

BOARD OF DIRECTORS MEETING

THURSDAY, MARCH 28, 2024

A•G•E•N•D•A•

**CALL TO ORDER - 2:00 PM**

Mr. Pagán

**1. Executive Session | Facility Governing Body Report**

- NYC Health + Hospitals | Gouverneur Nursing Facility
- NYC Health + Hospitals | Coler Long Term Care and Rehabilitation Center

**Semi-Annual Governing Body Report (Written Submission Only)**

- NYC Health + Hospitals | Harlem

**2. OPEN PUBLIC SESSION - 3:00 PM**

**3. Adoption of the Board of Directors Meeting Minutes – February 29, 2024**

Mr. Pagán

**4. Chair's Report**

Mr. Pagán

**5. President's Report**

Dr. Katz

6. Authorizing New York City Health and Hospitals Corporation (the "System") to execute contracts **with Rapid Reliable Testing NY LLC dba DocGo Inc., Medrite LLC dba Medrite Urgent Care, Cherokee Nation Management and Consulting, LLC, and Essey Group LLC dba The TempPosition Group of Companies for HERRC site administration staffing services** at a not to exceed amount of \$192,000,000 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: 03/11/2024)

Ms. Wang

**Vendex: All Approved**

**EEO: Approved: Medrite LLC and Cherokee Nation Management and Consulting LLC**

**Pending: Rapid Reliable Testing NY LLC and Essey Group LLC**

7. Authorizing New York City Health and Hospitals Corporation (the "System") to execute contracts with **Medrite LLC dba Medrite Urgent Care, Rapid Reliable Testing NY LLC dba DocGo Inc., Acuity International, LLC (legacy: Comprehensive Health Services, LLC), and RCM Technologies (USA) Inc. dba RCM Health Care Services for HERRC clinical staffing services** at a not to exceed amount of \$211,300,000 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: 03/11/2024)

Ms. Wang

**Vendex: Approved: Medrite LLC, Rapid Reliable Testing NY LLC and RCM Technologies USA Inc.**

**Pending: Acuity International LLC**

**EEO: Approved: Medrite LLC and RCM Technologies USA Inc.**

**Pending: Rapid Reliable Testing NY LLC and Acuity International LLC**

8. Authorizing New York City Health and Hospitals Corporation (the "System") to execute and agreement with **Gallagher Bassett Services, Inc. for the provision of Medical Malpractice Claims Management Services** on behalf of the System for an initial period of three-years with two one-year renewal options, exercisable at the discretion of the System. The not-to-exceed amount for the anticipated five-year term is \$35,850,000  
(Presented to the Finance Committee: 03/11/2024)

Ms. Wang

**Vendex: Approved / EEO: Pending**

9. Authorizing New York City Health and Hospitals Corporation (the “System”) to sign a 10-year lease with **Coney Island Associates Retail 2 LLC (“Developer”)** for approximately 6,250 sq. ft. on the 1<sup>st</sup> floor of a to-be-constructed building at 2932 West 16<sup>th</sup> Street in Coney Island (the “Premises”) to house the Behavioral Health and Chemical Dependency practice (the “Practice”) of the Ida G. Israel Community Health Clinic (the “Clinic”) operated by NYC Health + Hospitals/South Brooklyn Health (the “Facility”) now operating on an adjacent lot for a yearly rent of \$25/sq. ft. to be escalated by 10% after 5 years plus the provision of 10 parking spaces charged at \$150/month for each parking space; provided that Developer will build out the Premises to the System’s specifications within a budget of \$2.5M, with the System paying Developer \$2M of this expense ; and provided further that the System shall hold two 5-year options to renew the lease with the rent during the first renewal term to be at the higher of 95% of fair market value or 10% over the prior rent and with the rent for the second renewal term to be at a 10% increase over the prior rent with the rent over the entire potential 20-year term totaling approximately \$3,985,781  
(Presented to the Capital Committee: 03/11/2024)  
**Vendex: NA / EEO: NA**

Mr. Pagán

10. Authorizing the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to execute a contract with **Holt Construction Corp. (the “Contractor”), to undertake a gut renovation at NYC Health + Hospitals/Jacobi Medical Center’s (“Jacobi”) 11E operating rooms**, along with dedicated support areas to maximize efficient use of Jacobi and to modernize and meet the needs of an expanding community, for a contract amount of \$8,128,692 with a 15% project contingency of \$1,219,304 to bring the total cost not to exceed \$9,347,996.  
(Presented to the Capital Committee: 03/11/2024)  
**Vendex: Approved / EEO: Approved**

Mr. Pagán

11. Authorizing the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to execute a contract with **Crescent Contracting Corp. (the “Contractor”), to undertake a project to install sprinklers and fire alarms in the administrative offices of Building #4 of NYC Health + Hospitals/Jacobi Medical Center** for a contract amount of \$8,251,375, with a 15% project contingency of \$1,237,706, to bring the total cost not to exceed \$9,489,081  
(Presented to the Capital Committee: 03/11/2024)  
**Vendex: Approved / EEO: Approved**

Mr. Pagán

12. Authorizing the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to execute a contract with **Ark Systems Electrical Corp. (the “Contractor”), to undertake a fire alarm upgrade of Building #1 of NYC Health + Hospitals/Jacobi Medical Center** for a contract amount of \$10,800,000, with a 15% project contingency of \$1,620,000, to bring the total cost not to exceed \$12,420,000  
(Presented to the Capital Committee: 03/11/2024)  
**Vendex: Approved / EEO: Approved**

Mr. Pagán

13. Authorizing the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to execute a contract with **Atlantic Specialty, Inc. (the “Contractor”), to undertake a parking garage renovation project of the main building of NYC Health + Hospitals/Lincoln** for a contract amount of \$4,708,790, with a 20% project contingency of \$941,758, to bring the total cost not to exceed \$5,650,548  
(Presented to the Capital Committee: 03/11/2024)  
**Vendex: Approved / EEO: Approved**

Mr. Pagán

## COMMITTEE AND SUBSIDIARY REPORTS

- Equity Diversity and Inclusion Committee
- Community Relations Committee
- Capital Committee
- Finance Committee
- HHC Accountable Care Organization (Subsidiary)

>>Old Business<<  
>>New Business<<  
>>Adjournment<<

Dr. Marthone  
Ms. Rowe-Adams  
Mr. Pagán  
Ms. Wang  
Dr. Katz

Mr. Pagán

**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 **29th day of February, 2024** 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:

Mr. José Pagán  
Dr. Mitchell Katz  
Ms. Anne Williams-Isom - Left at 3:00p.m.  
Ms. Erin Kelly - Joined at 3:00p.m.  
Dr. Vincent Calamia  
Ms. Karen St. Hilaire  
Dr. William Fisher  
Dr. Michelle Morse  
Ms. Anita Kawatra  
Ms. Freda Wang  
Ms. Jackie Rowe-Adams  
Ms. Barbara Lowe

José Pagán, Chair of the Board, called the meeting to order at 2:04 p.m. Mr. Pagán chaired the meeting and Colicia Hercules, Corporate Secretary, kept the minutes thereof.

Mr. Pagán noted that Dr. William Fisher is representing Deepa Avula, Ms. Karen St. Hilaire is representing Molly Wasow Park, and Dr. Michelle Morse is representing Ashwin Vasan - all in a voting capacity.

Mr. Pagán noted for the record that Sally Hernandez-Piñero is participating virtually in a listening capacity.

**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 3:30 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, and Dr. Michelle Morse is representing Ashwin Vasan - all in a voting capacity.

Mr. Pagán also noted for the record that Sally Hernandez-Piñero is participating virtually in a listening capacity.

### **ACTION ITEM 3 - ADOPTION OF MINUTES**

The minutes of the Board of Directors meeting held on January 25, 2024 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 January 25, 2024, 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/Lincoln and NYC Health + Hospitals/Kings County.

The Board also received and approved the semi-annual governing body written report from NYC Health + Hospitals/Queens.

### **VENDEX APPROVALS**

Mr. Pagán noted there is one item on the agenda requiring Vendex approval, the item has that approval. There are no items from previous Board meetings pending Vendex approval.

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

### **ACTION ITEM 6:**

Dr. Calamia read the resolution

Authorizing New York City Health and Hospitals Corporation (the "System") to execute agreements to create a pool of vendor contracts with each of the following vendors: **Forerunne Technologies, Inc., Mason Technologies Inc., Coranet Corp and Interface Cable Assemblies & Services (ICAS) for the provision of Cabling Services** on behalf of the System for an initial period of three-years with two one-year renewal options, exercisable at the discretion of the System, for an amount not to exceed \$85,000,000 over the potential five-year term:

And to permit the System to add additional vendors to the pool should the need for additional vendors arise and should such vendors meet the same minimum criteria and receive from an evaluation committee a score of 7.25

or greater.

(Presented to the Medical and Professional Affairs / Information Technology Committee: 02/05/2024)

Kim Mendez, Senior Vice President, provided an overview of the historical RFP with the cabling vendors, contract, services and outlined the need for additional vendors to the vendor pool and a rationale for the additional authorization. The RFP criteria and procurement process were discussed. Two of the four vendors are 100% MWBE, with the other two at a 30% MWBE goal. The overall vendors' performance history rating was satisfactory.

The Board requested clarification on the second part of the resolution regarding automatic approval of additional vendors. Ms. Mendez explained that this is a contingency plan to expedite the addition of vendors without a full RFP process however this selection process of additional vendors will follow the same minimum criteria and evaluation committee review of 7.25 or greater as the original four in this resolution. The selected vendors will then be presented to the Contract Review Committee for approval and the Medical and Professional Affairs/ Information Technology Committee will be informed of the selected vendor.

In response to other questions from the Board, Jeff Lutz, Senior Assistant Vice President and Chief Technology Officer and Ms. Mendez explained that the pool of vendors is constantly changing and evolving. The plan to add additional vendors, if needed, is a precaution in the event the vendor pool shifts due to mergers, capacity and other factors that may impact timeliness of projects. When a project is released, the pool of vendors completes a mini-bid process to ensure alignment to the System's needs and capability.

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

#### **ACTION ITEM 7:**

Dr. Calamia read the resolution

Authorizing New York City Health and Hospitals Corporation (the "System") to enter into the **following two agreements with State University of New York Health Science Center at Brooklyn, a/k/a Downstate Health Sciences University ("DHSU") each to run through June 30, 2028 for a total not-to-exceed \$98,990,812 which includes a 10% contingency for the full term of both agreements:**

**A clinical affiliation agreement for services at NYC Health + Hospitals/Kings County and NYC Health + Hospitals/South Brooklyn Health for a not-to-exceed of \$81,663,333; and**

**An academic affiliation agreement for medical education and post-graduate**

**medical training at NYC Health + Hospitals/Kings County for a not-to-exceed of \$17,327,479.**

(Presented Directly to the Board: 02/29/2024)

Vendex: NA / EEO: NA

Dr. Machelles Allen, Senior Vice President and System Chief Medical Officer provided background information on the previously approved System affiliation agreement with SUNY Downstate Health Sciences University (SUNY-DHS) and current state of proposed agreements. Dr. Allen also provided the guiding principles driving the affiliation agreement, highlighting that the contract proposal does NOT address any aspect of the reorganization proposal for SUNY Downstate Health Sciences University. The System's affiliation contract budget through June 30, 2028 for SUNY-DHS and the proposed costs for the clinical services as well as the GMR program were also discussed.

Following questions from the Board, Andrea G. Cohen, Senior Vice President and General Counsel explained the rationale for separating the clinical and academic affiliation agreements with distinct functions and goals. Strategically, negotiating separate agreements helped clearly establish which expenses were associated with each agreement, and allowed the System to individually address the different issues relevant for clinical services versus the academic program.

After further questions from the Board, Dr. Allen explained that NYC Health + Hospitals/Kings County has a significantly larger clinical service provider under the SUNY affiliation agreement than Health + Hospitals/South Brooklyn Health.

As for the timing of the renewal process, Ms. Cohen added, SUNY physicians are affiliate employees under a union with a provision that requires one-year notice if there is a potential termination of contract, this ensures the System is always one-year ahead of the termination date for the renewal approval.

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

#### **ACTION ITEM 8:**

Mr. Pagán read the resolution

**Electing Sally Hernandez-Piñero to a second term as Chairperson and Frederick Covino as member of the Board of Directors of MetroPlus Health Plan, Inc.**, a public benefit corporation formed pursuant to Section 7385(20) of the Unconsolidated Laws of New York ("MetroPlus"), to serve in such capacity for five-year terms or until their successors have been duly elected and qualified, or as otherwise provided in the MetroPlus Bylaws.

(Presented Directly to the Board: 02/29/2024)

The Board and Dr. Katz thanked Ms. Hernandez-Piñero for her service as the Chair of MetroPlus Health Plan, Inc. and welcomed Frederick Covino as member of the Board of Directors of MetroPlus Health Plan, Inc.

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

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

**NYC HEALTH + HOSPITALS FACILITIES RECOGNIZE BLACK HISTORY MONTH**

The facilities and sites across the System all celebrated Black History Month in their own special way. Last week, NYC Health + Hospitals/McKinney held a wreath-laying ceremony at the facility's namesake in Green-Wood Cemetery. The facility was named in honor of Dr. Susan Smith McKinney Steward, the first African-American female doctor in New York State and the third in the nation.

**HEALTH SYSTEM WINS NINE AWARDS FOR ITS COMMITMENT TO HIGH-QUALITY PALLIATIVE CARE**

NYC Health + Hospitals received nine awards from the Center to Advance Palliative Care for its commitment to high-quality palliative care. As part of its 2023 Tipping Point Challenge, the Center to Advance Palliative Care recognized NYC Health + Hospitals/Coler as one of 15 winners and NYC Health + Hospitals/McKinney and four additional sites as honor roll recipients. The Center also recognized two individuals at NYC Health + Hospitals for their commitment to expanding their skills: Yetunde Egbeyale, RN at NYC Health + Hospitals/Coler and Valentina Forcella, RN at NYC Health + Hospitals/South Brooklyn Health.

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

From the outset of the crisis, NYC Health + Hospitals has prioritized providing essential medical care to newly arrived asylum seekers. The Arrival Center has now welcomed nearly 120,000 new arrivals, providing immediate access to essential services including screenings for communicable disease, urgent care, treatment for depression, and case management services.

The case management teams have held over 80,000 meetings to help those individuals or families with children achieve their goals, including completing asylum and work authorization applications. Thanks to this intensified case management work, over half of families with children who received a 60-day notice chose to leave the City shelter system and take the next steps forward in their journeys.

The System is now working with the City and sister agencies in planning and formulating a strategic response to the crisis by transitioning non-health services to appropriate sister agencies and retuning to the core of NYC Health + Hospitals' mission of providing health care to all.

**AS PART OF HOUSING FOR HEALTH, MORE THAN 1,100 NYC HEALTH + HOSPITAL PATIENTS HAVE BEEN SERVED BY THE MEDICAL RESPITE PROGRAM**

More than 1,100 patients have participated in the medical respite program, which offers patients experiencing homelessness a place to stay for up to 90 days while accessing expanded medical services that are not available in shelter. Medical respite is one component of the System's Housing for Health initiative. Seventy-five percent completed their medical respite stay, and nearly 300 patients were discharged from respite into more stable housing, including supportive, affordable and market housing, reuniting with their families, and assisted living placement. The majority of the remaining patients were connected to Department of Homeless Services' shelters and safe havens, while some returned to the hospital or other interim living arrangements. Currently, medical respite is fully funded by the System. NYC Health + Hospitals is the largest provider of medical respite in New York State.

**CASTLE CONNOLLY RECOGNIZES CHIEF WOMEN'S HEALTH SERVICE OFFICER AND PHYSICIANS FROM NYC HEALTH + HOSPITALS/HARLEM AND LINCOLN AS "2024 TOP BLACK DOCTORS"**

Four System hospital leaders and physicians were among 240 physicians across 30 states and 57 specialties named to Castle Connolly's list of '2024 Top Black Doctors' for their medical expertise and culturally-responsive care.

**ANDREA G. COHEN, JD, SENIOR VICE PRESIDENT AND GENERAL AFFAIRS, AND CHIEF LABOR RELATIONS OFFICER RECOGNIZED BY CRAIN'S AS "2024 NOTABLE GENERAL COUNSELS"**

Andrea G. Cohen, Esq., Senior Vice President, General Counsel and Chief Labor Relations Officer to the System was honored by Crain's '2024 Notable General Counsels' recognition list.

**NYC CARE REACHES 125,000 MEMBERS**

NYC Health + Hospitals' NYC Care program hosted an ethnic and community media roundtable at City Hall to announce reaching the milestone of 125,000 members enrolled in the program. Dr. Katz expressed comfort in knowing that patients will be provided the care they need under this program.

**MACHELLE ALLEN, MD, NAMED TO POLITICS NY AND AMNY METRO'S "2023 BLACK POWER PLAYERS" LIST**



Dr. Machelles Allen, Senior Vice President (SVP) and Chief Medical Officer (CMO), was recognized by PoliticsNY and amNY Metro on its annual "Black Power Players" list.

#### **NEW STATE OF THE ART DAVINCI ROBOT DEBUTS AT NYC HEALTH + HOSPITALS/QUEENS**

NYC Health + Hospitals/Queens has enhanced its surgical capabilities with the highly advanced da Vinci Robotic Surgical System. Inaugurated "Quincy Queens," the new da Vinci Robotic Surgical System is expected to expand surgical care and improve patient outcomes and experience at NYC Health + Hospitals/Queens.

#### **HEALTH SYSTEM REVAMPS ITS INTRANET HOMEPAGE**

The Office of Communications and Marketing launched a completely revised and redesigned INSIDER and Intranet Landing page. Dr. Katz encouraged staff and Board members to browse through the page to see all the new features.

#### **EMERGENCY CONTRACTS**

Since the last meeting of the Board of Directors, Dr. Katz has authorized two exceptions to the standard procurement rules:

#### **EveryTable**

The Board recently approved licenses for EveryTable to operate as a food vendor at NYC Health + Hospitals/Metropolitan, NYC Health + Hospitals/Jacobi, NYC Health + Hospitals/Queens, NYC Health + Hospitals/South Brooklyn and NYC Health + Hospitals/Harlem. The Board also approved contracts with Tasty Picks to operate at NYC Health + Hospitals/NCB and recently at a second location at Metropolitan. Everytable has unfortunately abruptly closed all of its East Coast operations resulting in those facilities having to replace their food vendor. EveryTable is in breach of its agreements with the System, but the company cannot be forced to maintain its operations.

To address the urgent need for Metropolitan and Jacobi to replace EveryTable, Dr. Katz authorized deviations from OP 100-6 to permit licenses with Tasty Picks to take over the locations where EveryTable was operating at NYC Health + Hospitals/Jacobi and NYC Health + Hospitals/Metropolitan. The terms will be identical to the terms previously approved for EveryTable.

We are searching for a replacement for EveryTable at NYC Health + Hospitals/Queens, NYC Health + Hospitals/South Brooklyn and NYC Health + Hospitals/Harlem.

In response to questions from the Board, Dr. Katz clarified that Everytable closed their East Coast operations approximately two months ago. They were provided a license to operate in the System's facilities. Historically, it has been difficult to find vendors who can sustain the food

operations for staff and visitors because it is not as profitable as a traditional restaurant/cafeteria. Dr. Katz suggested a different approach and a better solution to this issue, perhaps a non-profit food vendor or a different model would be helpful.

### **Interpretation Services**

Dr. Katz recently approved an extension to certain contracts that were previously approved by the Board and are undergoing an RFP process to ensure continuity of these critical patient care services during the RFP and any vendor transition. We expect these new contracts to come before the Board for approval in the next few months.

Extending by 8 months the following vendor contracts for over-the-phone-interpretation services with a not-to-exceed amount of \$15 million: Linguistica International, Propio Language Services, and Language Line Services, Inc.

Extending by 4 months the following vendor contracts for video-remote-interpretation services with a not-to-exceed amount of \$3 million: AMN Healthcare Services, Inc., and Language Line Services, Inc., with the final event of the series on March 12th at NYC Health + Hospitals/Elmhurst. The Community Affairs team and new Council of Auxiliaries Chair, Pearl John, have also been preparing for the first Council of Auxiliaries meeting of the year, set to occur on March 6th.

Following a question, Dr. Katz confirmed all essential languages are covered in the interpretation services.


### **COMMITTEE REPORTS**

Mr. Pagán noted that the Committee reports are included in the materials for 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 4:09 P.M.

  
Colicia Hercules  
Corporate Secretary

## COMMITTEE REPORTS

### AUDIT COMMITTEE TALKING POINTS – February 05, 2024

**As Reported by:** José Pagán

**Committee Members Present:** Mr. José Pagán, Dr. Machelles Allen representing Dr. Katz, and Freda Wang

The meeting was called to order by Mr. José Pagán at 11:18 A.M.

Mr. José Pagán noted for the record that Dr. Machelles Allen is representing Dr. Katz in a voting capacity and that committee members Anita Kawatra and Ms. Sally Hernandez- Piñero are participating virtually in a listening capacity only.

Mr. José Pagán asked for a motion to adopt the minutes of the Audit Committee meeting held on December 4, 2023. A motion was made and duly seconded with all in favor to adopt the minutes.

Mr. José Pagán 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 11:26 A.M.

Mr. Jose Pagán called on Joseph O'Keefe to provide an update on Internal Audits.

Mr. Joseph O'Keefe presented an Audit update the first 2 items he addressed were the External Audits being performed by the Comptroller's Office both for mental health services, which have been ongoing for a while. They are both having the same issues which is access to PHI. He mentioned that there are 14 Audits planned for FY-2024 so far, they have completed 5 audits, 6 in progress, and 3 not started.

The next item he presented was the System-Wide Review of Nurse Hiring Audit which is completed. The report should be issued shortly. He went on to mention the Patient Valuables Audit performed at Kings County he is working to implement an automated system for tracking patients' valuables.

The last item he presented was the Auxiliary Audits. They are still ongoing and are coming close to the endpoint. Some of these audits are waiting for the Accounting firm to receive information from the individual Auxiliaries so the audits can be completed.

Freda Wang asked about the patient valuables that could be improved and updated.

Mr. Joseph O'Keefe responded that he has been working with various IT and local staff to try to update the process. Much of it is done manually in which makes tracking difficult. They are trying to automate the process to more easily locate patient belongings.

Freda asked is this a systemwide solution? Is everyone working together?

Mr. Joseph O'Keefe responded yes, it is a systemwide solution and he is

working with IT and others to find a solution. The difficulty of tracking patients valuable is a commonality systemwide. We are working with EPIC to implement a systemwide solution.

Dr. Machelles Allen asked when can we find out the specifics of tracking people's belongings, their phones, and the things that tend to get lost? Is there a specific system that is being put in place? When does that get fed back?

Mr. Joseph O'Keefe responded some of it is being tracked but the patient has to file with the City if they lost something to get paid back. The health system does not handle that. We are looking at getting reports from the City that would show us exactly what complaints are being made because we do not always know if a patient filed a complaint.

Dr. Machelles Allen asked do we know a return rate?

Mr. Joseph O'Keefe responded he was not sure. He mentioned that hospital police might know certain aspects of it but he has never seen a report that reflects on missing items.

Dr. Machelles Allen mentioned we do not want to get audited year after year for the same problem. How do we know we have improved?

Freda Wang asked is there a financial impact?

Mr. Joseph O'Keefe responded that is what we are trying to determine. The system does not get a report back from the City on exact claims that are paid. So, we have no idea if a patient makes a claim from the City and whether that claim gets paid or not. We do not know the actual loss in the system as a whole, it is a loss to the City.

Dr. Machelles Allen commented we know what we are doing, but we do not get feedback from the City in terms of the patient's claim being satisfied or not. I think this is an internal discussion for us to take to another venue.

Freda Wang asked Joseph if there were findings he had summarized in the completed audits

Mr. Joseph O'Keefe responded that the findings are on the final report. They should have received some of the reports in an email this week, and that the nurse hiring audit should be going out next week.

Mr. José Pagán called on Catherine Patsos to give an update on compliance.

Ms. Catherine Patsos presented a Compliance update the first item she discussed was the fiscal year 2025 risk assessment. She mentioned her office has reviewed the oversight agency, guidance, and their work plan to find out what they are looking for, she is also looking at previous audits that were done by oversight agencies to see where we might still have some vulnerability. The OCC in conjunction with Internal Audits has prepared the draft FY-2025 risk assessment to present to the Enterprise Risk and Compliance Committee later this month.

Ms. Catherine Patsos also reported the Coalfire 2024 risk analysis has begun they are doing document production interviews for the acute care facilities this month and the neighborhood health clinics will begin in March. They are developing a policy management system. Compliance and EITS are working together to allow us to draft and revise new and existing policies and procedures throughout the system.

This will automate the review and approval process as well as the distribution of the policies to the intended audience, they are working right now on the operating procedure portion of it, but it will be expanded to include other resource documents like guidance and administrative material tip sheet.

Ms. Catherine Patsos meets every year with the program and facility CEOs to bring them up to date on what is happening in Compliance as well as review their Coalfire Compliance and Risk Reports and any kind of upcoming operating procedures that are new or revised. She also talks to them about what has been happening in the OCC, including the policy management system, the workforce member compliance survey, and the risk assessment that they all participated in. She also reviews the Compliance and HIPAA training completion rates.

Ms. Catherine Patsos also reported that this year the Medicaid Inspector General increased Compliance and HIPAA training modules into three parts, the HIPAA training is now a standalone module in which all members are currently enrolled and The Compliance training has been split into 2 modules, which are being uploaded to HR's training platform. The first module is on Fraud Waste Abuse and Payor Requirement Annual training and the second module is on Code of Conduct and Disciplinary Standards Annual Training. The overall system completion rate in 2023 is 88% compared to 85% in 2022.

She conducted a workforce member compliance survey in December last year. Some of the high-level findings are that there was an increase in the percentage of respondents who knew how to contact the Office of Corporate Compliance and their Compliance Officers as of last year the supervisors and managers are likely the 1st point of contact that staff would bring compliance issues to. Most of the respondents thought the training provided them with guidance appropriately, and that they did recall key lessons from the training and more than half of them would like to see more electronic communications from the Office of Compliance, which she will be doing.

Ms. Catherine Patsos presented the Compliance Report Metrics in the past 2 years on the compliance issues have been about the same 302 and 305. Her next slide shows the time it has taken them to resolve the compliance cases, which has reduced dramatically over the past 3 years.

Freda Wang asked what do you think attributed to that?

Ms. Catherine Patsos responded that being more efficient in streamlining cases and making sure that they get directed to the appropriate place if they're not compliance issues and also

Freda Wang asked it's not so much the nature of the case?

Ms. Catherine Patsos responded she thinks the nature of the case is pretty steady, except that the privacy cases have increased quite a bit. She presented us with the Privacy Report Metric she reported the increase in privacy cases.

They discovered different ways of identifying inappropriate access to patient records through various means including patient privacy monitoring tools that they use.

Freda Wang asked Catherine are you saying that the increase in the privacy issues.

Ms. Catherine Patsos responded we have been able to identify more cases when there has been inappropriate access to patients.

Freda Wang asked maybe not that there are more incidents but that you are able to identify them more.

Ms. Catherine Patsos responded Yes, we are able to identify them more.

Her final slide was the Privacy Report Metrics which we have reduced the number of days it takes to resolve the privacy cases as well.

Freda asked Catherine is it more that we are identifying them or do you think there is a training issue or a procedure process.

Ms. Catherine Patsos responded folks did a lot of focus training on HIPAA privacy and held in on some key areas where we have found inappropriate access and tried to address it more directly. To try to bring those cases down and also, she thinks that doing the HIPAA training separately where we can focus more on some of the HIPAA requirements and do's and don'ts and examples, is going to hopefully reduce the incidence of privacy cases.

Mr. José Pagán asked are you implementing a new platform so that if I know I have to review a policy by a certain date it would prompt me.

Ms. Catherine Patsos responded yes you would be prompted the tool will have the review cadence included in it so that you will be reminded when you have to review your policies and when it is due.

Mr. José Pagán asked right now the system we have is more static?

Ms. Catherine Patsos responded it is manual. We have operating procedures that are very old and need revision and updating, so I am hoping that this tool will facilitate that and make it easier for policy owners to update their policies and it will be searchable across the whole spectrum.

Freda Wang asked is there a regular timetable for policies that should be reviewed?

Ms. Catherine Patsos responded yes it should be reviewed 1 -3-years max.

Mr. José Pagán asked if there are any old or new business to be discussed, hearing none the meeting was adjourn at 11:45 AM.

**Medical and Professional Affairs / Information Technology Committee-  
February 5th, 2024**

**As Reported by Dr. Vincent Calamia**

**Committee Members Present-** Dr. Mitchell Katz, José Pagán, Sally Hernandez-Piñero, Barbara Lowe

Dr. Vincent Calamia, Chairperson of the committee, called the meeting to order at 9:06AM.

Dr. Calamia noted for the record Sally Hernandez-Piñero is participating virtually in a listening capacity.

On motion made and seconded, the Committee adopted the minutes of the November 20th, 2023 Medical and Professional Affairs/Information Technology Committee.

**ACTION ITEM:**

Dr. Kim Keziah Mendez, Senior Vice President and Corporate Chief Information Officer presented the resolution to the committee.

**Authorizing New York City Health and Hospitals Corporation (the "System") to execute agreements to create a pool of vendor contracts with each of the following vendors: Forerunner Technologies, Inc., Mason Technologies Inc., Coranet Corp and Interface Cable Assemblies & Services (ICAS) for the provision of Cabling Services on behalf of the System for an initial period of three-years with two one-year renewal options, exercisable at the discretion of the System, for an amount not to exceed \$85,000,000 over the potential five-year term, and to permit the System to add additional vendors to the pool should the need for additional vendors arise and should such vendors meet the same minimum criteria and receive from an evaluation committee a score of 7.25 or greater.**

Dr. Mendez presented an overview of the RFP that was done to enter into a pricing contract with cabling vendors to provide all labor, equipment and materials necessary to structure cabling services and racking cabinet solutions for both project and support based needs. The amount would not exceed of \$85,000,000 and the contract would be for three years with two one-year renewal options. In similar structure with the citywide contract, the contract would be in place by the Fiscal Year 2024.

Dr. Mendez then presented the rationale on additional authorization of vendors. To align with the supply chain process which would be posted on the City Records, this contract will allow the opportunity to replace the existing contracts if any of the 4 vendors are unavailable to meet operational needs. Vendors would have met the same selection by the evaluation committee membership and the same scoring criteria with a minimum of 7.25 or greater. EITS would also need to present the proposed award to the Contract Review Committee and inform M&PA/IT Committee. The RFP criteria was reviewed along with the procurement process. Dr. Mendez answered a question from Dr. Allen regarding prioritization of projects and requests. She stated that was part of the evaluations process. Dr. Allen also inquired if this allow for nurses to have devices in hand immediately. Dr. Mendez clarified that this contract would help set the ground work to support the infrastructure required for the equipment such as rovers or mobile devices.

***Questioned raised by the Committee: How will the contract be allocated?*** Ms. Karia responded; a mini solicitation where the requirements are sent out to all 4 vendors they would have submit a proposal. A vendor would be selected based on the lowest cost.

After discussion the resolution was duly seconded, and unanimously adopted by the Committee for consideration by the full Board.

## CHIEF MEDICAL OFFICER REPORT

Machelle Allen MD, System Chief Medical Officer/Sr. Vice President of Medical and Professionals Affairs, and Omar Fattal, MD, Co-Deputy Chief Medical Officer/System Chief of Behavioral Health highlighted the following:

Dr. Allen commented the remarkable work and notable accomplishment of the African American staff in honor of Black History Month. Saturday, February 3rd was national women physician day. It is on the birthday of Elizabeth Blackwell, who was the first women to become a license physician in the United States.

OBH Aligned Accomplishments: Access to Care

These are some highlights with access for inpatient and outpatient. For the workforce they were successful in distributing \$1 million in debt relief grant to 27 behavioral health providers in exchange for a three-year commitment to serving our health System. We have secured an additional \$4 million grant to providers over the next 2 years.

We were able to meet the State mandate to restore 225 psychiatric beds across six facilities that were repurposed during COVID-19 bringing the System's capacity up to nearly 1,000 psychiatric beds. There were a lot of efforts from many different teams to make this happen. Part of the 225 beds are at Kings County, which is a unit where people can stay for up to 90 days for rehabilitation and reintegrating back into the community.

The ECU unit at Kings County is modeled after Bellevue, which opened in 2020 and has been very successful. We are currently looking into opening a 3<sup>rd</sup> program at Elmhurst. This also includes the 11 female forensic unit which has been closed for 4 years and just opened on January 22<sup>nd</sup>.

There is expanded services for survivors of domestic violence by providing mental health service in 9 domestic violence shelters. There are 2 clinics 1 at Lincoln and 1 at Kings County, telehealth is also an option. Work is being done for regular outpatient visits on the adult mental health access across the 11 acute sites. The focus has been on Epic visit types and workflow to improve efficiency. Providers bookings has increased by 20%, which resulted in a 6% increase in patient volume in 2023.

**Questioned raised by the Committee:** *are the number of beds we have the max, are we fully staffed as far as license beds? Dr. Fattal responded: we have more license beds than what is online. Online beds, are beds that are available for patient, it could be off-line for many reasons, lack of staffing, clinical, or an aggressive patient, COVID patient, the beds will be blocked. We have 1000 beds available for patients now, to be filled immediately.*

**Questioned raised by the Committee:** *For women with children, is there a process in place once discharged how to keep them engaged until they are totally on their feet? There is a focus on women's health in collaboration with Dr. Wendy Wilcox through the impact 3 2 1 program, embedded service in women health. The approach has been to meet them in women health and provide the service there; then link them with the appropriate services.*



*Dr. Allen responded: there is a focus of increasing social work support and presence in our prenatal service. There is a fellowship that is called reproductive psychiatry for psychiatrist that are interested in caring for women Currently at Bellevue. Pediatrics is starting with the care of the child at fetus stage knowing that the care of the mother has significant impact on the development of the child in the prenatal setting.*

#### **SYSTEM CHIEF NURSE EXECUTIVE REPORT**

*Dr. Natalia Cineas, System Chief Nurse Executive, Office of Patient Center Care full written report is included in the materials with a on Care*

<sup>2</sup>  
*Delivery Daily (CD):*

<sup>2</sup>  
*Care Delivery Daily (CD) Management System - Elmhurst*  
*The Care Delivery Daily Management system was successfully completed at Elmhurst this past November. Elmhurst is the sixth hospital to complete the CD<sup>2</sup> training and roll out. The goals of CD<sup>2</sup> is to enhance patient safety; standardize communication huddles from frontline staff all the way up to the CEO of the organization. To improve communication amongst nurses and nurses' leaders; to escalate any issues for awareness and additional support. To organize and establish consistent nursing care that is patient centric and, to reinforce the nursing process and standard of care. This is a weeklong didactic training that comprises of 5 service lines; Med/Surg, Behavior Health, Critical Care, Emergency Medicine, and Maternal Child Health. Then followed by simulation training for all nurse leaders, and a rollout on all of the respective units. There has been an increase in communication regarding reductions of falls throughout all of the hospitals.*

***Questioned raised by the Committee:*** *what does CD<sup>2</sup> do and how is the training with the nurse leaders? Dr. Cineas responded; it is going back to basic nurse practice. There are 5 days of training, Dr. Cineas leads the trainings. There are all levels of nurses in the training, they go over what they learned in nursing school. Then they challenge one another with questions. After the 5 days the nurse leaders go back to the basics with standard work to ensure that they are understanding what the assessment are in their areas and go back and demonstrate the basics.*

*All of the leaders are trained, the CEO and the CMO at all of our facilities come in during the 5 days. The leaders are trained on how to huddle for less than 10 minutes at the beginning of every shift. There is a huddle at 6:45AM where the CNO dials in and gets the report from the off- shift supervisor and all leaders are there for 15 minutes to get what is transpiring in the hospital. After the week of safe space training and nurse leadership are on the same page, training starts for the frontline staff. Right now, 1,500 nurses are being trained at Bellevue one by one.*

*After they are trained on their respective units, they are brought to simulation to go over the skills they should have. This is ensuring safe practices. The Committee commended the work that Dr. Cineas has done.*

#### **CHIEF INFORMATION OFFICER REPORT**

*Dr. Kim Keziah Mendez, Senior Vice President and Corporate Chief*

Information Officer gave highlights of EITS to the committee, with a full written report included in the materials.

Dr. Mendez presented the update which includes an overview of EITS goals for fiscal year 2024 and highlight accomplishments from 2023. The data center migrations whose project timeline started in May 2021 has been completed as of December 2023. The SunGuard transition was completed in September 2022 and the transition to Cyrus One was completed at the end of last month. The former Jacobi Data Center will be transitioning to new MDF, main district distribution framework, areas which will be built out to support network support activities at Jacobi Medical Center.

Dr. Mendez also highlighted efforts from the Enterprise Support Services, they provide 24/7 support to the entire institution answering calls. The satisfaction rate has increased from 92% to 95.3 which is higher than the average benchmark for the nation of 85%.

Dr. Mendez then provided an overview of the PMO, Project Management Office, and their efforts over the past year. They processed almost 2500 demands, or requests, across the System which include the new hospital wing at South Brooklyn and major Epic workflow changes. In addition, various governance and advisory committees have also been formed to provide equity and help with decision making. A few of the committees include clinical governance and artificial intelligence which will be reported on in future updates.

**Questioned raised by the Committee:** regarding the volume of call received by the Enterprise Service Desk. Dr. Mendez responded; On average, over 70,000 calls are received which includes calls from across the System such as skilled nursing facilities and affiliates. As part of the high satisfaction rate, customers satisfaction surveys were put in place about 2 years ago as per recommendation from previous Committee meetings. In addition, efforts to automating certain requests by using a virtual agent would help the call center agent navigate requests and improve escalation efficiencies such as password reset or issues with Epic. Dr. Mendez closed her report by thanking Angela Zumaran, AVP of Support Service for her work and efforts in this area.

#### **METROPLUS HEALTH PLAN, INC.**

Sanjiv Shah, MD, Chief Medical Officer, MetroPlus Health Plan, presented on behalf of Talya Schwartz, MD, President and CEO, to the committee, a full report is included in the materials, with the following highlights -

Behavioral Health (BH) Care Management (CM) Redesign:

In 2016, 2015 the State decided, that individuals with serious mental illness who were previously managed by the State in a fee for service model would be managed by managed care organizations. The first 5 years MetroPlus out sourced the behavioral Health portion of this benefit to a behavioral health organization, Beacon.

In 2021 MetroPlus brought behavioral health inhouse. This was to ensure that there will be a strong collaboration between the plan and the providers. A module was created to focus on individuals who are admitted to an inpatient facility where there was behavioral health or substance

abuse to place care managers on site. This is done in 3 Health + Hospitals facilities, Kings county, Metropolitan, and Jacobi.

At other inpatient facilities and standalone substance abuse inpatient facilities, there has been community outreach pods put in place. The modules require a care manager or a peer, to meet the individual while they are admitted into the inpatient facility. There they meet the person that they will be engaging with in the community or telephonically. Making that connection was to ensure strong community follow up post discharge. One of the other benefits of bringing behavioral health to the manage care health plans, is information exchange. There has often been a lot of information on the physical health issues with the member, where they have been admitted, to an inpatient stay. Despite the reliance on information exchange through electronic health record, substance abuse is not included in EHI. There are digital restrictions that prevent the information from coming across. With the appropriate consent, information can be shared with the inpatient facilities and the managed care.

Engagement increase with the program redesign: the goal was to ensure that the patient engagement was immediate post-discharge after their outpatient visit, or at least 30 days with care management. The 30-day engagement increase dramatically in the pre-redesign of this initiative. The goal was to solidify an engagement within 7 days. This has reduced readmissions, individual enrolled in Medicaid with mental health issues, as well as those in health recovery plan. These people have to be followed longer to assure this is a sustained impact of the model. The collaboration between the plan and provider to bring health services and managed care is a benefit.

***Questioned raised by the /Committee:*** *post COVID, has it been a positive outcome being telephonic or virtual, versus in person? Dr. Shah responded: in the behavioral health space, once a connection has been made in person, a patient who struggled to leave their home because of their behavioral health conditions, is able to connect to the provider telephonically or virtual has been a plus. It may reduce no shows.*

***Questioned raised by the Committee:*** *have you asked the peer counselors what challenges have they faced when they connect the patient to the different services: Dr. Shah responded; there has been time when the peer has had issues. They do give concrete feedback on the challenges they face. There has been talk about building a customer satisfaction survey. There should also be a model that surveillance the peers and community health workers on their experience. Their experience will make the system better on what the patients encounter.*

The Committee commended Dr. Shah on the work that has been done.

There being no further business to bring before the Committee, the meeting was adjourned 10:10AM.

**Community Relations Committee IN-PERSON MEETING – February 6 2024**

**As Reported by Ms. Jackie Rowe Adams**

**Committee Members Present:** Dr. Mitchell Katz, Jackie Rowe-Adams, Dr. Jose Pagan Sally B. Hernandez-Piñero (virtually so in a listening capacity only)

Ms. Jackie Rowe-Adams called the meeting of the Community Relations Committee meeting to order at 5:07 p.m.

Ms. Rowe-Adams called for a moment of silence in honor of Mr. Robert Nolan, previous chair of the Community Relations Committee and Vanessa Panero, NYC Health + Hospitals/Belvis CAB liaison, who both passed away December of 2023.

Quorum was established - the minutes of the Community Relations Committee meeting held on November 14, 2023 was reviewed and upon motion made, and duly seconded the minutes was unanimously approved.

Scheduled to present annual verbal reports this evening are the following Community Advisory Boards (CABs).

1. NYC Health + Hospitals/Carter Specialty Hospital and Nursing Facility
2. NYC Health + Hospital/Gotham East New York
3. NYC Health + Hospitals/Kings County
4. NYC Health + Hospitals/Queens
5. NYC Health + Hospitals/Woodhull

**Dr. Katz shared the President's report:**

- Stating that the Chief Medical Officer Dr. Machel Allen was voted on the 2024 Black power players list.
- NYC Health + Hospitals is one of the few, if only public system that provides abortion care through a virtual system where people can call and get the care they need and the medications get mailed to them.
- Findhelp is the new tool that is used if patients have any social needs, food, housing or transportation, the tool can help connect them to community-based organizations to get those needs.
- NYC Health + Hospitals/Woodhull hosted a naloxone training and substance use.
- NYC Health + Hospitals/ Queens had a ribbon cutting for a new surgical robot. NYC Health + Hospitals honored leprosy day and NYC Health + Hospitals/ Metropolitan was re-designated as a baby friendly hospital.
- NYC Health + Hospital/Lincoln announced that the Medical Intensive Care Unit

II recently received a silver-lever Beacon Award for Excellence from the American Association of Critical care Nurses.

- NYC Health + Hospitals/ Harlem unveiled a new community mural and also received the Scopy award for colon cancer outreach efforts. There has also been the completion of the first ever solar power installation.
- Elmhurst received national recognition lifestyle medicine program award, this is the first times these services will be

offered in Queens.

- Sea View kicked off the New Year as the #1 ranked nursing home in New York State by Newsweek in 2024 for the second year in a row and as a high-performing nursing home in the nation for short-term rehabilitation and long-term care according to U.S. News & World Report.

#### **PRESENTERS:**

Ms. Rowe-Adams moved the agenda to the (5) facilities presenting their verbal annual reports. Each presentation is allotted 5 minutes.

#### **NYC Health + Hospitals/Carter**

Ms. Lashawn Henry, Chair of the NYC Health + Hospitals/Carter CAB presented the report to the CRC. Ms. Henry stated that the nursing facility is fully licensed by the New York State Department of Health. The blood transfusion program is expected to increase services to prevent lost billable days resulting from unplanned acute care hospitalizations. Patient safety and satisfaction is a continued priority and Carter's overall rating remains high among post-acute peers. Carter earned a CMS 5-star rating, was named to Newsweek Magazine Best Nursing Homes list and was acknowledged as a "High Performing" facility for short-term rehab by U.S. News & World report. Patient complaints remain low and is identified in the area of delay of care and communication.

Ms. Rowe Adams asked how is the family involved, and if there is no family involved what is the process you follow? There is family involvement, there are resident services and other committees that encourage families to participate. Mr. Floyd Long also stated that there is family access to patients' MyChart, which includes them in the medical process.

#### **NYC Health + Hospitals/Kings County**

Ms. Joan Alexander-Bakiriddin vice president of the NYC Health + Hospitals/Kings County CAB presented the report to the CRC. Ms. Alexander-Bakiriddin stated that leadership seeks multiple pathways to guarantee that the medical equipment is up to date and reliable while identifying and updating infrastructure to ensure robust, reliable and consistent support services. NYC Health + Hospitals/ Kings County successfully achieved the Silver-level certification for excellence in person-centered care from Planetree Institute. There were increased scores in responsiveness of hospital staff, staff working together to take care of patients, and inpatient behavioral health overall scores for care providers.

Ms. Alexander-Bakiriddin stated that the patients, staff community outreach has aided in understanding the issues impacting the local community such as socioeconomic concerns, public safety, mental health and equitable access to resources. The facility will leverage the insight shared about these challenges to continually improve their services.

Dr. Pagan asked how does the facility help with the perceptions of safety due to increased crime. Mr. Sheldon McLeod Chief Executive Officer of NYC Health + Hospitals/Kings County stated that it is a multipronged approach, working with the precincts to ensure patient safety, and providing devices to staff that will provide can be activated in case of an emergency that would make a loud noise

and draw attention.

Dr. Katz stated that Downstate Medical Center across the street is facing possible closure due to deteriorating facility conditions, and in the case of a closure, NYC Health + Hospitals will work to provide care to patients facing the loss and ensure the NYC Health + Hospitals/Kings County is not overburdened with patients.

Ms. Rowe-Adams asked what is contributing to the wait-time in the ambulatory care department and what does the wait-time look like.

Mr. McLeod stated that the Kingsbrook Hospital closure is contributing to the wait- times, due to patients choosing to come to Kings County instead of staying within the One Brooklyn Health System. This has caused for the number of patients admitted to increase and a reduction in available beds for admittance. The solutions proposed include working with Central Office to improve facility conditions in the short-term and in the long-term we are looking at solutions that will consider the possible closure of Downstate Medical Center also.

### **NYC Health + Hospitals/Queens**

Mrs. Robin Hogans CAB Chair, NYC Health + Hospitals/Queens, presented the report to the CRC. Over the next 5-10 years the hospital hopes to increase in patient bed capacity and a parking garage to accommodate staff. The hospital also performed its first minimally invasive robotic surgery with the da Vinci Surgical system.

The hospital achieved an almost flawless Joint Commission review in April 2023 and received a B grade for patient safety. The Hospital also achieved a Silver Designation for Person Centered Care from Planetree International and the ICU received a Gold- Level Beacon Award for Excellence.

Ms. Rowe-Adams commended the facility on the opening of the wellness center for staff, she emphasizes that while taking care of patients we also want to take care of ourselves, co-workers and each other.

### **NYC Health + Hospitals/Gotham Health, East New York**

Ms. Vere Gibbs, chair of the East New York CAB presented the report to the CRC. The facility underwent a Planetree Certification and received a Bronze level certification in Person Centered Care.

The facility was awarded \$1.6 million in capital funding and will be used to upgrade facilities. The facility will also be rolling out a Hologic 3D mammography unit. Challenges is long wait-times still persist, and continue to monitor Press Ganey scores and increase response rates by collecting real time feedback from patients.

Ms. Gill stated that patients expressed their concerns regarding making an appointment, and that the staff is working closely to identify the best appointments available for urgent matters. The facility is also working to increase the response rates by collecting real-time patient feedback before patients are checked out.

### **NYC Health + Hospitals/Woodhull**

Ms. Barbara Williams, CAB Chair, NYC Health + Hospitals/Woodhull, presented

the report to the CRC. Over the next 5-10 years the hospital hopes to increase the patient bed capacity. The facility is seeking FEMA funding for the facility to improve preparedness. The facility has received certification for excellence in Person Centered Care by e International. The facility has also reinstated the Patient and Family Advisory Council. There has also been a workforce wellness program to provide emotional support and promote overall staff wellness. The lifestyle and medicine program continue to be built out, vacancies continue to be backfilled to provide further care to the patients.

**ADJOURNMENT:**

Meeting adjourned at 6:16 P.M

## SUBSIDIARY REPORT

**HHC Capital Corporation – Semi-annual Public Meeting Thursday, January 25, 2024**

**As Reported by: José Pagán**

**ATTENDEES:** Members of the HHC Capital Corporation Board of Directors – José A. Pagán, Chair; Dr. Mitchell Katz; Freda Wang (virtual listening capacity only; Sally Hernandez-Piñero (virtual listening capacity only)

### **Other members of the NYC Health and Hospitals Board of Directors**

Dr. William Fisher (representing Deepa Avula)

Karen St. Hilaire (representing Molly Wasow Park)

Anita Kawatra

Barbara Lowe

Dr. Patricia Marthone

Dr. Vincent Calamia

Jackie Rowe-Adams

### **NYC Health + Hospitals Staff**

Andrea Cohen, Senior Vice President and General Counsel and Secretary, HHC Capital Corporation

Dr. Machelles Allen, Senior Vice President, Medical and Professional Affairs

Linda DeHart, Vice President, Finance

Paulene Lok, Senior Director, Debt Finance

Colicia Hercules, Secretary to the Health and Hospitals Corporation, Chairman's Office

Mr. José A. Pagán chaired the meeting of the HHC Capital Corporation Board of Directors (the "Board").

### **Call to Order:**

The HHC Capital Corporation meeting was officially called to order at 1:14 p.m. by Mr. Pagán. Mr. Pagán noted for the record that Karen St. Hilaire is representing Molly Wasow Park, and Dr. William Fisher is representing Deepa Avula – all in a voting capacity.

### **Adoption of Minutes:**

Mr. Pagán asked for a motion to adopt the minutes of the previous meeting that was held on July 27, 2023. The Board unanimously adopted the minutes. Mr. Pagán then introduced Ms. Linda DeHart to provide an update to the Board. Ms. DeHart referred to the HHC Capital Corporation Semi-Annual Meeting Presentation for the period ending December 31, 2023 to update the Board on the System's debt finance program.

### **HHC Outstanding Bond Portfolio (slide 1):**

Ms. DeHart provided an overview of NYC Health + Hospitals Corporation's ("H+H") current outstanding tax-exempt bonds portfolio totaling \$428 million, of which about \$118 million (27.6%) are variable rate bonds, and the remaining \$310 million (72.4%) are fixed rate bonds. The variable rate bonds are supported by letters of credit provided by TD Bank and JPMorgan Chase Bank.

### **HHC 2008 Series B-E Bonds Historical Interest Rates (slide 2):**

Ms. DeHart explained that the graph on slide 2 shows the variable rate interest rates bonds performance since inception. She noted that the interest



rates had considerable volatility in recent months due to geopolitical issues, inflation, the Federal Reserve interest rate hikes, and market activities and conditions.

**HHC Bonds - Issuance History (slide 3):**

Slide 3 of the presentation provides a history of bond issuances by H+H, as well as the refunding savings over the years.

Ms. DeHart pointed out that H+H borrowed infrequently in recent years. As a result, H+H's current outstanding debt level is relatively low.

**Construction Fund Balance on the 2020 Bonds (slide 4):**

Ms. DeHart reported the status of H+H's \$100 million 2020 Series A construction fund. Ms. DeHart reported that withdrawals through December 2023 from the 2020 bonds issuance totaled \$78.3 million to reimburse H+H for project expenditures, with a remaining balance of \$23.8 million. 2020 New Money Bonds - Project Activity Update (slide 5-7):

Ms. DeHart reviewed planned spending for the \$100 million new capital money that was allocated to various facilities. Ms. DeHart also provided an update of total infrastructure project spending through December 2023 as well as an overview of extensions made to the infrastructure project spending timeline; anticipated projects funds will be substantially spent down by December 2024.

**Outstanding Equipment Loan (slide 8-10):**

Ms. DeHart explained that in addition to the bond program, the H+H Board has authorized equipment loan financing up to \$120 million at any time. Ms. DeHart reported that as of December 2023, there are two loans outstanding with JPMorgan Chase Bank totaling \$36.4 million, and the Citibank loan was matured in October 2023. Ms. DeHart provided the status of the outstanding loans.

**Final Arbitrage Rebate Report for 2018 Citibank Revolving Loan slide 11):**

Referring to slide 11 Ms. DeHart reported that the 2018 Citibank Revolving Loan matured in October 2023. A final arbitrage rebate analysis was performed by Hawkins, Delafield and Wood, and determined that an arbitrage rebate liability of \$11,987.42 was incurred by the loan due to excess interest earning, A check was issued and submitted to the IRS with the filing of 8038-T form.

**Update - Final Arbitrage Rebate Report for 2013 Series A Bonds (slide 12):**

Referring to slide 12 Ms. DeHart reported that the 2013 Series A bonds matured in February 2023. A final arbitrage rebate analysis was performed by Hawkins, Delafield and Wood, and determined that no arbitrage rebate liability was incurred by the bonds. As such, the IRS had refunded \$581,485 of arbitrage rebate overpayment made (in 2018) by H+H to the IRS.

Discussion:

A question was asked about capital project planning, funding, and prioritization. Ms. DeHart noted that there is an extensive list of needed capital projects that exceeds available funding. In large part, the capital budget is funded by the City in the 10-year capital plan. The system plans to apply for available State capital grant funding, and will continue to look at additional borrowing as well. As to project prioritization, the Office of Facilities Development team works with all the facilities to develop a comprehensive list of needs, and also to identify the critical projects.

**Adjournment:**

There being no further business before the Board, Mr. Pagán adjourned the meeting at 1:32 p.m.

**Mitchell H. Katz, MD**  
**NYC HEALTH + HOSPITALS - PRESIDENT AND CHIEF EXECUTIVE OFFICER**  
**REPORT TO THE BOARD OF DIRECTORS**  
**February 29, 2024**

### **NYC HEALTH + HOSPITALS FACILITIES RECOGNIZE BLACK HISTORY MONTH**

As we close out February, our facilities and sites all celebrated Black History Month throughout the 29 days in their own special way. Some of the hospitals invited special guest speakers and held panels, while others celebrated fashion and held hip hop performances. NYC Health + Hospitals/Community Care showcased employee art here at 50 Water St. Last week, NYC Health + Hospitals/McKinney held a wreath-laying ceremony at the facility's namesake in Green-Wood Cemetery. The facility was named in honor of Dr. Susan Smith McKinney Steward, the first African-American female doctor in New York State and the third in the nation.

### **CHANGE HEALTHCARE CYBER INCIDENT AND ITS AFFECT ON THE HEALTH SYSTEM**

Last Wednesday one of our vendors Change Healthcare experienced a cyber incident that affected many businesses across the nation and in NYC, including NYC Health + Hospitals. Thanks to the vigilance of the company and to our EITS team led by Kim Mendez, to our knowledge no NYC Health + Hospitals patient health information was stolen or released related to this incident. However, as a result of the incident, Change Healthcare severed all connections to businesses it worked with, which affected some of our operations, including calls to our main appointment number, the NYC Care Hotline, and some revenue cycle operations. Our EITS team, in coordination with Call Center Operations, rapidly deployed contingencies and thankfully some of these services are beginning to be partially restored. We are looking to bring longer term solutions online, while simultaneously advocating for any regulatory or financial support we might need.

I want to thank our EITS and Call Center teams for their rapid response to this incident and for their tireless work over the past week. Change Healthcare has said that it could take some time before their operations are back to normal and considered safe for any type of data transfer. In the mean time we will work to ensure our patients continue to have access to high-quality care.

### **HEALTH SYSTEM WINS NINE AWARDS FOR ITS COMMITMENT TO HIGH-QUALITY PALLIATIVE CARE**

NYC Health + Hospitals received nine awards from the Center to Advance Palliative Care for its commitment to high-quality palliative care. As part of its 2023 Tipping Point Challenge national challenge for clinical training, the Center to Advance Palliative Care recognized NYC Health + Hospitals/Coler as one of 15 winners and NYC Health + Hospitals/McKinney as one of 47 honor roll recipients in a pool of over 1,700 health care organizations nationwide. In addition, the Center's New York City challenge recognized McKinney as one of 5 winners and four additional NYC Health + Hospitals sites in its citywide honor roll. Lastly, the Center also recognized two individuals at NYC Health + Hospitals for their commitment to expanding their skills: Yetunde Egbeyale, RN at NYC Health + Hospitals/Coler and Valentina Forcella, RN at NYC Health + Hospitals/South Brooklyn Health. The clinical training challenge encourages clinicians across medical specialties to enhance their skills to care for seriously ill patients, including communication, pain management, opioid

prescribing, symptom management, and dementia care.

**MAYOR ADAMS, NYC HEALTH + HOSPITALS ANNOUNCED  
FREE TAX PREP SERVICES FOR NEW YORKERS**

On February 23, New York City Mayor Eric Adams and NYC Health + Hospitals announced free, in-person, and virtual tax preparation services for New Yorkers as part of the New York City Department of Consumer and Worker Protection's (DCWP) NYC Free Tax Prep initiative. In partnership with BronxWorks, Grow Brooklyn, Urban Upbound, and Code for America's GetYourRefund initiative, free tax preparation is available for New Yorkers who earn \$85,000 or less annually and file as a family, or those who earn \$59,000 or less annually and file as an individual or couple without dependents. Select NYC Health + Hospitals sites offer support in Spanish, Chinese, and Bengali, and virtual tax preparation is available in Spanish as well.

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

NYC Health + Hospitals continues to be a cornerstone of the City's response to the unprecedented influx of asylum seekers. Our network of 15 humanitarian centers offers life-changing assistance to about 25,000 asylum seekers in our care, with families and children making up roughly three-quarters of that population. At our facilities, guests receive dignified care and the tools they need to forge a path towards a brighter future.

From the outset of the crisis, NYC Health + Hospitals has prioritized providing essential medical care to newly arrived asylum seekers, many of whom have experienced challenging journeys to New York City and arrive with urgent healthcare needs. Our staff at the Arrival Center have now welcomed nearly 120,000 new arrivals, providing immediate access to essential services including screenings for communicable disease, urgent care, treatment for depression, and case management services.

Since last September, when the City began distributing 30- and 60-day notices to asylum seekers, our case management teams have held over 80,000 meetings to help those individuals or families with children achieve their goals, including to complete asylum and work authorization applications. Thanks to this intensified case management work, over half of families with children who received a 60-day notice chose to leave the City shelter system and take the next steps forward in their journeys.

**AS PART OF HOUSING FOR HEALTH, MORE THAN 1,100 NYC HEALTH + HOSPITAL PATIENTS  
HAVE BEEN SERVED BY THE MEDICAL RESPITE PROGRAM**

More than 1,100 patients have participated in the medical respite program, which offers patients experiencing homelessness a place to stay for up to 90 days while accessing expanded medical services that are not available in shelter. Medical respite is one component of the health system's Housing for Health initiative. Seventy-five percent completed their medical respite stay, and nearly 300 patients were discharged from respite into more stable housing, including supportive, affordable and market housing, reuniting with their families, and assisted living placement. The majority of the remaining patients were connected to Department of Homeless Services' shelters and safe havens, while some returned to the hospital or other interim living arrangements.

NYC Health + Hospitals' medical respite provides short-term housing and access to medical care including wound care, oxygen, IV infusion, physical therapy, and occupational therapy. In addition, patients receive medically tailored meals, coordination of and transportation to medical appointments, and intensive housing case management. Studies show that patients discharged from

hospital to respite have better health outcomes compared to those discharged to shelter directly. Furthermore, by offering a place to recuperate with access to medical services, respite beds shorten patients' length of stay at the hospital, frees up beds for patients who have more intense needs and offers a more appropriate setting for the patient to recover in the community. NYC Health + Hospitals has 51 medical respite beds: 26 beds operated by the Institute of Community Living and 25 beds operated by Comunilife. Currently, medical respite is fully funded by the health system. NYC Health + Hospitals is the largest provider of medical respite in New York State.

**CASTLE CONNOLLY RECOGNIZES CHIEF WOMEN'S HEALTH SERVICE OFFICER AND PHYSICIANS FROM NYC HEALTH + HOSPITALS/HARLEM AND LINCOLN AS "2024 TOP BLACK DOCTORS"**

Four health system hospital leaders and physicians were among 240 physicians across 30 states and 57 specialties named to Castle Connolly's list of '2024 Top Black Doctors' for their medical expertise and culturally-responsive care. The physicians featured on the list were nominated by their peers and then evaluated by Castle Connolly for criteria including consideration of each nominee's professional qualifications, education, hospital and faculty appointments, research leadership, professional reputation, disciplinary history, interpersonal skills, and outcomes data. Castle Connolly is a health care directory that helps patients find providers. The 'Top Black Doctors' distinction is part of Castle Connolly's Diversity Equity and Inclusion (DEI) Initiative geared toward honoring exceptional clinicians and make it easier for individuals to find providers who have shared backgrounds and experiences.

**ANDREA G. COHEN, JD, SENIOR VICE PRESIDENT AND GENERAL AFFAIRS, AND CHIEF LABOR RELATIONS OFFICER RECOGNIZED BY CRAIN'S AS "2024 NOTABLE GENERAL COUNSELS"**

Andrea G. Cohen, JD, Senior Vice President, General Counsel and Chief Labor Relations Officer to the health system was honored by Crain's '2024 Notable General Counsels' recognition list. The list showcases 35 notable general counsels in the New York metropolitan area guiding health care technology innovators, steering organizations through regulatory landscapes and supporting marginalized groups. Ms. Cohen has spearheaded numerous achievements since joining NYC Health + Hospitals. She has rebuilt the inside legal team to meet the evolving needs of the System, including by bringing onboard a mix of specialists and generalists in relevant fields, rightsizing teams, and developing technology solutions to manage legal fees and high-volume matters. Her legal team also provided critical support during the COVID pandemic, performing all contracting and legal work for the Test and Trace and vaccine distribution programs. During this period, total outside counsel spending decreased from nearly \$23 million in 2018 to about \$18 million in 2022. The honorees featured on the recognition list were nominated by their peers, companies or other acquaintances. Crain's New York Business editors selected the honorees based on their accomplishments, track record of success and contributions to their industry and community.

**DEPUTY CHIEF OPERATING OFFICER FOR AMBULATORY CARE SARAH JOSEPH KURIEN NAMED TO MODERN HEALTHCARE'S "40 UNDER 40" LIST**

Sarah Joseph Kurien, NYC Health + Hospitals' Deputy Chief Operating Officer for Ambulatory Care Operations and its Humanitarian Emergency Response and Relief Centers (HERRC) program, was named to Modern Healthcare's 2024 "40 Under 40" list in recognition of her work leading New York City's response to the asylum seeker crisis and COVID-19 pandemic. As the former Testing & Vaccination Lead for the NYC Test & Trace Corps (T2), Sarah helped lead the

City's effort to provide accessible, no-cost COVID-19 testing and vaccinations, and resources for those infected or exposed, enabling them to quarantine or isolate. As a leader of NYC Health + Hospitals' HERRC operations, Sarah helped create a network of 15 humanitarian centers that currently house 25,000 asylum seekers and launched the city's Arrival Center, a central intake to register and provide medical and social services to new arrivals that has welcomed over 115,000 people to date.

#### **NYC HEALTH + HOSPITALS LAUNCHES ARTIST IN RESIDENCE PROGRAM**

On February 8, the health system launched its Artist in Residence program run by the Arts in Medicine department in partnership with The Creative Center at University Settlement. Five artists were selected for year-long residencies that will include weekly staff artmaking and regular artist exhibitions. This builds upon The Creative Center's evaluated and published long-running Hospital Artist-In-Residence Program that was brought to NYC Health + Hospitals over two decades ago. The current program will continue to include patients and expand to include hospital staff as well. The Creative Center supports the Arts in Medicine department with administrative support of the residency and artist selection. Each of the resident artists provide a wide range of instruction including painting, sketching, drawing, jewelry making, photography, creative writing, paper arts, fiber arts, natural fabric dying and botanical printing. The residency will provide staff and patients with tools to feel connected, be present in the moment, and reduce anxiety. A video about the program is available [here](#). The Artist in Residence program is made possible with a grant from the Laurie M. Tisch Illumination Fund.

#### **NYC CARE REACHES 125,000 MEMBERS**

NYC Health + Hospitals' NYC Care program hosted an ethnic and community media roundtable at City Hall to announce reaching the milestone of 125,000 members enrolled in the program. NYC Care Executive Director Jonathan Jiménez, MD, MPH, was joined by NYC Mayor's Office of Immigrant Affairs (MOIA) Commissioner Manuel Castro, NYC Mayor's Public Engagement Unit (PEU) Executive Director Adrienne Lever, Program Director at Sauti Yetu Center for African Women and Families Hager Shawkat, MPH, and NYC Care member Edgar. The speakers highlighted the numerous partnerships and initiatives that have fueled the rapid growth of the program, and urged NYC Care-eligible New Yorkers to enroll in the program to access the quality care they are entitled to. The speakers also encouraged eligible New Yorkers to enroll in the new health insurance option for undocumented immigrants aged 65 and older through New York Medicaid Managed Plans.

#### **NYC HEALTH + HOSPITALS/GOTHAM HEALTH, MORRISANIA'S WOMEN, INFANTS, AND CHILDREN PROGRAM RECOGNIZED FOR USDA GOLD BREASTFEEDING AWARD**

NYC Health + Hospitals/Gotham Health, Morrisania's Women, Infants and Children (WIC) program received the prestigious USDA Gold Breastfeeding Award of Excellence 2023 for providing exemplary breastfeeding promotion and support to WIC families. This is a four-year award and marks the third time the Gotham Health, Morrisania WIC team has received this award. It is well documented that WIC program participation improves birth outcomes, increases breastfeeding rates, reduces childhood obesity, as well as improving a variety of other health indicators. WIC is a federally funded, state-run program that focuses on the nutritional well-being of pregnant, breastfeeding, and post-partum individuals and children up to age five. The WIC program provides participant-centered nutrition counseling, chest/breastfeeding promotion,

protection and support and specific nutritious foods to this at-risk population. WIC also serves as a vital liaison between participants and a host of services, linking families to social and health resources, including healthcare and dental services, child care assistance programs, wellness programs, food pantries, food delivery services, smoking cessation and substance use treatment, prenatal or pediatric care, postpartum and mental health care and pharmacies. WIC serves as a gateway to primary and preventive care.

**MACHELLE ALLEN, MD, NAMED TO POLITICS NY  
AND AMNY'S "2023 BLACK POWER PLAYERS" LIST**

Senior Vice President (SVP) and Chief Medical Officer (CMO) Machelles Allen, MD, was recognized by PoliticsNY and amNY Metro on its annual "Black Power Players" list. Released in honor of Black History Month, the list honors community leaders, innovators, and politicians from different industries and organizations across the five boroughs who each contribute to the vibrancy of New York City. Dr. Allen is recognized for her unwavering commitment to helping the health system's patients, and for her pioneering work to advance women's health and birth outcomes.

A veteran of NYC Health + Hospitals, Dr. Allen completed her residency in Obstetrics and Gynecology at NYC Health + Hospitals/Jacobi, worked as an attending physician at Harlem and Bellevue hospitals, and served as the Associate Medical Director at Bellevue until 2013 when she transitioned to system Deputy Chief Medical Officer. She was subsequently promoted to system Chief Medical Officer in 2017.

**AS PART OF MAYOR ADAMS' "WOMEN FORWARD NYC," NYC HEALTH + HOSPITALS UPDATED  
COMMUNITY AND ETHNIC MEDIA ON VIRTUAL EXPRESS CARE TELEHEALTH ABORTION CARE  
SERVICE**

As part of the Mayor's "Women Forward NYC," NYC Health + Hospitals' Virtual ExpressCare updated members of community and ethnic media on its telehealth abortion care service. In October 2023, NYC Health + Hospitals launched telehealth abortion access – becoming the first public health system in the nation to do so. Since its launch, the service has provided 870 virtual visits, mailed over 230 abortion kits, and referred 360 patients for in-person care. The average wait time for a virtual visit is less than 5 minutes. Over 73% of the patients identify as people of color.

The service allows patients in NYC seeking abortion care to speak to a New York State-licensed health care professional on demand by video or phone for an assessment, counseling and access to medication if eligible. The telehealth service is available 7 days a week, 9:00 a.m. – 9:00 p.m., and will provide patients with access to safe and legal abortion care. In addition, NYC Health + Hospitals offers access to a full spectrum of medication and procedural abortion services at their hospital-based clinics. Patients wishing to make an in-person appointment for obstetric and gynecologic services, including abortion care, should call (844) NYC-4NYC.

**NYC HEALTH + HOSPITALS/WOODHULL HOSTS NALOXONE TRAINING  
AND SUBSTANCE USE EDUCATION SESSION**

In early February, NYC Health + Hospitals/Woodhull held a free comprehensive Naloxone training and substance use education session in collaboration with Services for the UnderServed (S:US). The session aimed to equip staff and community members with the necessary knowledge and skills to recognize and reverse an opioid overdose, ultimately empowering them to save lives within their community. Attendees also received valuable education on substance use

and addiction, fostering a deeper understanding of these critical issues. The event was attended by Matthew Warren, MD, Woodhull Hospital's Director of Chemical Dependency, Ross MacDonald, MD, Chief Medical Officer, and Brooklyn's District 34th Council Member Jennifer Gutierrez.

**NEW STATE OF THE ART DAVINCI ROBOT  
DEBUTS AT NYC HEALTH + HOSPITALS/QUEENS**

NYC Health + Hospitals/Queens has enhanced its surgical capabilities with the highly advanced da Vinci Robotic Surgical System. Inaugurated "Quincy Queens," the new da Vinci Robotic Surgical System is expected to expand surgical care and improve patient outcomes and experience at Queens Hospital.

Since December, the hospital has begun performing minimally invasive robotic surgery with the da Vinci Surgical System in the areas of gynecology and urology with general surgery to begin in early spring. The new surgical option builds on the hospital's greater strategic vision of enhancing its surgical, inpatient and ambulatory care departments to further improve patient experience and clinical outcomes. Queens Hospital projects it will complete more than 300 robotic cases in 2024 alone.

**NYC HEALTH + HOSPITALS/METROPOLITAN RECEIVES  
PRESTIGIOUS "BABY-FRIENDLY" DESIGNATION**

NYC Health + Hospitals/Metropolitan has once again achieved the highly prestigious "Baby-Friendly" designation after a rigorous review process conducted by Baby-Friendly USA, the organization responsible for certification in the United States. The designation recognizes hospitals that encourage and promote breastfeeding and mother-baby bonding. Metropolitan Hospital earned its first Baby-Friendly USA designation in 2017, and the re-designation is in effect through 2028.

To receive the designation, hospitals are required to meet or exceed patient care standards in a rigorous on-site evaluation by the Baby-Friendly Hospital Initiative, including: a comprehensive education program that offers mothers the information, confidence, and skills needed to successfully initiate and continue breastfeeding their babies; immediate skin-to-skin contact for mother and baby after birth; intensive education of both patients and hospital staff about the important benefits and management of breastfeeding; allowing newborns to stay with their mother's 24 hours a day during postpartum care; and providing connections for breastfeeding support groups in the area.

**NYC HEALTH + HOSPITALS/BELLEVUE RECOGNIZES ITS HANSEN'S DISEASE CLINIC ON  
WORLD LEPROSY DAY**

At the end of January, the Hansen's Disease Clinic, part of the Department of Dermatology at NYC Health + Hospitals/Bellevue, joined the international community in recognizing World Leprosy Day to raise awareness and stop the stigma surrounding this ancient disease. While rare in the United States, there are up to 250 new cases each year; Hansen's Disease, as leprosy is now known, is 100% curable. The Bellevue Hospital clinic conducts approximately 440 patient visits a year and is the only Hansen's Disease clinic in the Mid-Atlantic region, which includes New York, New Jersey, Delaware, Maryland, Pennsylvania and the District of Columbia. The clinic has provided treatment and care for leprosy patients since 1985. World Leprosy Day is the last Sunday in January. Bellevue Hospital, in partnership with the National Hansen's Disease Program, has the only dedicated Hansen's Disease Clinic in the mid-Atlantic.



**THE REMEDY, NYC HEALTH + HOSPITALS' NEW PODCAST,  
RELEASES TWO MORE EPISODES**

In January NYC Health + Hospitals launched a new podcast called *The Remedy*. *The Remedy* covers topics such as the power of primary care, food as medicine, women's health, preparing for the next pandemic, caring for people experiencing homelessness, and the health needs of migrants. It offers a voice that no other podcast can.

The podcast has been really well received: it ranks in the top 1% in the Health & Fitness Category, and top 5% for all podcasts. The most popular episode so far has been Food is Medicine.

Two episodes were released in February: the third episode, Ready for the Next Pandemic, explores how NYC Health + Hospitals has consistently answered the challenge of Ebola, COVID-19, and Mpox all while staying ahead of the latest health crisis; episode four focuses on women's health, and considers how New York City's public hospital system is expanding access to women's health care in a time when many women across the country are facing restricted access to care.

**HEALTH SYSTEM REVAMPS ITS INTRANET HOMEPAGE**

On February 5, the Office of Communications and Marketing launched a completely revised and redesigned INSIDER and Intranet Landing page. In addition to its bright and engaging design, the New INSIDER employee newsletter has several interactive features to keep staff united, informed, and inspired. The goal is to shine a spotlight on the myriad jobs and hardworking people who bring our mission to life. Content includes up-to-date coverage of all of our systemwide news, a new photo essay feature called Day in The Life, which explores the many diverse roles and dedicated staff at NYC Health + Hospitals through the lens of a camera, a trivia quiz and survey, social media feeds, and an educational staff profile feature called The Fast Five in which we ask the same five questions of anyone who wants to participate. You can also find all of your important links, systemwide resources, leadership letters, and the popular Photo of the Day.

These changes and improvements have been many years in the making and underscore the importance of unified communication and messaging in an organization as large as ours.

**FOR INTERNATIONAL MOTHER LANGUAGE DAY, NYC CARE TRANSLATES ITS OUTREACH FLYERS  
IN TO MORE THAN 50 LANGUAGES**

NYC Care's outreach flyers are now available in over 50 languages, a marked increase from the 10 City-designated languages they are currently available in. This coincided with the celebration of International Mother Language Day, a UNESCO world holiday celebrating linguistic diversity that has been observed globally since 2000. The day recognizes the importance of cultural and linguistic diversity, while acknowledging the threat of extinction to various languages.

Given the linguistic diversity of New York City, NYC Care is committed to promoting language justice as part of a range of initiatives to eliminate barriers to care and encourage all New Yorkers regardless of immigration status or ability to pay to apply. NYC Care eliminated the six-month residency

eligibility requirement and works with diverse community partners who undertake culturally sensitive outreach city-wide. The translation project also advances the Health System's mission to extend equally to all New Yorkers, regardless of their ability to pay, comprehensive health services of the highest quality in an atmosphere of humane care, dignity, and respect.

#### **EXTERNAL AFFAIRS UPDATE**

##### **City:**

Health + Hospital leadership has attended and will continue to attend the Mayor's community town halls. There was a City Council hearing on February 6th, Oversight Hearing: "Addressing the Healthcare Staffing Crisis- Examining Residency Conditions and Worker Concerns". Health + Hospital's preliminary budget hearing is scheduled for March 5th.

##### **State:**

The State fiscal year 24-25 state budget process is in full swing. Earlier this month, the Governor issued 30-day amendments that detailed technical and substantive changes to her executive budget. The budget still includes \$600 million in unallocated Medicaid cuts that could ultimately be directed at hospitals and nursing homes. We continue to advocate against these cuts to the Medicaid program. Additionally, there was funding included for the SUNY downstate transformation plan, \$100 million in operating funds as well as \$300 million in capital. We continue to have conversations and advocate for the needs of Kings County Hospital and the broader H+H system.

##### **Federal:**

Federal government funding is slated to expire in two tranches, the first on March 1st and the second on March 8th. Congress must reach a spending agreement, either by passing a Continuing Resolution or full-year Appropriations bills for FY 24. The DSH cuts are slated to go into effect March 8th absent Congressional action. H+H will continue to advocate for the long-term elimination of the DSH cuts as Congress negotiates a long-term spending plan for FY 24.

##### **Community Affairs:**

A presentation to The Council of form the Social Determinants of Health team about the new Findhelp platform is schedule for March. 12 CABs met with their local State elected officials to discuss the impact of the 2024 NYS budget on their facility. 9 CABs have hosted/will host a legislative event with their facility in February and March.

The Community Affairs team and Faith-based teams hosted their second Breaking Bread, Building Bonds conversation at NYC Health + Hospitals/Seaview on February 15th, and will be having their third and final event of the series on March 12th at NYC Health + Hospitals/ Elmhurst. The Community Affairs team and new Council of Auxiliaries Chair Pearl John have also been preparing for the first Council of Auxiliaries meeting of the year, set to occur on March 6th.

#### **EMERGENCY CONTRACTS**

Since the last meeting of the Board of Directors, I have authorized two exceptions to our standard procurement rules:

### **EveryTable**

The Board recently approved licenses for EveryTable to operate as a food vendor at Metropolitan, Jacobi, Queens, South Brooklyn and Harlem. You may recall that the Board also approved contracts with Tasty Picks to operate at NCB and recently at a second location at Metropolitan. Everytable has unfortunately abruptly closed all of its East Coast operations and so suddenly all those hospitals are scrambling to replace their food vendor. Although EveryTable is in breach of its agreements with us, practically speaking, we cannot force that company to maintain its operations.

To address the urgent need for Metropolitan and Jacobi to replace EveryTable, I authorized deviations from OP 100-6 to permit licenses with Tasty Picks to take over the locations where EveryTable was operating at Jacobi and Metropolitan. The terms will be identical to the terms previously approved for EveryTable.

We are searching for a replacement for EveryTable at Queens, South Brooklyn and Harlem.

### **Interpretation Services**

I recently approved an extension to certain contracts that were previously approved by the Board and are undergoing an RFP process to ensure continuity of these critical patient care services during the RFP and any vendor transition. We expect these new contracts to come before the Board for approval in the next few months.

Extending by 8 months the following vendor contracts for over-the-phone-interpretation services with a not-to-exceed amount of \$15 million: Linguistica International, Propio Language Services, and Language Line Services, Inc.

Extending by 4 months the following vendor contracts for video-remote-interpretation services with a not-to-exceed amount of \$3 million: AMN Healthcare Services, Inc., and Language Line Services, Inc

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

- **News 12:** [Outreach workers tackling conversation on gun violence](#)
- **The Indian Panorama:** [NYC Health + Hospitals/Harlem receives Scopy Award from the American College of Gastroenterology for colon cancer outreach efforts](#)
- **Staten Island Advance:** ['The Black Angels,' nursing heroes of tuberculosis care, honored in Staten Island Museum exhibit](#)
- **Harlem World Magazine:** [Brushing Brilliance, NYC Health + Hospitals Seeks Artists For 2024 Community Mural Magic In Harlem](#)
- **The Bronx Times:** [The Bronx wonders what will become of Just Home plan to house formerly incarcerated individuals as it heads to the City Council](#)
- **Becker's:** [How NYC Health + Hospitals doubled new nurse retention](#)
- **Today's Dietitian:** [Food as Medicine: Advocating for Food as Medicine](#)
- **News 12:** [NYC Care Program Reaches 125,000 Members](#)
- **Healthcare Brew:** [NYC Health + Hospitals has facilitated more than 230 abortions by mail](#)
- **Amsterdam News:** [Reproductive care is healthcare: NYS & NYC put abortion](#)

[services at the forefront](#)

- **Healthcare Innovation:** [8 Hospitals Receive Health Care Equity Certification From The Joint Commission](#)
- **Becker's:** [New York City sues social media companies over youth mental health](#)
- **Gothamist:** [Released from the hospital with nowhere to go? NY has a budding alternative.](#)
- **Harlem World Magazine:** [NYC Health + Hospitals Releases New "The Remedy" Podcast Episode](#)
- **Forks Over Knives:** [7 Ways NYC Is Blazing a Trail for Healthier, More Sustainable Communities](#)
- **Pix 11:** [NYC offering free tax filings across Health and Hospitals locations: LIST](#)
- **Bronx Times:** [Red Initiative: North Central Bronx Hospital Raises Awareness for Women's Cardiovascular Disease](#)

# HERRC Program Overview

- ❑ H+H currently oversees 15 H+H HERRC sites serving ~24,000 daily guests
- ❑ Over 115,000 asylum seekers have been served at the 24/7 Arrival Center
- ❑ H+H committed \$465M of HERRC expenses on behalf of the City in Q2 of FY24
- ❑ In January, H+H participated in a Citywide asylum seeker PEG, which achieved \$1.7B Citywide across FY24 and FY25.
  - ❑ Savings were derived from operational efficiencies at HERRCs, reduced service costs, transfers of costlier shelters to non-profit operators, and revisions to the asylum seeker census forecast
- ❑ H+H's HERRC January Plan funding summary is:

| Fiscal Year | FY24   | FY25   |
|-------------|--------|--------|
| Total       | \$1.7B | \$1.8B |

- ❑ OMB has provided H+H with revenue to cover committed expenses to date through the HERRC MOU with the Mayor's Office and remains committed to continue covering all HERRC expenses moving forward in FY24 and FY25

**RESOLUTION - 06**

Authorizing New York City Health and Hospitals Corporation (the “System”) to execute contracts with **Rapid Reliable Testing NY LLC dba DocGo Inc., Medrite LLC dba Medrite Urgent Care, Cherokee Nation Management and Consulting, LLC, and Essey Group LLC dba The TempPosition Group of Companies for HERRC site administration staffing services** at a not to exceed amount of \$192,000,000 for a contract term of one year and two six-month renewal options exercisable at the discretion of the System.

**WHEREAS**, the System began operating its Humanitarian Emergency Response and Relief Centers (“HERRCs”) in October 2022 as a response to the mass influx of asylum seekers arriving in New York City (the “City”); and

**WHEREAS**, HERRCs provide a range of holistic services to asylum seekers including a place to stay, food, medical care, reconnection services, and connection to social services; and

**WHEREAS**, the System currently operates multiple HERRCs throughout the City, with dedicated facilities serving families with minor children, single adult women and adult families, or single adult men; and

**WHEREAS**, the System is currently utilizing Medrite LLC dba Medrite Urgent Care and Rapid Reliable Testing NY LLC dba DocGo Inc to provide HERRC site administration staffing services, which includes hiring and managing staff to perform 24/7 robust operational support services across all HERRC sites and the Arrival Center; and

**WHEREAS**, the System has identified a need for the continuation of HERRC site administration staffing services for the hiring and managing of staff to perform tasks, including badge in and badge out management, line management, mailroom operations, bed assignments, managing lost and found, and short-term initiative supports such as federal work authorization; and

**WHEREAS**, the System conducted an open and competitive RFP process under the supervision and assistance, of Supply Chain to identify additional vendors, in which 40 firms attended a pre-proposal conference and 18 subsequently submitted proposals; and

**WHEREAS**, of the 18 proposals submitted, the four vendors who received the highest ratings have been selected for award; and

**WHEREAS**, those awarded vendors will provide services on an as-needed basis without a minimum usage requirement; and

**WHEREAS**, the Office of Ambulatory Care will be responsible for the management of the proposed contracts.

**NOW THEREFORE, be it**

**RESOLVED**, that New York City Health and Hospitals Corporation be and hereby is authorized to execute contracts with Rapid Reliable Testing NY LLC dba DocGo Inc., Medrite LLC dba Medrite Urgent Care, Cherokee Nation Management and Consulting, LLC, and Essey Group LLC dba The TempPosition Group of Companies for HERRC site administration staffing services at a not to exceed amount of \$192,000,000 for a contract term of one year and two six-month renewal options exercisable at the discretion of the System.

**EXECUTIVE SUMMARY**  
**HERRC SITE ADMINISTRATION STAFFING SERVICES**  
**RAPID RELIABLE TESTING NY LLC DBA DOCGO INC., MEDRITE LLC DBA MEDRITE**  
**URGENT CARE, CHEROKEE NATION MANAGEMENT AND CONSULTING, LLC, AND**  
**ESSEY GROUP LLC DBA THE TEMPOSITION GROUP OF COMPANIES**

- OVERVIEW:** The System began operating its Humanitarian Emergency Response and Relief Centers (“HERRCs”) in October 2022 as a response to the mass influx of asylum seekers arriving in New York City (“the City”). The System currently operates multiple HERRCs throughout the City for the provision of a range of holistic services to asylum seekers. Site administration staffing services are required to provide 24/7 robust operational support services across all HERRC sites and the Arrival Center. Such site administration staff would perform tasks, including badge in and badge out management, line management, mailroom operations, bed assignments, managing lost and found, and short-term initiative supports such as federal work authorization. The proposed contracts will support the asylum-seeker population at the HERRCs.
- PROCUREMENT:** The System conducted an open and competitive Request for Proposals (“RFP”) to establish a pool of vendors to provide HERRC site administration staffing services to the System on an as-needed basis. The RFP was sent directly to 16 prospective vendors, and 40 prospective vendors attended a pre-proposal conference. A total of 18 firms submitted proposals and, of the proposals submitted, the Evaluation Committee selected the top four rated proposers to provide site administration staffing services to the System.
- COSTS:** The total not-to-exceed cost for the proposed contract over its full, potential two-year term is not to exceed \$192,000,000.
- NYC Health + Hospitals site administrative staffing expenses will be covered by HERRC MOU with the Mayor’s Office
- MWBE:** An overall MWBE utilization goal of 35% has been established and accepted by Rapid Reliable Testing NY LLC dba DocGo Inc., Medrite LLC dba Medrite Urgent Care, Cherokee Nation Management and Consulting, LLC, and Essey Group LLC dba The TempPosition Group of Companies.

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

From: Irmali Rivera-Bazan Irmali Rivera-Bazan  
Associate Counsel Office of Legal Affairs  
Digitally signed by Irmali Rivera-Bazan  
Date: 2024.03.20 10:54:34 -04'00'

Re: Vendor Responsibility, EEO and MWBE status for Board Review of Contract

Contract: RFP No. 2723 HERRC Site Administrative Staffing Services

Date: March 20, 2024

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

| <u>Vendor</u>   | <u>Vendor Responsibility</u> | <u>EEO</u> | <u>MWBE</u> |
|---|------------------------------|------------|-------------|
| Rapid Reliable Testing NY LLC dba DocGo Inc.            | Approved                     | Pending    | 35%         |
| Medrite LLC dba Medrite Urgent Care                     | Approved                     | Approved   | 35%         |
| Cherokee Nation Management and Consulting, LLC          | Approved                     | Approved   | 35%         |
| Essey Group LLC dba The TempPosition Group of Companies | Approved                     | Pending    | 35%         |

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



# **Humanitarian Emergency Response and Relief Centers (HERRCs)**

## **Application to Award Contracts for Site Administration Staffing Services:**

**Rapid Reliable Testing NY LLC dba DocGo Inc., Medrite LLC dba Medrite Urgent Care,  
Cherokee Nation Management and Consulting, LLC, and Essey Group LLC dba The  
TempPosition Group of Companies**

**Board of Directors Meeting  
March 28, 2024**

**Chris Keeley, Senior Assistant Vice President  
Office of Ambulatory Care**



## For Board Consideration

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- Authorizing New York City Health and Hospitals Corporation (the “System”) to execute contracts with **Rapid Reliable Testing NY LLC dba DocGo Inc., Medrite LLC dba Medrite Urgent Care, Cherokee Nation Management and Consulting, LLC, and Essey Group LLC dba The TempPosition Group of Companies** for HERRC site administration staffing services at a not to exceed amount of \$192,000,000 for a contract term of one year and two six-month renewal options exercisable at the discretion of the System.

# Scope Breadth

- Site administrative staffing currently provides 24/7 robust operational support services across all HERRC sites and the Arrival Center
- Specific tasks include badge in and badge out management, line management, mailroom operations, bed assignments, managing lost and found, and short-term initiative supports such as federal work authorization clinics
- These vendors hire and manage those staff, ultimately reporting to the H+H manager on site, just as other vendors report to H+H, such as laundry, food, and security
- Two existing contracts
  - DocGo
  - MedRite
- Historical spend since October 2022
  - DocGo: NYC Health + Hospitals has committed \$113.9 million through February 2024 and has paid out \$47.9 million
  - MedRite: NYC Health + Hospitals has committed \$94.8 million through February 2024 and has paid out \$41.3 million
  - Pricing is hourly staff rates with reimbursement for certain supplies or equipment
- HERRC has split site administrative staffing and clinical staffing into two contracts to identify additional vendors and improve each vertical's future state scopes of service
- RFP was done to competitively bid for these services and identify additional vendors that may be well-suited to this work
- NYC Health + Hospitals expenses will be covered by HERRC MOU with the Mayor's Office

# RFP Criteria

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## ➤ Minimum criteria:

- Three years in business performing front end staffing services at a similar scale
- M/WBE status, Utilization Plan, or Waiver Request
- \$3 million in annual revenue for each of the last three years

## ➤ Evaluation Committee:

- COO, Ambulatory Care
- Program Manager, HERRC
- Senior Consultant, HERRC Finance
- Program Director, HERRC
- Director of Practice Optimization, Ambulatory Care Operations

## ➤ Substantive Criteria

- 30% Relevant experience
- 25% Readiness to deploy
- 25% Cost
- 10% Cultural competency
- 10% MWBE

# Overview of Procurement

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- 12/12/23: Application to issue request for proposals approved by CRC
- 01/08/24: RFP Posted on City Record, sent directly to 16 vendors
- 01/12/24: Pre-proposal conference held, 40 vendors attended
- 01/26/24: Proposals due, 18 proposals received
- 02/05/24: Evaluation committee debriefed and submitted final scores.  
Below are the top 4 proposers:
  - Rapid Reliable Testing NY LLC dba DocGo Inc.
  - Medrite LLC dba Medrite Urgent Care
  - Cherokee Nation Management and Consulting, LLC
  - Essey Group LLC dba The TempPosition Group of Companies

# Vendor Performance

| <b>Department of Supply Chain</b><br><b>Vendor Performance Evaluation</b><br><b>RapidReliableTesting DBA DocGo</b>   |               |
|--|---------------|
| <b>DESCRIPTION</b>   | <b>ANSWER</b> |
| Did the vendor meet its budgetary goals, exercising reasonable efforts to contain costs, including change order pricing?   | Satisfactory  |
| Has the vendor met any/all of the minority, women and emerging business enterprise participation goals and/or Local Business enterprise requirements, to the extend applicable?  | Satisfactory  |
| Did the vendor and any/all subcontractors comply with applicable Prevailing Wage requirements?   | Satisfactory  |
| Did the vendor maintain adequate records and logs, and did it submit accurate, complete and timely payment requisitions, fiscal reports and invoices, change order proposals, timesheets and other required daily and periodic record submissions (as applicable)? | Satisfactory  |
| Did the vendor submit its proposed subcontractors for approval in advance of all work by such subcontractors?  | Satisfactory  |
| Did the vendor pay its suppliers and subcontractors, if any, promptly?   | Satisfactory  |
| Did the vendor and its subcontractors perform the contract with the requisite technical skill and expertise?   | Satisfactory  |
| Did the vendor adequately supervise the contract and its personnel, and did its supervisors demonstrate the requisite technical skill and expertise to advance the work  | Satisfactory  |
| Did the vendor adequately staff the contract?  | Satisfactory  |
| Did the vendor fully comply with all applicable safety standards and maintain the site in an appropriate and safe condition?   | Satisfactory  |
| Did the vendor fully cooperate with the agency, e.g., by participating in necessary meetings, responding to agency orders and assisting the agency in addressing complaints from the community during the construction as applicable?                              | Satisfactory  |
| Did the vendor adequately identify and promptly notify the agency of any issues or conditions that could affect the quality of work or result in delays, and did it adequately and promptly assist the agency in resolving problems?                               | Satisfactory  |
| Performance and Overall Quality Rating Satisfactory  | Satisfactory  |

# Vendor Performance

**Department of Supply Chain**  
**Vendor Performance Evaluation**  
**MedRite**

| DESCRIPTION  | ANSWER       |
|--|--------------|
| Did the vendor meet its budgetary goals, exercising reasonable efforts to contain costs, including change order pricing?   | Satisfactory |
| Has the vendor met any/all of the minority, women and emerging business enterprise participation goals and/or Local Business enterprise requirements, to the extent applicable?  | Satisfactory |
| Did the vendor and any/all subcontractors comply with applicable Prevailing Wage requirements?   | Satisfactory |
| Did the vendor maintain adequate records and logs, and did it submit accurate, complete and timely payment requisitions, fiscal reports and invoices, change order proposals, timesheets and other required daily and periodic record submissions (as applicable)? | Satisfactory |
| Did the vendor submit its proposed subcontractors for approval in advance of all work by such subcontractors?  | Satisfactory |
| Did the vendor pay its suppliers and subcontractors, if any, promptly?   | Satisfactory |
| Did the vendor and its subcontractors perform the contract with the requisite technical skill and expertise?   | Satisfactory |
| Did the vendor adequately supervise the contract and its personnel, and did its supervisors demonstrate the requisite technical skill and expertise to advance the work  | Satisfactory |
| Did the vendor adequately staff the contract?  | Satisfactory |
| Did the vendor fully comply with all applicable safety standards and maintain the site in an appropriate and safe condition?   | Satisfactory |
| Did the vendor fully cooperate with the agency, e.g., by participating in necessary meetings, responding to agency orders and assisting the agency in addressing complaints from the community during the construction as applicable?                              | Satisfactory |
| Did the vendor adequately identify and promptly notify the agency of any issues or conditions that could affect the quality of work or result in delays, and did it adequately and promptly assist the agency in resolving problems?                               | Satisfactory |
| Performance and Overall Quality Rating Satisfactory  | Satisfactory |

# Vendor Background

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- Cherokee Nation Management and Consulting, LLC
  - Federally licensed Minority Business Enterprise with experience completing over 115 emergency preparedness and response projects
  - Experienced providing direct site administrative staffing for asylum seekers in short term, rapid construction transient settings
  - Have active recruitment pipelines across a variety of specialties and the agility to rapidly scale up or down in response to changing needs
  
- Essey Group LLC dba The TempPosition Group of Companies
  - Highly experienced with HERRC work through their contract with NYC DHS, where they provide site administrative staffing for a cumulative 53 DHS HERRC sites
  - Working Experience with NYC Health + Hospitals' Arrival Center model and workflows including cot/room assignments and centralized intake



## Cost Analysis

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- All selected vendors are priced competitively, with the staffing title expected to be most prevalent, administrative generalist, ranging between \$43-50 per hour across all vendors.
- Incumbent vendors saw active cost saving measures or no net increases, with all site administration lines either staying at the same bill rates, or seeing reductions.

## Assignment of Work

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- No work is guaranteed under this contract
- Work will be assigned based on operational need, vendor capacity, and financial competitiveness; contract can be sunset at any time with less than 90 day notice, and work can be reassigned from a vendor with 30 day notice
- When new vendors are introduced to a site, the on-site H+H manager is responsible for operational integration and program leadership ensures strategic alignment

# Vendor Diversity

| Vendor Name  | MWBE Vendor                   | Subcontracted SOW           | Certification            | UP Goal % |
|--|-------------------------------|-----------------------------|--------------------------|-----------|
| <b>Medrite</b>                                     | Staffing Boutique             | Supplemental Staffing       | NYC/NYS Non-Minority WBE | 35%       |
|  | Alliance Supply Inc.          | Medical and Office Supplies | NYC Non-Minority WBE     |           |
| <b>DocGo</b>                                       | CFF Consulting                | Supplemental Staffing       | NYC/NYS Hispanic MBE     | 35%       |
|  | Judit, Inc.                   | Supplemental Staffing       | NYC/NYS Non-Minority WBE |           |
|  | Nifty Concept, Inc            | Medical Supplies            | NYC Black MBE            |           |
| <b>Cherokee Nation Management &amp; Consulting</b> | Carter Lard                   | Supplemental Staffing       | NYC Black MBE            | 35%       |
| <b>Essey Group LLC dba The TemPositions Group</b>  | Jennifer Temps                | Supplemental Staffing       | NYC Black M/WBE          | 35%       |
|  | Penda Aiken, Inc              | Supplemental Staffing       | NYC Black M/WBE          |           |
|  | Admiral Staffing Inc.         | Supplemental Staffing       | NYC Asian Male           |           |
|  | Gainor Temporaries            | Supplemental Staffing       | NYC Non-Minority WBE     |           |
|  | Medical Staffing Services     | Supplemental Staffing       | Certification Pending    |           |
|  | Cure Staffing                 | Supplemental Staffing       | NYC Non-Minority WBE     |           |
|  | The Custom Group of Companies | Supplemental Staffing       | NYC Non-Minority WBE     |           |

# Board Approval Request

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- Office of Ambulatory Care is seeking approval to enter into contract with **Rapid Reliable Testing NY LLC dba DocGo Inc., Medrite LLC dba Medrite Urgent Care, Cherokee Nation Management and Consulting, LLC, and Essey Group LLC dba The TempPosition Group of Companies** to provide site administrative staffing services at a not to exceed amount of \$192,000,000
- Contract start date: April 1st, 2024 with a term of 12 months with two six-month renewal options
- NYC Health + Hospitals site administrative staffing expenses will be covered by HERRC MOU with the Mayor's Office

## RESOLUTION - 07

Authorizing New York City Health and Hospitals Corporation (the “System”) to execute contracts with **Medrite LLC dba Medrite Urgent Care, Rapid Reliable Testing NY LLC dba DocGo Inc., Acuity International, LLC (legacy: Comprehensive Health Services, LLC), and RCM Technologies (USA) Inc. dba RCM Health Care Services for HERRC clinical staffing services** at a not to exceed amount of \$211,300,000 for a contract term of one year and two six-month renewal options exercisable at the discretion of the System.

**WHEREAS**, the System began operating its Humanitarian Emergency Response and Relief Centers (“HERRCs”) in October 2022 as a response to the mass influx of asylum seekers arriving in New York City (the “City”); and

**WHEREAS**, HERRCs provide a range of holistic services to asylum seekers including a place to stay, food, medical care, reconnection services, and connection to social services; and

**WHEREAS**, the System currently operates multiple HERRCs throughout the City, with dedicated facilities serving families with minor children, single adult women and adult families, or single adult men; and

**WHEREAS**, the System is currently utilizing Medrite LLC dba Medrite Urgent Care and Rapid Reliable Testing NY LLC dba DocGo Inc to provide HERRC clinical staffing services; and

**WHEREAS**, the System has identified a need for the continuation of HERRC clinical staffing services that includes capacity to provide medical triage at the Arrival Center, urgent care supports for new arrivals, vaccination efforts, and infectious disease testing and management, as well as, behavioral health services, such as social work and casework services to support guests during their stay at HERRCs; and

**WHEREAS**, the System conducted an open and competitive RFP process under the supervision and assistance, of Supply Chain to identify additional vendors, in which 28 firms attended a pre-proposal conference and 21 subsequently submitted proposals; and

**WHEREAS**, of the 21 proposals submitted, the four vendors who received the highest ratings have been selected for award; and

**WHEREAS**, those awarded vendors will provide services on an as-needed basis without a minimum usage requirement; and

**WHEREAS**, the Office of Ambulatory Care will be responsible for the management of the proposed contracts.

**NOW THEREFORE, be it**

**RESOLVED**, that New York City Health and Hospitals Corporation be and hereby is authorized to execute contracts with Medrite LLC dba Medrite Urgent Care, Rapid Reliable Testing NY LLC dba DocGo Inc., Acuity International, LLC (legacy: Comprehensive Health Services, LLC), and RCM Technologies (USA) Inc. dba RCM Health Care Services for HERRC clinical staffing services at a not to exceed amount of \$211,300,000 for a contract term of one year and two six-month renewal options exercisable at the discretion of the System.

**EXECUTIVE SUMMARY  
HERRC CLINICAL STAFFING SERVICES  
AGREEMENTS WITH  
MEDRITE LLC DBA MEDRITE URGENT CARE, RAPID RELIABLE TESTING NY LLC DBA  
DOCGO INC., ACUITY INTERNATIONAL, LLC (LEGACY: COMPREHENSIVE HEALTH  
SERVICES, LLC), AND RCM TECHNOLOGIES (USA), INC., DBA RCM HEALTH CARE  
SERVICES**

- OVERVIEW:** The System began operating its Humanitarian Emergency Response and Relief Centers (“HERRCs”) in October 2022 as a response to the mass influx of asylum seekers arriving in New York City (“the City”). The System currently operates multiple HERRCs throughout the City for the provision of a range of holistic services to asylum seekers. Clinical staffing services are required in order to provide medical triage at the Arrival Center, urgent care support for new arrivals, vaccination efforts, and infectious disease testing and management, as well as, behavioral health services. The proposed contracts will support the asylum-seeker population for the entire duration of their stay at the HERRCs.
- PROCUREMENT:** The System conducted an open and competitive Request for Proposals (“RFP”) to establish a pool of vendors to provide HERRC clinical staffing services to the System on an as-needed basis. The RFP was sent directly to 13 prospective vendors, and 28 prospective vendors attended a pre-proposal conference. A total of 21 firms submitted proposals and, of the proposals submitted, the Evaluation Committee selected the top four rated proposers to provide clinical staffing services to the System.
- COSTS:** The total not-to-exceed cost for the proposed contract over its full, potential two-year term is not to exceed \$211,300,000.
- NYC Health + Hospitals site administrative staffing expenses will be covered by HERRC MOU with the Mayor’s Office
- MWBE:** An overall MWBE utilization goal of 35% has been established and accepted by Medrite LLC dba Medrite Urgent Care, Rapid Reliable Testing NY LLC dba DocGo Inc., Acuity International, LLC (legacy: Comprehensive Health Services, LLC), and RCM Technologies (USA) Inc. dba RCM Health Care Services.

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

From: Irmali Rivera-Bazan Irmali Rivera-Bazan  
Associate Counsel Office of Legal Affairs  
Digitally signed by Irmali Rivera-Bazan  
Date: 2024.03.20 10:49:40 -04'00'

Re: Vendor Responsibility, EEO and MWBE Status for Board Review of Contract

Contract: RFP No. 2733 HERRC Clinical Staffing Services

Date: March 20, 2024

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

| <u>Vendor</u>  | <u>Vendor Responsibility</u> | <u>EEO</u> | <u>MWBE</u> |
|--|------------------------------|------------|-------------|
| Medrite LLC dba Medrite Urgent Care                                    | Approved                     | Approved   | 35%         |
| Rapid Reliable Testing NY LLC dba DocGo Inc.                           | Approved                     | Pending    | 35%         |
| Acuity International, LLC (legacy: Comprehensive Health Services, LLC) | Pending                      | Pending    | 35%         |
| RCM Technologies (USA) Inc. dba RCM Health Care Services               | Approved                     | Approved   | 35%         |

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

# **Humanitarian Emergency Response and Relief Centers (HERRCs)**

## **Application to Award Contracts for Clinical Staffing Services:**

**Medrite LLC dba Medrite Urgent Care, Rapid Reliable Testing NY LLC dba DocGo Inc.,  
Acuity International, LLC (legacy: Comprehensive Health Services, LLC), and RCM  
Technologies (USA) Inc. dba RCM Health Care Services**

**Board of Directors Meeting  
March 28, 2024**

**Chris Keeley - Senior Assistant Vice President  
Office of Ambulatory Care**





## For Board Consideration

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- Authorizing New York City Health and Hospitals Corporation (the “System”) to execute contracts with **Medrite LLC dba Medrite Urgent Care, Rapid Reliable Testing NY LLC dba DocGo Inc., Acuity International, LLC (legacy: Comprehensive Health Services, LLC), and RCM Technologies (USA) Inc. dba RCM Health Care Services for HERRC clinical staffing services** at a not to exceed amount of \$211,300,000 for a contract term of one year and two six-month renewal options exercisable at the discretion of the System.

## Clinical Services Scope

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- H+H currently operates 15 HERRCs as well as the City's Arrival Center
- All clients coming into the Arrival Center receive medical triage and assessments for short- and long-term physical and behavioral health needs
- Medical teams at the Arrival Center utilize a trauma-focused approach for both physical and behavioral health, provide vaccinations, and set up referrals for clients to the hospital system, when needed
- At HERRC sites, we provide on-site social workers and medical resources as needed, particularly regarding infectious disease

## Scope Breadth

- Seeking vendors to continue to provide these clinical services at the Arrival Center and in an ad hoc basis at HERRC facilities
- Two existing contracts
  - DocGo
  - MedRite
- Historical spend since October 2022
  - DocGo: NYC Health + Hospitals has committed \$144.9 million through February 2024 and has paid out \$64.9 million
  - MedRite: NYC Health + Hospitals has committed \$36.3 million through February 2024 and has paid out \$11.4 million
  - Pricing is hourly staff rates with reimbursement for certain supplies or equipment
- No ancillary costs
- RFP was done to competitively bid for these services and identify additional vendors that may be well-suited to this work
- NYC Health + Hospitals expenses will be covered by HERRC MOU with the Mayor's Office

# RFP Criteria

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## ➤ Minimum criteria:

- Three years in business performing clinical staffing services at a similar scale
- M/WBE status, Utilization Plan, or Waiver Request
- \$3 million in annual revenue for each of the last three years

## ➤ Substantive Criteria

- 30% Relevant experience
- 25% Readiness to deploy
- 25% Cost
- 10% Cultural competency
- 10% MWBE

## ➤ Evaluation Committee:

- COO, Ambulatory Care
- Health & Human Services Program Director, HERRC
- Senior Consultant, HERRC Finance
- Behavioral Health Program Director, HERRC
- Medical Advisor to HERRC and Executive Director NYC Care
- Assistant Director, Community Affairs

# Overview of Procurement

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- 12/12/23: Application to issue request for proposals approved by CRC
- 01/08/24: RFP Posted on City Record, sent directly to 13 vendors
- 01/12/24: Pre-proposal conference held, 28 vendors attended
- 01/26/24: Proposals due, 21 proposals received
- 02/02/24: Evaluation committee debriefed and submitted final scores. Below are the top 4 proposers:
  - Medrite LLC dba Medrite Urgent Care
  - Rapid Reliable Testing NY LLC dba DocGo Inc.
  - Acuity International, LLC (legacy: Comprehensive Health Services, LLC)
  - RCM Technologies (USA) Inc. dba RCM Health Care Services

# Vendor Performance

**Department of Supply Chain**  
**Vendor Performance Evaluation**  
**MedRite**

| DESCRIPTION  | ANSWER       |
|--|--------------|
| Did the vendor meet its budgetary goals, exercising reasonable efforts to contain costs, including change order pricing?   | Satisfactory |
| Has the vendor met any/all of the minority, women and emerging business enterprise participation goals and/or Local Business enterprise requirements, to the extent applicable?  | Satisfactory |
| Did the vendor and any/all subcontractors comply with applicable Prevailing Wage requirements?   | Satisfactory |
| Did the vendor maintain adequate records and logs, and did it submit accurate, complete and timely payment requisitions, fiscal reports and invoices, change order proposals, timesheets and other required daily and periodic record submissions (as applicable)? | Satisfactory |
| Did the vendor submit its proposed subcontractors for approval in advance of all work by such subcontractors?  | Satisfactory |
| Did the vendor pay its suppliers and subcontractors, if any, promptly?   | Satisfactory |
| Did the vendor and its subcontractors perform the contract with the requisite technical skill and expertise?   | Satisfactory |
| Did the vendor adequately supervise the contract and its personnel, and did its supervisors demonstrate the requisite technical skill and expertise to advance the work  | Satisfactory |
| Did the vendor adequately staff the contract?  | Satisfactory |
| Did the vendor fully comply with all applicable safety standards and maintain the site in an appropriate and safe condition?   | Satisfactory |
| Did the vendor fully cooperate with the agency, e.g., by participating in necessary meetings, responding to agency orders and assisting the agency in addressing complaints from the community during the construction as applicable?                              | Satisfactory |
| Did the vendor adequately identify and promptly notify the agency of any issues or conditions that could affect the quality of work or result in delays, and did it adequately and promptly assist the agency in resolving problems?                               | Satisfactory |
| Performance and Overall Quality Rating Satisfactory  | Satisfactory |

# Vendor Performance

| <b>Department of Supply Chain</b><br><b>Vendor Performance Evaluation</b><br><b>RapidReliableTesting DBA DocGo</b>   |              |
|--|--------------|
| DESCRIPTION  | ANSWER       |
| Did the vendor meet its budgetary goals, exercising reasonable efforts to contain costs, including change order pricing?   | Satisfactory |
| Has the vendor met any/all of the minority, women and emerging business enterprise participation goals and/or Local Business enterprise requirements, to the extend applicable?  | Satisfactory |
| Did the vendor and any/all subcontractors comply with applicable Prevailing Wage requirements?   | Satisfactory |
| Did the vendor maintain adequate records and logs, and did it submit accurate, complete and timely payment requisitions, fiscal reports and invoices, change order proposals, timesheets and other required daily and periodic record submissions (as applicable)? | Satisfactory |
| Did the vendor submit its proposed subcontractors for approval in advance of all work by such subcontractors?  | Satisfactory |
| Did the vendor pay its suppliers and subcontractors, if any, promptly?   | Satisfactory |
| Did the vendor and its subcontractors perform the contract with the requisite technical skill and expertise?   | Satisfactory |
| Did the vendor adequately supervise the contract and its personnel, and did its supervisors demonstrate the requisite technical skill and expertise to advance the work  | Satisfactory |
| Did the vendor adequately staff the contract?  | Satisfactory |
| Did the vendor fully comply with all applicable safety standards and maintain the site in an appropriate and safe condition?   | Satisfactory |
| Did the vendor fully cooperate with the agency, e.g., by participating in necessary meetings, responding to agency orders and assisting the agency in addressing complaints from the community during the construction as applicable?                              | Satisfactory |
| Did the vendor adequately identify and promptly notify the agency of any issues or conditions that could affect the quality of work or result in delays, and did it adequately and promptly assist the agency in resolving problems?                               | Satisfactory |
| Performance and Overall Quality Rating Satisfactory  | Satisfactory |

# Vendor Performance

| <b>Department of Supply Chain</b><br><b>Vendor Performance Evaluation</b><br><b>Acuity International, LLC</b><br><b>(legacy: Comprehensive Health Services, LLC)</b>   |               |
|--|---------------|
| <b>DESCRIPTION</b>   | <b>ANSWER</b> |
| Did the vendor meet its budgetary goals, exercising reasonable efforts to contain costs, including change order pricing?   | Satisfactory  |
| Has the vendor met any/all of the minority, women and emerging business enterprise participation goals and/or Local Business enterprise requirements, to the extend applicable?  | Satisfactory  |
| Did the vendor and any/all subcontractors comply with applicable Prevailing Wage requirements?   | Satisfactory  |
| Did the vendor maintain adequate records and logs, and did it submit accurate, complete and timely payment requisitions, fiscal reports and invoices, change order proposals, timesheets and other required daily and periodic record submissions (as applicable)? | Satisfactory  |
| Did the vendor submit its proposed subcontractors for approval in advance of all work by such subcontractors?  | Satisfactory  |
| Did the vendor pay its suppliers and subcontractors, if any, promptly?   | Satisfactory  |
| Did the vendor and its subcontractors perform the contract with the requisite technical skill and expertise?   | Satisfactory  |
| Did the vendor adequately supervise the contract and its personnel, and did its supervisors demonstrate the requisite technical skill and expertise to advance the work  | Satisfactory  |
| Did the vendor adequately staff the contract?  | Satisfactory  |
| Did the vendor fully comply with all applicable safety standards and maintain the site in an appropriate and safe condition?   | Satisfactory  |
| Did the vendor fully cooperate with the agency, e.g., by participating in necessary meetings, responding to agency orders and assisting the agency in addressing complaints from the community during the construction as applicable?                              | Satisfactory  |
| Did the vendor adequately identify and promptly notify the agency of any issues or conditions that could affect the quality of work or result in delays, and did it adequately and promptly assist the agency in resolving problems?                               | Satisfactory  |
| Performance and Overall Quality Rating Satisfactory  | Satisfactory  |



# Vendor Background

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- Acuity International, LLC (legacy: Comprehensive Health Services, LLC)
  - 47 years of experience providing clinical staffing services, including significant experience working with the population and in shelter and transient settings
  - Able to scale at significant rates to meet any reasonable clinical demands, as was highlighted with their work for NYC Health + Hospitals during the early days of COVID
- RCM Technologies (USA) Inc. dba RCM Health Care Services
  - 45 years of experience providing on-site clinical staffing, including experience providing clinical staffing for NYC Health + Hospitals
  - Vendor is also experienced with City government, where they provide behavioral health clinical staff to the NYC Department of Education and NYC Administration for Children's Services

## Cost Analysis

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- Cost assessments looked at proposed hourly pricing titles for each area of this contract – physical health as well as behavioral health, which includes mental health and casework services
- All selected vendors are priced competitively; for example, Masters of Social Work bill rates range from \$80-95 per hour across all vendors
- Incumbent vendors saw active cost saving measures or minimal hourly rate increases for key roles such as Registered Nurses
- To offset certain increases, incumbents also saw reductions in certain non-clinical hourly lines, such as Caseworkers

## Assignment of Work

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- No work is guaranteed under this contract
- Work will be assigned based on operational need, vendor capacity, and financial competitiveness; Contract can be sunset at any time with less than 90 day notice, and work can be reassigned from a vendor with 30 day notice
- When new vendors are introduced to a site the on-site H+H manager is responsible for operational integration and program leadership ensures strategic alignment

# Vendor Diversity

| Vendor Name  | MWBE Vendor                  | Subcontracted SOW     | Certification            | UP Goal %  |
|--|------------------------------|-----------------------|--------------------------|------------|
| <b>Medrite</b>   | Staffing Boutique            | Supplemental Staffing | NYC/NYS Non-Minority WBE | <b>35%</b> |
| <b>DocGo</b>   | CFF Consulting               | Supplemental Staffing | NYC/NYS Hispanic MBE     | <b>35%</b> |
|  | Judit, Inc.                  | Supplemental Staffing | NYC/NYS Non-Minority WBE |            |
|  | Nifty Concept, Inc           | Medical Supplies      | NYC/NYS Black MBE        |            |
| <b>RCM Technologies</b>  | Remede Consulting Group Inc. | Supplemental Staffing | NYC/NYS Asian MBE        | <b>35%</b> |
|  | Elevation Health Group       | Supplemental Staffing | NYC Non-Minority WBE     |            |
| <b>Acuity International<br/>(legacy: Comprehensive Health Services, LLC)</b> | Alexis Young                 | Supplemental Staffing | NYC Non-Minority WBE     | <b>35%</b> |

# Board Approval Request

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- Office of Ambulatory Care is seeking approval to enter into contract **with Medrite LLC dba Medrite Urgent Care, Rapid Reliable Testing NY LLC dba DocGo Inc., Acuity International, LLC (legacy: Comprehensive Health Services, LLC), and RCM Technologies (USA) Inc. dba RCM Health Care Services** to provide to provide clinical staffing services at a not to exceed amount of \$211,300,000
- Contract start date: April 1st, 2024 with a term of 12 months with two six-month renewal options
- NYC Health + Hospitals clinical staffing expenses will be covered by HERRC MOU with the Mayor's Office

## RESOLUTION - 08

Authorizing New York City Health and Hospitals Corporation (the “System”) to execute and agreement with **Gallagher Bassett Services, Inc. for the provision of Medical Malpractice Claims Management Services** on behalf of the System for an initial period of three-years with two one-year renewal options, exercisable at the discretion of the System. The not-to-exceed amount for the anticipated five-year term is \$35,850,000.

**WHEREAS**, the vendor will provide medical malpractice claims management services; and

**WHEREAS**, the Request for Proposals for the provision of medical malpractice claims management services was released on October 26, 2023 through its Supply Chain Services Unit, followed by a pre-proposal conference, attended by six vendors; and

**WHEREAS**, of the six vendors that attended the pre-proposal conference, four vendors submitted proposals and were evaluated by the evaluation committee; and

**WHEREAS**, in conformance with its procurement operating procedure, the System received and evaluated proposals from four vendors and evaluated such proposals among a diverse evaluation committee; and

**WHEREAS**, the following vendor was selected to receive a contract award: Gallagher Bassett Services, Inc.; and

**WHEREAS**, the Deputy Counsel, Office of Legal Affairs will be responsible for the administration of the proposed agreements.

### **NOW THEREFORE, be it**

**RESOLVED**, that the New York City Health and Hospitals Corporation, be and hereby is authorized, to execute an agreement with Gallagher Bassett Services, Inc. for medical malpractice claims management services on behalf of the System. The initial term shall be three-years and two one-year renewal options, solely exercisable by the System. The not-to-exceed amount for the anticipated five-year term is \$35,850,000.

**EXECUTIVE SUMMARY  
RESOLUTION TO AUTHORIZE CONTRACT  
WITH ONE VENDOR**

|                    |  |
|--------------------|--|
| <b>OVERVIEW</b>    | The purpose of this agreement is to provide medical malpractice claims management services.  |
| <b>PROCUREMENT</b> | The System undertook an RFP to procure vendors to provide medical malpractice claims management services. Four vendors provided proposals. After evaluation, one vendor was selected to provide services: Gallagher Bassett Services, Inc. |
| <b>NEED</b>        | The vendor will provide medical malpractice claims management services.  |
| <b>TERM</b>        | This agreement shall not exceed \$35,850,000 for the anticipated five-year term.   |
| <b>MWBE</b>        | The services procured under this contract will be self-performed by the winning vendor.  |

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

From: Irmali Rivera-Bazan  
Associate Counsel  
Office of Legal Affairs

Irmali  
Rivera-  
Bazan

Digitally signed  
by Irmali Rivera-  
Bazan  
Date: 2024.02.26  
13:44:51 -05'00'

Re: Vendor Responsibility, EEO and MWBE status for Board review of Contracts for Medical  
Malpractice Claims Services

Date: February 26, 2024

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

| <u>Vendor Name</u>               | <u>Vendor Responsibility</u> | <u>EEO</u> | <u>MWBE</u> |
|----------------------------------|------------------------------|------------|-------------|
| Gallagher Bassett Services, Inc. | Approved                     | Pending    | N/A         |

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



# **Medical Malpractice Claims Management Services**

**Application to Award Contract to:  
Gallagher Bassett Services, Inc.**

**Board of Directors Meeting  
March 28, 2024**

**David C. Y. Cheung, Deputy Counsel  
Office of Legal Affairs**



## For Board Consideration

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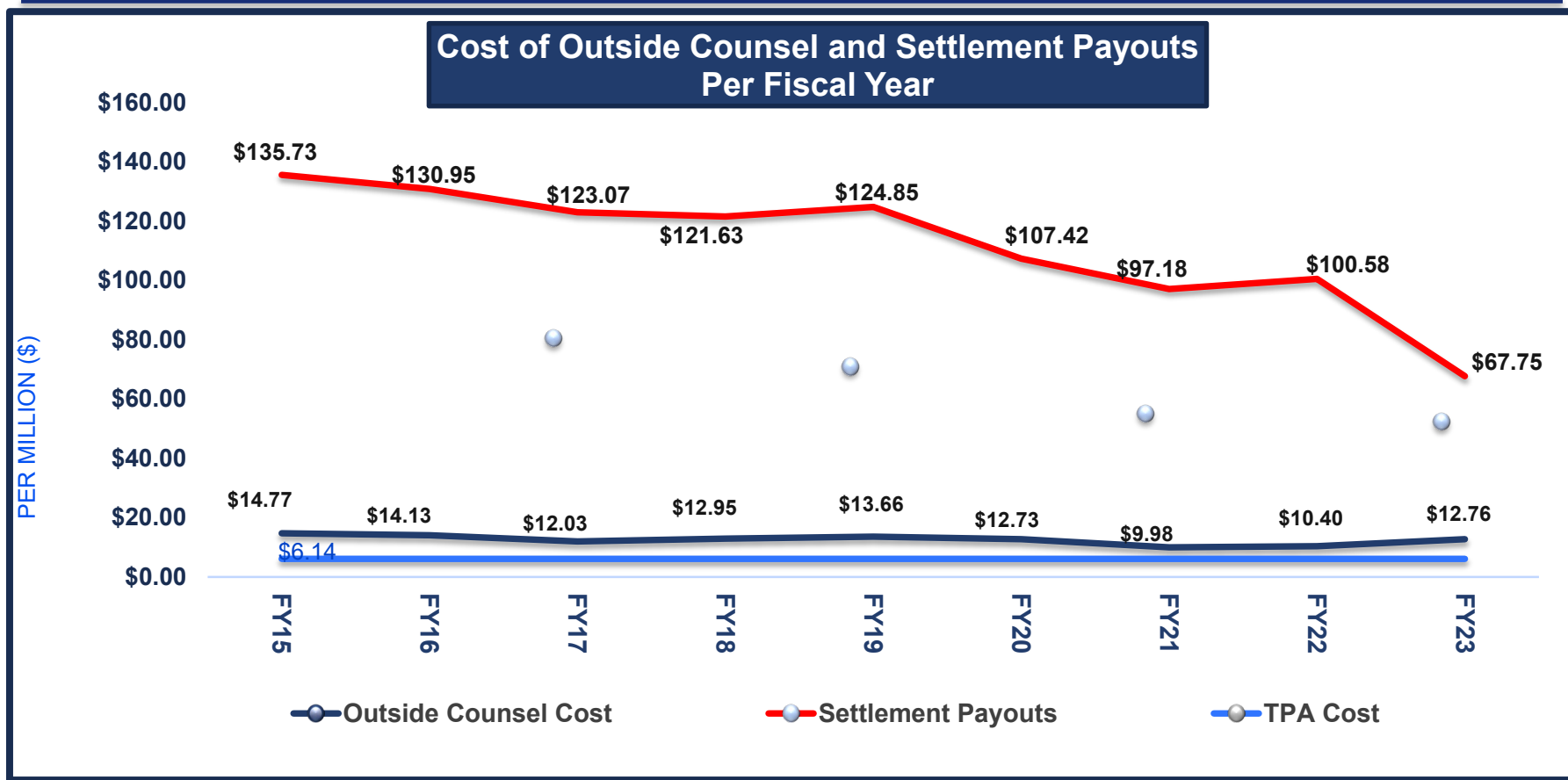
- Authorizing New York City Health and Hospitals Corporation (the “System”) to execute an agreement with **Gallagher Bassett Services, Inc. for the provision of Medical Malpractice Claims Management Services** on behalf of the System for an initial period of three-years with two one-year renewal options, exercisable at the discretion of the System. The not-to-exceed amount for the anticipated five-year term is \$35,850,000.

## Background/Current State

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- The Office of Legal Affairs, Claims and Litigation Unit, manages all of the medical malpractice claims against the System
  - 1500-1600 matters at any given time handled in-house and by outside counsel
- Claims Management Services by a Third Party Administrator (TPA) is needed to manage the volume of claims and Medical Malpractice costs
- Largest components of Medical Malpractice costs:
  - Settlements and Payouts
  - Outside Counsel legal fees

# TPA Contributes to Management of Outside Counsel and Settlement Costs



- Counsel costs: Relatively flat for the past 9 years (despite increase in rates in FY23)\*
- Settlement and Payouts: Reduced from \$135M in FY15 to \$67M in FY23
- TPA costs: \$6.14M annually (FY15 - FY23)

\*H+H receives funding from the City for costs related to Medical Malpractice defense as part of longstanding agreement. 4

# Overview of Scope of Services

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- We have had the same TPA since 2002
  - Annual contract cost is \$6.14M
  - Expiration date of contract is 08/30/2024
  
- In April 2023, a Request For Information (RFI) was published in the City Register to determine whether other vendors had capacity to provide requested services
  - 5 TPA vendors submitted responses
  - Based upon those responses, we proceeded with an RFP
  
- Scope of Services from RFP:
  - Early Investigation (Record reviews and interviews)
  - Outside Counsel Supervision
  - Tracking, Monitoring and Reporting
  - Electronic Database Management
  - Regulatory Compliance and Reporting
  - Maintaining indemnity and Expense Reserves

# RFP Criteria

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## ➤ Minimum Criteria

- 10 years of experience (claims management services for medical malpractice)
- Insurance - \$5 million
- \$25 million gross operating income

## ➤ Substantive Criteria

- 40% Subject Matter Expertise (methodology, approach, past experience, and client references)
- 20% Cost
- 20% Implementation Plan
- 20% Technology (support for vendor application)

## ➤ Evaluation Committee

- Deputy Counsel
- Senior Counsel
- Associate Counsel
- Associate Executive Director Risk Management
- Director Risk Management Quality and Safety
- CMO of H+H/Queens

# Vendor Overview

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- RFP selection committee chose Gallagher Bassett out of a pool of 4 vendors that submitted proposals
- Annual cost, which remained flat for 10 years, will be a bit higher at approximately \$7million/year
- Advantages of new vendor are also significant
  - Gallagher Bassett will staff with experienced medical malpractice lawyers
    - Monitor outside counsel tasks
    - Audit outside counsel billing
    - Provide strategies for earlier resolution of claims
    - Expand Fast Track Program (early investigations by nurse investigators)
    - Expert databases to assist in formulating defenses
    - Settlement databases to assist in negotiating resolutions
  - Dedicated IT/Technology team to migrate legacy data to new System
  - Modern data system which will allow for data analysis and more insights to emerge from our claims data
  - Reference checks were completed and vendor performed exceptionally well with other systems.

# Vendor Diversity

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## ➤ Subcontract Goal Setting

- The services procured under this contract will be self-performed by the winning vendors.
- The only subcontracting potential is related to the captive insurance program, which amounts to a very small portion of the overall contract value (~5%). The winning vendor and our diversity team were unable to identify any MWBE vendors to provide these services.
- Accordingly, without any MWBEs available to perform any of the potentially subcontracted work, no goal was set on this solicitation.

## ➤ Prime Contractors

- The Vendor Diversity Team reviewed the vendor diversity databases and found no MWBE third party administrator for direct invite.



# Board Approval Request

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- The Office of Legal Affairs, Claims and Litigation Unit, is seeking approval to:
  - Award a contract to Gallagher Bassett to provide medical malpractice claims services at a not-to-exceed amount of \$35,850,000
- The proposed contract will be a term of three years with two one-year options to renew.
  - Maximum spend for new contract will be \$7,000,000 each year for the first three years (roughly 15% increase from same rate for last 10 years) and \$7,350,000 in optional years 4 and 5 (roughly 5% increase).
  - One-time cost of \$150,000 in the first year only (migration and implementation of new claims database system).
- The proposed contract will allow us to reduce or remove any category of service provided by the TPA on 30 days' notice.

**RESOLUTION - 09**

Authorizing New York City Health and Hospitals Corporation (the “System”) to sign a 10-year lease with **Coney Island Associates Retail 2 LLC (“Developer”)** for approximately **6,250 sq. ft. on the 1<sup>st</sup> floor of a to-be-constructed building at 2932 West 16<sup>th</sup> Street in Coney Island (the “Premises”)** to house the **Behavioral Health and Chemical Dependency practice (the “Practice”)** of the **Ida G. Israel Community Health Clinic (the “Clinic”)** operated by **NYC Health + Hospitals/South Brooklyn Health (the “Facility”)** now operating on an adjacent lot for a yearly rent of \$25/sq. ft. to be escalated by 10% after 5 years plus the provision of 10 parking spaces charged at \$150/month for each parking space; provided that Developer will build out the Premises to the System’s specifications within a budget of \$2.5M, with the System paying Developer \$2M of this expense ; and provided further that the System shall hold two 5-year options to renew the lease with the rent during the first renewal term to be at the higher of 95% of fair market value or 10% over the prior rent and with the rent for the second renewal term to be at a 10% increase over the prior rent with the rent over the entire potential 20-year term totaling approximately \$3,985,781.

**WHEREAS**, in 2012, Hurricane Sandy destroyed the Clinic’s rented space in the Coney Island neighborhood forcing its urgent relocation; and

**WHEREAS**, in 2013, New York City Department of Housing Preservation and Development (“HPD”) licensed the Clinic’s current location to the System for the Clinic’s operation with the warning that the location was slated for the development of affordable housing as part of a three-phase development plan with an unspecified schedule; and

**WHEREAS**, Phase I of HPD’s development plan is completed, Phase II involving the construction of the 2<sup>nd</sup> building that will house the Clinic is nearing completion and Phase III is to start in the near future with the construction of the 3<sup>rd</sup> building to be on the Clinic’s current site; and

**WHEREAS**, in November 2021 the Board approved a lease for the Clinic, excluding the Practice, to occupy space in the Phase II building when the space is ready with the expectation that the Practice would relocate to the NYC Health + Hospitals/South Brooklyn Health campus; and

**WHEREAS**, System leadership has since determined that it is necessary that the Practice remain near its current location and thus a second lease has been negotiated with Developer for additional space in the Phase II building close to, but not a part of, the space the rest of the Clinic will occupy; and

**WHEREAS**, when it becomes necessary to move because of the construction of the 3<sup>rd</sup> building in the HPD plan or when space is ready at the Premises, the Clinic and the Practice, as currently operated, will move to the Premises; and

**WHEREAS**, the Premises will be leased to the System at a lower rent than was charged two years ago to the NYC Human Resources Administration for a much larger space in the Phase I building; and

**WHEREAS**, the administration of the proposed lease will be the responsibility of the Executive Director of the Facility.

**NOW THEREFORE, IT IS RESOLVED THAT** New York City Health and Hospitals Corporation (the “System”) be and it hereby is authorized to sign a 10-year lease with **Coney Island Associates Retail 2 LLC (“Developer”)** for approximately **6,250 sq. ft. on the 1<sup>st</sup> floor of a to-be-constructed building at 2932 West 16<sup>th</sup> Street in Coney Island (the “Premises”)** to house the **Behavioral Health and Chemical Dependency practice (the “Practice”)** of the **Ida G. Israel Community Health Clinic (the “Clinic”)** operated by **NYC Health + Hospitals/South Brooklyn Health (the “Facility”)** now operating on an adjacent lot for a yearly rent of \$25/sq. ft. to be escalated by 10% after 5 years plus the provision of 10 parking spaces charged at \$150/month for each parking space; provided that Developer will build out the Premises to the System’s specifications within a budget of \$2.5M, with the System paying Developer \$2M of this expense ; and provided further that the System shall hold two 5-year options to renew the lease with the rent during the first renewal term to be at the higher of 95% of fair market value or 10% over the prior rent and with the rent for the second renewal term to be at a 10% increase over the prior rent with the rent over the entire potential 20-year term totaling approximately \$3,985,781.

**EXECUTIVE SUMMARY**  
**LEASE OF 2,500 SQ. FT. FOR**  
**IDA G. ISRAEL COMMUNITY HEALTH CENTER**

**BACK  
GROUND:**

Ida G. Israel Community Health Clinic (the “**Clinic**”) has been in a 13,000 sq. ft. prefabricated structure on an otherwise vacant lot in Coney Island licensed by NYC Housing Preservation and Development (“**HPD**”) since 2013 after having to urgently relocate from its prior rented space that was destroyed by Hurricane Sandy in 2012. The current site is part of a three-block assemblage that HPD has designated for a mixed-use affordable housing building with ground floor retail. NYC Human Resources Administration (“**HRA**”) has already taken occupancy of about 30,000 sq. ft. in the first of the three phases, which was recently completed. The construction of the 2<sup>nd</sup> building is nearing completion and, at that time, the Clinic will have to relocate to make way.

In November 2021, the Board approved a lease for the Clinic, excluding the Practice, to occupy space in the Phase II building when the space is ready with the expectation that the Practice would relocate to the NYC Health + Hospitals/South Brooklyn Health campus. At the time, it was thought that the Practice would be among the ambulatory care programs established in the Facility’s former bed tower. Subsequently, however, System leadership has determined that it is necessary that the Practice remain near its current location and thus a second lease has been negotiated with Developer for additional space in the Phase II building close to, but not a part of, the space the rest of the Clinic will occupy

**PROPOSED  
PROGRAM:**

Currently the Clinic offers the following services: Behavioral Health, Substance Use Disorder, Dentistry, Family Medicine. The part of the Clinic’s programs focused on Family Medicine, will be relocated to the new space to be rented pursuant to the lease authorized by the Board in November 2021, on the first floor of the 2<sup>nd</sup> building in 2,500 sq. ft.

The Practice, consisting of Behavioral Health and Substance Use Disorder services will be relocated to the first floor of the 2<sup>nd</sup> building in 6,250 sq. ft. to be leased pursuant to the authority granted in this Resolution.

Dentistry will be move to the NYC Health + Hospitals/South Brooklyn Health campus.

**TERMS:**

The proposed lease will be with Coney Island Retail 2 LLC (“**Developer**”). HPD selected the Developer to develop Phase II (Block 7602). The lease will have an initial 10-year term and the System will hold two 5-year options to renew. The initial rent for the Premises will be at \$25/sq. ft. and will increase by 10% after 5 years. The rent during the first of the option terms will be at the greater of 95% of fair market value or 10% above the prior rent. Rent during the 2<sup>nd</sup> five-year option term will be at 10% over the prior rent. Developer will build out the Premises to the System’s specifications within a budget of \$2.5M, with Developer paying \$500,000 of this cost and the System paying \$2M. The System will pay its share of the fit-out cost as work progresses.

The Developer will also provide H+H with ten parking spaces for staff. These will be charged at \$150/month for each parking space for an additional annual charge of \$18,000.

The proposed lease will also require the payment of condominium common charges calculated at the System’s prorated share of the Developer’s operating expenses based on the size of the Premises. This item is expected to be negligible because the operating expenses will consist of only insurance and the cost of a small management staff and because the System’s share of the building will be only 1%.

Retail and commercial are new to this neighborhood and there are few comparable new buildings of similar size within the vicinity. Therefore, it is difficult to establish fair market value. It should be noted, however, that three years ago, HRA leased 30,000 sq. ft. at \$32/ft in the Phase I building, adjacent to this development site II. Because rent on the proposed lease will be at only \$25/ft. and because it is typical for tenants renting large blocks of space to pay at lower rates than tenants renting smaller blocks, it seems that the System will benefit from a below market rent.

# **NYC Health and Hospitals/South Brooklyn Health**

## **New Ida G. Israel Community Health Center— Behavioral Health and Chemical Dependency Practice Lease Agreement with - Coney Island Associates Retail 2 LLC**

**Board of Directors Meeting**

**March 28, 2024**

**Svetlana Lipyanskaya, CEO, NYC H+H/South Brooklyn Health**  
**Leora Jontef, Assistant Vice President, Housing + Real Estate**



# For Board Consideration

Authorizing New York City Health and Hospitals Corporation (the “System”) to sign a 10-year lease with **Coney Island Associates Retail 2 LLC (“Developer”)** for approximately 6,250 sq. ft. on the 1<sup>st</sup> floor of a to-be-constructed building at 2932 West 16<sup>th</sup> Street in Coney Island (the “Premises”) to house the Behavioral Health and Chemical Dependency practice (the “Practice”) of the Ida G. Israel Community Health Clinic (the “Clinic”) operated by NYC Health + Hospitals/South Brooklyn Health (the “Facility”) now operating on an adjacent lot for a yearly rent of \$25/sq. ft. to be escalated by 10% after 5 years plus the provision of 10 parking spaces charged at \$150/month for each parking space; provided that Developer will build out the Premises to the System’s specifications within a budget of \$2.5M, with the System paying Developer \$2M of this expense ; and provided further that the System shall hold two 5-year options to renew the lease with the rent during the first renewal term to be at the higher of 95% of fair market value or 10% over the prior rent and with the rent for the second renewal term to be at a 10% increase over the prior rent with the rent over the entire potential 20-year term totaling approximately \$3,985,781.

## Background: Ida G. Israel Community Health Center

- Hurricane Sandy destroyed the Ida G. Israel Community Health Center on Neptune Ave.
- Since July 2014, the Board of Directors has authorized license agreements with NYC HPD for the occupancy of seven lots on Block 7061 for the temporary clinic.
- In May 2021, the Board of Directors approved a renewal with NYC HPD for one year with five successive terms with no occupancy fee.



- This block will host Phase 3 of HPD Coney Island redevelopment. Development is projected to soon after H+H vacates the site.
  - Dental moves to main campus
  - Family Practice and Chemical Dependency move to new building on Surf Ave



# Opportunity: New Ida G. Israel Chemical Dependency Site

- Phase 2 of Coney Island redevelopment of City owned land began construction December 2021.
- ~\$182M investment to create 376 units of affordable housing financed by the City.
- 20,000 SF of community and retail space.
- In November 2021, the Board approved a 2,500 SF lease for the clinic's primary care practice which is nearly ready for occupancy.
- The Chemical Dependency practice planned to move to South Brooklyn Health campus; however, retaining the practice in the neighborhood has become a new priority.
  - This necessitated a second lease in the same building but in separate space to house this function.



# Lease Terms

- NYC Health and Hospitals/South Brooklyn Health will occupy 6,250 SF at 2932 West 16th Street, Brooklyn, NY.
- A 10 year lease term will commence upon execution of the lease with two 5-year options.
- Base Rent: \$25/square foot to escalate 10% after five years.
  - During the first renewal term, rent shall be set the higher of 95% of fair market value or 10% over the prior rent
  - During the second renewal term, rent will be set 10% over the prior rent
  - This rate of \$25/ square foot for the new space is less than the previous negotiated rate of \$30/square foot for the primary care practice
- Parking: \$150/month/space/month for up to 10 spaces will be \$18,000/year.
- The total annual occupancy fee for base rent and parking over the potential 20-year term will be approximately \$3,985,781.
- System will also pay \$2M in additional costs to the developer to build out premises to the system's specification. Landlord contribution will be \$500,000.

|                  | Lease Term   | Option 1                         | Option 2     |
|------------------|--------------|----------------------------------|--------------|
|                  | Year 1-10    | Year 11-15                       | Year 15-20   |
| <b>Base Rent</b> | \$ 1,640,625 | \$ 945,313                       | \$ 1,039,844 |
| <b>Parking</b>   | \$ 180,000   | \$ 90,000                        | \$ 90,000    |
| <b>TOTAL</b>     | \$ 1,820,625 | \$ 1,035,313                     | \$ 1,129,844 |
|                  |              |                                  |              |
|                  |              | Approx 20 year<br>occupancy cost | \$ 3,985,781 |
|                  |              |                                  |              |
|                  |              |                                  |              |



# Board Approval Request

Authorizing New York City Health and Hospitals Corporation (the “System”) to sign a 10-year lease with **Coney Island Associates Retail 2 LLC (“Developer”)** for approximately 6,250 sq. ft. on the 1<sup>st</sup> floor of a to-be-constructed building at 2932 West 16<sup>th</sup> Street in Coney Island (the “Premises”) to house the Behavioral Health and Chemical Dependency practice (the “Practice”) of the Ida G. Israel Community Health Clinic (the “Clinic”) operated by NYC Health + Hospitals/South Brooklyn Health (the “Facility”) now operating on an adjacent lot for a yearly rent of \$25/sq. ft. to be escalated by 10% after 5 years plus the provision of 10 parking spaces charged at \$150/month for each parking space; provided that Developer will build out the Premises to the System’s specifications within a budget of \$2.5M, with the System paying Developer \$2M of this expense ; and provided further that the System shall hold two 5-year options to renew the lease with the rent during the first renewal term to be at the higher of 95% of fair market value or 10% over the prior rent and with the rent for the second renewal term to be at a 10% increase over the prior rent with the rent over the entire potential 20-year term totaling approximately \$3,985,781.

## **RESOLUTION - 10**

Authorizing the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to execute a contract with **Holt Construction Corp. (the “Contractor”), to undertake a gut renovation at NYC Health + Hospitals/Jacobi Medical Center’s (“Jacobi”) 11E operating rooms**, along with dedicated support areas to maximize efficient use of Jacobi and to modernize and meet the needs of an expanding community, for a contract amount of \$8,128,692 with a 15% project contingency of \$1,219,304 to bring the total cost not to exceed \$9,347,996.

**WHEREAS**, Jacobi’s 11E Operating Rooms (“ORs”) are located in Building 1 and consist of four ORs that have not been in service since 2008 when the Building 6 ORs were put into service; and

**WHEREAS**, there is a current need to provide additional ambulatory surgery capacity, to alleviate the Building 6 demand, and enhance patient services; and

**WHEREAS**, the 11E ORs were built in 1955 and cannot be utilized until they are renovated to meet current regulations, guidelines and codes, and

**WHEREAS**, in order to meet the identified additional capacity needs, it has been determined that Jacobi should undertake a gut renovation and modernization of the 11E ORs to provide for three new ORs, a centralized nurses station with eight post/pre op rooms, a new reception area, the installation of new medical gas lines, and MEP upgrades throughout the space which shall include multi-specialty and ambulatory surgery including, but not limited to, ophthalmology, hand, sports, GI, GU Minor, and simple laparoscopy, and

**WHEREAS**, in accordance with Operating Procedure 100-5 a solicitation was issued on December 13, 2023, pursuant to which bids were received and publicly opened on February 6, 2024, and NYC Health + Hospitals determined that the Contractor submitted the lowest responsible bid; and

**WHEREAS**, the Contractor has met all, legal, business and technical requirements and is qualified to perform the services as required in the contract documents; and

**WHEREAS**, the overall responsibility for the administration of the proposed contract shall be with the Vice President, Facilities Development.

**NOW, THEREFORE, be it**

**RESOLVED** that the New York City Health and Hospitals Corporation be and hereby is authorized to execute a contract with BA Construction Corp. in the amount of \$8,128,692 to undertake a renovation at NYC Health + Hospitals/Jacobi Medical Center’s 11E Operating Rooms.

**EXECUTIVE  
SUMMARY  
JACOBI MEDICAL CENTER  
BUILDING #1 – 11E OPERATING ROOMS  
HOLT CONSTRUCTION CORP.**

**CONTRACT SCOPE:** General Construction Work

**NEED:** NYC Health + Hospitals facilities requires general construction services to undertake the 11E Operating Rooms Project at Jacobi Medical Center provide additional ambulatory surgery capacity, to alleviate the Building 6 demand, and enhance patient services.

**CONTRACT DURATION:** Twelve months; slated to commence summer 2024 with anticipated completion in summer of 2025

**PROCUREMENT:** A competitive sealed bid was issued on December 13, 2023; nine contractors attended the pre-bid on site tours on 12/13/2023 and 12/14/2023; nine bids were received by the bid due date of 2/6/2024 with the low, responsible and responsive bidder being Holt Construction Corp. for a contract not to exceed total of \$9,347,996.

**PRIOR EXPERIENCE:** Vendor has worked with DASNY on two significant projects and has completed many private-sector healthcare projects.

**CONTRACT AMOUNT:** Not to Exceed \$9,347,996.

**PASSPORT APPROVAL:** Approved

**EEO APPROVAL:** Approved

**MWBE STATUS:** Contractor has committed to a 38% MWBE contract goal.



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

From: Franco Esposito *Franco Esposito*  
Senior Counsel  
Office of Legal Affairs

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

Vendor: Holt Construction Corp.

Date: February 22, 2024

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The below information indicates the vendor's status as to responsibility, EEO and MWBE as provided by the Office of Facilities Development and Supply Chain:

**Vendor Responsibility**

Approved

**EEO**

Approved

**MWBE**

38.2%

**Request to Award Contract to  
Holt Construction Corp  
for 11E ORs  
at NYC H+H/ Jacobi Medical Center – Building #1**

**Board of Directors Meeting  
March 28, 2024**

**Christopher Mastromano, Chief Executive Officer, NYC H+H/Jacobi**  
**Ellen Barlis, Chief Financial Officer, NYC H+H/Jacobi**  
**Hiba Hadeed, Director of Design & Construction, NYC H+H/Jacobi**  
**Manuel Saez, PhD, Vice President, OFD**  
**Oscar Gonzalez, Senior Assistant Vice President, OFD**  
**Erin Egan, Senior Director, OFD**



## For Board Consideration

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- Authorizing the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to execute a contract with **Holt Construction Corp. (the “Contractor”)**, to undertake a gut renovation at NYC Health + Hospitals/Jacobi Medical Center’s (“Jacobi”) 11E operating rooms, along with **dedicated support areas to maximize efficient use of Jacobi** and to modernize and meet the needs of an expanding community, for a contract amount of \$8,128,692 with a 15% project contingency of \$1,219,304 to bring the total cost not to exceed \$9,347,996.

## Program Background/ History

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- 11E four (4) operating rooms are original to Jacobi Medical Center Building #1 built in 1955, located on the 11<sup>th</sup> floor.
- The operating rooms in building #1 have not been in service since 2008 when Building #6 in 2008 was constructed. All OR services were moved to building #6 and it currently has 10 active ORs.
- Renovations in Building #1 ORs will require significant upgrades of the space to meet today's regulations, guidelines, and code standards.
- Renovating 11E OR for ambulatory surgery will provide critical OR capacity, alleviate the demand at building #6 Operating Rooms, and enhance services to patients.

# Construction Scope & Schedule

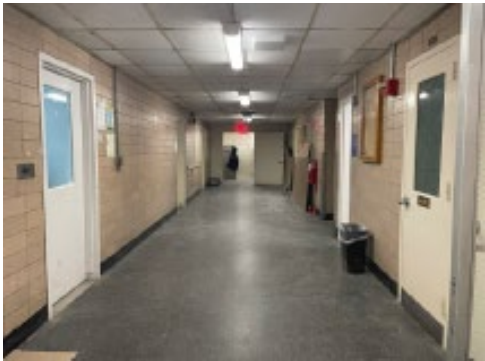
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- Jacobi, Building 1, 11E OR:
  - Complete interior gut renovation of existing 11E Operating Rooms to provide three (3) new operating rooms with dedicated support areas
  - Provide centralized nurse station with eight (8) pre/post rooms
  - Provide new reception and waiting area
  - Installation of new Medical Gas lines
  - Mechanical, Electrical and Plumbing upgrades throughout the space
  - The new space would provide multi-specialty and ambulatory surgery including but not limited to: Ophthalmology, Hand, Sports, GI, GU Minor, Simple laparoscopy (Hernias, Ambi Gallbladders).
  - Construction is expected to begin Summer 2024 with completion expected by Summer 2025 (12 Months)



## Current State

## Future state



# Overview of Procurement

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- 12/13/2023 & 12/14/2023 : Site tours for bidders; 9 Total contractors attended
- 2/6/2024: Bid due date, 9 bids received
- 2/15/2024: Determination of low bid finalized, and Holt Construction Corp. was selected based on the lowest bid amount and responsibility requirements.

# Construction Contract

- Sourced via public bid
- Holt Construction Corp. was the lowest of nine (9) bidders
- Contract amount is \$8,128,692
- Expected to begin Summer 2024 and complete after 12 months in Summer 2025
- Holt Construction Corp. has committed to a 38% MWBE subcontractor utilization plan presented below:

| Subcontractor             | Certification | Supplies/Services | Utilization Plan % | Utilization \$s    |
|---------------------------|---------------|-------------------|--------------------|--------------------|
| Cardoza Plumbing          | MBE           | Plumbing          | 15%                | \$1,219,304        |
| Women in Mechanical       | WBE           | Sprinklers        | 1%                 | \$81,287           |
| Architectural Forms       | MBE           | drywall           | 9%                 | \$731,582          |
| Pyramid Flooring          | WBE           | Flooring          | 2%                 | \$162,572          |
| Lightsmith                | MBE           | Lighting          | 3%                 | \$243,861          |
| Premium Millwork          | MWBE          | Millwork          | 4%                 | \$325,148          |
| Silver Slate              | MWBE          | Tile              | 1%                 | \$81,287           |
| Accurate Doors & Hardware | MWE           | Doors & Hardware  | 3%                 | \$243,861          |
| <b>Total</b>              |               |                   | <b>38%</b>         | <b>\$3,088,903</b> |

# Construction Contract

- Holt Construction has worked with DASNY at Medgar Evers Library approx. 5,000 SF for \$15M. The project consisted of gut renovations of the existing building, front of building expansion, adding a mezzanine with glass stairs & railing, and power upgrades throughout.
- Holt Construction has worked with DASNY at LaGuardia Admin Office fit approx. 10,000 SF for \$3 mil. The project consisted of buildout of full floor, new offices with demountable partitions, installation of new HVAC system, and modifying Sprinkler & Plumbing work.
- Holt Construction has worked with a number of healthcare facilities:
  - Atlantic Health System (\$13.5M) - Ambulatory Care Center and medical office building (90,000 SF). Holt completed demolition and construction of a family medicine / urgent care center with comprehensive imaging capabilities including X-ray, MRI, central registration and pre-admission testing.
  - Good Samaritan Hospital (\$5.9M)– CT and MR suites (12,000 SF). Holt completed full demolition of the existing radiology areas, scope included installation of new MRI machines, CT scanners, and recovery bays as well as new rooftop air handling units.
  - NYU Langone Medical Center (\$4.6M)- Neurology ICU on the 4th floor (15,000 SF). Holt installed new headwall units and focusable LED surgical lighting. Air handling units, power distribution equipment, lounges, offices, and other facilities was also constructed / renovated throughout multiple floors of the hospital.
- Holt construction Corp. references reviews were excellent.

# Project Budget

| Jacobi- Postpartum Renovation Project |             |
|---------------------------------------|-------------|
| Construction                          | \$8,128,692 |
|                                       |             |
| Project Contingency (15%)             | \$1,219,304 |
|                                       |             |
| Total                                 | \$9,347,996 |

\*Full funding for this project has been allocated and CP is Pending with OMB

## Board Approval Request

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- Authorizing the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to execute a contract with **Holt Construction Corp. (the “Contractor”)**, to undertake a gut renovation at NYC Health + Hospitals/Jacobi Medical Center’s (“Jacobi”) 11E operating rooms, along with **dedicated support areas to maximize efficient use of Jacobi** and to modernize and meet the needs of an expanding community, for a contract amount of \$8,128,692 with a 15% project contingency of \$1,219,304 to bring the total cost not to exceed \$9,347,996.

**RESOLUTION - 11**

Authorizing the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to execute a contract with **Crescent Contracting Corp. (the “Contractor”)**, to undertake a project to install **sprinklers and fire alarms in the administrative offices of Building #4 of NYC Health + Hospitals/Jacobi Medical Center** for a contract amount of \$8,251,375, with a 15% project contingency of \$1,237,706, to bring the total cost not to exceed \$9,489,081.

**WHEREAS**, Jacobi Medical Center’s (“Jacobi”) Building #4 and adjacent rotunda auditorium building were built in 1976 and while previously serving as a nurse’s residence, currently house administrative offices; and

**WHEREAS**, the buildings are currently partially sprinklered and lack fire alarms; and

**WHEREAS**, in order to meet current guidelines and best practices, it has been determined that a project should be undertaken to install sprinklers throughout the buildings, fire alarm devices at various locations, a new fire pump room along with associated water service, and electrical connections to support the new system; and

**WHEREAS**, in accordance with Operating Procedure 100-5 a solicitation was issued, pursuant to which bids were received and publicly opened on February 15, 2024, and NYC Health + Hospitals determined that the Contractor submitted the lowest responsible bid; and

**WHEREAS**, the Contractor has met all, legal, business and technical requirements and is qualified to perform the services as required in the contract documents; and

**WHEREAS**, the overall responsibility for the administration of the proposed contract shall be with the Vice President, Facilities Development.

**NOW, THEREFORE, be it**

**RESOLVED** that the New York City Health and Hospitals Corporation be and hereby is authorized to execute a contract with Crescent Contracting Corp. in the amount of \$8,251,375 to undertake the installation of sprinklers and fire alarms along with associated other equipment at NYC Health + Hospitals/Jacobi Medical Center, Building #4 and adjacent rotunda auditorium building.

**EXECUTIVE SUMMARY**  
**JACOBI MEDICAL CENTER**  
**SPRINKLER AND FIRE ALARM CONTRACT**  
**CRESCENT CONTRACTING CORP.**

**CONTRACT SCOPE:** Sprinkler and fire alarm installation

**NEED:** NYC Health + Hospitals facilities needs general construction services to undertake the sprinkler and fire alarm project at Jacobi Medical Center in order to meet current guidelines and standards.

**CONTRACT DURATION:** 12 months, slated to commence Summer of 2024 with anticipated completion in Summer 2025.

**PROCUREMENT:** A competitive sealed bid was issued on January 26, 2024, six contractors attended the pre-bid on site visits on 2/1/2024 and 2/2/2024; only one contractor submitted a bid. The bid was opened on February 15, 2024 and Crescent Contracting Corp. was determined the low, responsible and responsive bidder for a contract not to exceed total of \$9,489,081.

**PRIOR EXPERIENCE:** Crescent Contracting Corp. is a current vendor in NYC Health + Hospitals' JOCs plumbing pool. Their prior ratings in MOCS include one excellent, one good, and five satisfactory.

**CONTRACT AMOUNT:** Not to Exceed \$9,489,081.

**PASSPORT APPROVAL:** Approved

**EEO APPROVAL:** Approved

**MWBE STATUS:** Contractor has committed to a 30% MWBE contract goal.





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

From: Franco Esposito *Franco Esposito*  
Senior Counsel  
Office of Legal Affairs

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

Vendor: Crescent Contracting Corporation

Date: February 23, 2024

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The below information indicates the vendor's status as to responsibility, EEO and MWBE as provided by the Office of Facilities Development and Supply Chain:

**Vendor Responsibility**

Approved

**EEO**

Approved

**MWBE**

30%

**Request to Award Contract to  
Crescent Contracting Corp.  
for Fire Alarm & Sprinkler Upgrade  
at NYC H+H/ Jacobi Medical Center – Building #4**

**Board of Directors Meeting  
March 28, 2024**

**Christopher Mastromano, Chief Executive Officer, NYC H+H/Jacobi  
Ellen Barlis, Chief Financial Officer, NYC H+H/Jacobi  
Hiba Hadeed, Director of Design & Construction, NYC H+H/Jacobi  
Manuel Saez, PhD, Vice President, OFD  
Oscar Gonzalez, Senior Assistant Vice President, OFD  
Erin Egan, Senior Director, OFD**



- Authorizing the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to execute a contract with **Crescent Contracting Corp. (the “Contractor”)**, to undertake a project to install sprinklers and fire alarms in the administrative offices of **Building #4 of NYC Health + Hospitals/Jacobi Medical Center** for a contract amount of \$8,251,375, with a 15% project contingency of \$1,237,706, to bring the total cost not to exceed \$9,489,081

# Program Background & Scope

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- Jacobi's building #4 is a 14 story building built in 1976 with an adjacent 1 story Rotunda auditorium building.
- The building previously used as a nurse's residence. The building currently houses administrative offices (Payroll, Finance, Nurse's Education, Simulation Center, OHS, HR etc.)
- The building currently has partial coverage for sprinklers
- The scope of the project is the installation of sprinklers throughout the main building, the rotunda, and adding fire alarm devices per the current layouts and use.
- Scope of work also includes:
  - New sprinklers throughout
  - New fire alarm devices
  - New fire pump room
  - New water service to support new pump room
  - New electrical connections to support the new system
- Construction start date of Summer 2024 - Completion date of Summer 2025 (12 months)

# Overview of Procurement

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- 2/1/24 & 2/2/24: Site tour for bidders; Six (6) vendors attended
- 2/15/24: Bid due date, one (1) proposals received.
  - Four of the five vendors who did not submit a proposal for this project provided a No Bid response indicating they decided not to submit a proposal.
- 2/21/24: Determination of low bid finalized, and Crescent Contracting Corp. was selected based on the lowest bid amount and responsibility requirements.

# Construction Contract

- Procurement is sourced via public bid
- Crescent Contracting Corp. is the only bidder
- Contract amount is \$8,251,375
- Crescent Contracting Corp. is a general contractor and is a current vendor in our JOCs Plumbing pool. The ratings listed in MOCs included 1 Excellent, 1 Good, and 5 Satisfactory.
- Constuction expected to begin Summer 2024 completion in expected in Summer 2025 (12 Months)
- Crescent Contracting Corp. has committed to a 30% MWBE subcontractor utilization plan presented

| Subcontractor                                  | Certification | Supplies/Services | Utilization Plan % | Utilization \$s    |
|--|---------------|-------------------|--------------------|--------------------|
| TJ Piping and Heating                          | MBE           | Sprinkler         | 10%                | \$825,138          |
| Mac Fhionnghaile & Sons Electrical Contracting | WBE           | Electrical        | 20%                | \$1,650,275        |
|  |               |                   |                    |                    |
| <b>Total</b>                                   |               |                   | <b>30%</b>         | <b>\$2,475,413</b> |

# Performance Evaluation

| Vendor Performance Evaluation<br><b>Crescent Contracting Corp.</b>   |        |
|--|--------|
| DESCRIPTION  | ANSWER |
| Did the vendor meet its budgetary goals, exercising reasonable efforts to contain costs, including change order pricing?   | Yes    |
| Has the vendor met any/all of the minority, women and emerging business enterprise participation goals and/or Local Business enterprise requirements, to the extent applicable?  | Yes    |
| Did the vendor and any/all subcontractors comply with applicable Prevailing Wage requirements?   | Yes    |
| Did the vendor maintain adequate records and logs, and did it submit accurate, complete and timely payment requisitions, fiscal reports and invoices, change order proposals, timesheets and other required daily and periodic record submissions (as applicable)? | Yes    |
| Did the vendor submit its proposed subcontractors for approval in advance of all work by such subcontractors?  | Yes    |
| Did the vendor pay its suppliers and subcontractors, if any, promptly?   | Yes    |
| Did the vendor and its subcontractors perform the contract with the requisite technical skill and expertise?   | Yes    |
| Did the vendor adequately supervise the contract and its personnel, and did its supervisors demonstrate the requisite technical skill and expertise to advance the work  | Yes    |
| Did the vendor adequately staff the contract?  | Yes    |
| Did the vendor fully comply with all applicable safety standards and maintain the site in an appropriate and safe condition?   | Yes    |
| Did the vendor fully cooperate with the agency, e.g., by participating in necessary meetings, responding to agency orders and assisting the agency in addressing complaints from the community during the construction as applicable?                              | Yes    |
| Did the vendor adequately identify and promptly notify the agency of any issues or conditions that could affect the quality of work or result in delays, and did it adequately and promptly assist the agency in resolving problems?                               | Yes    |
| Performance and Overall Quality Rating Satisfactory  | Good   |

71% - 80% ----- Satisfactory  
81% - 90% ----- Good  
91% - 100% ----- Excellent

# Project Budget

| Construction              | \$8,251,375  |
|---------------------------|--------------|
|                           |              |
| Project Contingency (15%) | \$1,237,706  |
|                           |              |
| Total                     | \$9,489,081* |

\*Full funding for this project has been allocated and approved by OMB



## Board Approval Request

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- Authorizing the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to execute a contract with **Crescent Contracting Corp. (the “Contractor”)**, to undertake a project to **install sprinklers and fire alarms in the administrative offices of Building #4 of NYC Health + Hospitals/Jacobi Medical Center** for a contract amount of \$8,251,375, with a 15% project contingency of \$1,237,706, to bring the total cost not to exceed \$9,489,081

## **RESOLUTION - 12**

Authorizing the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to execute a contract with **Ark Systems Electrical Corp. (the “Contractor”)**, to undertake a fire alarm upgrade of **Building #1 of NYC Health + Hospitals/Jacobi Medical Center** for a contract amount of \$10,800,000, with a 15% project contingency of \$1,620,000, to bring the total cost not to exceed \$12,420,000.

**WHEREAS**, the fire alarm system at Jacobi Medical Center’s (“Jacobi”) Building #1 is nearing the end of its service life; and

**WHEREAS**, due to the current state of the fire alarm system, it has been determined that a project should be undertaken to replace the entire fire alarm system in Building #1 that will meet current FDNY and DOB codes; and

**WHEREAS**, the replacement includes a new fire alarm command center panel, new fire alarm devices throughout the building, smoke purge system upgrades, new stair pressurization system, and new emergency electrical connections to support the new system; and

**WHEREAS**, in accordance with Operating Procedure 100-5 a solicitation was issued, pursuant to which bids were received and publicly opened on January 23, 2024, and NYC Health + Hospitals determined that the Contractor submitted the lowest responsible bid; and

**WHEREAS**, the Contractor has met all, legal, business and technical requirements and is qualified to perform the services as required in the contract documents; and

**WHEREAS**, the overall responsibility for the administration of the proposed contract shall be with the Vice President, Facilities Development.

**NOW, THEREFORE, be it**

**RESOLVED** that the New York City Health and Hospitals Corporation be and hereby is authorized to execute a contract with Ark Systems Electrical Corp. in the amount of \$10,800,000 to undertake the upgrade of the fire alarm along with associated other equipment at NYC Health + Hospitals/Jacobi Medical Center, Building #1.

**EXECUTIVE SUMMARY**  
**JACOBI MEDICAL CENTER**  
**FIRE ALARM SYSTEM REPLACEMENT CONTRACT**  
**ARK SYSTEMS ELECTRICAL CORP.**

**CONTRACT SCOPE:** Fire alarm system upgrade

**NEED:** NYC Health + Hospitals facilities needs general construction and electrical services to undertake the fire alarm system upgrade project at Jacobi Medical Center, Building #1.

**CONTRACT DURATION:** 18 months, slated to commence Summer of 2024 with anticipated completion in Spring 2026.

**PROCUREMENT:** A competitive sealed bid was issued on November 20, 2023; eight contractors attended the pre-bid on site visits on 12/7/2023 and 12/8/2024; three contractors submitted bids with the lowest responsible and responsive bidder being Ark Systems Electrical Corp. for a contract not to exceed total of \$12,420,000.

**PRIOR EXPERIENCE:** Ark systems Electrical Corp. has previously worked on the Bellevue Men's Shelter project. They have also previously worked on projects for NYCHA, SCA, DDC, and DHS and have received one rating of excellent and three ratings of good.

**CONTRACT AMOUNT:** Not to Exceed \$12,420,000.

**PASSPORT APPROVAL:** Approved

**EEO APPROVAL:** Approved

**MWBE STATUS:** Contractor is a certified MWBE contractor, therefore 100% of the contract is MWBE.

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

From: Franco Esposito *Franco Esposito*  
Senior Counsel  
Office of Legal Affairs

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

Vendor: Ark Systems Electrical Corp.

Date: February 22, 2024

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The below information indicates the vendor's status as to responsibility, EEO and MWBE as provided by the Office of Facilities Development and Supply Chain:

**Vendor Responsibility**

Approved

**EEO**

Approved

**MWBE**

100%

**Request to Award Contract to  
Ark Systems Electrical Corp.  
for Fire Alarm Upgrade  
at NYC H+H/ Jacobi Medical Center – Building #1**

**Board of Directors Meeting  
March 28, 2024**

**Christopher Mastromano, Chief Executive Officer, NYC H+H/Jacobi  
Ellen Barlis, Chief Financial Officer, NYC H+H/Jacobi  
Hiba Hadeed, Director of Design & Construction, NYC H+H/Jacobi  
Manuel Saez, PhD, Vice President, OFD  
Oscar Gonzalez, Senior Assistant Vice President, OFD  
Erin Egan, Senior Director, OFD**



## For Board Consideration

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- Authorizing the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to execute a contract with **Ark Systems Electrical Corp. (the “Contractor”)**, to undertake a fire alarm upgrade of **Building #1 of NYC Health + Hospitals/Jacobi Medical Center** for a contract amount of \$10,800,000, with a 15% project contingency of \$1,620,000, to bring the total cost not to exceed \$12,420,000

# Program Background & Scope

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- The existing fire alarm system at Jacobi's building #1 is nearing the end of its service life.
- The scope of the project is a complete replacement of the existing fire alarm system throughout the entirety of building 1.
- The new fire alarm system will be in compliance with current FDNY and DOB codes.
- Renovations will include:
  - New Fire Alarm Command Center panel
  - New fire alarm devices throughout
  - Smoke purge system upgrades and new stair pressurization system
  - New emergency electrical connections to support the new system
- Construction start date of Summer 2024 - Completion date of Spring 2026 (18 Months)

# Overview of Procurement

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- 12/7/23 & 12/8/23: Site tour for bidders; eight (8) vendors attended
- 1/23/24: Bid due date, 3 bids received
- 2/15/24: Determination of low bid finalized, and Ark Systems Electrical Corp. was selected based on the lowest bid amount and responsibility requirements.



# Construction Contract

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- Procurement is sourced via public bid
- Ark Systems Electrical Corp. Was the lowest of three (3) bidders
- Ark Systems Electrical Corp. Is an MBE corporation and will be self-performing Electrical services for this contract
- Contract amount is \$10,800,000
- Ark Systems Electrical Corp is an electrical contractor. The ratings listed in MOCs included 1 Excellent and 3 Good.
- Ark Systems has previously worked with DASNY on the Bellevue Men's Shelter project. Other public agency work includes NYCHA, SCA, DDC, and DHS.
- Construction expected to begin Summer 2024 completion in expected in Spring 2026 (18 Months)

# Project Budget

| Elmhurst EES              |               |
|---------------------------|---------------|
| Construction              | \$10,800,000  |
|                           |               |
| Project Contingency (15%) | \$1,620,000   |
|                           |               |
| Total                     | \$12,420,000* |

\*Full funding for this project has been allocated and amended CP is pending with OMB for approval

## Board Approval Request

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- Authorizing the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to execute a contract with **Ark Systems Electrical Corp. (the “Contractor”)**, to undertake a fire alarm upgrade of **Building #1 of NYC Health + Hospitals/Jacobi Medical Center** for a contract amount of \$10,800,000, with a 15% project contingency of \$1,620,000, to bring the total cost not to exceed \$12,420,000

## **RESOLUTION - 13**

Authorizing the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to execute a contract with **Atlantic Specialty, Inc. (the “Contractor”)**, **to undertake a parking garage renovation project of the main building of NYC Health + Hospitals/Lincoln** for a contract amount of \$4,708,790, with a 20% project contingency of \$941,758, to bring the total cost not to exceed \$5,650,548.

**WHEREAS**, the parking garage at Lincoln Hospital is interconnected to the main building and has been in service since 1976; and

**WHEREAS**, due to water infiltration throughout the garage, it has been determined that a project should be undertaken to address such water infiltration issues as well as to develop a preventative maintenance program to optimize its useful life; and

**WHEREAS**, in accordance with Operating Procedure 100-5 a solicitation was issued, pursuant to which bids were received and publicly opened on January 5, 2024, and NYC Health + Hospitals determined that the Contractor submitted the lowest responsible bid; and

**WHEREAS**, the Contractor has met all, legal, business and technical requirements and is qualified to perform the services as required in the contract documents; and

**WHEREAS**, the overall responsibility for the administration of the proposed contract shall be with the Vice President, Facilities Development.

**NOW, THEREFORE, be it**

**RESOLVED** that the New York City Health and Hospitals Corporation be and hereby is authorized to execute a contract with Atlantic Specialty, Inc. in the amount of \$4,708,790 for a garage renovation project to address the water infiltration issues at NYC Health + Hospitals/Lincoln.

**EXECUTIVE SUMMARY  
LINCOLN HOSPITAL  
PARKING GARAGE RENOVATION PROJECT  
ATLANTIC SPECIALTY, INC.**

**CONTRACT SCOPE:** Garage renovation project

**NEED:** NYC Health + Hospitals facilities needs general construction services to undertake the garage renovation project at Lincoln Hospital.

**CONTRACT DURATION:** 24 months, slated to commence Summer of 2024 with anticipated completion in Summer 2026.

**PROCUREMENT:** A competitive sealed bid was issued on 12/1/2023; eleven contractors attended the pre-bid on site visit on 12/7/2023 and nine contractors attended the pre-bid on site visit on 12/8/2024; nine contractors submitted bids with the lowest responsible and responsive bidder being Atlantic Specialty, Inc. for a contract not to exceed total of \$5,650,548.

**PRIOR EXPERIENCE:** Atlantic Specialty, Inc. has previously worked on the Bellevue Morgue project. They have also previously worked on a project for DDC and received a rating of good.

**CONTRACT AMOUNT:** Not to Exceed \$5,650,548.

**PASSPORT APPROVAL:** Approved

**EEO APPROVAL:** Approved

**MWBE STATUS:** Contractor is a certified MWBE contractor, therefore 100% of the contract is MWBE.



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

From: Franco Esposito *Franco Esposito*  
Senior Counsel  
Office of Legal Affairs

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

Vendor: Atlantic Specialty, Inc.

Date: February 22, 2024

---

The below information indicates the vendor's status as to responsibility, EEO and MWBE as provided by the Office of Facilities Development and Supply Chain:

**Vendor Responsibility**

Approved

**EEO**

Approved

**MWBE**

100%

# **Request to Award Contract to Atlantic Specialty Inc for Parking Garage Renovation Project at NYC H+H/Lincoln**

**Board of Directors Meeting  
March 28, 2024**

Chris Roker, Chief Executive Officer, NYC H+H/Lincoln

Manuel Saez, PhD, Vice President, OFD

Oscar Gonzalez, CCM, Senior Assistant Vice President, OFD

Erin Egan, Senior Director, OFD



## For Board Consideration

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- Authorizing the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to execute a contract with **Atlantic Specialty, Inc. (the “Contractor”)**, to undertake a parking garage renovation project of the main building of NYC Health + Hospitals/Lincoln for a contract amount of \$4,708,790, with a 20% project contingency of \$941,758, to bring the total cost not to exceed \$5,650,548



# Program Background/History/Scope

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- The Parking Garage is original to NYC H+H/Lincoln, and has been in service for since 1976
- The Parking Garage is interconnected to the main building
- The goal of the project is to undertake the renovation of the parking garage
- The work is to update and refresh the current garage that has been in service for over 45 years
  - Water has been infiltrating the structure in various locations
  - Work is needed to stop the infiltration and remediate the damage caused
  - The remediation will include patching and repair of the concrete, rebar corrosion remediation, and installation of expansion joint replacements that will ensure a longer life for the structure.
- Project is to be completed in multiple Phases while the parking Garage remains open for the staff and visitors to NYC H+H/Lincoln
- Develop a preventative maintenance program for the Parking Garage to optimize the useful life of the Capital asset

# Overview of Procurement

---

- 12/1/2023 – Solicitation posted to City Record
- 12/7/2023 - Site tour for bidders; 11 Total contractors attended
- 12/8/2023 - Site tour for bidders; 9 Total contractors attended
- 1/5/2024 - 9 Bids were received
- 1/7/2024 - Determination of low bid finalized, and Atlantic Specialty Inc. was selected based on the lowest bid amount and responsibility requirements.

- Sourced via public bid
- Atlantic Specialty Inc. was the lowest of the 9 bidders and is an MBE
- Atlantic Specialty has completed excavation, concrete, carpentry, and electrical work for the morgue in Bellevue.
- Atlantic Specialty Inc. has one Good rating in MOCS from DDC.
- Contract amount is \$4,708,790
- Construction is expected to begin Summer 2024 with construction completion expected by Summer 2026 (24 months)

# Performance Evaluation

| Vendor Performance Evaluation  |        |
|--|--------|
| Atlantic Specialty Inc.  |        |
| <i>DDC Performance Evaluation</i>  |        |
| DESCRIPTION  | ANSWER |
| Did the vendor meet its budgetary goals, exercising reasonable efforts to contain costs, including change order pricing?   | Yes    |
| Has the vendor met any/all of the minority, women and emerging business enterprise participation goals and/or Local Business enterprise requirements, to the extent applicable?  | Yes    |
| Did the vendor and any/all subcontractors comply with applicable Prevailing Wage requirements?   | Yes    |
| Did the vendor maintain adequate records and logs, and did it submit accurate, complete and timely payment requisitions, fiscal reports and invoices, change order proposals, timesheets and other required daily and periodic record submissions (as applicable)? | Yes    |
| Did the vendor submit its proposed subcontractors for approval in advance of all work by such subcontractors?  | Yes    |
| Did the vendor pay its suppliers and subcontractors, if any, promptly?   | Yes    |
| Did the vendor and its subcontractors perform the contract with the requisite technical skill and expertise?   | Yes    |
| Did the vendor adequately supervise the contract and its personnel, and did its supervisors demonstrate the requisite technical skill and expertise to advance the work  | Yes    |
| Did the vendor adequately staff the contract?  | Yes    |
| Did the vendor fully comply with all applicable safety standards and maintain the site in an appropriate and safe condition?   | Yes    |
| Did the vendor fully cooperate with the agency, e.g., by participating in necessary meetings, responding to agency orders and assisting the agency in addressing complaints from the community during the construction as applicable?                              | Yes    |
| Did the vendor adequately identify and promptly notify the agency of any issues or conditions that could affect the quality of work or result in delays, and did it adequately and promptly assist the agency in resolving problems?                               | Yes    |
| Performance and Overall Quality Rating Satisfactory  | Good   |

71% - 80% ----- Satisfactory  
81% - 90% ----- Good  
91% - 100% ----- Excellent

# Project Budget

| Lincoln Parking Garage    |             |
|---------------------------|-------------|
| Construction              | \$4,708,790 |
|                           |             |
| Project Contingency (20%) | \$941,758   |
|                           |             |
| Total                     | \$5,650,548 |

\*Full funding for this project has been allocated and CP is to be submitted to OMB

## Board Approval Request

---

- Authorizing the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to execute a contract with Atlantic Specialty, Inc. (the “Contractor”), to undertake a parking garage renovation project of the main building of NYC Health + Hospitals/Lincoln for a contract amount of \$4,708,790, with a 20% project contingency of \$941,758, to bring the total cost not to exceed \$5,650,548