Day Care Center

Date: September 5, 2019

The below chart indicates the vendor's status as to vendor responsibility, EEO and MWBE:

Vendor Responsibility	**EEO**	**MWBE**
Approved	NA	NA

The above status is consistent and appropriate with the applicable laws, regulations, and operating procedures to allow the Board of Directors to approve this contract.

BELLEVUE DAY CARE CENTER, INC.

Request for a 5 year Lease renewal

CAPITAL COMMITTEE
SEPTEMBER 12, 2019

Michael Rawlings – Chief Operating Officer Bellevue Hospital

Bellevue Day Care Center, Inc.

- The Day Care is a not-for-profit established in 1971.
- The Day Care has been on-site at Bellevue since 2001.
- Occupying 3,031 square feet in Bellevue's C&D Building.
- Bellevue provides electricity, water, heating/AC, and garbage collection.
- 51% of the Childcare spots are reserved for Bellevue Staff (Bellevue is currently using 60% of the spots).
- The occupancy fee (3,031 square feet at $34.00 per square foot for a total cost of $103,054 yearly) has been waved, due to the benefits accruing to Bellevue staff (receiving discounts totaling $248,208 yearly) and to the surrounding community.

Day Care Operation

- The Day Care Center is licensed for 41 childcare spots
  - 8 Infants
  - 12 Children Ages 1 – 3
  - 21 Children Ages 3 - 5
  - The Day Care has 8 Free Pre-K spots for the ages of 3 – 5
  - The Day Care is open from 7:00 am to 7:00 pm, Monday – Friday.
  - Bellevue Staff receive a 10% discount.
  - Bellevue staff pay $1,875 monthly and Non-Bellevue staff pay $1,975 monthly.
  - Most of Bellevue staff are eligible for a further discount though a program offered by NYC Administration of Children's Services (ACS).

Day Care Current Enrollment Stats

- There are 8 Infants.
- There are 24 Bellevue/Affiliate employees' children (60% of the Day Care childcare spots) and 16 non-Bellevue employees' children are enrolled.
- There are 4 spots (in the 3-5-year range) that are open for the fall 2019 and Bellevue staff has preference.
- There are currently 15 Bellevue employees on a waiting list for enrollment in 2020.

Additional Employee Benefits

- The Day Care works with NYC Administration for Children's Services (ACS) to help subsidizes the monthly costs for Bellevue Staff. Currently, 14 of the 24 Bellevue staff with children enrolled in the Day Care qualify for ACS discount.
- In 2014 the Day Care was awarded a grant from New York City Council to install an outdoor play area, which was built in Bellevue's First Avenue Park.

Bellevue Day Care Center, Inc.

Authorizing the President of the New York City Health and Hospitals Corporation (the "Corporation") to execute a five year revocable license agreement with Bellevue Day Care Center Inc. (the "Licensee") for the use and occupancy of 3,031 square feet in the C&D Building at Bellevue Hospital Center (the "Facility") in which to operate a daycare center at no charge to the Licensee.

JOC ELECTRICAL CONTRACT INCREASES

MAC FHIONNGHAILE & SONS ELECTRICAL CONTRACTORS

SYSTEM-WIDE

RESOLUTION

Authorizing the New York City Health and Hospitals Corporation (the "System") to amend the resolution adopted by the Board of Directors of New York City Health and Hospitals Corporation on July 26, 2018 authorizing the execution of a Job Order Contract ("JOC") with Mac Fhionnghaile & Sons Electrical Contractors, Inc. ("Mac & Sons"), which was procured through the System's public bid process, to provide electrical construction services on an as-needed basis with such amendment increasing the $6,000,0000 not to exceed contract limit for Mac & Sons by $6,000,000 to bring the total not to exceed limit to $12,000,000.

WHEREAS, to address the System's need for electrical contractors from time to time, the Board of Directors authorized two JOCs contracts in July 2018, including one for Mac & Sons, both of which are two year agreements of which roughly one year remains; and

WHEREAS, in July, 2018, the Board of Directors authorized the execution of two JOCs contracts; one with Mac Fhionnghaile & Sons Electrical Contracts, and one with Jemco Electrical Contractors; and

WHEREAS, Mac & Sons has been used far more heavily than originally expected because of the unanticipated volume of electrical work associated with the System's Epic roll-out; and

WHEREAS, the other JOCs electrical contractor has been similarly fully engaged doing work in connection with the System's roll-out of the Point Click Care medical records system for its Long Term Care facilities; and

WHEREAS, of the $6,000,000 authorized for Mac & Sons, $5,622,617.83 has already been spent leaving only $377,382.17 while $2,072,000 of work is being requested at NYC Health + Hospitals/Kings; and

WHEREAS, adding $6,000,000 to the Mac & Son contract will ensure that, after the currently identified work is completed, $4,305,382 will remain in the contract for currently unanticipated projects; and

WHEREAS, the Mac & Sons contract will be managed under the supervision of the Senior Vice President for Facilities Development.

NOW THEREFORE, it is hereby resolved that, the resolution adopted by the Board of Directors of New York City Health and Hospitals Corporation on July 26, 2018 authorizing the execution of a Job Order Contract ("JOC") with Mac Fhionnghaile & Sons Electrical Contractors, Inc. ("Mac & Sons"), which was procured through the System's public bid process, to provide electrical construction services on an as-needed basis with such amendment increasing the $6,000,0000 not to exceed contract limit for Mac Fhionnghaile & Sons Electrical Contractors, Inc. by $6,000,000 to bring the total not to exceed limit to $12,000,000.

EXECUTIVE SUMMARY

AMENDMENT OF RESOLUTION LIFTING PRIOR NOT-TO-EXCEED CAP
MAC FHIONNGHAILE & SONS ELECTRICAL CONTRACTORS, INC.
ELECTRICAL REQUIREMENTS CONTRACT

OVER-VIEW The System uses JOC contracts to meet many of its needs for professional construction services. In fact, the statute that created the System specifically allows pre-qualification of contractors. Historically, the resolutions that have approved such contracting have included a not-to-exceed limit. In July 2018, the Board approved two contracts for two contractors to serve on an as-needed basis with each contract having a $6M not-to-exceed limit. These contracts have worked well and have been heavily drawn upon throughout the System enabling the System to respond quickly to a wide range of requests and needs. In fact, they have been so useful that currently the Mac Fhionnghaile & Sons Electrical Contractors Inc. ("Mac & Sons") contract has committed $5,622,617.83 leaving only $377,382.17 dollars remaining through the expiration of the contract at the end of the next fiscal year. Mac & Sons has already been requested to perform work valued at $2,072,000 a NYC Health + Hospitals/Kings over the next three months and this will exceed the current value of the contract. These contracts have been used for many projects not envisioned in 2018 and 2019 such as the electrical work required in the IT IDFs and MDFs for EPIC go-live. These additional uses have pushed the expenditures close to the maximum allowed on the current contract.

NEED: Additional uses of the Mac & Sons contract are anticipated some of which are not currently known.

FUNDING: Each use of the JOC contracts is made only with explicitly identified funding whether from operating funds or City Capital. Increasing the not-to-exceed cap will not provide additional money to be spent but will only increase the capacity of the subject contract to be used with such funds as are provided.

PROGRAM: The Mac & Sons contract will expire in July 2020. Prior to that date, the System will perform another RFP to secure a continuing pool of requirements contractors in the needed fields. The requested authority will not change any aspect of the current contract other than to increase the contracting cap from $6,000,000 to $12,000,000 subject to funding availability.

MWBE: Mac & Sons is a WBE certified firm.

NYC HEALTH + HOSPITALS

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646-458-2034

To: Colicia Hercules
Chief of Staff, Office of the Chair

From: Keith Tallbe
Senior Counsel
Office of Legal Affairs

Re: Vendor Responsibility, EEO and MWBE status for Board review of contract

Vendor: MacFhionnghaile & Sons.

Date: September 5, 2019

The below chart indicates the vendor's status as to vendor responsibility, EEO and MWBE:

Vendor Responsibility	**EEO**	**MWBE**
Approved	Approved	NYC Certified WBE

The above status is consistent and appropriate with the applicable laws, regulations, and operating procedures to allow the Board of Directors to approve this contract.

Mac Fhionnghaile & Sons Inc.
Electrical Contractor

Capital Committee

September 12th, 2019

Christine Flaherty
Sr. Vice President
Office of Facilities Development

NYC HEALTH+ HOSPITALS

Background / Current State

- JOC contracts are pre-bid contracts using fixed prices with a multiplier
- Current electrical construction services providers are
  - Mac Fhionngnaile & Sons Inc.
  - JEMCO
- JEMCO used for Point Care Click (PCC) make ready work
  - PCC is the long term care electronic patient record software
- Mac Fhionngnaile & Sons used for EPIC make ready work
  - EPIC is the acute and ambulatory acre electronic patient record software

Procurement

- Public bids opened on April 3, 2018 and April 4, 2018 for two contracts, each for $6M, to provide electrical construction services
- JEMCO Electrical Contractors was the lowest responsible bidder on both bids, however they can only be awarded one contract
  - **April 3, 2018** - JEMCOs multiplier **1.0493** and Mac Fhionngnaile 1.1599
    - Elmhurst Electric 1.2078 and Wade Electric 1.4300 were the other bidders
  - **April 4, 2018** - JEMCOs multiplier 1.0493 and Mac Fhionngnaile **1.1495**
    - Elmhurst Electric 1.3207, Palace Eletrical Contractor 1.3386, and Arcadia Electrical Inc. 1.2480 were the other bidders
- Mac Fhionngnaile & Sons Electrical Inc. was the second lowest responsible bidder on the April 4, 2018 opening
- Mac Fhionngnaile & Sons is a WBE

Mac & Sons Current Commitment

Work Order	Facility	Description	Approval Date	Capital	Expense	Total
1905000-1000	Cumberland D & TC	Rooms 358 & 431 Installations	1/8/2019		$ 25,300.43	$ 25,300.43
1905000-1001	Bellevue Hospital Center	EPIC Data Rooms Additional Electric	1/14/2019		$ 31,987.52	$ 31,987.52
1905000-1002	Jacobi Medical Center	Power for 46 IDF closets in Bldgs. 1, 6, and 8		$ 1,999,997.72		$ 1,999,997.72
1905000-1003	Jacobi Medical Center	EPIC Database Server Refresh Power Upgrade	2/28/2019	$ -	$ 12,140.23	$ 12,140.23
1905000-1004	Metropolitan Hospital Center	IDF Closet Power Upgrade		$ 618,647.58		$ 618,647.58
1905000-1005	Correctional Health	Correctional Health - Horizon Facility Repurpose Storage Room to Medication Distribution Room.	4/11/2019		$ 33,755.85	$ 33,755.85
1905000-1006	Jacobi Medical Center	Power for 46 IDF closets in Bldgs. 1, 6, and 8 - supplemental	5/6/2019		$ 100,814.78	$ 100,814.78
1905000-1007	Morrisania D&TC	Electrical install of 32 c20 outlets and 32 c12 outlets in IDF rooms.	6/21/2019	$ 160,808.68		$ 160,808.68
1905000-1008	Lincoln Medical Center	Provide 70 A circuits in 27 IDF closets	6/21/2019	$ 724,056.31		$ 724,056.31
1905000-1009	Metropolitan Hospital Center	IDF Closet Power Upgrade Supplemental	7/31/2019	$ 122,296.83		$ 122,196.83
1905000-1010	Kings County Hospital	Bldg. S IDF Closet Electrical Work	8/1/2019	$ 442,481.70		$ 442,481.70
1905000-1011	Kings County Hospital	Bldg. E IDF Closet Electrical Work		$ 527,202.93		$ 527,202.93
1905000-1012	Jacobi Medical Center	Hyperbaric Chamber bldg#1	8/6/2019		$ 44,974.92	$ 44,974.92
1905000-1013	Kings County Hospital	Bldg. B IDF Closet Electrical Work	8/27/2019	$ 778,252.35		$ 778,252.35
Subtotal				$ 5,373,744.10	$ 248,973.73	
TOTAL						**$ 5,622,617.83**

Mac & Sons Future Commitment

Facility	Description	Approval Date	Estimate
Kings County Hospital	C Buidling IDF Work		$662,000.00
Kings County Hospital	P Building IDF Work		$458,000.00
Kings County Hospital	A Buidling IDF Work		$695,000.00
Kings County Hospital	T Buidling IDF Work		$257,000.00
TOTAL			**$2,072,000.00**

- With current spend and future commitments, anticipated contract spend will exceed the current $6,000,000 NTE limit

COMMITMENT	AMOUNT
Current Commitment	$5,622,617.83
Future Commitment	$2,072,000.00
TOTAL COMMITMENT	**$7,694,617.83**

Capital Committee Approval Request

- Seeking the approval of the Capital Committee to increase the value of the NTE amount of the current contract with Mac Fhionnghaile & Sons Electrical Inc from $6,000,0000 to $12,000,000.

CONTRACT APPROVAL

CARRIER CORPORATION
HVAC & CHILLER MAINTENANCE SERVICES

NYC HEALTH + HOSPITALS / SYSTEM WIDE

RESOLUTION

Authorizing the New York City Health and Hospitals Corporation (the "System") to execute a contract with Carrier Corporation ("the contractor"): that was selected through a Request For Proposals ("RFP") process, to provide HVAC/Chiller maintenance services on pre-determined schedule at various facilities throughout the System. The contract shall be for a term of three (3) years with the option for two (2) one year extensions, for an amount not to exceed $6,000,000. The total authorized value of this contract would be $6,000,000.

WHEREAS, the facilities of the System will require maintenance services for Heating, Ventilation and Air Conditioning (HVAC) systems; and

WHEREAS, the System has determined that such needs can best be met by utilizing an outside firm, through a maintenance contract; and

WHEREAS, the System's Operating Procedure No. 100-5 requires approval by the Board of Directors contracts of $5,000,000 and above; and

WHEREAS, the System published a RFP for HVAC/Chiller maintenance servies, proposals an evaluated with the final results of the evaluation published on June 18, 2019, and the System's evaluation committee determined that the Contractor was best suited to provide these services to the System; and

WHEREAS, the Contractor have met all, legal, business and technical requirements and are qualified to perform the services as required in the contract documents.

NOW, THEREFORE, be it

RESOLVED, the New York City Health and Hospitals Corporation be and hereby is authorized to execute a contract with Carrier Corporation Inc. that was selected through a Request For Proposals ("RFP") process, to provide HVAC/Chiller maintenance services on pre-determined schedule at various facilities throughout the System. The contract shall be for a term of three (3) years with the option for two (2) one year extensions, for an amount not to exceed $6,000,000. The total authorized value of this contract would be $6,000,000.

EXECUTIVE SUMMARY

HVAC/CHILLER MAINTENANCE SERVICES

CARRIER CORPORATION INC.

OVERVIEW:	The New York City Health and Hospitals Corporation (the "System") seeks to execute a contract for a term of three years, with the option for two one year renewals for amount not-to-exceed $6,000,000, to provide HVAC/Chiller maintenance services at various NYC Health + Hospitals facility. The total authorized to be spent under this contracts is $6 Million.
NEED:	Throughout the System various facilities utilize HVAC/Chiller systems to provide cooling and dehumidification to the buildings. These HVAC/Chiller systems require regularly scheduled maintenance to ensure their continued operation.
TERMS:	The maintenance services will be provided via a contract within a three (3) year period, with the option for two one year extensions for an amount not to exceed $6,000,000.
COSTS:	Not-to-exceed $6,000,000 over three years and two one year options solely exercisable by the System.
FINANCING:	This contract will be funded through the System's operating budget.
SCHEDULE:	Upon contract execution this contract will be in effect for three years with the System have the option to exercise two one year renewals.

CONTRACT FACT SHEET

CONTRACT SCOPE:	HVAC/Chiller Maintenance Services
CONTRACT DURATION:	Three (3) years with two (2) one year extension options
CONTRACT AMOUNT:	$6,000,000
ADVERTISING PERIOD:	Advertised in City Record January 11, 2019
BIDS RECEIVED:	Three (3) proposals received for consideration. Carrier Corporation was selected by the System’s evaluation committee using a pre-determined evaluation criteria.
HHC EXPERIENCE:	This is the first maintenance contract between Carrier Corporation Inc., and New York City Health and Hospitals Corporation, however, Carrier Corporation Inc. has previously provided satisfactory repair services to the System.
VENDEX:	TBD.
EEO:	Approved.
MWBE:	Carrier will meet 30% subcontracting plan for MWBEs.

NYC
HEALTH+
HOSPITALS

Keith Tallbe
Senior Counsel, Office of Legal Affairs
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646-458-2034

To: Colicia Hercules
Chief of Staff, Office of the Chair

From: Keith Tallbe
Senior Counsel
Office of Legal Affairs

KT

Re: Vendor Responsibility, EEO and MWBE status for Board review of contract

Vendor: Carrier

Date: September 5, 2019

The below chart indicates the vendor's status as to vendor responsibility, EEO and MWBE:

Vendor Responsibility	EEO	MWBE
Pending	Approved	30%

The above status is consistent and appropriate with the applicable laws, regulations, and operating procedures to allow the Board of Directors to approve this contract.

Chiller\HVAC Maintenance and Repairs

Capital Committee

September 12th, 2019

Christine Flaherty
Sr. Vice President
Office of Facilities Development

Background / Current State

- Chillers serve as the cooling source for most of the facilities at H+H
- The System currently has 100 chillers and 10 HVAC cooling units under a service/maintenance contract with Johnson Controls (JCI) that expired on 6/30/19
- JCI declined request to extend the agreement
- The vendor of choice, Carrier, has agreed to perform any needed work on an interim basis at rates negotiated for their proposed contract with H+H

NYC HEALTH+ HOSPITALS

Procurement

- Evaluation Criteria
  - 35% Agreement to the terms of SOW and substance of Vendor's proposal
  - 20% Appropriateness and quality of firm's experience
  - 35% Cost Proposal
  - 10% Status as MWBE or MWBE utilization

- Evaluation Committee:
- Donald McManamon, Dir., Coney Island
- Kevin Matulich, Dir., Harlem
- Keith Smalls, Dir., Lincoln
- Vincent Forgione, Dir., Coler
- Angelo Quartuccia, Dir., Gouverneur
- James Galu, Dir., Henry J Carter
- Michael Geldert, Dir., Elmhurst
- John Muniz, Dir., Metropolitan
- John Schiek, Dir., Queens
- George Gallo, Dir., Bellevue
- Wojciech Mickowski, Dir., NCB
- George Montine, Dir., Kings County
- Scott Rasnow, Dir., Seaview
- Donald Panton, Dir. East New York

Overview of Procurement

- Application to Issue RFP was approved by the CRC on 11/27/18
- RFP was issued 1/11/19 and published to City Record
- Nine vendors attended the pre-bidders conference
- Three proposals were received
- Carrier received the highest scoring based on the established RFP criteria to provide preventative maintenance and repair services for HVAC/Chiller equipment across the System
- Carrier will meet 30% subcontracting plan for MWBE’s

Vendor Name	Agreement to terms of SOW and Substance of Vendor's Proposal	Appropriateness and Quality of Firm's Experience	Cost Proposal	Status as MWBE or MWBE Utilization Plan Percentage and Quality	Total
MAXIMUM SCORE	**3.5**	**2**	**3.5**	**1**	**10**
Carrier	2.95	1.71	2.78	1.00	8.44
Johnson Controls	2.58	1.36	1.63	0.00	5.56
Power Cooling	2.74	1.44	2.51	0.00	6.69

Carrier References

- Lennox Hill Hospital
- SUNY Stony Brook
- The Parker Institute for Geriatric Care
- Park Towers
- Nyack Hospital
- Mount Sinai Hospital
- White Plains Hospital Center

Capital Committee Approval Request

- Health + Hospitals is seeking approval to enter into contract with Carrier for HVAC/Chiller Preventative Maintenance and Repairs:

  - Vendor name: Carrier Corporation
  - Contract Terms: 3 years with two one-year options to renew
  - Effective Date: October 1, 2019
  - 5 Year Contract Cost: $6,000,000

FY 18 preventative maintenance spend - $1.22MM

FY 18 repair spend - $915K

Translates to ~$5M of savings over the term compared to previous agreement.

LEASE EXTENSION AGREEMENT

LSS LEASING LIMITED LIABILITY COMPANY
59-17 JUNCTION BOULEVARD

WOMEN'S MEDICAL CENTER

NYC HEALTH + HOSPITALS / GOTHAM

RESOLUTION

Authorizing the New York City Health and Hospitals Corporation (the “System”) to execute a five year lease extension agreement with LSS Leasing Limited Liability Company (the “Landlord”) for 5,120 square feet of space at 59-17 Junction Boulevard, Borough of Queens, to house the Women’s Medical Center (the “Center”), operated by NYC Health + Hospitals/Gotham Health (“Gotham Health”) at an initial rent of $271,360 per year or $53 per square foot to increase at a rate of 3% per year for a five year total of $1,440,687.

WHEREAS, the Center is a community-based health care center that has been providing primary care services to residents of the Corona section of Queens since the year 2000; and

WHEREAS, the Center offers a full range of primary care services for women and children including prenatal care and gynecological services; and

WHEREAS, half of the leased premises have been and will continue to be occupied by a subtenant, Pediatrics Specialties of Queens, P.C. which will continue its arrangement of paying one half of all occupancy costs associated with the Center; and

WHEREAS, the proposed sublease with Pediatrics Specialties of Queens, P.C. will be the subject of a separate resolution presented to the Corporation’s Capital Committee and Board for authorization; and

WHEREAS, there remains a need for primary care services in this section of Queens and extending the lease for this site will allow the Center to continue to serve the community.

NOW, THEREFORE, be it

RESOLVED, that the New York City Health and Hospitals Corporation (the “System”) be and hereby is authorized to execute a five year lease extension agreement with LSS Leasing Limited Liability Company for 5,120 square feet of space at 59-17 Junction Boulevard, Borough of Queens, to house the Women’s Medical Center, operated by NYC Health + Hospitals/Gotham Health (“Gotham Health”) at an initial rent of $271,360 per year or $53 per square foot to increase at a rate of 3% per year for a five year total of $1,440,687.

EXECUTIVE SUMMARY
NYC HEALTH + HOAPITALS GOTHAM
WOMEN'S MEDICAL CENTER
59-17 JUNCTION BOULEVARD
BOROUGH OF THE QUEENS

OVERVIEW: The New York City Health and Hospitals Corporation seeks authorization from the Board of Directors of the Corporation to execute a lease extension agreement with LSS Leasing Limited Liability Company (the "Landlord") for space at 59-17 Junction Boulevard, Borough of Queens to house the Women's Medical Center (the "Center") operated by NYC Health + Hospitals/Gotham Health ("Gotham Health")

NEED/
PROGRAM: The Center is a community-based health care center that has been providing primary care services to residents of the Corona section of Queens since the year 2000.
The Center offers a full range of primary care services for women and children including prenatal care and gynecological services. There remains a need for primary care services in this section of Queens and extending the lease for this site will allow the Center to continue to serve the community. Under a sublease agreement, Pediatric Specialties of Queens occupies approximately half the entire area leased and is responsible under the agreement for payment of half of the occupancy costs. The Center is open Monday through Friday 8:00 a.m. to 4:30 p.m.

UTILIZTION: For the FY 2018/19, the Center provided approximately 4,494 visits.

PRIOR TERMS: The Center has occupied the site under a lease dated April 6, 1999 that commenced after landlord completed a build out of the space on January 17, 2000. The rent currently paid at the space (including the portion covered by the subtenant) is $251,102 per year or $49 per square foot. The new base rent under the proposed lease extension will commence at $271,360 per year or $53 per square foot. The new rent represents an 8% increase over the current rent. The subtenant will continue to pay 50% of the rent, or $135,680 per year.

TERMS: The Tenant will continue to occupy approximately 5,120 square feet of ground floor space. The base rent will be escalated by 3% per year. The rent for this lease extension has been determined to be a fair market value rate. The rent will total $1,440,687 over the five year lease extension term.

The Landlord will be responsible for structural repairs and maintenance and the repair and maintenance of all common areas including sidewalks, curbs and parking lots. The Tenant will be responsible for interior non-structural repairs and maintenance. The Tenant will be responsible for payment of separately metered utilities.

The Tenant will be responsible for the payment of its proportionate share of real estate tax increases above a base year.

SUMMARY OF ECONOMIC TERMS

SITE:	59-17 Junction Boulevard Queens, New York 11368 Block 1918, Lot 112
LANDLORD:	LSS Leasing Limited Liability Company 59-17 Junction Boulevard, 20th floor NY, NY 11368
TERM:	Five years
FLOOR AREA:	Approximately 5,120 square feet
BASE RENT:	$53 per square foot or $271,360 per year
ESCALATION:	3% per year
UTILITIES:	Tenant is responsible for payment for electricity, gas, and water and sewer rents
REAL ESTATE TAXES:	Tenant is responsible for payment of its proportionate share of real estate taxes increases above a base year.
REPAIRS/ MAINTENANCE:	The Landlord will be responsible for structural repairs and maintenance and the repair and maintenance of all common areas including sidewalks, curbs and parking lots. The Tenant will be responsible for interior non-structural repairs and maintenance.

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Keith Tallbe
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646-458-2034

To: Colicia Hercules
Chief of Staff, Office of the Chair

From: Keith Tallbe
Senior Counsel
Office of Legal Affairs

Re: Vendor Responsibility, EEO and MWBE status for Board review of contract

Vendor: LSS Leasing Limited Liability Co.

Date: September 5, 2019

The below chart indicates the vendor's status as to vendor responsibility, EEO and MWBE:

Vendor Responsibility	EEO	MWBE
Pending	NA	NA

The above status is consistent and appropriate with the applicable laws, regulations, and operating procedures to allow the Board of Directors to approve this contract.

SAVITT PARTNERS

August 21, 2019

Mr. Dion Wilson
Director of Real Estate
NYC Health + Hospitals
125 Worth Street, Rm 527
New York, NY 10013

Re: Fair Market Value Report
Women's Health Service Center
59-17 Junction Boulevard, Queens, NY 11373

Dear Dion:

You have requested that I comment on the value of the referenced property for the rental renewal. The original valuation report dated October 22, 2014 describes the referenced premises and gives a valuation of $44-46 per rentable square foot (RSF) at that time.

This letter further confirms that I've reviewed the proposal of economic terms of the Lease by and between LSS Leasing, Inc. as Landlord and NYC Health + Hospitals intended response as Tenant comprising the following:

- The unit is currently occupied and zoned for use as a medical office.
- The lease expired February, 2020.
- The Landlord, in accordance with the terms of the original lease, has proposed a second, five-year renewal term with 3.00% escalations per annum.
- The unit is approximately 5,120 RSF.
- This evaluation is for the purpose of a lease renewal.

Based on my review of the proposed lease term (5 years), the starting base rent and escalations, $50.50 per square foot with 2.75% annual increases plus other Landlord cost pass-throughs as outlined in the initial lease, represents an increase from the current rent of 3.00% giving the Landlord 2.75% annual escalations.

Landlord could reasonably claim rents to be in the mid-$60s range as the rental market for commercial space has improved. We understand also that the building is fully leased. That said, there must be consideration given to a Tenant renewing its lease. The renewing Tenant will provide Landlord with a continued rent stream uninterrupted by vacancy, little or no Tenant Improvement Allowance, no gap in marketing a vacant space and the time it takes to do so, and any free rent which would be given to a new Tenant. In addition, ancillary costs such as architects and engineering, commissions, and hard and soft legal fees are also avoided.

Quantifying these items probably gives the Landlord a net effect of rent similar to that which NYC Health + Hospitals is proposing: $50.50 per square foot with 2.75% annual increases.

Given the proposed Landlord rent and NYC Health + Hospitals response, we value the rent at a range of $51-54/RSF. Further, a 3% annual escalating rent increase, while on the higher end of percentage rent escalations, nevertheless remains consistent with current market conditions.

If you have any further questions, please let me know.

Very truly yours,

Michael Dubin
Partner

NYC HEALTH+ HOSPITALS | Gotham Health

Annual Operating P/L
Women's Medical Center
59-19 Junction Boulevard, Corona, NY 11368
Cost Center: CUM01-8024-215000

PERSONNEL SERVICES (P.S.)

TITLE	NAME	REIM. CODE	FTE	SALARY As of 6/15/19 PSER	ANNUAL BUDGET
PATIENT CARE ASSOCIATE	KAZIYEVA, STELLA	GOXL	1.00	44,690	44,690
PATIENT CARE ASSOCIATE	BABAYEVA, ROZA	GOXL	1.00	44,681	44,681
PUBLIC HEALTH NURSE-L I	SHARMA, TARAMATEE	GOXL	1.00	95,245	95,245
CLERICAL ASSOCIATE - L IV	POON, MANG YING	GOXL	1.00	46,461	46,461
HHC PS			4.00	231,077	231,077
HHC F.B. @	78.65%				181,742
HHC PS + F.B.					412,819
Certified Nurse Midwife	HENRY-LAKE, SELENE		0.40	35,499	35,499
AFFL PS			0.40	35,499	35,499
AFFL F.B. @	22.39%				7,948
AFFL Over Head @	2.00%				869
AFFL PS + F.B. + OH					44,316
TOTAL PS + F.B.			4.40		457,135

OTHER THAN PERSONNEL SERVICES (O.T.P.S.) - Vouched FY19

GL ACCOUNT	DESCRIPTION		BUDGET
6398490	MEDICAL SURGICAL SUPPLIES		660
6458550	CLEANING SUPPLIES		4,400
6468560	OFFICE SUPPLIES		93
7140102	SPACE LEASE/RENTAL + WATER + REAL ESTATE TAX		258,869
	TELEPHONE ($50 X12MON X 4.40 FTE)		2,640
	Dr. Villegas - sub leasee / shared space (half of LaFrak site rent is paid by Dr. Villegas)		(125,551)
OTPS			141,111
TOTAL DIRECT EXPENSE			598,247
	ANCILLARY/MED. SURG COSTS ($15 per visit)	4,494	67,410
INDIRECT + ANCILLARY			67,410
TOTAL EXPENSES			665,657

REVENUE COLLECTIONS (BASED ON Sorian & EPIC data run)

NEC CODE		Rate	VISITS/MEMBERS	Allocation	COLLECTIONS
FFS COLLECTIONS (Clinic Codes 231, 335, 454, 473, 488)			4,494		283,454
WRAP PAYMENT			1,593		163,553
INPATIENT REVENUE CREDIT	(referred by clinic)	$ 6,706.50	18	32% Credit (based on fixed)	38,341
TOTAL COLLECTIONS					485,348

SURPLUS / (DEFICIT)	(180,309)

SUBLEASE AGREEMENT

PEDIATRIC SPECIALTIES OF QUEENS
59-17 JUNCTION BOULEVARD

NYC HEALTH + HOSPITALS / GOTHAM

RESOLUTION

Authorizing the New York City Health and Hospitals Corporation (the "System") to execute a five year sublease agreement with Pediatric Specialties of Queens (the "Subtenant") for approximately 2,560 square feet of space at 59-17 Junction Boulevard, Borough of Queens, to house the Subtenant's pediatric practice at an initial rent of $135,680 per year or approximately $53 per square foot to increase at a rate of 3% per year but in no event to be less than half of all of the System's occupancy costs at the premises.

WHEREAS, the System has been operating a community-based health care center at this location that has been providing primary care services to residents of the Corona section of Queens since 2000; and

WHEREAS, the System's health care center is now managed under the Gotham Health FQHC structure; and

WHEREAS, the Subtenant has been providing pediatric services at this site since the late 1990s and the System and the Subtenant maintain separate and distinct medical practices at the site; and

WHEREAS, in the past, the Subtenant has subleased half of the space rented by the System and has paid half of the System's occupancy costs; and

WHEREAS, the System proposes, pursuant to separate resolution, to renew and extend its lease for the premises and the Subtenant wishes to continue in occupancy of its half of the premises and to pay half the System's occupancy costs for the entire premises under a sublease with the System.

.

NOW, THEREFORE, be it

RESOLVED, that the New York City Health and Hospitals Corporation be and hereby is authorized to execute a five year sublease agreement with Pediatric Specialties of Queens for approximately 2,560 square feet of space at 59-17 Junction Boulevard, Borough of Queens, to house the Subtenant's pediatric practice at an initial rent of $135,680 per year or approximately $53 per square foot to increase at a rate of 3% per year but in no event to be less than half of all of the Corporation's occupancy costs at the premises.

EXECUTIVE SUMMARY

59-17 JUNCTION BOULEVARD SUBLEASE

OVERVIEW: The New York City Health and Hospitals Corporation seeks authorization from its Board of Directors to execute a five-year sublease agreement with Pediatric Specialties of Queens (the "Subtenant") for approximately 2,560 square feet of space at 59-17 Junction Boulevard, Borough of Queens, to house the Subtenant's pediatric practice at an initial rent of $135,680 per year or approximately $53 per square foot to increase at a rate of 3% per year but in no event to be less than half of all of the System's occupancy costs at the premises.

NEED/ PROGRAM: The System, through its Gotham Health FQHC structure, operates a Gotham community health center with a focus on obstetrics at 59-17 Junction Blvd., Queens, NY. The center provides the continuum of care for families with the focus being on obstetric and women's services and the subtenant, Pediatric Specialties of Queens, Inc., providing pediatric care.

UTILIZTION: In 2018, there were 4,494 visits, and FY 19 is on track to do the same.

TERMS: The subtenant occupies half of the space leased by the System and pays half of the rent. The rent that the System pays is determined to be a fair market value rent and the Subtenant's payment of half the rent for half of the space is also a fair market value arrangement.

NYC HEALTH + HOSPITALS

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646-458-2034

To: Colicia Hercules
Chief of Staff, Office of the Chair

From: Keith Tallbe
Senior Counsel
Office of Legal Affairs

Re: Vendor Responsibility, EEO and MWBE status for Board review of contract

Vendor: Pediatric Specialties of Queens

Date: September 5, 2019

The below chart indicates the vendor's status as to vendor responsibility, EEO and MWBE:

Vendor Responsibility	**EEO**	**MWBE**
Pending	NA	NA

The above status is consistent and appropriate with the applicable laws, regulations, and operating procedures to allow the Board of Directors to approve this contract.

Sublease to Pediatric Specialties of Queens at 59-17 Junction Blvd., Queens, NY

Capital Committee, September 12, 2019

Theodore Long, MD, MHS

Vice President, Ambulatory Care

Sublease Overview

- The Pediatric Specialties of Queens, Inc., has been subletting half of the space at 59-17 Junction Blvd., Queens, NY since January 2000. The subtenant pays fair market value rent for half of the space.
- The center provides the continuum of care for families with the Gotham clinic providing obstetric and women's services and the subtenant, Pediatric Specialties of Queens, Inc., providing pediatric care.

LICENSE AGREEMENT

VERIZON WIRELESS

NYC HEALTH + HOSPITALS / COLER

RESOLUTION

Authorizing the New York City Health and Hospitals Corporation ("NYC Health + Hospitals") to execute a five year revocable license agreement with Verizon Wireless (the "Licensee") to operate a cellular communications system in approximately 300 square feet of space on the roof of the "C Building" at NYC Health + Hospitals/Coler Rehabilitation and Nursing Care Center (the "Facility") at an annual occupancy fee of $50,000 per year or $167 per square foot to be escalated by 2% per year for a five year total of $260,202.

WHEREAS, the Licensee currently operates a cellular communications network that provides coverage to ninety-eight percent of the United States; and

WHEREAS, the Licensee desires to install and operate equipment at the Facility that will enhance the performance of their cellular communications network; and

WHEREAS, the operation of the Licensee's equipment will not compromise Facility operations and the equipment complies with applicable federal statutes governing the emission of radio frequency signals, and therefore poses no health risk.

NOW THEREFORE, be it

RESOLVED, that the New York City Health and Hospitals Corporation be and hereby is authorized to execute a five year revocable license agreement with Verizon Wireless to operate a cellular communications system in approximately 300 square feet of space on the roof of the "C Building" at NYC Health + Hospitals/Coler Rehabilitation and Nursing Care Center at an annual occupancy fee of $50,000 per year or $167 per square foot to be escalated by 2% per year for a five year total of $260,202.

EXECUTIVE SUMMARY

LICENSE AGREEMENT
VERIZON WIRELESS

COLER REHABILITATION AND NURSING CARE CENTER

NYC Health + Hospitals seeks Board of Director's authorization to execute a five year revocable license agreement with Verizon Wireless ("Verizon") to operate a cellular communications system on the campus of the NYC Health + Hospitals/Coler Rehabilitation and Nursing Care Center ("Coler").

Verizon operates a cellular communications network that provides coverage to ninety-eight percent of the United States. Verizon will be given the use and occupancy of approximately 300 square feet of space on the roof of the "C Building." The system installed and operated by Verizon will include four equipment cabinets, eighteen antennas and associated cabling, eighteen RRHs, an equipment platform, and a generator. Verizon will pay an annual occupancy fee of $50,000 or $167 per square foot with annual increases of 2% throughout the duration of the agreement for a five year total of $260,202. Verizon will be responsible for the cost of maintaining its equipment. Verizon's equipment will not compromise Facility operations and it complies with applicable federal statutes governing the emission of radio frequency signals for cellular communications system.

The Licensee will obtain and purchase its own electrical power from the public utility and will be required to indemnify and hold harmless NYC Health + Hospitals and the City of New York from any and all claims arising out of its use of the licensed space, and shall provide appropriate insurance naming NYC Health + Hospitals and the City of New York as additional insureds.

The term of this agreement shall not exceed five years without further authorization by the Board of Directors and shall be revocable by either party upon six months prior notice.

Existing Commercial Antenna Sites

Site	Licensee	Area (SF)	Annual Fee	Monthly Fee	Per SF Rate
Coler	T-Mobile	200	$67,488	$5,624	$337
Lincoln	Sprint	300	$96,492	$8,041	$322
Harlem	Con Edison	50	$33,204	$2,767	$664
Neponsit	T-Mobile	750	see note below	see note below	$267

Note: T-Mobile will pay a $50,000 occupancy fee. The license agreement for this site covers a three month period. The equipment is mounted on a trailer and located on a 750 square foot parcel of land.

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646-458-2034

To: Colicia Hercules
Chief of Staff, Office of the Chair

From: Keith Tallbe
Senior Counsel
Office of Legal Affairs

Re: Vendor Responsibility, EEO and MWBE status for Board review of contract

Vendor: Verizon

Date: September 5, 2019

The below chart indicates the vendor's status as to vendor responsibility, EEO and MWBE:

Vendor Responsibility	EEO	MWBE
Approved	NA	NA

The above status is consistent and appropriate with the applicable laws, regulations, and operating procedures to allow the Board of Directors to approve this contract.

AGREEMENT AMENDMENT

ARCADIS, US & PARSONS BRINKERHOFF, INC.

FEMA PROJECTS

RESOLUTION

Amending the resolution adopted in September 29, 2017 by the Board of Directors of the New York City Health and Hospitals Corporation ("NYC Health + Hospitals") to authorizing an extension of existing agreements with Arcadis U.S., Inc. ("Arcadis") and with Parsons Brinckerhoff, Inc. ("Parsons") for a term of five years for an amount not to exceed $1,277,702.94 for both of such contractors drawing on funds left unused from the prior contract with such amendment authorizing an increase in the not-to-exceed amount by an additional $450,000 without further extending the term for a total amount of $1,727,702.94.

WHEREAS, NYC Health + Hospitals/Bellevue NYC Health + Hospitals/Coler, NYC Health + Hospitals/Metropolitan and NYC Health + Hospitals/Coney Island were all damaged by Hurricane Sandy; and

WHEREAS, in February 2013 NYC Health + Hospitals issued a Request for Proposals (the "RFP") to secure the services of architects and engineers to help to plan the necessary repair, restoration and hazard mitigation work; and

WHEREAS, Arcadis and Parsons were awarded contracts pursuant to the RFP which expired September 30, 2015; and

WHEREAS, on March 26, 2015, the NYC Health + Hospitals' Board of Directors approved a contract with Parsons and Arcadis for an amount not to exceed $5 Million and for a term of one year expiring September 30, 2016; and

WHEREAS, in July 28, 2016, the Board of Directors approved a twelve (12) month extension for the Arcadis and Parsons' contracts, for an amount not-to-exceed $2,366,826.50 of for both such contracts drawing on funds left unused from the prior contract, of the approved $5 Million; and

WHEREAS, on September 28, 2017 the Board of Directors authorized a five (5) year extension of the contracts, for an amount not to exceed $1,277,702.94, the funds remaining under the prior contract; and

WHEREAS, the work remained to be done to develop the over-all strategy and priority to further the repair, restoration and hazard mitigation work at the damaged NYC Health + Hospitals' facilities and to present the same to the Federal Emergency Management Agency ("FEMA"); and

WHEREAS, most of the work the Corporation has performed to date to respond to Hurricane Sandy has been emergency repair work designed merely to repair the damage caused by the Storm and to enable the impacted facilities to resume providing services however it is also necessary to guard against the impact of future storms by hardening them where possible; and

WHEREAS, FEMA will provide additional funding to harden the damaged facilities from future storms if NYC Health + Hospitals properly proposes the hazard mitigation projects; and

WHEREAS, Arcadis and Parson has started work to prepare a preliminary plan for such hardening and NYC Health + Hospitals wishes to allow them to continue such work with the additional spending authority requested; and

WHEREAS, the Senior Vice President for Facilities Development and Capital Projects shall be responsible for the administration of these contracts.

NOW THEREFORE, be it

RESOLVED that the resolution adopted in September 26, 2017 by the Board of Directors of the New York City Health and Hospitals Corporation ("NYC Health + Hospitals") to authorizing an extension of existing agreements with Arcadis U.S., Inc. ("Arcadis") and with Parsons Brinckerhoff, Inc. ("Parsons") for a term of five years months for an amount not to exceed $1,277,702.94 for both of such contractors drawing on funds left unused from the prior contract be amended to authorize an increase in the not-to-exceed amount by an additional $450,000 without further extending the term for a total amount of $1,727,702.94.

EXECUTIVE SUMMARY

CONTRACT EXTENSIONS WITH ARCADIS U.S., INC. AND PARSONS BRINCKERHOFF, INC.

Most of the work the Corporation has performed to date to respond to Hurricane Sandy has been emergency repair work designed merely to repair the damage caused by the Storm and to enable the impacted facilities to resume providing services. The Corporation has performed only limited work so far to minimize the risk of damage from future storms. Good stewardship of these public assets, however, requires that the Corporation alter its facilities, where practicable, to guard against the impact of future storms. Further, FEMA will provide additional funding to harden damaged facilities from future storms if the Corporation properly proposes the hazard mitigation projects. The Corporation hired Parsons Brinkerhoff and ARCADIS (the "A & E Firms") to conduct a review of the Corporation's damaged facilities to identify alterations that might be performed at reasonable cost and that would substantially protect such facilities from the damage of future storms. The A & E Firms were also to design the alterations they proposed. Finally, the two firms were to assist HHC with claims for reimbursement for the cost of storm related repairs from FEMA and from Community Development Block Grants.

To date, the A & E firms have completed the work described below including having completed substantial parts of its review of the Corporation's facilities to determine where mitigation projects should be performed. Now that such review is substantially complete, the Corporation has the benefit of a list of projects in need of design and can budget for the design work remaining for the A & E Firms to complete also as indicated in the attached. To complete the design of such projects, the Corporation seeks to increase the funding for the work of the A & E Firms from $1,277,702.94 for a total spend of $1,727,702.94 – an increase of $450,000.

It is anticipated that a majority of the cost of these A&E services will be reimbursed by FEMA.

Both Parsons Brinkerhoff and Arcadis were granted a non-MWBE waiver in 2013. To date, Parsons Brinkerhoff has sub contracted 7% of their awarded work for a value of $419,689 and Arcadis has sub contracted 5% of their awarded work for a value of $509,085. If granted this increase in their contract, Arcadis has committed to award 5%-10% of the increased value to MWBE firms and Parsons Brinkerhoff has committed to 5%-7% of the increased value to MWBE firms.

NYC HEALTH+ HOSPITALS

Keith Tallbe
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646-458-2034

To: Colicia Hercules
Chief of Staff, Office of the Chair

From: Keith Tallbe
Senior Counsel
Office of Legal Affairs

Re: Vendor Responsibility, EEO and MWBE status for Board review of contract

Vendor: Arcadis

Date: September 5, 2019

The below chart indicates the vendor's status as to vendor responsibility, EEO and MWBE:

Vendor Responsibility	**EEO**	**MWBE**
Approved	Pending	See below

Arcadis was granted an MWBE waiver in 2013. To date, Arcadis has subcontracted 5% of the awarded work for a value of $509,085. If granted this increase in the contract, Arcadis has committed to award 5%-10% of the increased value to MWBE firms.

The above status is consistent and appropriate with the applicable laws, regulations, and operating procedures to allow the Board of Directors to approve this contract.

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To: Colicia Hercules
Chief of Staff, Office of the Chair

From: Keith Tallbe
Senior Counsel
Office of Legal Affairs KT

Re: Vendor Responsibility, EEO and MWBE status for Board review of contract

Vendor: Parsons Brinckerhoff

Date: September 5, 2019

The below chart indicates the vendor's status as to vendor responsibility, EEO and MWBE:

Vendor Responsibility	EEO	MWBE
Approved	Pending	See below

Parsons Brinkerhoff was granted an MWBE waiver in 2013. To date Parsons Brinkerhoff has sub contracted 7% of the awarded work for a value of $419,689. If granted this increase in the contract, Arcadis has committed to award 5%-10% of the increased value to MWBE firms.

The above status is consistent and appropriate with the applicable laws, regulations, and operating procedures to allow the Board of Directors to approve this contract.

Request of Additional Funding for Hurricane Sandy "A & E" Design Consulting Firms : ARCADIS & Parson's Brinkerhoff (WSP)

Capital Committee
September 12th, 2019

Christine Flaherty , Sr Vice President – Capital/Facilities Construction
Frederick Covino , Vice President – Corp Budget

Background & Current State

- H+H total FEMA Hurricane Sandy portfolio $1.72B is dedicated to our major facilities (Bellevue, Coney, Coler & Metropolitan) for repairs, reconstruction and mitigation efforts.

- Facility Breakdown is as follows:

	FEMA Funding Approvals
Bellevue	$499,189,533
Metropolitan	$120,021,717
Coler	$180,750,493
Coney Island	$922,743,641
Totals :	$1,722,705,384

Background & Current State

- H+H procured two Architectural and Engineering Contracts which board approved in 2013 via public Request for Proposals (RFP) competitive selection process. **The two firms were procured for sole purpose of facilitating *"Designs"* for Sandy reconstruction & mitigation of FEMA projects at aforementioned H+H facilities.**

- Total Budget Allocation for the two contracts was **$16M**
  - **Parson's Brinkerhoff (WSP)**
  - **ARCADIS – US**

- To date, we have designed and completed thirteen FEMA mitigation projects relating to design work from WSP and ARCADIS. **There are 5 remaining mitigation projects (Bellevue) that are in various states of completion and require additional design services.**

Request

- Through our designers we have improved our projects:
  (i.e. Bellevue flood wall, elevating security and smarter improvements to elevators). As we complete the remaining projects there are modifications which require additional design services.

- In order to be timely and cost effective, we believe the remaining “Design” services be continued through the current engineering firms.

- **We are requesting an increase of $450,000.00 to be added to the existing 2017 board approved resolution. (approximately 3% of original $16M contract)**

APPENDIX 1

FEMA projects designed and completed so far:

Facility	FEMAReconstrction/Mitigation Project	Project Status	A&E Design Firm onboard	Additional Design Services require - Yes/NO
Bellevue	A.1-Replace/Mitigate/Elevate Sandy Damaged Emergency Backup Generator and Fuel Oil Pumps	98% complete	Parson's BrinckerHoff	NO
Bellevue	A.3.1- H Building Elevator pits Protections-Flood Slats	76% complete	ARCADIS	NO
Bellevue	**A.3.2 - Existing Elevation Mitigation Projects (32 Elevators @ Bellevue)**	**21% complete**	**Parson's BrinckerHoff**	**YES**
Bellevue	A.4-Domestic Water Mitigation Project	95% complete	Parson's BrinckerHoff	NO
Bellevue	A.5-Medical Gas Mitigation Project	98% complete	Parson's BrinckerHoff	NO
Bellevue	A.6-Basement Steam Tunnel Rehabilitation/reinforcement	98% complete	Parson's BrinckerHoff	NO
Bellevue	A.7-Basement Piping Reinsulating	**100% complete**	Parson's BrinckerHoff	NO
Bellevue	A.8.1-Abulatory Care building - Basement Protection, Flood Slats	**100% complete**	ARCADIS	NO
Bellevue	A.8.2-Basement and Fire Alarm Restoration	**100% complete**	Parson's BrinckerHoff	NO
Bellevue	A.9-Basment Loading Dock resurfacing including drainage	**100% complete**	Parson's BrinckerHoff	NO
Bellevue	A.10 - Replacement of Parking lot lifts, and site construction	**100% complete**	Parson's BrinckerHoff	NO
Bellevue	**Major Work - Electrical Relocation (Switchgear elevation)**	**1.5% complete**	**Parson's BrinckerHoff**	**YES**
Bellevue	**Major Work - HVAC Relocation**	**3% complete**	**Parson's BrinckerHoff**	**YES**
Bellevue	**Major Work - Flood Wall Project Predesigns & Surveys**	**0%**	**ARCADIS**	**YES**
Bellevue	**Major Work - Security Mitigation (Basement Data Center Relocation)**	**0%**	**Parson's BrinckerHoff**	**YES**
Coler	B.2-Lighting replacement in basement	**100% complete**	Parson's BrinckerHoff	NO
Coler	B.3-Temp Electrical Panel Replacement	**100% complete**	Parson's BrinckerHoff	NO
Coler	B.5-Fire pump relocation	98% complete	Parson's BrinckerHoff	NO

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Current Spending & Available Funding Status of ARCADIS & Parson's Brinkerhoff "A &E" Design Consulting Contracts:

FEMA Engineering Contract			Executed March 2013										
Parsons Brinkerhoff & ARCADIS													
								Current Anticipated Needs:					
Total Contract Value				**$16,000,000**				WSP	Bellevue Vert Trans		Security		$10,650
											Asbestos		$3,620
Spend to Date	ARCADIS			($9,900,614)							ACM Survey		$19,620
Spend to Date	Parsons Brinkerhoff			($6,014,597)					Bellevue Switch Gear		Offices		$69,500
											IT Closets		$66,000
											CA Services		OPEN
Net Available Funds				$84,789					Bellevue AHU		CA Services		OPEN
									Bellevue Security / IT Mitigation				$200,000
Decommission Funds		Coler Generator		$18,000									
		Bellevue Generator		$5,000				ARCADIS	Bellevu - Alexandria / City Agency presentations				$100,000
		Metropolitan Settlement		$22,000									
Current Available Fund including decommission				**$129,789**								Needs:	$469,390
											Available funds		($129,789)
											Net Needs:		$339,601
										Board request $450,000			
Bellevue Wall		ARCADIS											
	Incumbered			$315,000									
									Calculation				
									Board request of 3% of original contract				$480,000
									Board request of 2.5% of original contract				$400,000
									Board request of 2% of original contact				$320,000