

**BOARD OF DIRECTORS MEETING**

**FRIDAY, JANUARY 12, 2024**

**A•G•E•N•D•A•**

**CALL TO ORDER - 8:00 AM**

Ms. Wang

1. **Adoption of the Board of Directors Meeting Minutes – December 14, 2023**

2. **Chair’s Report**

3. Approving the following appointments of Directors to the Committees of the Board of Directors of New York City Health and Hospitals Corporation (the **Board**) effective January 12, 2024 to complete the current terms of such appointments: Anne Williams-Isom to the Capital Committee; Molly Wasow Park to the Capital Committee and Jackie Rowe-Adams to the Community Relations Committee in the capacity of Chairperson.  
and

Ms. Wang

Approving the appointment of Anne Williams-Isom to the Board of Directors of the New York City Health and Hospitals Corporation’s subsidiary, HHC Capital Corporation.  
(Presented Directly to the Board 01/12/2024)

**Vendex: NA / EEO: NA**

>>**Old Business**<<

>>**New Business**<<

>>**Adjournment**<<

Ms. Wang

**NEW YORK CITY HEALTH AND HOSPITALS CORPORATION**

A meeting of the Board of Directors of New York City Health and Hospitals Corporation was held in room 1701 at 50 Water Street, New York, New York 10004 on the **14th day of December, 2023** at 2:00 P.M., pursuant to a notice, which was sent to all of the Directors of New York City Health and Hospitals Corporation and which was provided to the public by the Secretary. The following Directors participated in person:

1. Mr. José Pagán
2. Ms. Freda Wang
3. Dr. Mitchell Katz
4. Ms. Anne Williams-Isom - Left at 3:00p.m.
5. Ms. Erin Kelly - Joined at 3:00p.m.
6. Ms. Molly Wasow-Park Left at 3:00p.m.
7. Ms. Karen St. Hilaire - Joined at 3:00p.m.
8. Dr. William Fisher
9. Ms. Sally Hernandez-Piñero
10. Dr. Michelle Morse - Left at 3:00p.m.
11. Ms. Anita Kawatra - Joined at 3:00p.m.
12. Ms. Jackie Rowe-Adams

José Pagán, Chair of the Board, called the meeting to order at 2:08 p.m. Mr. Pagán chaired the meeting and Colicia Hercules, Corporate Secretary, kept the minutes thereof.

**EXECUTIVE SESSION**

Upon motion made and duly seconded, the members voted to convene in executive session because the matters to be discussed involved confidential and privileged information regarding patient medical information.

**OPEN SESSION**

The Board reconvened in public session at 3:17 p.m.

Mr. Pagán noted that Erin Kelly is representing Deputy Mayor Anne Williams-Isom, William Fisher is representing Deepa Avula, Karen St. Hilaire is representing Molly Wasow Park - all in a voting capacity.

**ACTION ITEM 3 - ADOPTION OF MINUTES**

The minutes of the Board of Directors meeting held on November 30, 2023 were presented to the Board. Then, on motion duly made and seconded, the Board unanimously adopted the minutes.

**RESOLVED**, that the minutes of the Board of Directors Meeting held on November 30, 2023, copies of which have been presented to the Board be, and hereby are, adopted.

**ITEM 4 - CHAIR'S REPORT**

Mr. Pagán advised that during the Executive Session, the Board received and approved the governing body oral and written report from NYC Health + Hospitals/Elmhurst and NYC Health + Hospitals/Bellevue.

The Board also received and approved the semi-annual governing body written submission from NYC Health + Hospitals/ Metropolitan; Henry J. Carter Specialty Hospital and Henry J. Carter Nursing Facility.

**ACTION ITEM 6:**

Mr. Pagán read the resolution

Approving the New York City Health and Hospitals Corporation **Annual Board Committee Assignments Effective January 1, 2024**, as set forth in the attachment hereto as mandated by Article VI, section 1(C) of the By-Laws,

Further authorizing as set forth in Article V, section 1 - the Vice Chair shall be chosen by the Board from among themselves and shall be elected annually - approving the New York City Health + Hospitals Corporation **to appoint Freda Wang as the Vice Chair of the Board of Directors** (Presented Directly to the Board 12/14/2023)

The committee Assignments were displayed for all to view. Mr. Pagán thanked all members for their service to the System and the Board.

There being no questions, upon motion duly made and seconded, the Board unanimously approved the resolution.

**ACTION ITEM 7:**

Ms. Wang read the resolution

Authorizing the New York City Health and Hospitals Corporation (the "System") to execute contracts with **Cherokee Nation Management and Consulting, LLC, International Rescue Committee, Inc., Horne LLP, Rapid Reliable Testing NY LLC dba DocGo Inc., and Medrite LLC dba Medrite Urgent Care for HERRC case management services** at a not to exceed amount of \$176,800,000 for a contract term of one year and two six-month renewal options exercisable at the discretion of the System (Presented to the Finance Committee 12/04/2023)

Prior to the presentation, Dr. Theodore Long, Senior Assistant Vice President, provided an overview of the HERRC Program. Since October of 2022, the System has overseen the Humanitarian Emergency Response and Relief Centers with 16 sites serving over 23,000 daily guests and the Arrival Center which has served over 85,000 asylum seekers (the overview slide reflects over 79,000, that number has since increased) while providing humane services and resources to this population. In the NYC November Plan, NYC Health + Hospitals received \$2.17 billion for fiscal year 2024 and \$2.82 billion for fiscal year 2025, the Office of Management and Budget has provided NYC Health + Hospitals with revenue through the HERRC MOU with the Mayor's Office. The System is helping the city in their efforts and the asylum seekers through case management, where guests are provided with connections and resources for their re-settlement process.

Chris Keeley, Senior Assistant Vice President proceeded with the presentation by highlighting that the System is moving away from emergency procurement into competitively bidding for HERRC contracts. Mr. Keeley provided background and current information on the needs and services for case management as it relates to HERRC activities as well as the historical spend within the existing contracts. The team is looking to expand and deepen the work on exit planning. Mr. Keeley shared an overview of the RFP criteria, procurement process and vendor performance history. The vendor background, assignment and diversity MWBE goals were also discussed.

The Board thanked the team for all their work in supporting the City's efforts in mitigating the crisis.

There being no questions, upon motion duly made and seconded, the Board unanimously approved the resolution.

**ACTION ITEM 8:**

Ms. Wang read the resolution

Authorizing the New York City Health and Hospitals Corporation (the "System") to execute contracts with **Rethink Food NYC, Inc., LIC COM LLC dba Kommissary, Bridging Cultures Group, Inc., and R.C. Stillwell LLC dba Riviera Caterers for HERRC catering services** at a not to exceed amount of \$355,000,000 for a contract term of one year and two six-month renewal options exercisable at the discretion of the System.

(Presented to the Finance Committee 12/04/2023)

Chris Keeley, Senior Assistant Vice President provided background and current information on the needs and the provision of culturally competent and nutritious catering services as well as the historical spend with the existing contracts.

Dr. Long shared highlights on the successes of the HERRC Food Program.

Mr. Keeley shared an overview of the RFP criteria, procurement process and vendor performance history. The vendor background, assignment and diversity MWBE goals were also discussed.

After questions from the Board, Mr. Keeley confirmed that the vendors all have spaces within the five boroughs where they prepare the meals. Rethink Food NYC, Inc. partners with restaurants across the City to source food.

Following questions, Mr. Keeley provided a description of the structure of the three meals being provided to the guests all, which align with the City's foods guidelines. The menu is frequently rotated in an effort to introduce new meals and change the cycle.

Mr. Keeley explained, after questions, while some of the vendors do a lot of the production themselves, all vendors have subcontracting partners that help produce the food. The vendors also reach their diversity targets via these partnerships. Dr. Long added that LIC COM draw almost exclusively from local farms, which aligns well with the efforts to adhere to the New York City Health Standards.

The Board asked about the maximum dollar amount per day. Mr. Keeley explained that the contracts price meals with a cap of \$14.40 per day per guest and includes all vendors expenses and packaging. The volume of orders however may vary per day depending on census patterns and consequently decrease the per day/per guest amount to less than \$14.40.

In response to questions, Mr. Keeley explained that the contracts provide significant cost savings and the overall spend per day per person has decreased. Operational improvements and efficiencies continue to help in lowering cost. While they do not expect to reach the not-to-exceed amount, the crisis is still on-going and needs may change in the future.

Dr. Long added, they serve 430,000 meals each week. From a cost perspective, they have been able to dramatically decrease cost through the competitive process of the RFP and purchasing power created by a System as large as NYC Health + Hospitals.

The Board asked about the logistics of food delivery and being served to guests. Mr. Keeley responded, most foods are delivered and served buffet-style and sometime food is pre-packaged in to-go containers. Most sites have large cafeteria spaces however, often times guests prefer to eat elsewhere. Dr. Long added that they work to have each meal and its ingredients labeled in multiple languages to ensure awareness in the event of food allergies and food sensitivity.

The Board asked about waste management, composting and recycling. Mr. Keeley responded that most, if not all, of the packaging used is recyclable however he is not certain about composting.

After discussion, upon motion duly made and seconded, the Board unanimously approved the resolution.

**ACTION ITEM 9:**

Ms. Wang read the resolution

Authorizing the New York City Health and Hospitals Corporation (the "System") to execute contracts with **HappyNest, Inc., Sodexo, Inc., Sun International Trading LLC, Burnblu 2081 Flatbush Ave LLC dba Blu Laundry Services for HERRC laundry services** at a not to exceed amount of \$33,800,000 for a contract term of one year and two six-month renewal options exercisable at the discretion of the System.  
(Presented to the Finance Committee 12/04/2023)

Chris Keeley, Senior Assistant Vice President provided background and current information on the laundering services available at all HERRC centers as well as the historical spend with the existing contracts.

Mr. Keeley shared an overview of the RFP criteria, procurement process and vendor performance history. The vendor background, assignment and diversity MWBE goals were also discussed. Mr. Keeley highlighted that after working in partnership with the procurement team, Sodexo MWBE's goal is now 30% from the 16% currently on the presentation.

After questions, Mr. Keeley confirmed that the laundry services are almost exclusively for personal laundering, however there are HERCC sites where linen service needs are included. All services are included in this contract.

After discussion, upon motion duly made and seconded, the Board unanimously approved the resolution.

**ACTION ITEM 10:**

Mr. Pagán read the resolution

Authorizing the New York City Health and Hospitals Corporation ("NYC Health + Hospitals") to execute a contract with BA Global Construction, Corp. (the "Contractor"), to undertake a renovation at NYC Health + Hospitals/Jacobi Medical Center's ("Jacobi") Postpartum Department, to upgrade and modernize such Postpartum Department to meet the needs of an expanding community, for a contract amount of \$12,842,955 with an 18% project contingency of \$2,311,732 to bring the total cost not to exceed \$15,154,687.

(Presented to the Capital Committee 12/04/2023)

Oscar Gonzalez, Senior Assistant Vice President, introduced Hiba Hadeed, Director, Office of Facilities Development who provided background and history of the Post-Partum units, the construction scope of work and schedule, including a picture of the current and future physical space.

Mr. Gonzalez shared an overview of the procurement, summary of proposed construction contract, vendor MWBE status and vendor performance evaluation. The project budget has a higher contingency than usual due to potential unforeseen field conditions due to aging quality of the building.

The Board asked about current and projected yearly patient volume. Mr. Mastromano responded, currently the hospital does approximately 2,000 deliveries a year and expect to have 3,000 after the renovations are completed. Women usually get their pre-natal and post-delivery care at the Jacobi however, they go to other nearby hospitals to deliver. The new units will help address this issue.

The Board complimented the visual image of the physical space in its future state and thanked the team for explaining the contingency.

After discussion, upon motion duly made and seconded, the Board unanimously approved the resolution.

**ACTION ITEM 11:**

Ms. Hernandez-Piñero read the resolution

Authorizing the Executive Director of **MetroPlus Health Plan, Inc.** ("**MetroPlus** or "**the Plan**") to negotiate and execute a contract with **Accenture, LLP ("Accenture")** to lead the business implementation efforts for the Plan's new core processing system for an amount not to exceed \$20,000,000 for a total 26-month contract period.  
(Presented to the MetroPlus Board 12/7/2023)

Ganesh Ramratan, Chief Information Officer, began by providing a detailed overview of the Background on the Core Processing System and implementation complexity, RFP criteria, vendor selection process, vendor MWBE utilization plan, and Mmagement consulting services for MetroPlusHealth.

The Board asked about the post-implementation phase and any costs associated with maintenance. Mr. Ramratan responded, MetroPlusHealth has a license agreement with HealthEdge, which was previously approved by the Board for a term of 12-years. There is a 2-year implementation and a 10-year production period which MetroPlus will need to maintain and HealthEdge is responsible for supporting that effort.

After discussion, upon motion duly made and seconded, the Board unanimously approved the resolution.

**ACTION ITEM 12:**

Ms. Hernandez-Piñero read the resolution

Authorizing the Executive Director of MetroPlus Health Plan, Inc. ("MetroPlusHealth" or "the Plan") to increase the funding by \$15,000,000 for its previously executed agreements with **Prager Creative LLC and Bellweather LLC and to allocate those additional funds for media buying, creative advertising & marketing, digital content & social media, and public relations services** to those two contracts for a total amount not to exceed \$35,000,000 for the total 5-year term.  
(Presented to the MetroPlus Board 12/7/2023)

Laura Santella-Saccone, Chief Marketing and Brand Officer began by discussing the background, the evolution of the brand, investment driving website traffic, awareness and call volume. Ms. Santella-Saccone explained how marketing attribution will help understand the channels driving performance and the results. The rationale for the increase allocation and spending authority request were also discussed.

In response to questions from the Board, Ms. Santella-Saccone explained that the \$9 million will be shifted from smaller vendors to core agencies who will drive the bulk of the work. The core vendors are larger, more efficient in media buy-in and have the expertise to drive efficiencies and economies of scale. The smaller vendor will continue to help with much more specialized areas.

Ms. Santella-Saccone responded to questions, from a metrics perspective, the plan is to apply attribution methodology to driving conversion beyond digital and include radio and print. Ultimately, the data will help understand the conversion of leads and cost per acquisition. Dr. Schwartz added, of the 62% of people who are aware of the brand, there was a significant increase in the number of people who considered MetroPlusHealth as an option for their health coverage. The piece the team is working on is the data on the people who became a member based on a campaign. Overall, market share and lines of businesses have increased.

**FOLLOW-UP:** The Board asked for an update in a year's time.

The Board commented on the importance of increasing brand awareness to reach people who may otherwise may not have access or qualify to healthcare coverage as well as continuity of care.



The Board asked about the ability to track patients who have never had health insurance before. Dr. Schwartz responded no, if the patients were previously employed and had coverage through their employer there is no access to this information.

The Board acknowledged that the public's view of MetroPlusHealth has positively changed over the last six years due to a number of reasons, including the guidance of the Leadership team, the Board, the System being a better and more responsive provider, marketing and perception among other factors.

After discussion, upon motion duly made and seconded, the Board unanimously approved the resolution.

#### **VENDEX APPROVALS**

Mr. Pagán noted there are eighteen items on the agenda requiring Vendex approval and that, twelve have that approval. There are four items from previous Board meetings pending Vendex approval. Two Vendex approvals have been received since the Board last met.

The Board will be notified as outstanding Vendex approvals are received.

#### **ITEM 5 - PRESIDENT REPORT - FULL WRITTEN SUBMISSION INCLUDED IN THE MATERIALS WITH FEW VERBAL HIGHLIGHTS:**

##### **NYC HEALTH + HOSPITALS FACILITIES GET FESTIVE**

NYC Health + Hospitals facilities across the five boroughs are hosting Christmas tree and menorah lighting ceremonies in conjunction with community groups and leaders. Many of the sites of the sites will celebrate Kwanzaa which it begins on Tuesday, December 26, and Three Kings Day on Saturday, January 6.

##### **RESPONDING TO THE HUMANITARIAN CRISIS - SERVICES FOR ASYLUM SEEKERS**

Since the crisis began, the staff at the Arrival Center have now registered approximately 85,000 asylum seekers. A number of medical, mental health and social services are provided or coordinated on-site, including vaccinations, health insurance enrollment, case work and reconnection services to all new arrivals to New York City.

##### **JUST HOME PUBLIC HEARING**

Yesterday at NYC Health + Hospitals/Jacobi the Board of Directors held a public hearing on the Just Home project. The project is a joint effort between NYC Health + Hospitals and the NYC Department of Housing Preservation & Development (HPD) to house New Yorkers with complex medical needs after they leave jail. Patients with health issues such as congestive heart failure, stage 4 cancer, and end-stage renal disease cannot be placed in the City's homeless shelters and would be eligible for this program.

Correctional Health Services, a division of NYC Health + Hospitals and the direct provider of health care in the City's jails, will identify patients based on clinical and other needs. The Fortune Society will act as the developer, manager, and social service provider for the project. Fortune Society's Castle Gardens residence, which opened in 2010 and has become an integral and valued part of the West Harlem community, and serves as a model for Just Home.

**NYC HEALTH + HOSPITALS/GOTHAM HEALTH, MORRISANIA RECOGNIZED AS CENTERS FOR DISEASE CONTROL AND PREVENTION MILLION HEARTS HYPERTENSION CONTROL CHAMPION**

NYC Health + Hospitals facilities continue to do outstanding work controlling chronic disease. The American Heart Association awarded 17 NYC Health + Hospital sites Gold recognition for reducing Type 2 Diabetes, and Gold+ recognition for hypertension control.

**HEALTH CARE ACCESS WEBINARS HOSTED BY NYC HEALTH + HOSPITALS, NYC MAYOR'S PUBLIC ENGAGEMENT UNIT, NY STATE OF HEALTH, NYC HUMAN RESOURCES ADMINISTRATION, AND NYC DEPARTMENT OF HEALTH AND MENTAL HYGIENE**

On December 5 and 6, NYC Health + Hospitals' NYC Care program, the NYC Mayor's Public Engagement Unit's (PEU) GetCoveredNYC program, NY State of Health, the NYC Human Resources Administration's (HRA) Office of Citywide Health Insurance Access, and the NYC Department of Health & Mental Hygiene (DOHMH) hosted a virtual webinar series to inform New Yorkers about the health insurance and health care access programs available to them.

**PLANETREE INTERNATIONAL RECOGNIZES THREE ADDITIONAL NYC HEALTH + HOSPITALS LOCATIONS FOR THEIR COMMITMENT TO ENHANCING THE STAFF, PATIENT AND FAMILY EXPERIENCE IN HEALTH CARE SETTINGS**

Three additional NYC Health + Hospitals facilities have been certified by Planetree International for excellence in person-centered care, bringing the total number of our facilities recognized by Planetree to nine. Planetree works with organizations across the globe to enhance staff, patient and family experiences in health care settings.

**NEW COMMUNITY MURALS UNVEILED AT NYC HEALTH + HOSPITALS/CARTER AND GOTHAM HEALTH, MORRISANIA**

Last week, NYC Health + Hospitals/Carter celebrated their new mural, Chromatic Symphony of Greater Harlem by artist Ji Yong Kim.

Yesterday, NYC Health + Hospitals/Gotham Health, Morrisania unveiled its new mural, Each and Every Day: Simple but Full of Love by artist Yukiko Izumi.

Both murals were developed through a series of focus groups with community members, staff and patients and brought to life at a paint party where people from the community were invited to paint the mural as a group.

#### **NYC HEALTH + HOSPITALS PRESENTS FIRST-EVER EXHIBITION TO SHOWCASE ART FROM BOTH RIKERS ISLAND AND ITS OWN COLLECTION**

On Tuesday, December 5, NYC Health + Hospitals presented Creating Within: Art from Rikers and the NYC Health + Hospitals Art Collection, the health System's first-ever exhibition to showcase creative works by individuals detained on Rikers Island, alongside selections from its own art collection.

#### **TEN LEADERS AT NYC HEALTH + HOSPITALS AND METROPLUSHEALTH RECOGNIZED AS POWER PLAYERS IN HEALTH CARE BY MEDIA OUTLETS amNY AND POLITICSNY**

Ten leaders from across the health System and MetroPlusHealth were added to the PoliticsNY and amNY Metro 2023 Power Players in Health Care list, recognized as pioneering individuals and political heavyweights whose unwavering commitment to excellence is leading New York's health care industry into a future defined by innovation, compassion, and improved health outcomes for all.

#### **CEO OF NYC HEALTH + HOSPITALS/COMMUNITY CARE NICOLE JORDAN-MARTIN RECEIVES 2023 EMPIRE WHOLE HEALTH HEROES AWARD**

Nicole Jordan-Martin, MPA, FACHE, the Executive Director and CEO of NYC Health + Hospitals/Community Care, has been named one of 25 recipients of the prestigious 2023 Empire Whole Health Heroes Awards.

#### **EXTERNAL & COMMUNITY AFFAIRS UPDATE**

**City:** Representatives from NYC health + Hospitals/Metropolitan and NYC Health + Hospitals/Elmhurst attended an East Harlem and Corona, Queens Mayors Town Hall in December.

**State:** We continue to work with the Governor, the Assembly, and the Senate to support the ongoing needs of safety net hospitals.

**Federal:** The Medicaid Disproportionate Share Hospital (DSH) cuts were delayed until January 19. We will continue to advocate for the DSH cuts to be eliminated, and there is broad support for doing so.

#### **EMERGENCY CONTRACTS**

Since Dr. Katz's last update regarding asylum seeker contracting response, there has been two increases to previously reported HERRC contract deviations to the Board:

- The first of these concerns our rental of space on Hall Street in Brooklyn that I approved on June 27, 2023 with a ceiling of \$22,070,003 for

construction and \$22,162,590 for rent and other occupancy costs. As the City's need for additional space for migrant asylum seekers grew, we exercised our option to almost double the footprint of the project. The projected operating costs will correspondingly increase as will the construction costs to prepare the space for asylum seekers. With these increases, the total construction cost for improvements to Hall Street are projected at \$53,384,294 and the total 18-month projected operating cost will be \$41,859,013. We have also allowed for an additional \$15,000,000 to pay for alterations to a previously renovated part of the property. While nothing is planned or approved yet, there may be a future decision to alter part of the property to be suitable for a different service delivery model. This would involve putting up partial walls to make separate "pods" for each family unit. This work and the associated expenditure would be made only with further explicit OMB approval.

- The second modification to a previous exception made May 31, 2023 concerns the property we leased at 320 West 31st Street in Manhattan. There, we have had to reimburse unexpectedly high insurance costs but that increase is partially offset by terminating the agreement five months early after only 5 months of operation. The net effect of these developments is a net increase of \$22,714 to bring the number to \$8,236,414.

I also recently approved an exception to policy to permit a six-month continuation of 21 CBO agreements, which were procured through an RFP process. The initial term of the agreement was February 2022 through October 2023 with a budget of \$4.93 million. The additional amount is not to exceed \$1.1 million. These contracts support education, outreach and NYC Care enrollment assistance. An RFP is being conducted that will replace these contracts prior to their expiration.

Dr. Katz reflected on the events of the past year and thanked the Board for their commitment to the System and patients.

**COMMITTEE AND SUBSIDIARY REPORTS**

Mr. Pagán noted that the Committee and Subsidiary reports are included in the materials for your review and were submitted into the record. Mr. Pagán welcomed questions or comments regarding the reports.

**OLD BUSINESS/NEW BUSINESS**

**ADJOURNMENT**

Hearing no old business or new business to bring before the New York City Health + Hospitals Corporation Board of Directors, the meeting was adjourned at 4:29 P.M.

  
Colicia Hercules  
Corporate Secretary

# COMMITTEE REPORT

**AUDIT COMMITTEE MEETING - December 04, 2023**

**As Reported by: Sally Hernandez-Piñero**

**Committee Members Present:** Ms. Sally Hernandez-Piñero, Jose Pagán,  
Dr. Mitchell Katz and Freda Wang

The meeting was called to order by Ms. Sally Hernandez-Piñero at 10:08 A.M.

Ms. Hernandez-Piñero noted for the record that committee member Anita Kawatra is participating virtually.

Ms. Hernandez-Piñero asked for a motion to adopt the minutes of the Audit Committee meeting held on October 16, 2023. A motion was made and duly seconded with all in favor to adopt the minutes.

Ms. Hernandez-Piñero proposed a motion to convene an executive session to discuss confidential and privileged matters that may be related to anticipated or actual litigation. A motion was made and seconded with all in favor.

The Committee reconvened in an open session at 10:35 A.M.

Ms. Hernandez-Piñero introduced the information item regarding the Grant Thornton Management Letter. Mr. David Guzman turned the discussion over to Tami Radinsky,

Ms. Radinsky presented the formal management letter to the Committee, she explained Grant Thornton's responsibility, and the different levels of deficiency possible.

Ms. Radinsky informed the Committee of an identified significant deficiency in HHC's grant's revenue and reconciliation process. The Management letter focuses on Grant revenue and related reconciliation of the financial statements for the T2 grant program. Ms. Radinsky reported that a reconciliation was not maintained or reconciled timely by the T2 program, which resulted in an immaterial overstatement of revenue in the prior fiscal year of 2022 and the recording of an adjustment related reduction of revenue in fiscal 2023. In addition, grant revenue was recorded using a budget rather than actual expenditures. Lastly, the organization does not perform a reconciliation of the Scheduled of Expenditure of Federal awards to the financial statements on a timely basis. The Schedule of Expenditure and Federal Awards ("SEFA") relates to the Uniform Guidance Audit, which is performed subsequent to the H+H year-end audit.

Ms. Radinsky recommends that a formal analysis of expenditures by funding source, be performed, reviewed, and approved on a monthly basis, inclusive of the appropriate documentation for all the grants received. In addition, grant revenue should be recorded, based on actual expenditures versus budgeted amounts. She also recommended the Scheduled of Expenditures of Federal Awards be reconciled to the amounts reported in the financial statements prior to the issuance of the H+H financial statements. This will help improve oversight, and ensure that the financial statements

include an accurate reporting of grants revenue.

Ms. Hernandez-Piñero asked about the difficulty of reconciling with the schedule of expenditures since there are inputs that are outside of H+H's control and financial statement issuance timeframe.?

Ms. Radinsky responded that yes this is a factor on many of Grant Thornton's audits. She recommended that a draft SEFA be used. The reconciliation of the SEFA will prevent changes to reported numbers after the issuance of the financial statements and prevent a reconciling item.

Ms. Hernandez-Piñero opened it up for questions.

Ms. Freda Wang responded there seems to be a time issue. Is this what you are alluding to Sally? There is a timing mismatch on how the City does it.

Mr. David Guzman responded that he believes the question relates to the ability to reconcile in a timeframe that aligns with financial statements when certain items are beyond our control and are required inputs to the reconciliation.

Ms. Farag Michline responded that there are components to the SEFA that are external to H&H there are components that are recommended from different organizations. So, the timeline is a bit different but to Tami's point, there are sub-components in there that are direct H&H grants that would normally make it into the financial statement. So that piece reconciles with the financial statement as we go with those components with those closing expenditures, the timing varies because those external components come into H&H to complete the SEFA as a final product which continues until the City calls its process.

Ms. Freda Wang responded that it may not be possible to completely align the timing for the recommendation that Grant Thornton's making?

Ms. Farag Michline responded not a final product of what an actual SEFA is it would be in progress.

Mr. Pagán asked What is the definition of formal analysis of expenditures?

Ms. Radinsky responded all of your expenditures there should be some sort of approval of the analysis. So, management can be able to perform together with the grants department, finance, and just sign off on that just to make sure it is complete and accurate. Formal just means that you know, you have the appropriate approvals in place and that management has reviewed them as appropriate.

Mr. Pagán as if in the monthly timeframe is the standard timeframe that is used in any organization or public sector?

Ms. Radinsky responded management can determine if they want to do a bi-monthly it just cannot be at the end of the year, so whatever time frame makes sense, it does not have to necessarily be every single month, but if you keep up with something monthly, then you come to the end of the year and there is not a heavy lift.

Ms. Hernandez-Piñero called on Catherine Patsos to provide a Compliance

Update.

Ms. Catherine Patsos provided an update on the 2025 risk assessment. They are conducting interviews with system leadership, as well, the facility leadership, and will be reviewing oversight agency guidance on what their work plans are to better understand what their priorities and objectives are for the coming year.

Ms. Hernandez-Piñero asked the audit are we required to audit and did they send out a form audit for us to use.

Ms. Catherine Patsos responded that the risk assessment is to determine the risks to the organization. What areas that have been audited by oversight agencies in the past to make sure that we are not making the same mistakes again. She shared with us the HIPPA risk analysis vendor Coalfire and they are near completion of the 2023 risk analysis. The results are shared with the CEOs at the beginning of the year, along with informing them about updates and compliance.

The risk scores have decreased compared to last year. As previously noted, the risk score was 15. Now, the risk level threshold is 12. We are looking at more moderate risks now than we have in the past. She reported that we had a 3<sup>rd</sup> party Risk Management workshop with Coalfire in October. That was a collaborative effort with representations from information security and risk management, supply, chain, legal, and procurement. This was to streamline our vendor risk management assessment for 2024. What this is about is Coalfire, analyzes the Risk profile of our vendors that have access to or maintain our PHI. They want to identify gaps in the security and privacy of our processes as they pertain to 3rd party risk management. To compare them to the National Institutes of Standard and Technology or NIST supply chain, risk controls, and to create an optimization road map for supply chain and risk management. What they learned from these key takeaways is that we do need a better system for identifying expired contracts that has BAA and to have better collaboration between the office of corporate compliance ISIM, and supply chain procurement to identify vendors that can be used in Coalfire annual risk management reviews.

Ms. Hernandez-Piñero asked does the vendor have a document that requires that they follow certain guidelines?

Ms. Patsos responded the OCR has audit guidelines that they follow. They have guidelines that should be followed for best practices and it is issued by the government it has different areas of risk assessment that should be followed.

Ms. Patsos reported they had Corporate Compliance and Ethics week last month with a large amount of employee participating at the tables that the Corporate Compliance officer had at each of their facilities. People engage in a jeopardy game to win prizes if they got correct answers on compliance and privacy questions they also had online puzzles about compliance issues. They also did compliance and HIPPA webinars that people can listen and participate in.

Ms. Patsos reported they are working with EITS to develop a policy management system and this will allow for a more efficient procedure for drafting new operating procedures this process should be in place by the end of the year. We will also be incorporating other resources, random policies,

Guidance documents, tip sheets, and they will be incorporated into this tool. It will automate the review the approval process for operating procedures and the distribution to their intended audiences. Finally, they are closing in on the year-end compliance with the training statistics. She presented the percentages that have been completed for each of the facilities as of November 15th. She sent emails on November 22<sup>nd</sup> to the facility CEOs and attached the employees who had not completed their training and asked for their support to increase the completion rates for their facilities.

Ms. Wang asked about the year-end completion target?

Ms. Patsos would like it to be in the 90s it is hard to get 100% because some people are on FMLA or some other type of leave they are not able to complete it by the end of the year.

Ms. Hernandez-Piñero called on Joseph O'Keefe to give an update on Internal Audits.

Mr. O'Keefe reported his 1<sup>st</sup> external audit, by the New York City comptroller's office, regarding access to mental health within corrections systems.

The 2<sup>nd</sup> Audit regarding behavioral health emergency assist response division and NYC Police Department's role in the response and treatment of mental health crisis by the NYC Comptroller's Office. They are auditing services that we provide under agreement with the City, both audits are ongoing at this point.

Both are primarily stuck on the same point, which is access to mental health records and the City's looking to come back to us with an acceptable method of audit for which they can complete both of these audits.

Mr. O'Keefe provided an update of the activities of the Internal Audit Unit: there are 14 planned audits for FY 2024. Four audits have been completed, seven are in progress and three have not yet started. He went on to mention the system-wide review of nursing and that the final report has been drafted. The audit is complete and they are now working out management's responses to issues that came up during the audit and then it will be finalized.

The next audit he presented was the patient valuables it was completed at Jacobi Medical Center fairly standard issues that we have noted in other facilities where this audit was being done.

Ms. Wang requested a clarification of the status of the system-wide review of nurse hiring.

Mr. O'Keefe responded right now we are waiting for management's responses to the finding so once we receive a response we can finalize the report.

He went on to speak on the auxiliary audits the Bonadio Group, is working on the calendar year 2021 and 2022 audits. He also mentioned that 2022 will be the last year we will pay for auxiliary audits.

Ms. Hernandez-Piñero asked about a previous nursing audit before and were they able to piggyback onto that or is this separate from it?



Mr. O'Keefe responded it was separate and that this audit was looking at the onboarding of the nurses and all the background checks, criminal, proper education license, and financial. They are making sure everything being done that is required to onboard properly. So, they were not Piggybacking on the older audits.

Ms. Hernandez-Piñero Any other questions or comments, is there any old business or new business to be discussed meeting ended at 10:56 AM.

**Capital Committee Meeting - December 4, 2023**

**As reported by:** José Pagán

**Committee Members Present:** Dr. Machelles Allen for Mitchell Katz until he joined at 11:28, José Pagán, Freda Wang joined at 11:28, Sally Hernandez-Piñero

Mr. José Pagán called the meeting to order at 11:17 a.m. and noted for the record Dr. Machelles Allen is representing Dr. Mitchell Katz, in a voting capacity until he joins.

Mr. Pagán called for a motion to approve the November 20, 2023 minutes of the Capital Committee meeting.

**Upon motion made and duly seconded the minutes of the Capital Committee meeting held on November 20, 2023, were unanimously approved.**

**VICE PRESIDENT REPORT**

Manuel Saez provided the Vice President's for the Office of Facilities Development report.

Mr. Saez informed the Committee as the calendar year wraps up, the Office of Facilities Development has been actively meeting with leadership of all Health + Hospitals facilities to review and prioritize new needs submission to the Office of Management and Budget (OMB) in December.

We are working to enhance the Harlem OB-OR space to allow us to provide care to our patients in the best environment possible. Working to install seamless flooring, LED lighting, and new equipment and storage. Actively working with the clinical team on various access barriers, and working with a current timeline of 3 months to completion.

He noted that the department is starting our second year with the ACE mentorship program. Last year was very successful with 12 students completing the year and successfully presenting a final project. Four students from the last team chose to return to the team again this year. We will host high school students at Metropolitan to teach them about Architecture, Construction Management, and Engineering available in a healthcare setting. We are hosting the students every other week until May 2024.

Mr. Saez advised that the Brooklyn Borough President funded Maternal Health project had met an early milestone of all solicitations being approved by the Contract Review Committee (CRC). We are looking to be in contract for all three facilities (South Brooklyn, Woodhull, Kings County) in the late spring or early summer of 2023.

Mr. Saez reported there was one item for the Committee to discuss - a construction project for Labor and Delivery at NYC H+H/Jacobi.

Ms. Hernandez-Piñero asked about the status of the master planning services contracts. Mr. Gonzalez said solicitation was in the final steps and two contracts were nearing award. Ms. Hernandez-Piñero asked if it was a multi-year effort. Mr. Gonzalez said, yes. Ms. Hernandez-Piñero asked if work would be assigned by Borough. Mr. Gonzalez said there would be one executive master planner of sorts to help tie in any system-wide initiatives and establish a standard and the other consultants in the pool would each be assigned a facility.

Mr. Saez read the resolution for consideration:

**Authorizing the New York City Health and Hospitals Corporation ("NYC Health + Hospitals") to execute a contract with BA Global Construction, Corp. (the "Contractor"), to undertake a renovation at NYC Health + Hospitals/Jacobi Medical Center's ("Jacobi") Postpartum Department, to upgrade and modernize such Postpartum Department to meet the needs of an expanding community, for a contract amount of \$12,842,955 with an 18% project contingency of \$2,311,732 to bring the total cost not to exceed \$15,154,687.**

Oscar Gonzalez, Senior Assistant Vice President, narrated a presentation providing background information on the contracts and associated services, prior increases, overview of procurement, summary of proposed amendments, and WMBE utilization plan. Mr. Gonzalez was joined by Chris Mastromano, Chief Executive Officer, Ellen Barlis, Deputy Executive Director, NYC Health + Hospitals/Jacobi, and Hiba Hadeed, Director, Office of Facilities Development.

Ms. Hernandez-Piñero asked if decreasing the number of available patient rooms was outweighed by the value of having the individual rooms. Mr. Mastromano said yes, we anticipate an increase in deliveries as a result.

Dr. Allen asked about the decentralized nurse's stations. Ms. Hadeed said because the space was two wings, there would be a station on each wing.

Dr. Allen asked how often current rooms were filled. Mr. Mastromano said not often. We are very rarely hitting full census. He noted that space was a limiting factor.

Ms. Hernandez-Piñero noted that BA Global had other contracts with H+H. Mr. Indar said yes, they hold an on-demand Job Order Contract for General Construction services. Ms. Hernandez-Piñero asked if the system was satisfied with their services. Mr. Indar said yes, based on evaluations.

Upon motion duly made and seconded the resolution was approved for consideration by the Board of Directors.

There being no further business, the Committee Meeting was adjourned at 11:30 a.m.

**Finance Committee Meeting - December 4, 2023**

**As Reported By: Freda Wang**

**Committee Members Present:** Mitchell Katz - left at 12:25, MD, José Pagán, Freda Wang, Sally Hernandez-Piñero- left at 1:31, Patricia Marthone; Barbara Lowe - Join at 12:48

**NYC Health + Hospitals Employees in Attendance:**

Michline Farag, Marji Karlin, Linda DeHart, John Ulberg, James Cassidy, Megan Meagher, Sonya Rubin, Baily Jones, Mariel McLeod, Ted Long, MD, Chris Keeley, Keith Tallbe, James Linhart, Christopher Miller, Clifford Chen, Rafelina Hernandez, Colicia Hercules

**CALL TO ORDER**

Ms. Wang called the meeting of the New York City Health + Hospitals Board of Directors Finance Committee Meeting to order at 12:04 p.m.

Ms. Wang called for a motion to approve the October 16, 2023 minutes of the Finance Committee meeting.

Upon motion made and duly seconded the minutes of the Finance Committee meeting held on October 16, 2023 were adopted.

**Executive Session**

Ms. Wang called for a motion to enter into an executive session to discuss confidential and privileged matters that may be related to threatened and potential set of litigation.

Upon motion made and duly seconded the board convened an executive session.

The Board reconvened in public session at 12:35 p.m.

**Overview of HERRC Financial Update**

Mr. Keely read the resolution into the record:

Authorizing the New York City Health and Hospitals Corporation (the "System") to execute contracts with **Cherokee Nation Management and Consulting, LLC, International Rescue Committee, Inc., Horne LLP, Rapid Reliable Testing NY LLC dba DocGo Inc., and Medrite LLC dba Medrite Urgent Care for HERRC case management services** at a not to exceed amount of \$176,800,000 for a contract term of one year and two six-month renewal options exercisable at the discretion of the System

Dr. Ted Long commenced the presentation with an overview of the HERRC program and a financial update. H+H has overseen the Humanitarian Emergency Response and Relief Centers (HERRC) per Emergency Executive Order 224 since October 2022. There are currently 16 H+H HERRC sites serving over 23,000 guests daily. At the 24/7 Arrival Center, more than 79,000 asylum seekers have been served to date. Compared to other cities, at the NYC Arrival Center asylum seekers are screened for diseases, mental health, and health care is offered upon arrival.

All H+H HERRCs provide basic human necessities such as food, clothing and shelter and resettlement and transport to friends or family in and beyond NYC. In the NYC November Plan, H+H received for the HERRC program \$2.17B in FY-24 and \$2.82B in FY-25. H+H has incurred \$429.3M of HERRC expenses in Q1 of FY-24. OMB has provided H+H with revenue through the HERRC MOU with the Mayor's Office to cover committed expenses to date.

Ms. Wang polled the committee questions.

Ms. Hernandez-Piñero inquired regarding the occupancy at the HERRC sites and how big is the range.

Dr. Long responded that the largest site is the Row Hotel where there are close to or up to 4,000 people and that is family with children. Whereas, there are smaller sites such as the Wingate Hotel, which has about 170 rooms and there is a much smaller number of people there each day. The amazing thing here is that there are 4,000 people that are being helped each day and all kids go to school each morning.

Ms. Wang asked if the sites are 100% occupied at all times. Dr. Ted Long agreed.

Ms. Wang inquired regarding the case management services that will be offered, if these will be a Citywide effort and not only for the 16 H+H sites.

Dr. Long agreed, and added that case management is the process of identifying barriers and helping people to overcome their barriers. Dr. Katz and himself are case managers in medical care for instance. In NYC, about 90% of asylum seekers not only in the H+H sites but all over the city have completed a survey where we know where the individual is in the process and they have told us what their barriers are. For which, when we bring the resolution to the Board, we are able to bring targeted help to overcome the specific barriers as everybody has a different situation and we have the data to start the process and really hit the ground running something that no other city has.

Ms. Wang added that when we speak of HERRC we refer to the 16 centers, but when we speak of HERRC expenses and how much funding is received for HERRC in the Financial Plan that also refers to the arrival center and everything we are doing related to HERRC. Dr. Ted Long agreed.

**ACTION ITEM: HERRC Case Management Services**

Mr. Chris Keeley - Senior Assistant Vice President - Office of Operations in Ambulatory Care and the HERRC program, read the resolution into the record and proceeded with the presented:

**Authorizing New York City Health and Hospitals Corporation (the "System") to execute contracts with Cherokee Nation Management and Consulting, LLC, International Rescue Committee, Inc., Horne LLP, Rapid Reliable Testing NY**

**LLC dba DocGo Inc., and Medrite LLC dba Medrite Urgent Care for HERRC case management services at a not to exceed amount of \$176,800,000 for a contract term of one-year and two six-month renewal options exercisable at the discretion of the System.**

Mr. Chris Keeley began by providing the background and current state of NYC H+H's casework services at HERRC sites. H+H currently provides general casework services at HERRC sites to assist guests with court dates, child care plans, work authorization, resource navigation, discharge planning, etc.

H+H seeks to strengthen and expand casework services for exit planning to support guests moving onto the next chapter of their lives as the system continues to lead this effort citywide. The System currently holds contracts with two of the proposed HERRC casework vendors; DocGo and Medrite. The vendors historical spend at NYC H+H was presented. An RFP was done to expand casework capacity and service scope, as well as bring in national expertise from organizations that have worked with these populations. Multiple reference checks for Cherokee Nation Management and Consulting, LLP, International Rescue Committee, Inc. and Horne LLP are being conducted. NYC H+H expenses will be covered by HERRC MOU with the Mayor's Office.

An overview of the RFP Criteria and procurement process was presented by Mr. Keeley. The performance evaluation for Rapid Reliable Testing DBA DocGo and Medrite was also presented.

Ms. Hernandez-Piñero inquired regarding the average revenue for the vendors that were selected.

Mr. Keeley responded he does not have the exact number handy, will follow up, but expects it would be in the north of \$3 Million per year.

Ms. Lowe asked if we are also trying to reunite and relocate individuals with families in other States.

Mr. Keeley responded Yes, however we are unsure if that will be 1% of families or 30% of families. The plan is to ensure that if we have partners that can bring those pathways and bring those avenues, bring those connections, we can leverage those. The vendors that we are seeking to move forward with, have national resources, so we can try to leverage that.

Ms. Lowe continued and asked if there is anything else that would need to be seeing before moving individuals to the next stage to ensure they do not fail.

Mr. Keeley responded that we are expecting the national experts we are bringing in, to help us think through what those prerequisites and requirements are, and we are going to be working with those families before we make that connection to ensure that they can do it successfully. We are going to be relying on their expertise.

Mr. Keeley continued by presenting the vendor background and assignment for the three new vendors. Cherokee Nation Management and Consulting, LLC is a federally licensed Minority Business Enterprise with experience completing over

115 emergency preparedness and response projects. Their approach to case management aligns with RGY (Red, Green, Yellow) coding and is able to provide a holistic resettlement and referral services, naming national resettlement as one of their 3 main programmatic pillars when approaching casework services. Cherokee have active recruitment pipelines across a variety of specialties and the agility to rapidly scale up or down in response to changing needs.

International Rescue Committee, Inc. is a non-profit industry leader capable of casework services and national resettlement, having provided asylum seeker casework and reception services to well over 100,000 asylum seekers across the country. Their approach centers on acknowledging migration-related stressors and systematic barriers. With their vast experience, they have worked with clients who come from over 170 countries, many of which are points of origin for HERRC guests and are helping with some novel models on how to really help individuals resettle.

Horne LLP have worked with State and Federal entities to provide national resettlement services to over 85,000 asylum seekers including work authorization, temporary protective status, and biometrics, as well as caseworker supports for 19,000+ New Yorkers during Hurricane Sandy's Emergency Response. Their approach involves conducting cultural assessments of targeted resettlement locations to ensure capacities for successful integration with formal (CBO, State) and informal (community, cultural) supports. Horne LLP is able to rapidly staff and deploy.

These vendors work will be assigned based on operational need, vendor capacity, and financial competitiveness. The contract terms allow contracts to be sunset at any time with less than 90-day notice, and work can be reassigned from a vendor with 30-day notice.

The MWBE analysis for each proposed vendor was presented by Mr. Keeley.

Dr. Katz inquired in regards to Cherokee Nation Management being a minority owned business but have not registered with the City. Mr. Keeley agreed and mentioned the vendor relayed they intend to do so.

The Office of Ambulatory Care is seeking approval to enter into contract with Cherokee Nation Management and Consulting, LLC, International Rescue Committee, Inc., Horne, LLP, Rapid Reliable Testing NY LLC dba DocGo Inc., and Medrite LLC dba Medrite Urgent Care for HERRC case management services at a not to exceed amount of \$176,800,000. The NTE is based on assumption that caseworkers will be available 16-hours a day and at a minimum available for 3 sessions per month for each HERRC household using historical rates. The contract start date is January 1<sup>st</sup>, 2024 with a term of one-year and two six-months renewal options exercisable at the discretion of the system.

Ms. Wang polled the committee for questions.

Ms. Hernandez-Piñero inquired regarding if there will be seminars or sessions to help people understand what other States or cities available to them and what is attractive about them that they can considered or will this be part of the one-on-one.

Mr. Keeley responded that the primary method we are assuming is incorporating as part of that one-on-one discussions. These are types of things that we have done in the past. There have been some programs within New York State where they have been able to offer resettlement upstate. We have possible pathways to agricultural jobs for example, and we are able to hold public information sessions and explain the jobs available and how to get involved.

Ms. Lowe asked what is the average size of a family.

Mr. Keeley responded that it is 3, often times two adults and one child or one adult and two children. We have a wide variety and mix of family types.

Ms. Wang inquired regarding how do vendors price their service; if it is on a daily rate, number of key families helped, or are these primarily driven by straight staff rates on an hourly rate for this type of staff versus that staff, etc.

Mr. Keeley answered that different vendors will have a slightly different staffing models, and as mentioned for instance with Cherokee Nation Management, they have the robust capability to do recruiting and onboarding of different types of caseworkers. Those different types of caseworkers, may have different hourly rates and depending on each case they may have more skilled case workers which would be at a higher rate. Whether the lesser skilled workers will have a lower rate and each of them will have a different type of supervisory ratios depending on the intensity of that work and then the vendors are different within that. The standard would be as a team structure with hourly rates for the staff, however what those teams really look like varies.

Ms. Wang continued, how does this RFP results yielded compared to what our contract were prior to this RFP.

Mr. Keeley responded that they are very comparable. The current work that is being done that was cited at the beginning with DocGo and Medrite rates is very comparable to where we are at now. We are bringing in these new national experts, so there is an element of paying a premium for that expertise, but it is comparable in rates ultimately.

Dr. Katz added, that this is the kind of job that is really no economy of scale. It is a case manager with a person, you do 500 or 1000, you will need twice as many hours.

Ms. Wang added that we are bringing different skill set here and that does not sound like the cost differential.

Mr. Keeley agreed and continued, that ultimately the expectation in this space is that with this casework we are able to resettle those families, help them move out of the City, support and housing, and so the more expertise we bring will help lower the overall census, we can lower the overall expense to the City. We do not need as many hotels as other HERRC resources. What we are looking to do is invest in helping folks be independent.

Ms. Wang inquired on the plan to allocate work to the different types of organizations. There are 5 vendors, what criteria will be used to decide how to use them.

Mr. Keeley responded that we are working through this at the moment. Working with them operationally to better understand where their deepest strengths are within the expertise that they bring. We expect to look at a couple of these national experts to first work on those greens and yellows and work with those folks who are sort of closest to being able to move out, who have some of those lowest barriers to help move out first, to help them resettle quickly. We will probably end up using one of the other vendors or a combination on those for red families that have the higher barriers that need more intensive case management. We will probably wind up splitting it that way but we have lots of ongoing conversations to have with each partner.

Ms. Wang inquired regarding who has been doing the work with the RGY coding.

Mr. Keeley responded that this is some of the work DocGo and Medrite has been doing so far. The goal is to scale up to meet the needs of the full population across the City to be able to move quickly and help get those green and yellow on their feet and outside of the System.

Dr. Long added that he has been thinking about this from an effectiveness point of view but there is also an efficiency component. When some of these new organizations come on, they will be speaking with somebody who they have on their computer screen to their barriers as listed, whether red, yellow, green, and what some of their goals are to help them to complete their journeys. This will be a supercharged effort as they will not be starting from scratch, they will be able to build on a very strong base that may not be available in other Cities.

Ms. Lowe asked what would an evaluation look like over a period of time.

Dr. Long responded that a key component of the evaluation is how successful are we in helping someone complete their journey after they have left our City system and resettle somewhere with either friends, family in NYC or ticketed to a sibling in Chicago and found the job that they wanted as we can afford OSHA training for them. Ultimately, a big important metric of success for us will be how many asylum seekers in our System with our help has been able to leave the system and complete their journey and celebrate their birthdays in their new apartment.

Ms. Hernandez-Piñero inquired regarding the system success mentioned. What has happened to those people who time-out of the 60-days and moved out and cycled back in.

Dr. Long responded that there have been no families with children who have reached the 60-days in terms of notices that have been given. This will be an important piece of helping families with children be successful in taking the next step forward, in particular among adults. We have had initially 60-day notices and 30-day notices and when adults have reached that time period, are leaving sites where they currently at and we have had an effort on our end to



help them through a similar type of case management to help identify what their barriers are and help them be able to successfully leave. That is why the vast majority of adults that have received a notice have not come back into the City system. Dr. Long will confirm the exact statistics, but he believes is about 23%.

Following the discussion and upon motion made and duly seconded, the Committee unanimously approved the resolution for consideration by the Board.

**ACTION ITEM: HERRC Catering Services**

Mr. Chris Keeley - Senior Assistant Vice President - Office of Operations in Ambulatory Care and the HERRC program, read the resolution into the record and proceeded with the presented:

**Authorizing New York City Health and Hospitals Corporation (the "System") to execute contracts with Rethink Food NYC, Inc., LIC COM LLC dba Kommissary, Bridging Cultures Group, Inc., and R.C. Stillwell LLC dba Riviera Caterers for HERRC catering services at a not to exceed amount of \$355,000,000 for a contract term of one-year and two six-month renewal options exercisable at the discretion of the System.**

Mr. Chris Keeley began by providing the background and current state of NYC H+H's catering services at HERRC sites. Currently providing 3 culturally competent and nutritious meals per day daily at HERRCs sites operated by NYC H+H. H+H seeking vendors to continue to provide access to nutritious and culturally competent food for these individuals and families. The System currently holds contracts with two of the proposed HERRC catering vendors; ReThink Food and LIC Com, LLC. The vendors historical spend at NYC H+H was presented. An RFP was done to competitively bid for these services and identify additional vendors that maybe well-suited to this work. Multiple reference checks for Bridging Cultures Group, Inc., and R.C, Stillwell LLC dba Riviera Caterers are being conducted. NYC H+H expenses will be covered by HERRC MOU with the Mayor's Office.

Dr. Ted Long presented the successes of HERRC Food program. Some of the HERRC Food Program successes include soliciting guests' feedback to be able to provide culturally competent meals of choice, operational improvements and efficiencies, partnerships for leftovers, and cost savings.

An overview of the RFP Criteria and procurement process was presented by Mr. Keeley. The performance evaluation for ReThink Food and LIC Com dba Kommissary was also presented.

Mr. Keeley continued by presenting the vendor background and assignment for the two new vendors. Bridging Cultures Group, Inc. is an Arab-American Woman-Owned MWBE vendor capable of providing full services within 10 days of contracting. The Menu blueprint meets cultural competency goals of diverse and regionally appropriate meals that comply with NYC Food standards, with meals designed to scale as needed. Bridging Cultures Group have also done long standing community work throughout the City. R.C. Stillwell LLC dba Riviera Caterers is an MWBE

vendor experienced in providing meal services to asylum seekers and working in a food service capacity with the City. Riviera Caterers sample menu is encompassing of regional cuisine goals and vendor was a leader on adaption of NYC Food standards when Executive Order 8 was signed. This vendor also has the ability to rapidly deploy following contracting, with marginal capacity to operationalize new sites overnight. These vendors work will be assigned based on operational need, vendor capacity, and financial competitiveness. The contract terms allow contracts to be sunset at any time with less than 90-day notice, and work can be reassigned from a vendor with 30-day notice.

The MWBE analysis for each proposed vendor was presented by Mr. Keeley. Three of the awardees are MWBEs and ReThink Food is a non-profit.

Dr. Katz asked in regards to ReThink Food, assuming work is given to other minority business, do those work show as part of the spend or not?

Mr. Tallbe responded that if the vendors are not registered as diverse vendors with the City or State, they would not show.

Dr. Katz continued, a non-profit business using a minority business to provide services and minority business gets some of the money, the dollars show or do not.

Mr. Tallbe responded that the dollars typically do not show. We have 2 large contracts with non-profits where we track them, but we have not historically tracked those non-profits doing business with certified diverse vendors. Our current policy has that we do not have a goal setting on non-profit.

Dr. Katz agreed on that is how non-profits law works, there is no goal setting on non-profits. However, as we show our data based on spend, if a non-profit is spending the money through a City or State entity that should show in our stats.

Mr. Tallbe responded that we could apply it. We currently have 2 non-profits that have goals where we negotiated with them and although they are non-profit we asked them to have goals. Nevertheless, and we do track those, but it is not our standard practice to do.

**Follow-up:** Dr. Katz added if we could look into whether it could be a standard practice. Mr. Tallbe responded absolutely.

Dr. Katz continued, in the case of an application where we would certainly wish them to do City although as a matter of inclusiveness we include the State, can we include that as part of our standard to please do the City.

Mr. Keeley responded that in the case that mentioned the State here having some certifications pending, was just a coincidence as these vendors were already in the process before they came to our attention.

The Office of Ambulatory Care is seeking approval to enter into contract with ReThink Food NYC, Inc., LIC COM LLC dba Kommissary, Bridging Cultures Group, Inc., and R.C. Stillwell LLC dba Riviera Caterers for HERRC Catering services at a not to exceed amount of \$355,000,000. The NTE is based on maximum

occupancy at HERRC Sites for guests 3 meals a day utilizing historical rates. The contract start date is January 1<sup>st</sup>, 2024 with a term of one-year and two six-months renewal options exercisable at the discretion of the system.

Ms. Wang polled the committee for questions.

Ms. Lowe commended the team for the impressive work.

Ms. Wang asked if the cap is the same for all.

Mr. Keeley responded that on the RFP the cap was set to come in at or below \$14.40 per person and they all did. Some of them that we are moving forward with came even further and said they would come in at under \$14 if certain scale was met for instance do more than 5,000 or 20,000, or certain number of meals during a certain time. They get that economy of scale. We have been working since the beginning of the HERRC program to bring down the catering prices considerably and we are looking forward to bring it from that \$14.40 even further down in the months ahead as we continue to work through the logistics of how to move this more efficiently while having our Food standards and having good food quality.

Dr. Katz asked what is our current average rate. Mr. Keeley responded \$14.40.

Ms. Wang added it has come down from what we have been spending. For the \$60.8M that has been spent, is that a year's worth of spending?

Ms. Rubin responded that it is since we launched in October 2022.

Ms. Wang asked if we are expecting a large increase due to population increase, as our rates are better.

Ms. Rubin responded that it is also due to the uncertainty of the future, making sure that we have enough buffer if the City needs to respond and support any other sites moving forward.

Ms. Wang thanked the team.

Following the discussion and upon motion made and duly seconded, the Committee unanimously approved the resolution for consideration by the Board.

**ACTION ITEM: HERRC Laundry Services**

Mr. Chris Keeley - Senior Assistant Vice President - Office of Operations in Ambulatory Care and the HERRC program, read the resolution into the record and proceeded with the presented:

**Authorizing New York City Health and Hospitals Corporation (the "System") to execute contracts with HappyNest, Inc., Sodexo, Inc., Sun International Trading LLC, and Burnblu 2081 Flatbush Ave LLC dba Blu Laundry Services for HERRC laundry services at a not to exceed amount of \$33,800,000 for a contract term of one-year and two six-month renewal options exercisable at the discretion of the System.**

Mr. Chris Keeley began by providing the background and current state of NYC H+H's laundry services at HERRC sites. Currently providing routine laundering services at all HERRC sites operated by NYC H+H. H+H seeking vendors to continue providing effective laundering services at significant scale. Many asylum seekers arrive with minimal clothing and need reliable access to laundering services. H+H currently holds contracts with two of the proposed HERRC laundry service vendors; Sodexo and HappyNest. The vendors historical spend at NYC H+H was presented. An RFP was done to competitively bid for these services and identify additional vendors that may be well-suited for this work. Multiple reference checks for Sun International Trading LLC and Burnblu 2081 Flatbush Ave LLC dba Blu Laundry Services are being conducted. NYC H+H expenses will be covered by HERRC MOU with the Mayor's Office.

An overview of the RFP Criteria and procurement process was presented by Mr. Keeley. The performance evaluation for Sodexo and HappyNest was also presented.

Mr. Keeley continued by presenting the vendor background and assignment for the two new vendors. Sun International Trading LLC is an Asian woman-owned MWBE with 10 years' City contract experience, capable of rapidly scaling. The facilities are conveniently located in multiple boroughs, positioned to strategically serve HERRC families with minimal disruption to service. Burnblu 2081 Flatbush Ave LLC is applying for MWBE status directly, in addition to plan for adequate subcontracting. This vendor has capacity to deploy immediately. The work will be assigned based on operational need, vendor capacity, and financial competitiveness. The contract terms allow contracts to be sunset at any time with less than 90-day notice, and work can be reassigned from a vendor with 30-day notice.

The MWBE analysis for each proposed vendor was presented by Mr. Keeley. The vendor diversity team set a goal of 30% on this solicitation. The awarded vendors include one MWBE. The three non-MWBE vendors have agreed to utilization plans meeting the 30% goal, with the exception of Sodexo, which has submitted a plan of 16% and negotiations are continuing and believe that by the Board meeting that number will increase. Sodexo scoring was strong enough on all other criteria that they were able to make it into the top 4 awarded vendors.

The Office of Ambulatory Care is seeking approval to enter into contract with HappyNest, Inc., Sodexo, Inc., Sun International Trading LLC, and Burnblu 2081 Flatbush Ave LLC dba Blu Laundry Services for HERRC Laundry services at a not to exceed amount of \$33,800,000. The NTE is based on maximum occupancy at HERRC Sites and guests receiving laundering on a weekly basis utilizing historical rates. The contract start date is January 1<sup>st</sup>, 2024 with a term of one-year and two six-months renewal options exercisable at the discretion of the system.

Ms. Wang polled the committee for questions.

Ms. Hernandez-Pinero asked if these rates cover bedding as well.

Mr. Keeley responded that there are very few sites where we actually needed to do that as the hotels includes bedding in their nightly room rates. However, there are certain sites where we wanted to have that flexibility and we have tapped into those linen services with HappyNest and Sodexo. The Roosevelt Hotel

provide the linen services and housekeeping services just like they would if they were a hotel open to the public.

Dr. Katz added that it was important to the unions to be able to ensure their employees would not all be on the street if we did those jobs ourselves there will be all these people unemployed from those hotels.

Ms. Lowe inquired regarding Sodexo and the long history we have with them.

Mr. Keeley added that this contract would be a separate contract for HERRC services separate aside from the systemwide Sodexo contract.

Dr. Ted Long added that it is important to point out that it is a good example of we have had a long history with them on the hospital side as we were building these sites, we operated them like we would operate a hospital. We broke down each service, including laundry, we had the opportunity to build off of our relationship and experience with Sodexo to move at the pace we needed to move at and now we are going to the RFP process to make sure we have the most competitive bids.

Ms. Wang inquired regarding the different pricing models for HappyNest, are the other vendors a similar model and how did the RFP process help in terms of pricing results.

Mr. Keeley responded that in terms of the pricing results, the new vendors are coming in more on the per pound scenario, HappyNest is more of the outlier as far as we can tell in terms of a per bag scenario. However, that works well for us at certain locations that HappyNest per bag scenario in small to medium size sites, there is actually more efficiency towards doing a per bag rate as it is less staff intensive and we find other efficiencies in the system of doing that way. However, we are seeing the new vendors coming in at a per pound rate, and believe it will be tough for these local laundromats to compete with somebody as large as Sodexo on a per pound rate as they are currently coming in at a higher rate.

Ms. Wang inquired regarding the evaluation committee, are these new individuals we hired for HERRC or that moonlight. Mr. Keeley advised that it is a mix. There will be a few on this list that are moonlighting and then 1 or 2 that are new hires. Ms. Wang thanked the team.

Following the discussion and upon motion made and duly seconded, the Committee unanimously approved the resolution for consideration by the Board.

### **FINANCIAL UPDATE**

Mr. Ulberg opened the presentation with the FY-24 Quarter 1 Highlights. He conveyed that September closed with \$962M (36 days cash-on-hand). The budget overperformed at 1% and closed September with a positive Net Budget Variance of \$49M.

Mr. Ulberg continued that direct patient care receipts came in \$133.89M higher than the same period in FY-23 partially due to SBH bills held in PY Q1, continued increases in IP and OP services in FY-24, and overall improved cash performance. Patient care volume in FY-24 has surpassed pre-COVID levels (1%), and is 9% ahead of FY-20 pre-COVID OP visits. Revenue base remains strong and

resilient primarily driven by returning volume and higher average collectability rate over the base. Overall, our strategic Financial Initiatives are underway. So far, Q1 performance generated \$217M against an annual target of \$1.08B. Financial updates are still in progress within areas of Revenue Cycle and System Efficiencies. Several areas of strong Q1 performance were noted.

Mr. Ulberg presented the cash projections for FY-24. The System is estimated to close November with approximately \$650 million (24 days cash-on-hand) and expects to close December with approximately \$500 million (18 days cash-on-hand). We continue to work closely with the City on our remaining liabilities due to them as we continue to closely monitor our cash position.

Mr. Ulberg continued presenting the external risks. Several areas of focus are staff recruitment, retention, temp services and sessional costs which continue to present a financial challenge. The system is focused on the 18-month RN glidepath, which assumes hiring to start ramping up in FY-24 Q2. NYSNA negotiations closed on August and H+H implemented the "All Hands-on Deck" approach to recruit and retain RNs. Sites are tracking well towards achieving FY-24 glidepath targets. The system is rolling off or converting non-clinical temps where appropriate. RN temp agency ramp down is expected to follow completion of orientation for new hires starting end of Q2 of FY-24. FY-23 Sessional spending surpassed FY-22 actuals and budget across all facilities and is currently being monitored.

H+H is diligently working to address inflationary pressures and supply chain related costs continue to present a financial challenge as facilities submitted \$90M in gap closing plans to reduce spend including OTPS discretionary spending. City and State budget challenges remain and H+H continues to closely monitor this as City's November Plan included another PEG. Federal Budget and regulatory impacts continue to present a financial challenge due to the Medicare DSH cuts rule currently delayed and IPPS rule being implemented. H+H is tracking potential impacts. Lastly, Medicaid Recertification is currently meeting our budgeted recertification targets and continue to optimize our overall strategies to ensure that we stay on track.

Ms. Lowe inquired on the Medicaid Recertification, if H+H has received any information for potential impacts for retirees.

Mr. Ulberg responded that the Medicaid recertification is a process that was held due to the pandemic by the Federal government and is in place now and is a cumbersome process. As mentioned, there is a portion of the recertification that is done by paper and it is the SSI population, the vulnerable population and we may need to have a conversation about that with the State. The State has been very good and open to us, and shown interest as we have been in constant communication. The Feds on the Medicaid Recert piece has given States some flexibility. It is very likely that those who would recertify be eligible rather than losing their insurance coverage, and if we can go back and check to refund any of those that did not qualify. It's about finding that balance as it may be a small percentage of the population instead of the risk of losing that connection and losing that clinical relationship with that population. It is very important to us as that is a large portion of the population we serve. The report we receive from the health insurance plans on how they are doing versus

other benchmarks, show that we are for the most part doing a very good job. It is nice having good partners with your health plans, especially on complicated important issues like Medicaid Recert.

Ms. Wang added that due to time constraints we should continue with the main highlights of the presentation.

Mr. Cassidy presented the November 25 Financial Plan - PEG. OMB released the Nov 25 Financial Plan on 11/16. As part of the plan, NYC Health + Hospitals along with other City agencies, was given a City Tax Levy (CTL) budget savings target also known as a Program to Eliminate the Gap of 5% per year. NYC Health + Hospitals met its PEG target by in-housing consultant work, internally driven programmatic modifications, billing improvements, and Central Office contract and administrative expense reductions, and funding shifts. There are no impacts on patient services.

Ms. Farag presented the financial performance highlights for FY-24 thru September Net Budget Variance. She noted that September ended with a net budget variance of \$48.9M (1%). Receipts exceeded budget by \$140M Primarily driven by Patient Care Risk Revenue. Risk is higher due to improved PMPM and other PY reconciliations. Disbursement exceeded budget by \$91M, which includes expenses associated with Temp coverage, affiliation, and PS/Overtime costs.

Ms. Farag continued providing FY-24 thru September performance drivers updates. Cash receipts are 6% ahead of budget. Much of the overage can be attributed to Risk revenue exceeding target due to higher than anticipated PMPM and PY reconciliations. FY-24 thru September, cash disbursements are over budget by 4% primarily resulting from Temp spending and Agency costs exceeding target.

The revenue performance for FY-24 thru September was presented by Ms. Farag. FY-24 direct patient care revenue (IP and OP) is \$133.9M higher than FY-23 actuals. Patient revenue increases year-over-year can be partially attributed to PY hold on SBH bills (\$40M), PY UPL takeback (\$17M), Health Care Worker (HCW) Bonus (\$11M), overall increased volume and cash performance on revenue improvement initiatives.

Ms. Wang polled the Committee for questions. There being no further questions, Ms. Wang thanked the team.

#### **ADJOURNMENT**

There being no further business before this committee, the meeting adjourned at 1:47 PM.

## SUBSIDIARY REPORTS

<b>MINUTES OF ANNUAL MEETING OF HHC INSURANCE COMPANY, INC. As Reported by Vincent Calamia</b>
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A meeting of the Board of Directors of the HHC Insurance company, ("HHCIC") was held in the 17th floor conference room at 50 Water Street, New York, New York, on the 30th day of November 2023 at 1:00 p.m., pursuant to a notice which was sent to all the Directors of the Company and provided to the public by the Corporate Secretary of the NYC Health + Hospitals. The following Directors were present, constituting a quorum:

Vincent Calamia, M.D.

Mitchell Katz, M.D.

Andrea Cohen, Esq.

José Pagán - Chair of the NYC Health + Hospitals Board of Directors was also present, along with Board Members Sally Hernandez-Piñero, Jackie Rowe-Adams, Patricia Marthone, Barbara Lowe, Erin Kelly representing Anne Williams-Ison and William Fisher representing Deepa Avula both in a voting capacity.

Also present were Executive Director David Cheung and Claims Director Carmen Barroso, David Guzman of NYCHHC Controller's Office, and Mike Batsimm of Aon Insurance Managers (AIM).

Dr. Calamia chaired the meeting which was called to order at 1:05 p.m. The following resolutions were presented to the Board by Dr. Calamia:

1. The minutes of the November 1, 2022 annual meeting. A motion to approve the minutes was made by Ms. Cohen, seconded by Dr. Katz, and approved unanimously.
2. The following were unanimously approved following a motion to approve made by Ms. Cohen, seconded by Dr. Katz:
  - a. The re-appointments of Dr. Vincent Calamia, Dr. Mitchell Katz, Andrea Cohen, Esq., Dr. Machelles Allen, and John Ulberg, Jr. as members of the Board of Directors.
  - b. The appointment of Dr. Vincent Calamia as Chairman of the Board.
  - c. The Election of the following Officers for the HHC Insurance Company, Inc.:

➤ Vincent Calamia, M.D.	President
➤ Machelles Allen, M.D.	Vice-President
➤ Andrea Cohen, Esq.	Secretary
➤ John Ulberg, Jr.	Treasurer



3. The following were unanimously approved following a motion to approve made by Ms. Cohen, seconded by Dr. Katz:
  - a. David C. Cheung was re-appointed as the Executive Director of the Company.
  - b. Carmen Barroso was appointed Director of Claims of the Company.
4. The next item was the approval of the issuance of primary insurance policies to members of the HHC Physicians Purchasing Group. Upon motion by Ms. Cohen, seconded by Dr. Katz, the motion passed unanimously.
5. The next item was the re-appointment of Jo Ellen Cockley of Aon Risk Consultants as the Actuary of the Company. Upon motion by Ms. Cohen, seconded by Dr. Katz, the motion passed unanimously.
6. The next item was the re-appointment of Dana Wilson of Grant Thornton as the company auditor of the financial statements for the year ending December 31, 2023. Upon motion by Ms. Cohen, seconded by Dr. Katz, the motion passed unanimously.
7. The next item was the approval of the loan back of premium in an amount up to \$3.0 million to the parent corporation, the NYC Health + Hospitals (the System). Upon motion by Ms. Cohen, seconded by Dr. Katz, the motion passed unanimously.
8. The next item was the approval of the Audited Financial Statements as of December 31, 2022. Mike Batsimm of Aon gave a brief overview of the body of the statements. Upon motion by Ms. Cohen, seconded by Dr. Katz, the motion passed unanimously.
9. The next item was the approval of the Business Continuity Plan. Upon motion by Ms. Cohen, seconded by Dr. Katz, the motion passed unanimously.
10. The next item was the approval of the disaster response plan. Upon motion by Ms. Cohen, seconded by Dr. Katz, the motion passed unanimously.

Mike Batsimm presented the following five information items:

1. In 2007, the Company was required to sign up as a Plan or Pool participant of the Medical Malpractice Insurance Pool. The Company opted to be a Pool participant. The June 30, 2022 cession statement from the Pool indicates that the Company has a net equity in the Pool of \$1,894,594. Pages 39 & 40 of the board book further detail the Company's participation. No questions were asked.
2. The September 30, 2023 interim financial statements were reviewed. As of September 30, 2023, HHC Insurance Company has total assets of \$97,816,831. Of that balance, the intercompany receivable of \$94,625,173 is the largest component. There is an MMIP receivable of \$3,172,592. The total liabilities as of September 30, 2023 are \$6,245,705. A large component of the liabilities is the outstanding loss in LAE (expense) reserves as well as the reserves for IBNR (incurred but not reported loss). There were direct

reserves of \$2,651,808 and MMIP reserves of \$1,105,648. The total net assets as of September 30, 2023 are \$91,571,126.

3. Sedgwick CMS has reported 43 open files and 592 closed files for the underwriting years 2005-2023. Of the closed files, 41 were closed with payment and 551 files were closed without payment.
4. The company business plan has been approved by the Department of Financial Services (DFS), the pre-disaster survey and disaster response plan questionnaires have been filed. The annual Cyber Security certification has been filed. All Regulatory matters are current.
5. There are no outstanding requests or approvals pending from the Department of Financial Services. No additional new business matters were brought up.

**ADJOURNMENT:**

There being no further business before the Board, the meeting was adjourned at 1:25 p.m.

<p><b>MINUTES OF ANNUAL MEETING OF THE HHC PHYSICIANS PURCHASING GROUP, INC. As Reported by Vincent Calamia</b></p>
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A meeting of the Board of Directors of the HHC Physicians Purchasing Group, Inc., (hereinafter, the "PPG") was held in the 17th floor conference room at 50 Water Street, New York, New York on the 30<sup>th</sup> day of November 2023, pursuant to a notice which was sent to all the Directors of the Company and which was provided to the public by the Corporate Secretary of the NYC Health + Hospitals. The following Directors were present, constituting a quorum:

Vincent Calamia, M.D.

Mitchell Katz, M.D.

Andrea Cohen, Esq.

José Pagán - Chair of the NYC Health + Hospitals Board of Directors was also present, along with Board Members Sally Hernandez-Piñero, Jackie Rowe-Adams, Patricia Marthone, Barbara Lowe, Erin Kelly representing Anne Williams-Isom and William Fisher representing Deepa Avula both in a voting capacity.

Also present were Executive Director David Cheung and Claims Director Carmen Barroso, David Guzman of NYCHHC Controller's Office, and Mike Batsimm of Aon Insurance Managers (AIM).

The meeting was called to order at 1:25 p.m. by Dr. Calamia. The following resolutions were presented to the Board by Dr. Calamia, and upon motion by Ms. Cohen, seconded by Dr. Katz, were unanimously approved by the Board:

1. Approval of the minutes of the November 1, 2022 annual meeting;
2. The confirmation/acknowledgment of the appointment of the current Board of Directors with the appointment of Dr. Calamia as the Chairman; and,

3. The appointment of the following officers of the HHC Physicians Purchasing Group Inc.:

- Vincent Calamia, M.D. President
- Machelles Allen, M.D. Vice-President
- Andrea Cohen, Esq. Secretary
- John Ulberg, Jr. Treasurer

**INFORMATION ITEMS: Mike Batsimm presented two informational items:**

1. The PPG has been registered and approved by the New York State Department of Financial Services to act as a purchasing group within the State. The business of the PPG is to obtain on behalf of its members, who are employees of NYCHHC's affiliates, primary insurance for medical malpractice from the HHC Insurance Company ("HHCHC", a captive insurance company).
2. The physician members of the group have obtained primary medical malpractice insurance coverage in the amount of \$1.3 million per occurrence/\$3.9 million in the aggregate from HHCIC for 2023. Insurance policies have been issued for the PPG by the HHCIC. The members of the PPG have also received excess coverage in the amount of \$1 million per occurrence/\$3 million in the aggregate from MMIP (unless they have coverage through another excess carrier which would then write the excess coverage for the covered physician).

**ADJOURNMENT:** There being no further business before the Board, the meeting was adjourned at 1:30 p.m.

**SUMMARY OF MEETING**

**HHC ACO INC. ANNUAL SOLE MEMBER MEETING - NOVEMBER 30, 2023**

FOR CALENDAR YEAR 2023

As Reported by: José Pagán

Members Present: Freda Wang, Dr. Mitchell Katz, Erin Kelly, Karen St. Hilaire, Dr. Vincent Calamia; Dr. William Fisher, Dr. Patricia Marthone, Sally Hernandez-Piñero, Barbara Lowe, Jackie Rowe-Adams

The 2023 Annual Sole Member Meeting of HHC ACO Inc., NYC Health + Hospitals' subsidiary not-for-profit Accountable Care Organization ("ACO"), convened on November 30, 2023 at 1:30 p.m. Mr. José Pagán, Chair of the NYC Health + Hospitals Board of Directors called the meeting to order to discuss historical program performance and governance matters.

Mr. Pagán noted that Erin Kelly is representing Deputy Mayor Anne Williams-Isom, Dr. William Fisher is representing Deepa Avula, and Karen St. Hilaire is representing Molly Wasow Park - all in a voting capacity.

Upon motion made and duly seconded the minutes of the March 30, 2023 Annual Sole Member Meeting was unanimously approved.

The Board considered the following resolution:

Authorizing that each of the following persons be elected, effective immediately, to serve as a Director of HHC ACO Inc. (the "ACO") Board of Directors in accordance with the laws of the State of New York, until such person's successor is duly elected and qualified, subject to such person's earlier death, resignation, removal, or termination of his or her employment with any entity that has executed an ACO Participation Agreement or ACO Agreement:

Mitchell Katz, M.D.;

Matthew Siegler, Esq.;

John Ulberg, Jr., M.P.H.;

Andrea Cohen, Esq.;

Nicole Jordan-Martin, M.P.A.;

Hyacinth Peart, a Medicare beneficiary Director;

A Director who shall be the Chief Executive Officer of Physician Affiliate Group of New York, P.C. ("PAGNY");

A Director to be named by NYC Health + Hospitals to represent physicians employed by New York University Grossman School of Medicine and providing services in NYC Health + Hospitals facilities, as specified in a writing by NYC Health + Hospitals that is delivered to the Chairman of the ACO;

A Director to be named by the Icahn School of Medicine at Mount Sinai, doing business as Mt Sinai Elmhurst Faculty Practice (the "Elmhurst FPP"), as specified in a writing by the Elmhurst FPP that is delivered to the Chairman of the ACO;

A Director to be named pursuant to a designation by a majority in number of the Presidents of Coney Island Medical Practice Plan, P.C., Downtown Bronx Medical Associates, P.C., Harlem Medical Associates, P.C., and Metropolitan Medical Practice Plan, P.C. (the "PAGNY FPPs"), as specified in a writing by such majority that is delivered to the Chairman of the ACO; and

A Director to be named by Community Healthcare Network, Inc. (the "Non-Affiliate Participant"), as specified in a writing by such Non-Affiliate Participant that is delivered to the Chairman of the ACO.

The motion was duly made, seconded and unanimously approved by the Board.

Among other matters, the Board discussed the following:

- Matthew Siegler, Chief Executive Officer of HHC ACO Inc., reported on the ACO's PY 2022 Performance Results, the PY 2023 Shared Savings Forecast, and on the contract renewal.
- Dr. David Stevens, Chief Medical Officer of HHC ACO Inc., reported on the PY 2022 Quality Performance Results, the Quality Scoring Methodology changes, and on CAHPS. Dr. Stevens also went over the ACO's plan for Reducing Avoidable Admissions by presenting a Driver Diagram.

**FOLLOW-UP:** Dr. Pagán asked about the Board members selection on whether we can have a membership reflective of the goal of the ACO focus on social determinants, do we have a way of having more representatives from that area or does the ACO By-Laws predetermine the makeup of the Board with only on Medicare beneficiary? Maybe community organization or non-clinical voices.

Dr. Katz responded that the NYC Health + Hospitals Board of Directors plays some of those roles along with the Community Advisory Boards. Mr. Pagán clarified that we do not play a role in the day-to-day.

Mr. Siegler agreed to look into the possibilities and report back.

**ADJOURNMENT**

There being no old business, nor new business, the meeting was adjourned at 2:00 pm.

**MetroPlus Health Plan, Inc.**  
Board of Directors Meeting Update - Thursday, December 7<sup>th</sup>, 2023  
**As Reported By: Sally Hernandez-Piñero**

Draft subject to adoption at the next MetroPlusHealth Board of Directors meeting on Thursday, March 28<sup>th</sup>.

Sally Hernandez-Piñero, Chair of the Board called the meeting to order at 11:10 A.M.

**ADOPTION OF THE MINUTES**

The minutes from the Board of Directors meeting held on Thursday, September 14<sup>th</sup>, 2023 at 11:00AM were presented to the Board. On a motion by Sally Hernandez Piñero and duly seconded, the Board adopted the minutes.

**ACTION ITEM**

Sally Hernandez-Piñero advised that we begin the meeting by covering the Action Items. Christopher Roker, Chair for the Finance Committee, requested that we begin with the Finance Committee Action Items.

A **first** resolution was presented by Christopher Roker, Chair for the Finance Committee, for Board approval.

*Adopting the Annual Operating Budget and Expense Authority of the  
**MetroPlus Health Plan, Inc. (the "Plan"), for Calendar Year 2024.***

Lauren Leverich, Chief Financial Officer, provided a detailed overview of the FY-2023 Budget, FY-2023 vs. FY-2024 Personnel Services Budget Bridge, FY-2024 Personnel Services Budget Divisional Head Count, FY-2024 vs. FY2023 Other Than Personnel Services Budget Bridge, FY-2024 Other Than Personnel Services Budget Contingency Bridge, FY-2024 Capital Expense Proposal, FY-2023 Personnel Services Update, 2024 Membership Projection and 2024 Forecast by LOB.

Board Members asked questions and made comments regarding FY-2024 Personnel Services Divisional Headcount, FY-2024 Capital Expense Proposal and 2024 Membership Projection and EP Membership.

Lauren Leverich and Dr. Talya Schwartz, President and CEO, responded to questions.

There being no further questions or comments, on a motion by Christopher Roker and duly seconded, the resolution was unanimously adopted by the Board.

#### **ACTION ITEM**

A **second** resolution was presented by Christopher Roker, Chair for the Finance Committee, for Board approval.

*Authorizing the submission of a resolution to the Board of Directors of New York City Health and Hospitals ("NYC Health + Hospitals"), to authorize the Executive Director of MetroPlus Health Plan, Inc. ("MetroPlus" or "the Plan") to negotiate and execute a contract with **Accenture, LLP ("Accenture")** to lead the business implementation efforts for the Plan's new core processing system for an amount not to exceed \$20,000,000 for a total 26 month contract period.*

Ganesh Ramratan, Chief Information Officer, began by providing a detailed overview of the Background, RFP Criteria, Selection Process, Vendor Status, Management Consulting Services for MetroPlusHealth, Why MetroPlusHealth Selected Accenture, CORE System Implementation Experience and the Board Approval Request.

Board members asked questions regarding budget for this project; Dr. Schwartz and Ganesh Ramratan responded.

There being no further questions or comments, on a motion by Christopher Roker and duly seconded, the resolution was unanimously adopted by the Board.

#### **ACTION ITEM**

A **third** resolution was presented by Christopher Roker, Chair for the Finance Committee, for Board approval.

*Authorizing the Executive Director of MetroPlus Health Plan, Inc. ("MetroPlus" or the "Plan"), to execute a sole source contract with **Penstock Group, LLC ("Penstock")** for Health Care Reform Act ("HCRA") audit services for a total amount not to exceed \$3,000,000 for the term of one year with two one-year options to renew.*

Lauren Leverich, Chief Financial Officer, provided a detailed overview of the Background, Scope of Work, Vendor Highlights and Board Approval Request.

There being no further questions or comments, on a motion by Christopher Roker and duly seconded, the resolution was unanimously adopted by the Board.

#### **ACTION ITEM**

A **fourth** resolution was presented by Christopher Roker, Chair for Finance Committee, for Board approval.

*Authorizing the Executive Director of MetroPlus Health Plan, Inc. ("MetroPlus" or the "Plan"), to increase the spending authority for the contract with **Health Management Systems ("HMS")** dated April 1, 2021, and*

*to allocate additional funds for third party health insurance ("TPHI") identification and recovery services for the fulfillment of the contract for an amount not to exceed \$13,896,160 for the total 5-year term.*

Lauren Leverich, Chief Financial Officer, provided a detailed overview of the Background, SOW Overview, Justification for Increase and Spending Authority Request.

Board Members asked for clarification regarding projected spending and membership; Lauren Leverich responded, and Dr. Schwartz shared additional comments.

There being no further questions or comments, on a motion by Christopher Roker, and duly seconded, the resolution was unanimously adopted by the Board.

#### **ACTION ITEM**

A **fifth** resolution was presented by Vallencia Llyod, Chair for the Customer Experience and Marketing Committee, for Board approval.

*Authorizing the submission of a resolution to the Board of Directors of the New York City Health and Hospitals ("NYC Health + Hospitals"), to authorize the Executive Director of MetroPlus Health Plan, Inc. ("MetroPlusHealth" or "the Plan") **to increase the spending authority for each of the contracts with Prager Creative LLC, Bellweather LLC and to allocate additional funds for media buying, creative advertising & marketing, digital content & social media, and public relations services** for the fulfillment of the contract for an amount not to exceed \$35,000,000 for the total 5-year term.*

Laura Santella-Saccone, Chief Marketing and Brand Officer began by discussing the Background, Our Evolution, Investment Driving Website Traffic, Is It Working, Justification for Increase Allocation and Spending Authority Request.

There being no further questions or comments, on a motion by Vallencia Lloyd, and duly seconded, the resolution was unanimously adopted by the Board.

#### **ACTION ITEM**

A **sixth** resolution was presented by Vallencia Lloyd, Chair for the Customer Experience and Marketing Committee, for Board approval.

*Authorizing the Executive Director of MetroPlus Health Plan, Inc. ("MetroPlus" or the "Plan"), to execute a single source contract with **Axion Healthcare ("Axion")** for call center overflow services for an amount not to exceed \$550,000 for the total one-year term of the contract.*

Lila Benayoun, Chief Operating Officer, provided a detailed overview of the Background, Single Source Justification, Scope of Work, Vendor Highlights, Vendor Experience and Board Approval Request.

Vallencia Lloyd commented on the projected Q1 call volume increase and the abandonment rate; Dr. Sanjiv Shah shared an additional comment regarding CAPHS surveys.

Sally Hernandez-Piñero shared additional comments.

There being no further questions or comments, on a motion by Vallencia Lloyd and duly seconded, the resolution was unanimously adopted by the Board.

**ACTION ITEM**

A **seventh** resolution was presented by Dr. Eric Wei, Chair for Quality Assurance & Performance Improvement Committee (QAPI), for Board approval.

*Authorizing the Executive Director of MetroPlus Health Plan, Inc. ("MetroPlus" or the "Plan"), to increase the spending authority for the contract with **Reveleer** dated September 1, 2021, and to allocate additional funds for medical record review software services for the fulfillment of the contract for an amount not to exceed \$1,443,000 for the total 5-year term.*

Dr. Sanjiv Shah, Chief Medical Officer, presented a summary of the Background and a General Overview of Reveleer's Services.

There being no further questions or comments, on a motion by Dr. Eric Wei, and duly seconded, the resolution was unanimously adopted by the Board.

**ACTION ITEM**

An **eighth** resolution was presented by Dr. Eri Wei, Chair for Quality Assurance & Performance Improvement Committee (QAPI), for Board approval.

*Authorizing the Executive Director of MetroPlus Health Plan, Inc ("MetroPlus" or "the Authorizing the Executive Director of MetroPlus Health Plan, Inc. ("MetroPlus" or the "Plan"), to increase the spending authority for the contract with **Healthix, Inc. ("Healthix")** dated September 1, 2021, and to allocate additional funds for HEDIS 360 Encounter Data services for the fulfillment of the contract for an amount not to exceed \$425,000 for the third year of the initial term and each of the one-year optional renewals.*

Dr. Sanjiv Shah, Chief Medical Officer, provided an overview of the Contract Background, Healthix Current Performances/Services, ADT Feed Impacted Facilities, Healthix - Hedis 360 and Board Approval Request.

Dr. Schwartz asked a question about applications of Hedis across all areas; Dr. Sanjiv Shah responded.

Matthew Siegler, Board Member, advised that he sits on the Board of Directors at Healthix, therefore, recusing himself from voting on this Action Item.

There being no further questions or comments, on a motion by Dr. Eric Wei, and duly seconded, the resolution was unanimously adopted by the Board.

**ACTION ITEM**

A **ninth** resolution was presented by Dr. Eric Wei, Chair of the Quality Assurance and Performance Improvement Committee (QAPI), for Board approval.

*Authorizing the Executive Director of MetroPlus Health Plan, Inc. ("MetroPlus") to negotiate and execute a contract with **InquisitHealth, Inc. ("InquisitHealth")** to provide administration of Peer Coaching*



*services for a term of three years with two options to renew for one year each, solely exercisable by MetroPlus for an amount not to exceed \$850,000 per year.*

Dr. Sanjiv Shah, Chief Medical Officer, provided an overview of the Background, Overview of Procurement, RFP Criteria, The Evaluation Committee Selection Rationale, Clinical Impact of Inquisit Collaboration, Enrollment, Financial Impact of Inquisit Collaboration and Service Model.

Board Members asked a question regard HEDIS scores; Dr. Shah responded.

There being no further questions or comments, on a motion by Dr. Eric Wei, and duly seconded, the resolution was unanimously adopted by the Board.

**ACTION ITEM**

A **tenth and final** resolution was presented by Robert Micillo, Chief Information Security Officer, for Board approval.

*MetroPlus Health Plan Inc. ("MetroPlus") seeks the Executive Committee's approval for continuation of **the Plan's Cybersecurity Program**.*

Robert Micillo began his presentation by discussing the New BYS/DFS Cybersecurity Regulation and Timeline, Risks and Reportable Security Events, Annual Security and Privacy Risk Assessment and Security Posture for Local Competition.

There being no further questions or comments, on a motion by Robert Micillo, and duly seconded, the resolution was unanimously adopted by the Board.

Sally Hernandez-Piñero shared an end of the year message thanking everyone for their hard work throughout the year.

Due to time constraints, we were unable to cover New Business, however, Dr. Schwartz advised that the Strategic Pillars for 2024 are outlined in the meeting packet. The Q1 2024 Board Meeting will speak about the 2024 Strategic Pillars in greater detail.

There being no further business, Sally Hernandez-Piñero adjourned the meeting at 1:01 P.M.

**SUMMARY OF MEETING**

**HHC ACO INC. BOARD OF DIRECTORS (VIRTUAL)**

As Reported by: Dr. Mitchell Katz

Members Present: Matthew Siegler, Dr. Gary Kalkut, Andrea Cohen, Esq., Nicole Jordan-Martin, Dr. Jasmin Moshirpur, Dr. Daniel Napolitano, Hyacinth Peart, Dr. Warren Seigel, Dr. Edward Chew

The Board of Directors of HHC ACO Inc. (the "Board"), NYC Health + Hospitals' subsidiary not-for-profit Accountable Care Organization (the "ACO"), convened on December 12, 2023 at 2:02 p.m. Dr. Mitchell Katz, Chair of the Board called the meeting to go over the Findings and Required Disclosures by Grant Thornton LLP on the audit of HHC ACO Inc.'s Financial Statements for the fiscal year ended June 30, 2023, give an update on the PY 2022 Finalized Distribution payment amounts, review the PY 2023 Shared Savings Forecast, discuss the

upcoming MSSP Contract Renewal, and review the ACO's clinical plan for Reducing Avoidable Admissions: Driver Diagram.

Upon motion made and duly seconded the minutes of the September 29, 2023 Board meeting was unanimously approved.

The Board considered the following resolution:

**Acceptance by the Board of Directors of the ACO of the report of Grant Thornton LLP, the ACO's independent auditors, and the audited financial statements of the ACO for the fiscal year ended June 30, 2023.**

The motion was duly seconded and unanimously approved by the Board.

Among other matters, the Board discussed the following:

- The ACO's Proposed Board Meetings for 2024.

#### **ADJOURNMENT**

There being no old business, nor new business, the meeting was adjourned at 2:32 pm.

**Mitchell H. Katz, MD**  
**NYC HEALTH + HOSPITALS - PRESIDENT AND CHIEF EXECUTIVE OFFICER**  
**REPORT TO THE BOARD OF DIRECTORS**  
**December 14, 2023**

#### **NYC HEALTH + HOSPITALS FACILITIES GET FESTIVE**

NYC Health + Hospitals facilities across the five boroughs are hosting Christmas tree and menorah lighting ceremonies in conjunction with community groups and leaders. Many of our sites will celebrate Kwanzaa when it begins on Tuesday, December 26, and Three Kings Day on Saturday, January 6. Toy drives and toy distributions are a large part of the holiday effort to spread joy, with many of the sites partnering with MetroPlusHealth to ensure that all children who receive care or enter our facilities receive a gift. The facilities focus not only on their pediatric units, but also look to their social work teams and Women's Health departments to distribute gifts. It is also through generous community toy drives and donations that our facilities can answer this need for the thousands of children who receive care or accompany their parents through our doors.

Our post-acute facilities are also celebrating the season, focusing on their residents. One site is giving every resident a gift with a card from the CEO, while another is engaging the community to "adopt-a-resident" for the holidays. Most, if not all, of our post-acute facilities will have special holiday dinners for residents who don't have family or visitors nearby.

#### **RESPONDING TO THE HUMANITARIAN CRISIS - SERVICES FOR ASYLUM SEEKERS**

NYC Health + Hospitals continues to be a cornerstone of the City's response to the historic humanitarian crisis. Our 16 humanitarian centers provide life-changing assistance to the 23,000 asylum seekers in our care, roughly three-quarters of whom are families with children. Here, they receive dignified, compassionate treatment and on-site resources, paving the way towards a brighter future.

Since the crisis began, NYC Health + Hospitals has ensured new arrivals, many of whom have long been deprived care and arrive in extremis, are [provided critical medical services](#). Staff at the [Arrival Center have now registered approximately 85,000 asylum seekers](#), offering medical and behavioral health screenings, on-site vaccinations, health insurance enrollment, case work and reconnection services to all new arrivals to New York City.

As our knowledge of how to best assist asylum seekers has evolved, so has our response. We recently enhanced our case management services with partners who have national expertise providing high-quality, cost-effective services. With two monthly case management touchpoints, we will provide regular check-ins and assistance to help asylum seekers achieve their goals as effectively and expeditiously as possible. Our expanded case management effort will help our guests complete their journeys, reducing the number of people currently staying in shelters.

Similarly, early this year, our staff surveyed guests at several facilities to determine which meals are most popular and to ensure culturally-relevant food options are provided for people from all over the world, including our many guests from Latin and South America. The results of that effort and other food

tracking measures are in: Guests are currently consuming 95% of the 430,000 meals we serve each week, ensuring our guests are well-fed and little food is wasted.

Earlier this week, Dr. Ted Long attended a City Council to share some of these results and answer questions about the food served in asylum seeker shelters.

#### **JUST HOME PUBLIC HEARING**

Yesterday at NYC Health + Hospitals/Jacobi the Board of Directors held a public hearing on the Just Home project. The project is a joint effort between NYC Health + Hospitals and the NYC Department of Housing Preservation & Development (HPD) to house New Yorkers with complex medical needs after they leave jail. Patients with health issues such as congestive heart failure, stage 4 cancer, and end-stage renal disease cannot be placed in the City's homeless shelters and would be eligible for this program.

The project will offer much needed affordable housing. Just Home will create approximately 83 studio apartments and a two-bedroom apartment for a live-in superintendent, in a vacant building at 1900 Seminole Avenue on the NYC Health + Hospitals/Jacobi campus in the Bronx. Correctional Health Services, a division of NYC Health + Hospitals and the direct provider of health care in the City's jails, will identify patients based on clinical and other needs. Just Home will help these patients through intensive, on-site social services provided by licensed clinical social workers, dedicated peer workers, and specialists, and they will have the added benefit of being close to the health services at Jacobi Hospital. The Fortune Society will act as the developer, manager, and social service provider for the project. Fortune Society's Castle Gardens residence, which opened in 2010 and has become an integral and valued part of the West Harlem community, serves as a model for Just Home.

#### **NYC HEALTH + HOSPITALS/GOTHAM HEALTH, MORRISANIA RECOGNIZED AS CENTERS FOR DISEASE CONTROL AND PREVENTION MILLION HEARTS HYPERTENSION CONTROL CHAMPION**

NYC Health + Hospitals facilities continue to do outstanding work controlling chronic disease. This year, the American Heart Association awarded 17 NYC Health + Hospital sites Gold recognition for reducing Type 2 Diabetes, and Gold+ recognition for hypertension control; their highest-level awards for both categories. Morrisania was also recognized by the CDC as a Million Hearts Hypertension Control Champion for helping at least 80% of its patients achieve hypertension control. Morrisania is the only health care organization in New York State to be recognized this year.

In October we announced that all 11 acute hospitals and seven Gotham Health primary cares sites were recognized by the American Heart Association for their work helping patients manage their diabetes. 17 sites received Gold status, the highest recognition, for having fewer than 25% of patients with poorly controlled diabetes while also maintaining hypertension control rates above 70%. This is the first year NYC Health + Hospitals had applied for this recognition, and the results highlight positive outcomes in the way we are managing diabetes in our communities.

**HEALTH CARE ACCESS WEBINARS HOSTED BY NYC HEALTH + HOSPITALS, NYC MAYOR'S PUBLIC ENGAGEMENT UNIT, NY STATE OF HEALTH, NYC HUMAN RESOURCES ADMINISTRATION, AND NYC DEPARTMENT OF HEALTH AND MENTAL HYGIENE**

On December 5 and 6, NYC Health + Hospitals' NYC Care program, the NYC Mayor's Public Engagement Unit's (PEU) GetCoveredNYC program, NY State of Health, the NYC Human Resources Administration's (HRA) Office of Citywide Health Insurance Access, and the NYC Department of Health & Mental Hygiene (DOHMH) hosted a virtual webinar series to inform New Yorkers about the health insurance and health care access programs available to them. The information sessions streamed on Facebook in English and Spanish, and recordings are available for those who were unable to join the live sessions. The sessions, the second iteration of a series launched last year, are for all New Yorkers weighing the health insurance options available to them during the open enrollment period for health insurance from NY State of Health. The webinars feature an overview of the range of insurance options, the role of participating agencies in supporting enrollment, and they conclude with a question and answer segment open to the public. The speakers encourage all New Yorkers, regardless of immigration status or ability to pay, to seek the primary, specialty, and preventive care they need to lead longer, healthier lives.

**PLANETREE INTERNATIONAL RECOGNIZES THREE ADDITIONAL NYC HEALTH + HOSPITALS LOCATIONS FOR THEIR COMMITMENT TO ENHANCING THE STAFF, PATIENT AND FAMILY EXPERIENCE IN HEALTH CARE SETTINGS**

Three additional NYC Health + Hospitals facilities have been certified by Planetree International for excellence in person-centered care, bringing the total number of our facilities recognized by Planetree to nine. Planetree works with organizations across the globe to enhance staff, patient and family experiences in health care settings. Over a span of three years, these sites met several criteria to provide high-quality care, improve clinical outcomes, enhance patient experience, and develop workforce recruitment and retention. Planetree's model of patient, family, staff, and community engagement has improved patient outcomes, lowered rates of staff burnout, and lowered costs. For the first time, the organization recognized NYC Health + Hospitals/Lincoln, Queens, and Woodhull. NYC Health + Hospitals/Coler also received an honorable mention in their improvement and dedication of person-centered care practices, especially in their commitment to engaging their residents and staff.

The criteria for person-centered care include: partnering with patients and their loved ones, which can include shared decision-making, compassionate and empathetic communication, and having the patient identify their treatment goals; increasing family involvement and presence in all aspects related to patient care; supporting providers and staff, which can include emotional support and participation in decisions that impact their work; tailoring care to meet the individual needs, values and preferences of patients and their loved ones; and making data-driven improvements, including data on clinical quality, patient experience, and staff and provider engagement and well-being.

The newly recognized facilities are joined by the first cohort who received certification earlier this year: NYC Health + Hospitals/Bellevue; Elmhurst; Jacobi; Kings County; Gotham Health, East New York; and Gotham Health, Morrisania.

## **NEW COMMUNITY MURALS UNVEILED AT NYC HEALTH + HOSPITALS/CARTER AND GOTHAM HEALTH, MORRISANIA**

Two new murals have been unveiled at our health System as part of the Community Mural Project run by the health system's Arts in Medicine department.

Last week, NYC Health + Hospitals/Carter celebrated their new mural, *Chromatic Symphony of Greater Harlem* by artist Ji Yong Kim. The mural pays tribute to the diverse and rich history of Harlem, with a kaleidoscope of elements representing the area's cultural heritage. The artist spotlights dedicated hospital workers, flanked by a Bomba dancer on the left and a tap dancer on the right. Around these central figures, musical instruments, street scenes, historical figures, modes of transportation, and a profusion of plants and flowers collectively reflect the richness of Latin culture in the neighborhood. *Chromatic Symphony of Greater Harlem* celebrates the community's heritage, achievements and struggles, highlighting its profound contributions to various facets of life, including art, music, literature, politics, and social justice.

Yesterday, NYC Health + Hospitals/Gotham Health, Morrisania unveiled its new mural, *Each and Every Day: Simple but Full of Love* by artist Yukiko Izumi. The mural celebrates the mission of Morrisania, the staff's commitment to the community, and their pride in being part of the Bronx. The artist included symbols throughout the mural, including flowers, butterflies, hearts, and the sun, all celebrating life. On the right side of the mural, community members engage in daily routines. These seemingly ordinary moments reveal the beauty and strength of daily existence. Progressing leftward, the mural transitions into a portrayal of the inner workings of the facility, including a doctor with an x-ray, a dentist with a child, a pregnant woman, and families. These scenes emphasize the dedication and compassion of the hospital staff in their daily duties and the extraordinary aspects within the routine. The mural also highlights the distinctive roles played by each department within the facility, while incorporating elements that authentically capture the essence of the Bronx.

Both murals were developed through a series of focus groups with community members, staff and patients and brought to life at a paint party where people from the community were invited to paint the mural as a group. The Community Mural Project is believed to be the country's largest public hospital mural program since the 1930s. The nine new murals will add to the 26 murals created in the first wave of the project. This program is made possible through the generous support of the Laurie M. Tisch Illumination Fund.

## **NYC HEALTH + HOSPITALS PRESENTS FIRST-EVER EXHIBITION TO SHOWCASE ART FROM BOTH RIKERS ISLAND AND ITS OWN COLLECTION**

On Tuesday, December 5, NYC Health + Hospitals presented *Creating Within: Art from Rikers and the NYC Health + Hospitals Art Collection*, the health System's first-ever exhibition to showcase creative works by individuals detained on Rikers Island, alongside selections from its own art collection. *Creating Within* invites viewers to reflect on and celebrate, the power of creative expression to sustain health and wellness, to support self-empowerment and to transcend literal and abstract restraints under even the most challenging conditions. It features art, songs, and writing by participants in NYC Health +

Hospitals/Correctional Health Services' (CHS) Creative Arts Therapy program - the oldest and largest jail-based arts therapy program in the nation - and complementary works from the health system's art collection, one of the largest public art collections in New York City. The exhibition is on display at NYC Health + Hospitals/Woodhull for staff and patients through March 2025. It is accessible to the public internationally through the [Bloomberg Connects app](#) and [CHS website](#).

**TEN LEADERS AT NYC HEALTH + HOSPITALS AND METROPLUSHEALTH RECOGNIZED AS POWER PLAYERS IN HEALTH CARE BY MEDIA OUTLETS amNY AND POLITICSNY**

Ten leaders from across the health system and MetroPlusHealth were added to the PoliticsNY and amNY Metro 2023 Power Players in Health Care list, recognized as pioneering individuals and political heavyweights whose unwavering commitment to excellence is leading New York's health care industry into a future defined by innovation, compassion, and improved health outcomes for all. The list includes NYC Health + Hospitals Senior Vice President and Chief Medical Officer Mabelle Allen, MD; NYC Health + Hospitals/Bellevue CEO William Hicks; NYC Health + Hospitals President and CEO Mitchell Katz, MD; NYC Health + Hospitals/South Brooklyn Health CEO Svetlana Lipyanskaya, MPA; NYC Health + Hospitals/Jacobi and North Central Bronx CEO Christopher Mastromano; NYC Health + Hospitals/Kings County CEO Sheldon McLeod; MetroPlusHealth Chief Growth Officer Roger Milliner; NYC Health + Hospitals/Elmhurst and Queens Chief Medical Officer Jasmin Moshirpur, MD; Chair of the Board José Pagán, PhD; and MetroPlusHealth President and CEO Talya Schwartz, MD. The 2023 Power Players in Health Care list is part of a monthly series by PoliticsNY and amNY Metro on New York's Power Players, including business executives, educators, government affairs experts, and nonprofit directors.

**CEO OF NYC HEALTH + HOSPITALS/COMMUNITY CARE NICOLE JORDAN-MARTIN RECEIVES 2023 EMPIRE WHOLE HEALTH HEROES AWARD**

Nicole Jordan-Martin, MPA, FACHE, the Executive Director and CEO of NYC Health + Hospitals/Community Care, has been named one of 25 recipients of the prestigious 2023 Empire Whole Health Heroes Awards. This recognition is a joint initiative of Crain's New York and Empire BlueCross BlueShield to honor individuals who have made exceptional contributions to promoting whole health initiatives in New York City. The 2023 Empire Whole Health Heroes Award recipients were recognized for leading health care innovation and driving community impact.

**EXTERNAL & COMMUNITY AFFAIRS UPDATE**

**City:** Representatives from NYC Health + Hospitals/Metropolitan and NYC Health + Hospitals/Elmhurst attended an East Harlem and Corona, Queens Mayoral town hall in December.

**State:** The 2024 New York State legislative session will begin on January 3, 2024 and conclude on June 6, 2024. Governor Hochul is scheduled to deliver her State of the State Address on January 9th, which will highlight her legislative and budget priorities for the 2024 session. We continue to work with the

Governor, the Assembly, and the Senate to support the ongoing needs of safety net hospitals.

**Federal:** Last month, Congress passed a Continuing Resolution to keep the government open into 2024, with one tranche of government funding now running out on Jan. 19 and the other on Feb. 2. The Medicaid Disproportionate Share Hospital (DSH) cuts were delayed until January 19. We will continue to advocate for the DSH cuts to be eliminated, and there is broad support for doing so.

**Community Affairs:** The Community Affairs team continued to meet with the Community Advisory Boards through November and December, attending a total of 19 CAB meetings this fall and two in the new year to come. The team also hosted a holiday party for the Council of CABs during their December meeting, including a festive dinner and some holiday décor. The CABs will be important partners in our State advocacy in Albany in the coming year.

We completed hosting four Health Insurance Symposiums in partnership with CMS, NY State of Health, and NYC Care. Each symposium included presentations from CMS, the NY State Department of Health, the Office of Citywide Health Insurance Access, and NYC Care. The symposium was held at Woodhull, Elmhurst, Bellevue, and Lincoln and were attended by community partners, hospital staff, and community members.

#### **EMERGENCY CONTRACTS**

Since the last meeting of the Board of Directors, I have authorized two increases to previously reported HERRC contract deviations to the Board:

- The first of these concerns our rental of space on Hall Street in Brooklyn that I approved on June 27, 2023 with a ceiling of \$22,070,003 for construction and \$22,162,590 for rent and other occupancy costs. As the City's need for additional space for migrant asylum seekers grew, we exercised our option to almost double the footprint of the project. The projected operating costs will correspondingly increase as will the construction costs to prepare the space for asylum seekers. With these increases, the total construction cost for improvements to Hall Street are projected at \$53,384,294 and the total 18-month projected operating cost will be \$41,859,013. We have also allowed for an additional \$15,000,000 to pay for alterations to a previously renovated part of the property. While nothing is planned or approved yet, there may be a future decision to alter part of the property to be suitable for a different service delivery model. This would involve putting up partial walls to make separate "pods" for each family unit. This work and the associated expenditure would be made only with further explicit OMB approval.
- The second modification to a previous exception made May 31, 2023 concerns the property we leased at 320 West 31st Street in Manhattan. There, we have had to reimburse unexpectedly high insurance costs but that increase is partially offset by terminating the agreement five months early after only 5 months of operation. The net effect of these developments is a net increase of \$22,714 to bring the number to \$8,236,414.



I also recently approved an exception to policy to permit a six-month continuation of 21 CBO agreements, which were procured through an RFP process. The initial term of the agreement was February 2022 through October 2023 with a budget of \$4.93 million. The additional amount is not to exceed \$1.1 million. These contracts support education, outreach and NYC Care enrollment assistance. An RFP is being conducted that will replace these contracts prior to their expiration.

#### **NEWS AROUND THE HEALTH SYSTEM**

- [New York City Health + Hospitals hosts migrant families for Thanksgiving](#)
- [Lifestyle Medicine program expands to NYC Health + Hospitals/King's County](#)
- [Building Resiliency At Ruth Bader Ginsburg Hospital](#)
- [New mural unveiled at NYC Health + Hospitals/Coler](#)
- [World AIDS Day marked with events raising awareness across New York City](#)
- [Inside the Migrant Crisis](#)
- [A Famed Hospital Churns Poor Patients Through Weight-Loss Surgery](#)
- ['Healthy and Affordable': EveryTable Launches in Jacobi Hospital, Offering New Meal Choices](#) (pg. 18)
- [DRIVE TIME: Rikers inmates make art for display in NYC hospital](#)

**RESOLUTION - 03**

Approving the following appointments of Directors to the Committees of the Board of Directors of New York City Health and Hospitals Corporation (the **Board**) effective January 12, 2024 to complete the current terms of such appointments: Anne Williams-Isom to the Capital Committee; Molly Wasow Park to the Capital Committee and Jackie Rowe-Adams to the Community Relations Committee in the capacity of Chairperson.

and

Approving the appointment of Anne Williams-Isom to the Board of Directors of the New York City Health and Hospitals Corporation's subsidiary, HHC Capital Corporation.

**WHEREAS**, there are several unexpected vacancies on the Board's Committees and on the Board of Directors of HHC Capital Corporation; and

**WHEREAS**, the Chairperson has proposed appointments of Directors to the Board's Committees and to the Board of Directors of HHC Capital Corporation; and

**WHEREAS**, the appointments made by this Resolution shall not alter the annual cadence of Committee and subsidiary appointments it being intended that this Resolution shall merely make appointments to serve until the next set of annual appointments are made.

**NOW, THEREFORE, BE IT RESOLVED** that the following appointments of Directors to the Committees of the Board of Directors of New York City Health and Hospitals Corporation (the **Board**) effective January 12, 2024 to complete the current terms of such appointments are approved: Anne Williams-Isom to the Capital Committee; Molly Wasow Park to the Capital Committee and Jackie Rowe-Adams to the Community Relations Committee in the capacity of Chairperson.

and

**IT IS FURTHER RESOLVED** that the appointment of Anne Williams-Isom to the Board of Directors of the New York City Health and Hospitals Corporation's subsidiary, HHC Capital Corporation, is also approved.