

BOARD OF DIRECTORS MEETING

THURSDAY, JUNE 27, 2024

A•G•E•N•D•A•

<p><b><u>CALL TO ORDER - 2:00 PM</u></b></p>	<p>Ms. Wang</p>
<p>1. <b><u>Executive Session   Facility Governing Body Report</u></b>          ➤ NYC Health + Hospitals   Sea View Nursing and Rehabilitation Center</p> <p><b>2023 Performance Improvement Plan and Evaluation (Written Submission Only)</b>          ➤ NYC Health + Hospitals   Morrisania - Gotham Center</p>	<p>Ms. Wang</p>
<p><b>Semi-Annual Governing Body Report (Written Submission Only)</b>          ➤ NYC Health + Hospitals   McKinney Nursing and Rehabilitation Center</p>	
<p>2. <b><u>OPEN PUBLIC SESSION - 3:00 PM</u></b></p>	
<p>3. <b>Adoption of the Board of Directors Meeting Minutes – May 30, 2024</b></p>	<p>Ms. Wang</p>
<p>4. <b><u>Chair’s Report</u></b></p>	
<p>5. <b><u>President’s Report</u></b></p>	<p>Dr. Katz</p>
<p>6. Authorizing New York City Health and Hospitals Corporation (the “System”) to sign a lease with <b>175 Varick Street LLC (“Landlord”) for approximately 10,000 square feet on the 7th floor at 145 East 32nd Street, New York, NY (the “Premises”) to house the World Trade Center Environmental Health Center (the “Center”) that is currently located in NYC Health + Hospitals/Bellevue (“Bellevue”)</b> for an initial term of approximately 16 months with the System holding two 5-year options to extend the lease at an initial rent of \$54/sf to increase annually at 2.75% for an initial annual rent of \$540,000 and a total rent over the potential term of 12 years and 4 months of \$7,805,015          (Presented Directly to the Board: 06/27/2024)  <b>Vendex: Approved</b>  <b>EEO: Pending</b></p>	<p>Ms. Wang</p>
<p>7. <b>AMENDED</b> - Authorizing the New York City Health and Hospitals Corporation (the “System”) to sign a five-year license agreement with <b>Sodexo (“Sodexo”) for its use and occupancy of approximately 4,936 square feet at NYC Health + Hospitals/Bellevue (“Bellevue”) for a retail food operation</b> for which it will pay a minimum annual amount of \$100,000, plus 8% of annual gross sales over \$3M and 12% of annual gross sales over \$3.5M with such agreement to be terminable by each party on thirty days’ notice without cause.          (Presented to the Capital Committee: 06/10/2024)  <b>Vendex: NA</b>  <b>EEO: NA</b></p>	<p>Ms. Wang</p>
<p>8. Authorizing New York City Health and Hospitals Corporation (the “System”) to <b>amend the existing agreement with Tasty Picks, Inc. #5 (“Tasty Picks”) for its occupancy of space at NYC Health + Hospitals/Jacobi (“Jacobi”) for a retail food operation</b> to increase the area licensed from 1,000 square feet to 1,890 square feet and to increase the occupancy fee, calculated at \$25/square foot, from \$25,000 per year to \$47,250 per year.          (Presented to the Capital Committee: 06/10/2024)  <b>Vendex: NA / EEO: NA</b></p>	<p>Ms. Wang</p>
<p>9. Authorizing New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to execute a contract with <b>Vanguard Construction and Development Co., Inc. (the “Contractor”), to undertake a project to renovate the D5 Labor &amp; Delivery suite at NYC Health + Hospitals/Elmhurst Hospital</b> for a contract amount of \$11,783,528, with a 10% project contingency of \$1,178,353, to bring the total cost not to exceed \$12,962,881.          (Presented to the Capital Committee: 06/10/2024)  <b>Vendex: Approved / EEO: Pending</b></p>	<p>Ms. Wang</p>

10. Authorizing the Executive Director of MetroPlus Health Plan, Inc. (“MetroPlus or “the Plan”) to negotiate and execute a **best-interest extension of the current contract with Clarity Software Solutions, Inc. for fulfillment and distribution services** for a period of two years and 1 one-year renewal option, for an amount not to exceed \$31,500,000, which includes a 6% contingency, over the lifetime of the contract, effective August 8, 2024.

(Presented to the MetroPlus Board: 06/06/2024)

**Vendex: Approved / EEO: Approved**

Ms. Hernandez- Piñero

### COMMITTEE AND SUBSIDIARY REPORTS

Ms. Wang

- Medical and Professional Affairs / Information Technology Committee
- Strategic Planning Committee
- Capital Committee
- Metroplus Health - Subsidiary

Dr. Calamia

Ms. Wang

Ms. Wang

Ms. Hernandez- Piñero

>>Old Business<<

Ms. Wang

>>New Business<<

>>Adjournment<<

**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 **30th day of May, 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. Erin Kelly  
Dr. Vincent Calamia  
Ms. Freda Wang - Arrived at 2:13p.m.  
Ms. Molly Wasow Park - Left at 3:00 p.m.  
Ms. Karen St. Hilaire - Joined at 3:00 p.m.  
Dr. William Fisher  
Ms. Anita Kawatra  
Ms. Sally Hernandez-Piñero  
Dr. Patricia Marthone

José Pagán, Chair of the Board, called the meeting to order at 2:06 p.m. Mr. Pagán chaired the meeting and Colicia Hercules, Corporate Secretary, kept the minutes thereof.

Mr. Pagán noted that Erin Kelly is representing Deputy Mayor Anne Williams-Isom, and Dr. William Fisher is representing Dr. H Jean Wright II - all in a voting 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 3:10 p.m.

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

**ACTION ITEM 3 - ADOPTION OF MINUTES**

The minutes of the Board of Directors meeting held on April 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 April 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| Jacobi/North Central Bronx

The Board received and approved the written submission of the NYC Health + Hospitals| Gouverneur Gotham Center 2023 Performance Improvement Plan and Evaluation.

The Board also received and approved the written submission of the NYC Health and Hospitals| Lincoln and NYC Health and Hospitals| South Brooklyn Health semi-annual governing body report.

**FY 2024 ANNUAL PUBLIC MEETINGS**

Mr. Pagán reminded the Board of the Fiscal Year 2024 Annual public meeting series schedule for each borough and provided information for those who wish register to speak at the meetings.

Bronx - June 4th at Lincoln Hospital  
Staten Island - June 18th at Sea View Nursing and Rehabilitation Center

**VENDEX APPROVALS**

Mr. Pagán noted there are three items on the agenda requiring Vendex approval, two of which have that approval. There is one item from previous Board meetings pending Vendex approval.

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

**ACTION ITEM 6:**

Ms. Hernandez-Piñero read the resolution

Authorizing the New York City Health and Hospitals Corporation (the "System") to execute an agreement with **KPMG LLC for the provision of audit services on behalf of the System, including its subsidiaries**, for an initial period beginning June 2024 through the end of the CY 2027 Audit period for an amount not to exceed \$5,566,000 over the full term.

The System will have the right to terminate the agreement without cause with 30 days' notice.

(Presented to the Audit Committee: 05/06/2024)

David Guzman, Corporate Comptroller, was joined by James L. Linhart, Deputy Corporate Comptroller. Mr. Guzman provided background information regarding the regulatory requirements for audits and the current state of the existing contract. The entities and services within the scope of the new contract were also discussed. James Linhart, Deputy Corporate Comptroller, provided an overview of the RFP criteria, procurement process and auditor independence analysis. The firm has agreed to an MWBE goal of 25%.

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

**ACTION ITEM 7:**

Ms. Hernandez-Piñero read the resolution

**Approving the designation of Sofia Khalid, Executive Compliance and Privacy Officer, as the New York City Health and Hospitals Corporation (the "System") Record Management Officer (the "RMO"),** as that term is defined under New York State Education Department regulations found at 8 NYCRR § 185.1(a), to coordinate the development of and oversee the System's records management program in accordance with the requirements set forth under Article 57-A of the New York State Arts and Cultural Affairs Law and the implementing regulations thereof.

(Presented to the Audit Committee: 05/06/2024)

Catherine Patsos, Chief Corporate Compliance Officer, provided a description of the responsibilities of an Executive Compliance and Privacy Officer and shared highlights of Ms. Khalid's background and experience.

The Board welcomed and congratulated Ms. Khalid on her new role as Executive Compliance Officer.

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

**ACTION ITEM 8:**

Mr. Pagán read the resolution

**Authorizing New York City Health and Hospitals Corporation (the "System") to sign a 5-year renewal lease with David Welner d/b/a Welner Associates ("Landlord") for the use of the entire building at 279-281 Graham Avenue, Brooklyn, NY consisting of approximately 10,900 square feet (the "Building") together with the 1,185 square feet of vacant land adjacent**

**to the Building for use by NYC Health + Hospitals/Gotham Health ("Gotham") for a primary care clinic** at an initial rent of \$57.83 per square foot which will increase by 3.5% annually to reach \$66.36 per square foot by the 5th year; provided that the System will hold three options each for 5 years at a rent based upon a continuation of the pattern of 3.5% annual increases for a total rent payable over the potential 20-year term of \$17.83M.

(Presented to the Capital Committee: 05/06/2024)

Dr. Theodore Long, Senior Vice President, Ambulatory Care and Population Health, provided an overview of the existing Gotham Health locations across the City and more specifically, the current services and history of the Gotham Health Williamsburg site. Dr. Long also discussed the ethnic and racial data and community health profile of the patients being served at the Williamsburg location. Leora Jontef, Assistant Vice President, Real Estate & Housing, provided an overview of the lease terms and lease structure.

The Board remarked on the strategic approach to the structure of the lease. In response, Dr. Long added that there will continued evaluation of the community's needs and the System's options.

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

**ACTION ITEM 9:**

Mr. Pagán read the resolution

Authorizing New York City Health and Hospitals Corporation (the "System") to sign a five-year renewal revocable license agreement with **Sleep Disorders Institute ("SDI") for its use of approximately 1,038 square feet to operate a sleep disorder clinic on the 7th floor of the "H Building" at NYC Health + Hospitals/Bellevue** (the "Facility") at an annual occupancy fee of \$68,954 or \$66.43/ft. to escalate at 2.75% each year for a five-year total of \$429,347.

(Presented to the Capital Committee: 05/06/2024)

Deborah Morris, AICP, Senior Director, Real Estate & Housing, was joined by Marcia Peters, NYC Health + Hospitals/Bellevue COO, and Ms. Jontef. Ms. Morris and Ms. Peters provided background information on the Sleep Disorders Institute and its work with NYC Health + Hospitals/Bellevue.

The Board asked for clarification about the billing process. Ms. Peters explained that the Sleep Disorders Institute does independent billing. The Facility is responsible for paying for services rendered to its uninsured patients.

**Follow -Up:** Ms. Peters will share the billing rates for uninsured NYC

Health + Hospitals/Bellevue patients receiving care/services at the Sleep Disorders Institute at a later date.

After further questions, Ms. Peters added that the increased volume of sleep studies is attributed to different factors including the trauma following the COVID-19 pandemic and an easier referral process to the on-site Sleep Study Institute. Dr. Katz added, while there is still controversy among clinicians about the benefits of sleep studies and treatments for sleep apnea, there is an overall increase interest in the area and interventions to improve patient's quality of life. There are also challenges among the different insurers as they have different requirements to approve the sleep studies and the use of CPAP/BiPAP machines at home.

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

**ACTION ITEM 10:**

Mr. Pagán read the resolution

Authorizing New York City Health and Hospitals Corporation (the "NYC Health + Hospitals") to execute a **design-build contract with Axis Construction Corporation, (the "Contractor") to undertake a development an integrated women's health suite at New York City Health + Hospitals/South Brooklyn Health** for a contract amount of \$22,995,627, with a 10% project contingency of \$2,299,563, to bring the total cost not to exceed \$25,295,190.

(Presented to the Capital Committee: 05/06/2024)

Kelly Burns, Director, Office of Facility Development, provided an overview of the background and current state of the Women's Health services at Health + Hospitals South Brooklyn Health and a summary of the proposed future state. Oscar Gonzalez, Senior Assistant Vice President, Office of Facility Development, continued with an overview of the selection process explaining the rationale for the RFQ and RFP criteria and the procurement process. The contract details including an MWBE goal of 32%, vendor performance evaluation rating and the project budget breakdown were also discussed.

After questions from the Board, Ms. Burns clarified that the Women's Health Services include the provision of care before, during and after labor and birth. There will be no disruption on the delivery of Women's health services

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

**ACTION ITEM 11:**

Mr. Pagán read the resolution

Authorizing the New York City Health and Hospitals Corporation ("NYC Health + Hospitals") to execute a contract with **Jensen Hughes Engineering, P.C. (the "Contractor")**, to provide life safety services at all acute hospitals for a contract amount of \$7,348,135, with a 10% project contingency of \$734,813.50, to bring the total cost not to exceed \$8,082,949.

(Presented to the Capital Committee: 05/06/2024)

Manuel Saez, Vice President, Office of Facilities Development, provided background information regarding the existing contract and scope of service with the vendor. Mr. Saez explained the RFP criteria, procurement process and vendor performance. An overview of the contract budget, including the 10% contingency, and the vendor diversity goal of 30% was also discussed.

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

#### **COMMITTEE AND SUBSIDIARY REPORTS**

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

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

##### **NYC HEALTH + HOSPITAL FACILITIES RECOGNIZE**

##### **NURSES AND HOSPITAL POLICE DURING SPECIAL MAY OBSERVANCES**

The System held ceremonies and recognition events that highlighted the critical roles the nurses and hospital police play at the facilities.

##### **MAYOR ADAMS AND NYC HEALTH + HOSPITALS HAS HIRED OVER 1,000 NEW NURESES**

New York City Mayor Eric Adams and Dr. Katz announced that more than 1,000 new union nurses have been hired over the past eight months at the City's public hospital System, replacing many temporary nurses. This investment in the System's workforce ensures patients are served by permanent employees who are committed to the mission, come from the community, and have developed institutional knowledge.

##### **CHIEF QUALITY OFFICER DR. ERIC WEI AND NYC HEALTH + HOSPITALS/ELMHURST CEO**

##### **HELEN ARTEAGA LANDAVERDE JOINED SENATOR GILLIBRAND IN CALLING FOR MORE**

##### **INTERAGENCY COORDINATION TO RESPOND TO THE AVIAN FLU OUTBREAK IN CATTLE**

Senator Gillibrand held a press conference to advocate for additional interagency coordination to respond to the avian flu outbreak in cattle. She was joined by NYC Health + Hospitals/Elmhurst CEO Helen Arteaga Landaverde, Chief Quality Officer and Senior Vice President Dr. Eric Wei, and the CEO of



Mt. Sinai. NYC Health + Hospitals officials spoke to the System's critical role at the front line in responding to the public health crisis in New York City.

**OMER CABUK, ME APPOINTED TO LEAD HEALTH SYSTEM DECARBONIZATION EFFORTS**

NYC Health + Hospitals appointed Omer Cabuk, ME as its first ever Chief Decarbonization Officer. In this role, Mr. Cabuk will spearhead the organization's robust decarbonization initiatives, adhering to the targets set by Local Law 97 of 2019, which mandates a 40% reduction in operational emissions by 2025 and a 50% reduction by 2030.

**LEGAL SERVICES FOR PATIENTS EXPAND AT THE HEALTH SYSTEM**

The health System announced the expansion of free health-related legal services for its patients in partnership with LegalHealth, a division of the New York Legal Assistance Group ("NYLAG"). Nearly 5,000 patients accessed legal services at NYC Health + Hospitals in 2023. The expansion includes increased staffing, capacity building for increased patient access, and data-driven analysis on how legal services can impact patient health. The medical-legal partnership is funded in part by the New York City Council.

**NEW PSYCHIATRY RESIDENCY ESTABLISHED AT NYC HEALTH + HOSPITALS/QUEENS**

NYC Health + Hospitals/Queens received initial accreditation for a new psychiatry residency at the hospital. This new program will allow the health System to be more equipped to face the challenges of hiring in the behavioral health workforce. Residents will have a rich clinical and educational exposure during their training at Queens Hospital.

**NYC HEALTH + HOSPITALS HAS SERVED NEARLY 14,000 PATIENTS THROUGH ITS TELEHEALTH BEHAVIORAL HEALTH SERVICE**

Nearly 14,000 patients have received behavioral health care through the health System's telehealth service, Virtual ExpressCare, since the program launched in 2022. Through this service, patients can speak to a provider on demand via video or phone for help with anxiety, depression, stress, burnout, substance use disorders, withdrawal, and emotional distress. Services have expanded capacity to provider specialty services to children and adolescents. The System is the largest provider of behavioral health in New York City.

**INAUGURAL BLACK MATERNAL HEALTH FORUM HELD AT NYC HEALTH + HOSPITALS/GOTHAM HEALTH, GOUVERNEUR**

The System held its inaugural Black Maternal Health Forum on Tuesday, May 21 at NYC Health + Hospital/Gotham Health, Gouverneur. The forum focused on the current state of Black perinatal health, the legacy of Black midwives, and a panel discussed "A Solution Approach to Supporting Black Birthing People."

**BLOOMBERG CONNECTS APP FEATURES NEARLY 850 PIECES OF NYC HEALTH + HOSPITAL ART**

NYC Health + Hospitals is the first health care organization on Bloomberg Connects, which features more than 350 cultural organizations, including many

of the world's major museums. The Arts in Medicine department has been working closely with Bloomberg Connects to add content to its app. Nearly 850 works of art from the health System's collection are available to view worldwide on the free app.

**NEW MURALS INSTALLED ON THE FENCING OUTSIDE OF NYC HEALTH +  
HOSPITALS/METROPOLITAN**

In partnership with ArtBridge, two new murals were installed on the scaffolding of NYC Health + Hospitals/Metropolitan. The works were developed by artists Dario Mohr and JR in collaboration with residents from the nearby East River Houses over a series of workshops and community engagement events. The project received support from the System's Arts in Medicine program.

**DIAGNOSTIC RADIOLOGIC INTERPRETATION SERVICES GOES ONLINE**

NYC Health + Hospitals has embarked on the implementation of teleradiology to provide diagnostic radiologic interpretation services to several acute care hospitals for some inpatient and Emergency Department exams performed evenings, nights, and weekends. It will also include all NYC Health + Hospitals/Gotham Health outpatient radiology exams with the exception of mammography.

With teleradiology, the System is able to improve both the quality of clinical care and operational efficiencies. The System will continue to employ on-site radiologists to effectively coordinate care for patients. The second phase of the effort, expected to begin this fall, will bring 24/7 coverage utilizing a hybrid of onsite and Teleradiology models.

**DISCUSSION:** Dr. Fisher and other Board members asked about the communication process between the referring clinician, and the reading radiologist. Dr. Katz explained that the process would not differ from the current system where the full reports are available online via Epic along with the radiologist's contact information should one need to contact them directly via phone or via the Epic messaging platform.

Dr. Katz added that the utilization of artificial intelligence is a great enhancement in prioritizing the most critical scans in the queue for the radiologists to read.

Dr. Katz also added that leveraging virtual consults and management provides enhanced and much needed care in areas such as child psychiatry, where there are limited providers available in the System and in the City.

Following questions from the Board, Dr. Katz confirmed that the team conducted an assessment to identify the needs of each site based on their volume and the corresponding number of radiologists needed to manage that volume. Additionally, hiring radiologists versus utilizing vendors has its benefits. It is overall less expensive and there is more familiarity with the System's needs, platforms and patients.

Regarding STAT scans, there is a dedicated person who reads the most urgent scans. Their work is also enhanced by artificial intelligence which is able to identify and prioritize scan readings for the radiologists within the STAT cases.

The Board returned to the discussion regarding the availability of behavioral health professionals. Dr. Katz explained that there is an overall shortage of mental health professionals, more specifically psychiatrists and child psychiatry. The in-patient psychiatry and the use of virtual care remains a challenging area from a regulatory perspective. However, in an out-patient setting, such as the emergency room, the regulations do not require that a child in need of psychiatry services is seen by a child psychiatrist.

The Board inquired about the nearly 14,000 patients who have received behavioral health care through the System's telehealth service, in-person visit and about managing the patient as a whole. Dr. Katz confirmed that the 14,000 figure refers to out-patient visits. The System does a great job of referring patients to receive care beyond their behavioral health needs and manage other social determinants of health. While there was some reluctance at first, there is an increased interest in virtual care. Care will be delivered in the best way possible to meet the patient's needs whether that is in-person or via virtual care.

**NYC HEALTH + HOSPITALS/SOUTH BROOKLYN HEALTH MARKS ONE YEAR WITHOUT A CATHETER-ASSOCIATED URINARY TRACT INFECTION ("CAUTI")**

NYC Health + Hospitals/South Brooklyn Health reached a significant milestone, one year without a single catheter-associated urinary tract infection ("CAUTI").

**METROPLUSHEALTH OFFERS MEDICALLY TAILORED MEALS (MTM) AS A PERMANENT MEDICAID BENEFIT**

In 2022, New York State Medicaid approved MetroPlusHealth to implement the cost-effective medically-tailored meals ("MTM") program, designed to be delivered to members' homes either in lieu of Personal Care Aide service hours used for meal preparation and food shopping, or in lieu of hospital inpatient stays and/or emergency department visits. To date, MetroPlus Health and its partners have enrolled almost 1,200 members.

**ROBOTIC SURGERY PROGRAM EXCELS AT NYC HEALTH + HOSPITALS/HARLEM**

Harlem Hospital celebrated the one-year anniversary of its Robotic Surgery program. In 2023, Harlem Hospital introduced the state-of-the-art da Vinci surgical system as a means to perform surgical procedures with the advanced capabilities of robotic technology.

**NEW HOME HEALTH SIMULATION SATELLITE OPENS**

NYC Health + Hospitals/Community Care opened a new Home Health Simulation Satellite site for all home health nurses to use. The site gives home health

nurses a way to practice various scenarios, from routine procedures to emergencies, in a simulated home or other community-based setting.

**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 4:15 P.M.



Colicia Hercules  
Corporate Secretary

# COMMITTEE REPORTS

**Capital Committee Meeting – May 6, 2024**

**As reported by:** José Pagán

**Committee Members Present:** Mitchell Katz, MD, Sally Hernandez-Piñero, Freda Wang

Mr. José Pagán called the meeting to order at 10:06 a.m.

Mr. Pagán called for a motion to approve the April 8, 2024 minutes of the Capital Committee meeting.

**Upon motion made and duly seconded the minutes of the Capital**

**Committee meeting held on April 8, 2024, were unanimously approved.**

## **VICE PRESIDENT REPORT**

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

- As the end of the fiscal year nears, we are working diligently to ensure that our Fiscal Year 2024 contracts are registered with the comptroller to ensure that we meet our commitment goals and have timely starts to the projects.
- We received approval to proceed with the next phase of OTxHU and are actively working with our CHS, DOC, and SCOC partners to move forward with procurement for work at NYC H+H/Woodhull and NYC H+H/NCB.
- At NYC H+H/Elmhurst we are currently in procurement for the first phase of their larger Emergency Department renovation. We have opened the staff Wellness room, as well as the Radiation Oncology suite, which includes new LINAC and CT scanner.
- At NYC H+H/Metropolitan, the new Wellness room is complete and has been furnished. We have commenced design for the Condensate Riser, and the Ronald McDonald House sprinkler work has started.
- At NYC H+H/Jacobi, we completed renovations for the IT department which included two training rooms for staff.
- We have four items this month, the NYC H+H/South Brooklyn Health Maternal Health Renovation, System-Wide Life Safety Services, NYC H+H Gotham/Williamsburg Clinic Lease, and NYC H+H/Bellevue Sleep Disorder Clinic Lease.

That concluded Mr. Saez's report.

- Sally Hernandez-Piñero asked for status of the OTxHU project at NYC Health + Hospitals/Bellevue. Mr. Saez explained that the project was moving along with parking lot expansion on-going, flood protections in process, and canopy and tie-ins are under way. Mr. Gonzalez added that completion was expected by end of year.
- Dr. Katz said he remembered there being some discussion as to which size generator was selected. Mr. Gonzalez said the larger generator

was selected and has been ordered and there is a back up plan in place if the equipment does not arrive in time.

Leora Jontef read the resolution into the record:

**Authorizing New York City Health and Hospitals Corporation (the "System") to sign a 5-year renewal lease with David Welner d/b/a Welner Associates ("Landlord") for the use of the entire building at 279-281 Graham Avenue, Brooklyn, NY consisting of approximately 10,900 square feet (the "Building") together with the 1,185 square feet of vacant land adjacent to the Building for use by NYC Health + Hospitals/Gotham Health ("Gotham") for a primary care clinic at an initial rent of \$57.83 per square foot which will increase by 3.5% annually to reach \$66.36 per square foot by the 5th year; provided that the System will hold three options each for 5 years at a rent based upon a continuation of the pattern of 3.5% annual increases for a total rent payable over the potential 20-year term of \$17.83M.**

Ms. Jontef was joined by Ted Long, MD, MHS Senior Vice President, Ambulatory Care and Population Health, who presented the background information on the clinic, services provided, and the surrounding community. Ms. Jontef described the lease terms.

- Ms. Hernandez-Piñero asked about demographic profile for the clinic and asked if there was any insight into the 62% who did not disclose race. Dr. Long said that was not unlike most of the data collection that happens throughout the system. Roman Ryniewski, Deputy Executive Director, NYC Health + Hospitals/Gotham Health, said there had been an uptick in utilization from the Latin community.
- Ms. Hernandez-Piñero asked if there was a difference in patient population between the Greenpoint and Williamsburg clinics. Jeremy Berman, Deputy Counsel, said that historically there was a large polish population in the Greenpoint area.
- Ms. Hernandez-Piñero noted the 3.5% annual increases and asked if our existing relationship with the landlord helped facilitate negotiations. Ms. Jontef said yes, but the market in the neighborhood is very hot and the location of the clinic is desirable so we wanted to remain in the space for continuation of services to the community. The H+H team negotiated terms, which included some work that needed to be addressed and this is the outcome of that work.
- Ms. Hernandez-Piñero asked what capital improvements would be made. Deborah Morris, Director, Housing and Real Estate, said that roof work and duct work was underway, estimated to be several hundred thousand dollars, the basement stairs would be replaced, HVAC, roof work and coping on the exterior would be done.
- Freda Wang asked if the landlord would be paying for that. Ms. Morris said yes. Mr. Berman added that landlords were often responsible for replacements and H+H responsible for maintenance.
- Ms. Wang asked what the prior terms of the lease were. Mr. Berman said

the prior lease was for 20 years and this one is for 5 years. Ms. Wang asked what would happen in 5 years if the lease increases. Mr. Berman said negotiations would be step one because moving is a big lift and purchasing is not really an option.

- Mr. Pagán said he feels the 5-year term provides us with time to assess other options as needed.

After discussion - upon motion duly made and seconded the resolution was approved for consideration by the Board of Directors.

Ms. Morris read the resolution into the record:

**Authorizing New York City Health and Hospitals Corporation (the "System") to sign a five-year renewal revocable license agreement with Sleep Disorders Institute ("SDI") for its use of approximately 1,038 square feet to operate a sleep disorder clinic on the 7th floor of the "H Building" at NYC Health + Hospitals/Bellevue (the "Facility") at an annual occupancy fee of \$68,954 or \$66.43/ft. to escalate at 2.75% each year for a five-year total of \$429,347.**

Ms. Morris narrated a presentation providing background information, services to be provided, and terms of lease.

- Ms. Hernandez-Piñero said she had experience there and while there was a difference between locations she visited it was a fine facility.
- Ms. Wang asked if there was a priority in the program for Bellevue patients. Ms. Morris said the majority of patients came from Bellevue but outside patients were welcome.
- Mr. Pagán asked if there was any quality consistency check completed during negotiations to ensure that all sites were equal in comfort and service. Ms. Morris said she would discuss with appropriate parties.

After discussion - upon motion duly made and seconded the resolution was approved for consideration by the Board of Directors.

Mr. Saez read the resolution into the record:

**Authorizing New York City Health and Hospitals Corporation (the "NYC Health + Hospitals") to execute a design-build contract with Axis Construction Corporation, (the "Contractor") to undertake a development an integrated women's health suite at New York City Health + Hospitals/South Brooklyn Health for a contract amount of \$22,995,627, with a 10% project contingency of \$2,299,563, to bring the total cost not to exceed \$25,295,190.**

Oscar Gonzalez, Senior Assistant Vice President was joined by Kelly Burns, Director of Design and Construction, Office of Facilities Development, to narrate a presentation providing background information, overview of project scope, solicitation process, contract terms, MWBE status, and project budget.

- Ms. Hernandez-Piñero asked what the purpose of the various rooms would be. Ms. Burns said they range from pre to post-partum uses.
- Ms. Hernandez-Piñero asked what was meant by community rooms. Ms. Burns said there would be community education spaces to educate future parents and additional waiting areas with a children's section and stroller areas.
- Mr. Pagán noted that the increase in births was impressive and asked if we were sure this project would accommodate future needs. Dr. Katz noted that there had been increases in birth rates throughout the borough and System.
- Ms. Wang asked if the design-build model was working successfully for H+H. Mr. Gonzalez said it was still early but the design-build project at Harlem was going well.
- Ms. Wang asked how it was determined which projects would use the design-build model. Mr. Gonzalez said one mandated criterion was a \$10 million minimum project budget, but additionally it had to be a project that leant itself to collaboration and flexibility.
- Ms. Wang asked if this model was a Gross Maximum Price (GMP) contract. Mr. Gonzalez said no, this is more of a not-to-exceed, there is a contingency included within the \$23 million for field conditions but the owner's contingency is more for scope changes or additions. There is extra budget built in and available.
- Ms. Wang asked about contract term. Mr. Gonzalez said the 3-year contract with two one-year options to renew but completion was anticipated for end of year two. The additional time provides for close-out, and other end of project deliverables.
- Ms. Hernandez-Piñero asked if services would be interrupted during construction. Ms. Burns said no.

After discussion - upon motion duly made and seconded the resolution was approved for consideration by the Board of Directors.

Mr. Saez read the resolution for consideration:

**Authorizing the New York City Health and Hospitals Corporation ("NYC Health + Hospitals") to execute a contract with Jensen Hughes Engineering, P.C. (the "Contractor"), to provide life safety services at all acute hospitals for a contract amount of \$7,348,135, with a 10% project contingency of \$734,813.50, to bring the total cost not to exceed \$8,082,949.**

Mahendranath Indar, Assistant Vice President, narrated a presentation providing background information, scope of services, solicitation process, contract terms, MWBE utilization, and contract budget.

- Ms. Hernandez-Piñero asked for clarification on budget. Mr. Indar explained that there was additional square footage in the new



agreement and market rates had also increased.

- Ms. Wang asked why we were seeing the new agreement so far in advance of expiration. Mr. Saez said, we wanted to be prepared.

After discussion - upon motion duly made and seconded the resolution was approved for consideration by the Board of Directors.

There being no further business, the Committee Meeting was adjourned at 10:58 a.m.

**Finance Committee Meeting - May 6, 2024**

**As Reported By: Freda Wang**

**Committee Members Present:** Mitchell Katz, MD, Freda Wang, José Pagán, Sally Hernandez-Piñero, Barbara Lowe

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

Michline Farag, Tasha Philogene, Marji Karlin, John Ulberg, Linda Dehart, James Cassidy, David Guzman, Megan Meagher, Mariel McLeod, Ted Long, MD, Rafelina Hernandez, Colicia Hercules

**CALL TO ORDER**

Ms. Wang called the meeting of the New York City Health + Hospitals Board of Directors Finance Committee Meeting to order at 11:02 a.m.

Ms. Wang called for a motion to approve the March 11, 2024 minutes of the Finance Committee meeting.

Upon motion made and duly seconded the minutes of the Finance Committee meeting held on March 11, 2024 were adopted.

**FINANCIAL UPDATE**

Mr. Ulberg opened the presentation with the FY-24 Quarter 3 Highlights. He conveyed that March closed with \$708M (26 days cash-on-hand). The budget overperformed by 1% and closed YTD February with a positive Net Budget Variance of \$155.7M.

Mr. Ulberg continued that direct patient care receipts came in \$325M higher than the same period in FY-23 due to continued increases in IP and OP services in FY-24, UPL Conversion, and overall improved cash performance. IP Patient care volume in FY-24 has surpassed pre-COVID levels (1.5%) and OP visits are 9.3% ahead of FY-20 pre-COVID levels. Revenue base remains strong and resilient primarily driven by returning volume and higher average collectability rate over the base. Overall, our strategic financial initiatives are ongoing. YTD Q3 performance generated \$824.7M against an annual target of \$1.08B. Financial updates through this period are still in progress as some initiatives have been impacted by the interruption of Change Healthcare. Several areas of strong Q3 performance were noted.

Mr. Ulberg presented the cash projections for FY-24. The System is estimated to close April with approximately \$600 million (21 days cash-on-hand) and expects to close May with approximately \$600 million (21 days cash-on-hand).

We continue to work closely with the City on our remaining liabilities due to them as we continue to closely monitor our cash position.

Mr. Ulberg continued presenting the external risks. Several areas of focus include the Staffing Glidepath, temp services, and sessional costs, which continue to present a financial challenge. Full-time RN hiring is well ahead of target by 575 RNs, beating the glidepath, and temps are meeting the glidepath reduction targets as orientation is complete which ranges from 3 to 6 months, and potentially beating the 18-months glidepath target. A sessional and locum expense reducing glide path has been implemented and is assumed to start in FY-24 Q3, reaching target by the end of FY-25.

H+H is diligently working to address inflationary pressures which continue to present a strain on and risk to our cost reduction plans. Facilities submitted gap closing plans to reduce spend and generate revenue. Timing to achieve the spend reductions is at risk due to increased pharmacy and Medsurg Supply Costs driven by inflationary challenges, increased patients, and higher acuity patients that require more expensive drugs and services. Medsurg spending is projected to increase 46% since FY-19, driven by inflation and increased volume.

City and State budgets currently presents a low risk to H+H. OMB released its Executive Plan on April 24<sup>th</sup>, with no PEGs in this plan. Moreover, H+H continues to review the impacts of the SFY-24-25 Enacted State budget which passed on April 20<sup>th</sup>. A summary of the major SFY-24-25 Enacted State budget provisions detailed were noted.

Medicaid Recertification is currently meeting our budgeted recertification targets and continues to optimize our overall strategies to ensure that we stay on track.

Lastly, the Change Healthcare (CHC) Cyberattack presents a lower financial challenge to H+H as we continue to make progress. The incident has national impacts, primarily on health care provider organizations, retail pharmacies, and payors, which use CHC technologies/services. H+H has reconnected with CHC for pharmacy and has connected to Experian for claims processing and eligibility transactions. H+H continues to wait for responses from some health plans regarding waivers as outlined by Department of Financial Services Circular Letter.

Mr. Ulberg provided an overview of the State Budget. There were positive and negative highlights from the SFY-24-25 Enacted Budget. Several positive highlights included the Hospital and Nursing Homes Medicaid Rate increases, Expands of Access to Primary Care, Essential Plan and Medicaid Coverage Provisions, Safety Net Transformation Program, Behavioral Health Investments, Workforce Proposals, and Health Care Stability Fund/HMO Tax. Some of the negative highlights included the Partial Reduction in Managed Care Quality Pools, 10% Capital Reimbursement Cuts on top of existing 10% Cut for Hospitals and 5% Nursing Homes, and 1% across the board cuts to health plans.

Dr. Katz inquired on the 1% across the board cuts to health plans. Is that the State looking at their balance sheets?

Mr. Ulberg agreed and added that looking at all those cuts, the State was

just trying to get to a target.

Dr. Katz continued, the State is adding and subtracting noting that they need to also add initiatives. There is some data that suggest that plans really have been taking unfair profit and just wondering if the 1% across the board is based on them reviewing the balance sheet of plans and feeling like this is doable, or is it just we have got to close the gap somewhere and people hate plans, go ahead and do it there.

Mr. Ulberg responded that this is probably a combination of trying to hit the budget target. In his old job, you would always pay attention to that point, how much profit is being made and are you setting the right rate? At the end of the day, the State still has to set a rate that is reasonable and fits within the bounds that would be accepted by CMS. At one point they were trying to reach closer to the 25% of the range and is a combination of things. For H+H it becomes a direct cut due to our relationship with Healthfirst and MetroPlus. It is not a cut to us from most other plans where we do not engage in capitation arrangements, but that is a direct cut.

Dr. Katz asked if it affects every single line of plan business or just certain lines of the plan.

Mr. Ulberg responded that they set the premium and they cut it once. The total premium would just be reduced from where they would set it by 1%. It will still be a year-to-year increase as they need to factor in inflation, utilization increases, those are all part of the rate setting process but they will take a reduction of 1% that is part of the process. We do not like it but it is a real improvement from the Executive Budget to where they landed in the final budget. The Executive Budget had many deep cuts that were in essence, quote bought back, but next year will be interesting with the HMO tax, we will watch that carefully.

Ms. Hernandez-Piñero inquired on the focus on the Essential Plan, doing all pools more for Essential Plan in reducing for Medicaid. There seems to be a real focus on the Essential Plan, increasing the income level eligibility. There was an article talking about QHP and people falling out of QHP into essential plan.

Mr. Ulberg responded that we have added a slide on this and will be talking about this. We asked the question of why would you cut, and it goes back to Dr. Katz point about the budget, and trying to hit certain targets. The Essential Plan is 100% Federal funded, so they will go there first to try to maximize those Federal dollars and that is more than likely why they increased the quality pool there, but cut it on the Medicaid side. It is always important to maintain parity where you can, as the incentive structure will have an effect, and everybody knows the essential plan is a pretty rich plan at this point. The rates are very desirable level compared to Medicaid, but you need to always be mindful of keeping that balance as it will drive incentives that perhaps you do not want to create.

Ms. Lowe inquired on prison health and the potential movement occurring to move the work efforts further north.

Dr. Katz clarified that she meant upstate, Ms. Lowe agreed. This is due to workforce being less expensive upstate.

Ms. Farag presented the financial performance highlights for FY-24 thru

February Net Budget Variance. She noted that February ended with a net budget variance of \$155.7M (1%). Receipts exceeded budget by \$464M primarily driven by Patient Care and Risk Revenue. Risk is higher due to improved PMPM and other PY reconciliations. Disbursement exceeded budget by \$308M, which includes expenses associated with Temp coverage, Affiliation, Discretionary OTPS, and Overtime costs.

Ms. Philogene provided the FY-24 thru February performance drivers updates. Cash receipts are 9% ahead of budget. Much of the overage can be attributed to Risk revenue exceeding target due to higher than anticipated PMPM and PY reconciliations. FY-24 thru February, cash disbursements are over budget by 5% primarily resulting from Temp spending and Agency costs exceeding target. Ms. Wang asked if there is breakdown of what is due to inflation and due to higher volume.

Ms. Philogene responded that for volume we are seeing about 40% and then the balance is inflation. We do have some analysis for each separately on pharmaceuticals and medical supplies, and hopefully some of the savings that we realize in temps perhaps can cover some of the spending on that side.

Ms. Wang asked regarding the temps, the \$130M expense, even though on the glidepath we are ahead of schedule but the dollars have not been realized. Ms. Farag responded that there is a lag between off boarding the temps and then starting to see the annualized fiscal dollars, so it is not immediate. Most of the reductions have been after the settlement of the NYSNA contract in August so it takes a lag of hiring first our full-time staff, or putting them through orientation properly for safe transition, to transition the temps off so there is a lag by the point of the temps transition off. Most of the progress we have seen has actually been in the last couple of months, or the last quarter. That is on actual off boarding of the actual staff, the temp staff, and then you start to see the financial savings come after that, now you are reducing post them leaving.

Ms. Wang added that when we are kind of projecting out for the next budget, we want to think about that time because this is a pretty big swing, \$175 million, so even though our timing is on track or ahead of schedule, the dollars are not.

Ms. Farag agreed and added that we do not see the larger dollars immediately but you will see larger financial gains in FY-25.

Mr. Ulberg added that we are very confident that the savings will materialize as Natalia and her team actualize the contract on a nurse by contract nurse basis, knows when they are going to depart, knows who has been hired and where they are in their training path; knows who needs to exit and the processes underway. Ms. Farag added, that she knows on the individual level by facility issues, meeting with facility weekly, and is really a great effort.

Ms. Lowe commented that there are some common factors that we can expect this time of the year, new grads. They run to us for orientation, and then they have a plan to move out of New York or do whatever, go somewhere else, and it is always that way. But we have done phenomenally much better than we have done in years.

Ms. Farag added, absolutely, the progress is evident in our hiring so it has been really great.

Ms. Lowe added that when personally going to the facility, she loves seeing their faces as everyone is happy.

Ms. Wang commented, that is great.

Mr. Ulberg added that it is a great point, as it gives us the chance to change the culture. With many new nurses, Natalia has done a great job with that training program, and on the way out the door we are recruiting the contract nurses as they go. We will tell them, we have enjoyed having you and we have a job for you so they can still choose. Things are moving well there.

Ms. Wang commented that we are 1% ahead of budget which is great although this does not reflect some of the Change Healthcare impact, but we will hear that it is coming along as from the cash forecast, it looks like we are going to recover from that. The one thing to note is that some of the variances, we are fortunate we have high variances on the revenue side as it is offsetting the high variances on the expense side, so in terms of risk pool performance, the 79% better than expected PMPM performance that we cannot anticipate necessarily, is that correct?

Ms. Farag responded that the ones that we have the reconciliation is for the prior year for one-time, and the PMPM improvement will be doing more. We will be able to see that continuity, but there is definitely a lot of that.

Ms. Wang added, the 26%. Ms. Farag agreed.

Ms. Wang continued, when we review the risk pool we may see that might start to change, is that correct? Mr. Ulberg agreed. Ms. Wang added that it is factored into our budget moving forward.

The revenue performance for FY-24 thru February was presented by Ms. Philogene. FY-24 direct patient care revenue (IP and OP) is \$325.2M higher than FY-23 actuals. Patient revenue increases year-over-year can be attributed to approved State Medicaid increases, Federal approved Billing UPL, overall increased volume and cash performance on revenue improvement initiatives.

Ms. Karlin provided an update on Medicaid Recertification results that remain in line with NYC Health + Hospitals Financial Plan 2/3rds of the way through. NYC H+H is currently averaging 79% for June 2023 through February 2024 cohorts recertified from the biggest health plan partners. Recertification percentages for MetroPlusHealth and Healthfirst members dipped over winter holidays but are showing signs of recovery in February and March 2024, which is not complete. Further, atypically high recertification percentage for Healthfirst for December 2023 cohort is primarily driven by automatic extension of coverage for large cohort of aged, blind and disabled members with coverage through LDSS-HRA who were due for recert in that month.

An overview of NYC Health + Hospitals continuing to make progress in recovering from Change HealthCare Cyberattack was presented by Ms. Karlin. Change HealthCare, NYC Health + Hospitals vendor for claims clearinghouse, experienced a cyberattack on 02/21/24. In terms of Cash Flow management, H+H

is closely working with our City, State, and Federal partners to expedite approved funding to H+H and prioritize review and approval of pending initiatives and current-year reimbursements. H+H has notified National Government Services (NGS) about the interruption in order to avoid PIP timeliness reviews; Medicare payments have been steady. Insurance payments are starting to come in based on recent claims submissions, and H+H continues to have ongoing conversations with managed care partners to afford leniency related to timely filing and appeals deadlines. Revenue Cycle is accelerating planned implementation of paperless billing - live since 02/28, and expedited planned 7/1/24 implementation of Experian clearinghouse for eligibility, authorization, claims and remits. H+H is live with eligibility and claims with the exception of real time eligibility and dental claims. H+H is not live with remittances and expect to go live on Experian by June 1<sup>st</sup>. The live dates for eligibility, claims and remits were noted. Revenue Cycle continues to optimize Experian implementation in the weeks and months ahead, and currently working with facilities to address backlogs in eligibility and claims/denials follow-up.

Ms. Wang asked how do we think this will show up in our financials. Mr. Ulberg responded that the complete recovery plan we had discussed have a three-phase recovery plan each one being 6 weeks. We were fortunate that we had cash balances available that carried us through the first 6 weeks. The second six weeks, we were working closely with our City partners to move funds back and forth, and the final phase is tracking how are we doing with denials which we are asking our insurance partners to be flexible with us in terms of the processing of the denials, and we are making progress there. We do a lot of business Medicaid Fee for Service business with the State and having them be good partners with us in terms of how they treat the denials, and allow appeal denials, will be important. We have asked them to just follow the guidelines set out by the Department of Financial services, so we do not anticipate it being an issue. The other important part of phase 3 is dealing with our Federal and State partners, we have two significant transactions that were built into the plan for the year.

The first is inpatient UPL, which is a transaction initially approved by CMS last year, they renewed that approval almost 3 months ago. It is our understanding that the status of that package has moved from the Health Department over to the budget division and that is the last step. But again, time is of the essence there, as to effectuate the transaction it takes at least 6 to 7 weeks since there are other things that we have to do in terms of moving the money between us and the State, and then the plans back to us. It is just part of our plan. The last transaction is outpatient UPL which is new to CMS and they have not done that before. Dr. Katz added that we mainly focus on timing, making sure we can pay our bills, but if we put that aside for a second at the end of the day, would we lose money due to this?

Mr. Ulberg responded that we are not sure but there is a possibility that we could lose money on the denial remittance part of the glitch here, but Bob has been looking at our cash and it is about 94-96% of where we should be with cash, some of that is the denials and it will come back. We make our living we say on the last 1%, and 1% makes the difference, that's the margin that we work with here.

Ms. Karlin agreed and added that from a pure operational standpoint, if the payors do not all cooperate with the extensions, that is the possibility of

where we lose money. If they cooperate, it is going to take us some time to dig out from under these, but from the payers that we are getting the remit files we are seeing as expected higher than typical denial rate for eligibility, because our eligibility was not live and we send it to the payer that we had on file not necessarily the right payer. And so, we were scoring and trying to address all of those in a priority manner, and then we have the denials sort of laid out in a priority order. For instance, if a payor comes back and said you were too late to bill us because we did pass their timely filing and we could not post the remit file from 4 months ago, that is the danger. But we are labeling and categorizing everything to fight it down to the last dollar.

Ms. Wang asked if there have been any regulations from the Federal government to extend this.

Ms. Karlin responded that there has been guidance. CMS gave their guidance as to what they were planning to do, but it is not regulation.

Ms. Wang added that payors have the option to not do it.

Mr. Ulberg added that DFS, Department of Financial Services regulates the non-Medicaid insurers, issued very direct guidance and what we do is keep track of who is in fact recognizing that we have issues and who is not. The best that we can do is to inform them really on a claim by claim basis of what is kind of fallen within being classified as an impact related to Change. We are fairly successful with even the State, we have a file for claims that fit within the denial period that we want you to recognize. And again, we even had to attest to DFS that we in fact had these various issues that we were requesting that the insurers address. We do not believe it is over, and it is not as big of an issue as we move quickly and other providers have moved quickly to try to switch to another clearing house and put in other systems.

Dr. Katz commented that Sally is the only lawyer at the table, that if we were to lose money because of insurers unwillingness to go beyond the date, would we not have a legal case claim against Change Healthcare? This is a company that had a \$300 billion dollar profit last year, they are not going bankrupt. No matter how many claims, they are not going bankrupt.

Ms. Karlin responded that OLA is looking at that as well, and we are as well ticking and tying, and making sure we put everything into an appropriate bucket, all of our claims, all of our denials, and working through it as well as any expenses that we have incurred because of this. OLA is looking at our options.

Ms. Hernandez-Piñero answered that she thinks we will have to get in line and asked if we had an interim vendor before Experian.

Ms. Karlin responded that we did not. Change HealthCare was our vendor, and the board approved a transition from Change Healthcare to Experian. We were just able to leverage that Experian contract to implement it earlier.

Dr. Katz added that we just started sooner and depending what you think, it was either brilliant judgement but we got very lucky, as we were able to start it earlier. We are lucky we were prepared.

Mr. Ulberg added that it raises the issue of this redundancy. Do we need to

have redundancy? Once we put this behind us, we will come back and answer that question of do we need to have redundancy to be prepared.

Ms. Hernandez-Piñero added that MetroPlus tried to have the redundancy built in, and then companies kept getting swallowed up, so everyone that you were using for redundancy was taken over.

Ms. Karlin added that we have already started engaging in that conversation with IT and we will see what their recommendation is.

Ms. Wang commented that from a timing standpoint, it sounds like the team has back up plans and back up plans, and the bigger question is, are we actually out a loss.

Mr. Ulberg added that we will report back on it.

Ms. Wang continued that the team is doing everything possible to prevent that but obviously that is the question.

Mr. Ulberg added that we are keeping track of it, we are tagging each claim as well.

Ms. Meagher provided an update on the Risk Surplus for Year-End 2023. Significant surplus payments achieved in 2023, but expecting much less surplus in 2024 due to NYS Medicaid and Healthfirst Medicare premium rate cuts against consistent medical spend. Membership remaining mostly flat due to strong Essential Plan performance and high Medicaid recertification rates.

Ms. Lowe asked if there is any one population that we can look at a little further, maybe adolescents and pediatrics.

Ms. Meagher responded that we can. We can definitely try to see what is changing with our pediatrics population, what proportion. They should mostly be in the blue bar, kids do not qualify for Essential Plan, we can try to quantify what proportion of that bar are kids and CHP.

Mr. Ulberg added that anyone who has been involved in measuring risk surpluses has never seen the performance that we saw this year. It was just quite remarkable for many reasons. We take that information when they set their budget, we try to triangulate between what we are seeing in the data, what Healthfirst sees, and what MetroPlus is also seeing. When we are setting our rates, we have the advantage of having the information from two other plans. So, when we do the FY-25 budget we will take that all into account that there will be some sort of drop and as Megan pointed out, we can already start to see it. Healthfirst is on a January calendar year basis, they predicted a drop but they are performing better than they had predicted due to the Medicaid rates that the State set in April was a little bit better than they had forecasted. Everybody is expecting a drop but how far the drop, we will have to see. But Healthfirst, first quarter, they are doing better than budget.

An overview of the recent changes in NYC Insurance market was presented by Ms. Meagher. Some recent changes highlights include starting in July 2023, Medicaid recerts contributing to growth in Essential Plan membership which is now tied to a much richer reimbursement rate. From a claims and surplus



perspective there is more revenue. Starting in January 2024, Medicaid Managed Care coverage was newly eligible for undocumented seniors over the age of 65. Starting in April 2024, the Essential Plan further expanded to Essential Plan 200-250 providing new, better coverage for individuals struggling to afford QHP coverage from HIE.

Dr. Katz added that the President made it possible for people who are dreamers to qualify previously DACA would not qualify for anything. How big of a population could that be, of people who are using our service presumable under NYC Care currently.

Ms. Meagher added that we believe this was part of the 1332 waiver. Mr. Ulberg added that we will double check and get back to you on this. Dr. Katz mentioned that it is good news, and it is something to watch and have some sense of what it would be. It shares in some ways the process of the seniors, they are in our System and we need to get them into a different program, presumably the same would be true for the DACA youth. Just need to figure out how to transition them.

Ms. Hernandez-Piñero added that they are eligible to enroll in a QHP through the marketplace.

Ms. Dehart commented that this is also a subject to CMS approval, same for the 1332 waiver that Megan referenced.

Mr. Ulberg added that a newly important regulation that the Biden administration released last week or the week before, aimed at health equity access to services, rate transparency and is very comprehensive. We are now going through the different elements of the rule. It was great to see them take such an active rule.

Ms. Wang added that it would be great to get a briefing on it.

Dr. Ted Long commenced the presentation with an overview of the HERRC program and a financial update. H+H currently oversees 14 H+H HERRC sites serving approximately 24,000 daily guests, a reduction of one HERRC site since Q2 close. At the 24/7 Arrival Center, over 131,000 asylum seekers have been served. H+H committed \$1.2B of HERRC expenses on behalf of the City through Q3 of FY-24. In the City's Executive plan, H+H budget for the HERRC program is \$1.6B in FY-24 and \$1.7B in FY-25. OMB has provided H+H with revenue to cover committed expenses to date through the HERRC MOU with the Mayor's Office.

Ms. Wang polled the Committee for questions. There being no further questions, Ms. Wang thanked and commended the team for the great work.

**ADJOURNMENT**

There being no further business before this committee, the meeting adjourned at 11:58 A.M.

**AUDIT COMMITTEE TALKING POINTS – May 06, 2024**  
**As Reported by: Ms. Sally Hernandez-Piñero**  
**Committee Members Present: Mr. José Pagán, Dr. Katz, and Freda Wang**

The meeting was called to order by Ms. Sally Hernandez-Piñero at 12:04 P.M.

Ms. Sally Hernandez-Piñero asked for a motion to adopt the minutes of the Audit Committee meeting held on February 5, 2024. A motion was made and duly seconded with all in favor to adopt the minutes.

Ms. Sally Hernandez-Piñero called on Mr. Guzmán to read and presented the resolution of Independent Audit Services for the record.

Authorizing the New York City Health and Hospitals Corporation (the "System") to execute an agreement with **KPMG LLC for the provision of audit services on behalf of the System, including its subsidiaries**, for an initial period beginning June 2024 through the end of the CY 2027 Audit period for an amount not to exceed \$5,566,000 over the full term. The System will have the right to terminate the agreement without cause with 30 days' notice.

Mr. Guzmán provided background on the resolution and reported that financial statements for the Health and Hospitals Corporation and its subsidiaries must be audited by an independent CPA firm as well as stated as such in the New York City Health and Hospital Corporate bylaws. Federal and State agencies also require independent audit certification. He mentioned that Grant Thornton is the incumbent vendor, their recent contract expired in 2021 and had contract value of \$3,871,500. In 2021 an extension was signed and expires when all audits covering fiscal year end and calendar year end 2023 have been completed. Which is around the issuance of the financial statements for 1 of our subsidiaries on or around March/April 2024. The extension contract value was \$2,019,500.

The entities that fall within scope of the audit are The New York City Health and Hospitals Corporation, Metro Plus, HHC INSURANCE, HHC ACO, NY Community IPA (FY25-27) and Metro Plus OneX (CY26-27). The audit services cover tax return prep and state charities reporting for the Gotham health FQHC.

Mr. Guzmán turned it over to Mr. James Linhart Deputy Comptroller to discuss RFP process.

Mr. James Linhart discussed RFP Minimum Criteria that was establish first was that the audit firm needs to be on The New York City Comptroller's Pre-Qualified CPA listing, be registered with the New York State Department of States to do business, licensed and active in public accounting for at least 9 years and of those 9 years at least 5 of those years of successful experience auditing the revenue, expenditures and programs of State or local governments and health systems with revenues and expenditures over \$1.0 billion and the bidder needs to have a MWBE Status Utilization Plan or Waiver request in order to participate in the RFP.

The scoring of the substantive criteria was 40% based on experience, 20% of cost, 10% expertise in federal and New York state reimbursement methodologies and regulations, 10% experience with public bond offerings and related requirements of underwriters and attorneys, 10% of depth of tax consulting division and 10% MWBE utilization.

The evaluation committee was made up of 7 individuals they were members of the audits, finance department and the reimbursements teams. One-member from Office of Legal Affairs, one-member internal audits team and 2 individuals from facilities finance and other subsidiaries. He discussed the Overview of Procurement process on November, 14th of 2023 the application to issue request for proposal approved by CRC, On February 20<sup>th</sup>, 2023 the RFP was posted on City Record and sent directly to 41 Vendors. On February 26,2024 they held a Pre-proposal conference 8 vendors had participated in the proposal conference, On March 13th, 2024 we had received 6 proposals. The evaluation committee submitted their 1st set of scores on April 1st,2024, and since the score for the top two bidders were within 5% of each other, it was deemed that a second vote was required. In the 2nd scoring, the evaluation committee selected KPMG.

Mr. David Guzman stated that KPMG was the top bidder, KPMG has done and continues to do some consulting /advisory work within the system, in accordance with the various professional auditing standards, including AICPA and GAO, KPMG must perform an analysis and determine that none of its advisory work would compromised its independence as our auditor.

In addition, KPMG has completed an initial independence analysis at our request, which we have reviewed carefully, and which determined that they do not have any advisory work with H+H that would impair KPMG'S independence as our auditor. KPMG will complete a full independence and risk clearance process if they are approved for the auditor work. David stated we will work closely with our counsel and KPMG to ensure that independence issues are fully analyzed and that appropriate safeguards, if any, are implemented before finalizing a contract with KPMG.

Mr. James Linhart stated that MWBE goal setting methodology for KPMG that they said can achieve a 25% goal and they are using vendor Katigbak CPA, otherwise known as TEAM Avaloria.

Ms. Sally Hernandez-Piñero asked David if Grant Thornton original contract was for 4 years before the extensions?

Mr. David Guzman responded yes.

Ms. Sally Hernandez-Piñero second question was we have a new accounting firm coming on how do we see that affecting the time line to complete the audit?

Mr. David Guzman responded that KPMG was actually our audit firm before Grant Thornton, so they have familiarity with our System, there will be a transition period and some incremental effort pursuant associated with that transition as there will be a discovery process. He does not believe there will any delay in terms of that transition process, this year will be atypical relative to prior years. We have been with the same firm for 6 years and a lot of that work, unfortunately will fall on the Comptroller's division; he stated he is ready to take it on. I am sure Grant Thornton will also work with KPMG in accordance with auditing standards to really facilitate a professional transition.

Dr. Katz stated that Grant Thornton is not going away, it is in their

interest to be cooperative just like KPMG had the contract before they are going to want it in the future. Periodically you should change auditors. They have looked at our System for 6 years it will be helpful to see what another auditor sees, Katz believes the transition would be pretty smooth.

Mr. James Linhart pointed out that the audit team that KPMG is proposing is familiar with us they were a part of our audit team back in 2017 predated Epic. With the discovery stage every Auditor and Accounting firm always give the courtesy of the new accounting firm the rights to open up the books and take a look and clip whatever is needed, they would share their work papers with them it is a normal practice.

Ms. Freda Wang ask does your audit delivery date change?

Mr. James Linhart answered no the audit delivery does not change it is due on October 18, we have to deliver it to the Comptroller's office for the City.

Ms. Freda Wang asked does the contract actually start like June 1st or June 30<sup>th</sup>? Can they get started before the end of the fiscal year?

Mr. James Linhart answered we are timing to start in June, we are not and can not provide them with any information or anything like that until the next round because we would have to take this to the Board.

Sally Hernandez-Piñero asked if there are any other questions this item is an item for voting. I will take a motion for adoption of the resolution, naming KPMG our auditors for the next auditing period she asks for a second Ms. Freda Wang said yes, Dr. Katz said yes and Mr. José Pagán said yes motion adopted.

Ms. Sally Hernandez-Piñero called on Ms. Catherine Patsos to read and present the resolution of Appointment of Record Management Officer for the record.

Approving the designation of Sofia Khalid, Executive Compliance and Privacy Officer, as the New York City Health and Hospitals Corporation (the "System") Record Management Officer (the "RMO"), as that term is defined under New York State Education Department regulations found at 8 NYCRR § 185.1(a), to coordinate the development of and oversee the System's records management program in accordance with the requirements set forth under Article 57-A of the New York State Arts and Cultural Affairs Law and the implementing regulations thereof.

Ms. Catherine Patsos stated that pursuant to the arts and cultural affairs law, all government, and public benefit corporations, which include the System are required to designate a records management officer which we currently have a vacancy in that position, Catherine and the Chief Corporate compliance officer nominates Sofia to serve as the Systems RO and Dr. Kats agrees with Catherine selection. She stated that Sofia is currently an Executive Compliance and Privacy Officer, she handles the matters related to Bellevue and Elmhurst and also assist Catherine with various system-wide compliance matters and legal issues.

Sofia also manages HIPPA Compliance and Privacy including participating in the Annual Risk Assessments in reviewing and responding to potential compliance issues and complaints. Sofia has been part of the office of Compliance since April 2023 and prior to that Sofia was an Associate Compliance officer from 2016 to 2021 in between that she served as Deputy Data Privacy Compliance Council at Bloomberg where she served as a project manager for Data Protection Impact Assessments. Catherine confirm that Sofia has a Doctorate Degree she is licensed to practice in the State of New York, she also holds a certificate healthcare compliance, Sofia received her Health Care Compliance certificate from Seton hall in June 2016. I believe she was well qualified to carry out the functions set forth in the applicable law. With the approval of the audit committee I asked for the recommendation of the systems Audit Committee of Board of Directors to appoint Sofia Khalid Systems RMO.

Ms. Sally Hernandez-Piñero accepted a motion for adoption of the resolution all in favor please say yes everyone agreed.

Ms. Sally Hernandez-Piñero called on Joseph O'Keefe from Internal Audits Department.

Joseph O'Keefe started with the Internal Audit updates. The first audit he mentioned was the Correctional Health which the City Comptroller are auditing, he mentioned that's been going on for about a year it has been stuck in various legal issues over the last year and they are now starting to make some headway and progress in this audit.

The second item, the State Comptroller is auditing the Language Services provided by Health and Hospitals. The audit started back in December 2023, he mentioned the audit was reviewing whether or not we have adequate supervision of Language Services. He went on to discuss the third item which is of The BeHeard Program behavioral health audit. He mentioned that audit has also been going on for little under a year which the city comptroller office is auditing. He asked if anyone had a question?

Freda Wang asked him 2 are from the City and 1 is the state?

Joseph O'Keefe responded yes and clarified that Language Access is the New York State Comptroller and the other 2 are with the city.

The next item he presented was the 14 Internal Audits Planned for FY24. He mentioned 6 of the audits are completed 6 are in progress and 2 have not yet started.

Freda Wang asked would you anticipate to do all 14 still?

Joseph O'Keefe responded that they will be started but whether they will be completed by the end of the fiscal year he was not sure.

Freda Wang asked do we usually get a report on the audit?

Joseph O'Keefe responded yes, you will be getting the audits in reports under separate cover.

The last item he discussed was Auxiliary Audit, he mentioned they will be performed by Bonadio Group on our various Auxiliary. You can see there are various states of progress and completion. The CY-23 is the last year that the Internal Audit Department will pay for those Auxiliary Audits it is going to be the responsibility of the Auxiliary to complete its audit and pay for them.

Freda Wang asked what is the legal relationship of the auxiliary?

Joseph responded we have no legal relationship to the Auxiliary they are independent 501C3s, we have been paying for it because we have history with them and it one way to reassures us that its actually getting done.

Freda Wang asked so in the revenues slide in 2022 are those negatives are for the year?

Joseph Okeefe responded most of them are due to losses on investments and the facilities that were impacted were Bellevue, Gouverneur and Coler.

Ms. Sally Hernandez-Piñero called on Catherine Patsos to give an update on Compliance.

Catherine Patsos mentioned some of the activities of the office of Corporate Compliance in the last meeting and she reported the 2025 risk assessment. She also met with Internal Audit and prepared the draft risk assessment which was presented to the Enterprise Risk and Compliance Committee in February meeting and again in the April meeting when the risk assessment was approved by ERCC.

She went on to discuss Coalfire 2024 Risk Analysis as required by the HIPAA regulations and the document collection interviews in site visits for the skilled nursing facilities and the acute care facilities have been completed the same for the diagnostic treatment centers and the neighborhood health clinics also has started and the interviews for those sites began in April and the site visit will occur in May.

She went on to discuss Updates and New Operating procedures for code of ethics new operating procedure. Changes are as follow: Existing Code of Ethics, which applies to non-employees of the System, is very outdated and does not align with operations of the System, the revised Code of Ethics incorporates the conflicts of Interest Law requirements for System employees and Board Member, The revised code of Ethics also aligns with the current System operations, including the operation of Faculty Practice Plan and Affiliation Agreements, The revised Code of Ethics was approved by Dr.Katz on April 9, 2024 and the OCC will be sending a system-wide email alert workforce members of the OP. The Social Media Use was also revised : Updating this Operation Procedure to align with current social media outlets, and System values and philosophies and The OCC will be sending a system-wide email alert informing workforce members of the revised OP. The next update is Procedure for Identification of Unidentified Patients

Ms. Sally Hernandez-Piñero asked does the Compliance Plan come to the Audit Committee or The Board?

Ms. Catherine Patsos responded yes it goes to the Audit Committee in Executive Session in July.

Catherine went on to her next slide and mentioned she is working with the Data Analytics Team to develop a Policy Management Tool, that will allow us to automate the ease of Drafting and revising all kinds of resource documents, including offering procedures, policies, guidance documents, and tips sheets. Anything that is considered a resource for workforce numbers. She presented it to the Stakeholders on March 15, 2024 to get feedback on the tools. Catherine is currently working with EITS to have this tool into production and revising Operating Procedures to be completed by July 2024, notifications will be sent out to the owners of those operating procedures that it is time for them for review and revision.

Ms. Sally Hernandez-Piñero asked can you fresh our memories on the Genesis?

Catherine stated this is actually a work plan item to update the life of operating procedure library and then it's kind of evolved into creating a system that can instead of just getting everybody to update their operating procedure let's put in place a tool that will assist in that process and get all the tools that would help facilitate the process and make it easier for operating procedures owners to get them up to date.

Freda Wang asked, can everybody access the library to look for operating procedures?

Catherine responded yes even on the Internet, keyword, Searchable and Tags.

Freda Wang asked is there a policy of how often OB needs to updated.

Catherine responded it really depends on the individual operating procedure but what is stated in the operating procedure on how frequently it needs to be updated. She also conducted workforce compliance survey in December 2023, unfortunately the response rate was much lower than the previous year, but she is planning to coordinate survey on compliance weeks so that the Compliance Officers encourage the people to take the survey at the high level. She reported that there was an increase in respondents that know how to contact the Office of Corporate Compliance or their Compliance Officers similar to last year. The supervisors and managers were the point of contact for people who had a compliance issue, which is fine as long as the supervisor managers knows to bring them to the Office of Compliance. The training provided good guidance and key lessons from it. She mentioned more than half of them want to see more electronic communications which will be implemented, as we roll out our communications plan in the coming months.

Her next slide was Compliance Report Metrics it displayed 1st quarter comparison from 2022,2023 and 2024 and we did have increase in 2024 1st quarter.

Ms. Sally Hernandez-Piñero asked what kind of cases that comes first in

compliance report metrics?

Catherine responded it can be misconduct, inappropriate behavior, Human Resources issues, patient care, patient rights, falsification of record, Billing compliance and etc.

Ms. Sally Hernandez-Piñero asked if there was one category that jumped out, right in terms of a traumatic increase?

Catherine responded for compliance issues we do get a lot of human resources and labor relations types of issues.

Freda asked just on the compliance slide was there a big drop in 2023 just that quarter dropped or was the whole year a lot lower than?

Catherine responded the whole year was not a lot lower it was just the timing.

Ms. Sally Hernandez-Piñero stated asked is there any old business or new business to bring before the Committee.

Hearing none the Committee adjourn at 12:40.

**Equity, Diversity and Inclusion Committee Meeting – May 7, 2024**

**As Reported by:** Patricia Marthone

**Committee Members Present:** Patricia Marthone, Mitchell Katz, José Pagán, Jackie Rowe-Adams

**CALL TO ORDER**

The meeting of the Equity, Diversity and Inclusion Committee of the NYC Health + Hospitals' Board was called to order at 4:20 p.m.

Sally Hernandez-Piñero participated virtually in a listening capacity.

Dr. Marthone moved for a motion to adopt the minutes of the March 5, 2024 meeting.

Upon motion made and duly second the minutes of the March 5, 2024 meeting was unanimously approved.

**DIVERSITY AND INCLUSION UPDATE**

Ivellesse Mendez-Justiniano, Vice President, Chief Diversity, Equity, & Inclusion Officer, provided an overview of the System's latest diversity and inclusion achievements and activities.

Ms. Mendez-Justiniano reported out on the top five training completions from January – May 2024, which included: Identifying and Managing Unconscious Bias, Religion as a Social Determinant of Health, Women's History Month: Women Mentors in the Workplace, Black History Month: Keeping it Alive, and Building Psychological Safety.

The next update she presented was in the Language Access category, regarding the RFP for interpretation services. The new interpretation services were approved by the Contracts Review Committee (CRC) on April 16<sup>th</sup> and will be



presented to the M&PA Board in June. The new contracts will cover the following: Over-the-Phone and Video-Remote Interpretation (OPI & VRI), On-Site Interpretation (OSI) for Spoken Languages, On-Site Interpretation (OSI) for Sign Languages, and Language Proficiency and Interpreter Skills Assessment.

Ms. Mendez-Justiniano continued on to highlight a new focus on Veterans Services. She shared that a Veterans Pop Up site, in partnership with the Mayor's Office of Veterans Affairs, was launched as a pilot at Metropolitan Hospital. Woodhull held a Veterans Pop Up session on May 3<sup>rd</sup>. The sessions are open to employees, patients, and the community at large. Onsite staff at the sessions can assist with:

- Starting VA Claim
- Updating military records
- Copying of military records
- Appealing VA decision
- Sharing information about services available & more

Ms. Mendez-Justiniano was pleased to announce that 18 NYC Health + Hospitals facilities (including all 11 acute care facilities and 7 Gotham sites) earned the "LGBTQ+ Healthcare Equality Leader" Designation in Human Rights Campaign Foundation's Healthcare Equality Index.

Ms. Mendez-Justiniano went on to share that in the Gender Equity category, there was a training developed in collaboration with the Institute for Human Identity. The three-month long (18 hours) training is an advanced clinical training program for the System's mental health professionals aimed at building their clinical knowledge and skills to provide affirming therapy to LGBTQ+ patients.

Ms. Mendez-Justiniano concluded her report by highlighting a few notable events and presentations including: a Women's History Month webinar about "Women Mentors in the Workplace", a Holi celebration, H+H staff speaking on panels at Becker's Healthcare 14<sup>th</sup> Annual Conference, and a feast celebrating Eid.

Follow-up: The Committee would like to know in the future the numbers of veterans served by the veteran services initiatives.

### **EQUITY AND ACCESS COUNCIL UPDATE**

Nichola Davis, Chief Population Health Officer, and Co-Chair of the Equity and Access Council ("Council") initiated the presentation and introduced Dr. Komal Bajaj, who is the Monitoring and Evaluation Workgroup co-chair.

Dr. Bajaj first discussed the Institute for Health Improvement (IHI) framework for health care organizations to improve health equity. Strategies for building health equity infrastructure include:

- Create the data infrastructure to improve health equity
- Build organizational capacity to support efforts to improve health equity

In terms of creating the data infrastructure, the steps include:

1. Provide staff training and support in obtaining accurate race, ethnicity, and language (REaL) data
2. Articulate the reason for stratifying REaL data
3. Characterize missing REaL data
4. Assess the accuracy of your REaL data

Dr. Bajaj then summarized the dimensions of REaL data which include: Accuracy, Completeness, Timeliness, and Consistency.

She then provided a brief outline of how the System has been working on improving race, ethnicity, and language (REaL) data over time. In 2021, data collection fields were updated, ethnic groups were standardized, and ethnic background categories expanded from 20 to 200. An enterprise definition for race and ethnicity was also approved. From 2021-2022, departments began utilizing the same standardized ethnic groupings. From 2022-2024, data collection methods improved (MyChart, kiosks). The goal continues to be to stratify quality measures by complete and accurate REaL data across the System.

Dr. Bajaj noted after improving REaL data collection, key health care metrics can be viewed and tracked from an equity lens. She then provided the example of blood pressure control rates by race/ethnicity among adults with hypertension. Looking at the variation of the results allows for the ability to deliver more targeted solutions to address gaps in care.

She then outlined next steps as it relates to assessing completeness, consistency, and accuracy. For assessing completeness, the rate of missing race and ethnicity among H+H patients from 2020-2024 should be evaluated, in terms of how the completion rates have changed since the new REaL fields were implemented. Comparing Race/Ethnicity standardized groupings in June 2022 vs. in April 2024, the "Unknown" category dropped from 18% to 8% and the "Something else" category dropped from 18% to 10%, thereby showing an improvement.

In terms of assessing consistency, Dr. Bajaj indicated that next steps would be to: 1. Map ethnicities/countries listed in the ethnic background field to H+H racial/ethnic categories and; 2. Assess agreement between patient's race/ethnicity and ethnic background. For assessing accuracy, the next step is to survey patients to collect self-reported race/ ethnicity data.

Following Dr. Bajaj's report, there was discussion around how to encourage patients to provide or validate their data, while also giving them the choice of not disclosing their information. The group also discussed how it will be important to assess the flow of data collection at the point of care at each site (both inpatient and outpatient), whether a registration staff member inputs data, or there is a proxy, or it is self-reported by the patient.

The Committee recommended to staff that communities sometimes respond better to surveys when there is an understanding of how the information being collected is for their improvement and betterment. The staff further explained the process of using a proxy and why it is used.

Dr. Marthone asked if there was any old business or new business, and hearing none, the meeting concluded and was adjourned at 4:48 p.m.

**Community Relations Committee IN-PERSON MEETING – May 7 2024**

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

**Committee Members Present: Dr. Mitchell Katz, Jackie Rowe-Adams, Dr. Jose Pagan, Dr. Patricia Marthone**

**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 5:00 p.m.

Quorum was established - the minutes of the Community Relations Committee meeting held on March 5, 2024 were reviewed and upon motion made, and duly seconded the minutes were unanimously approved.

Ms. Rowe-Adams reminded the Committee that the Board of Director's Annual Public Meetings for Fiscal Year 2024 has been scheduled as follows:

- For Brooklyn: Tuesday, May 14, 2024 at Kings County Hospital
- For the Bronx: Tuesday, June 4, 2024 at Lincoln Hospital
- For Staten Island: Tuesday, June 18, 2024 at Sea View Hospital

Speakers are asked to register in advance by calling:

**Ms. Colicia Hercules Secretary to the Corporation at 212-788-3359**

Ms. Rowe-Adams noted the Community Advisory Boards annual verbal reports scheduled to present at this meeting:

1. NYC Health + Hospitals/Cumberland
2. NYC Health + Hospital/Elmhurst
3. NYC Health + Hospitals/Gouverneur
4. NYC Health + Hospitals/Lincoln

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

- The Bloomberg Connects App has 850 pieces of art that can be viewed by anyone from NYC Health + Hospitals.
- Michelle Lewis was recognized as a power woman of Manhattan for 2024
- Several staff members were honored by the media for healthcare heroes recognition
- 14,000 people have been served through telehealth behavioral health services
- NYC Health + Hospitals/ South Brooklyn Health has had a year without catheter associated urinary tract infections
- NYC Health + Hospitals/ Elmhurst celebrated earth month with a series of green events
- Local author Carmen Noboa Espinal had an event at NYC Health + Hospitals/Queens inspiring children and families

- NYC Health + Hospitals/Gotham Health, East New York has a new mammogram machine which is more effective and comfortable for patients
- Correctional Health Services unveiled a new mural at the Reentry Center at Riker's Island
- NYC Health + Hospitals is opening 16 mental health clinics in public schools
- NYC health + Hospitals/ Bellevue is now able to do a micrographic surgery for the treatment of skin cancer

**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/Cumberland**

Mr. Corey Evans, Chair of the NYC Health + Hospitals/Cumberland CAB, presented the report to the CRC. Mr. Evans stated the accomplishments and recognitions which includes AHA and AMA Gold + Award for BP Control for September 2023, over 13 successful employees engagement events, and 2023 Patient Centered Medical Home Re-Accreditation. Projects completed include replacement of cooling towers, parking lot LED lighting, wellness center project, and radiology department improvements. Mr. Evans presented on the frequent complaints and responses, which included communication/updates on wait time; response- ADIET training provided to all staff members and clinicians, and access improvement; response- overbooking strategy and recruitment improvements. Issues impacting the community includes challenges in mental health services, unaffordable housing market/distribution of low-income lotteries apartments, and access to healthier food options.

Ms. Rowe-Adams polled Committee members for their comments or questions.

**NYC Health + Hospitals/Elmhurst**

Ms. Luisang Tamang, Chair of the NYC Health + Hospitals/Elmhurst CAB, presented the report to the CRC. Mr. Tamang stated that last year the hospital had close to 700,000 ambulatory care visits and over 130,000 emergency room visits and are an economic engine in the community. The hospital has had one of the highest levels of translation services in the system. Awards received includes recognition from US News and World Report as a 'Best Regional Hospital" and recognition from the American Heart Association for several years in a row.

Accomplishments include Phil Jackson, Care Experience Ambassador being recognized as 2023 Amazing Employee of the Year for the entire system, and a partnership with EHL Hospitality Business School. In addition, multiple improvements to the facility have been recently completed, including new operation rooms.

Elmhurst Hospital is in an underserved community. Expanded access to resources such as youth centers and services for seniors are needed.

Ms. Rowe-Adams polled Committee members for their comments or questions.

### **NYC Health + Hospitals/Gouverneur**

Dr. Morris from NYC Health + Hospitals/Gouverneur presented the report to the CRC. Dr. Morris was accompanied by Ms. Susan Sales, CEO of Gouverneur Skilled Nursing Facility. Dr. Morris stated that the main site has no significant infrastructure concerns. One of the satellite sites requires significant renovations to the second floor to make that usable clinical space. The upgrade of outdoor community garden has been completed and gym equipment upgrade and refurbishment of dining areas is underway. Dr. Morris stated that march data for patient satisfaction at the ambulatory care site has surpassed to city and state statistics. The patient satisfaction rates for the skilled nursing site are at about 70 percent as well. The structured process has been put in the patient relations department to address complaints.

Historically the neighborhood surrounding the facility has dealt with poverty but the life expectancy is higher and chronic illness outcomes are better overall.

Ms. Rowe-Adams poll Committee members for their comments or questions.

Dr. Katz asked what is the long-term plan for the vacant street level space, Dr. Morris stated that there is a plan to potentially expand the dental department and use that space, or enhancing the space and making it a community art center.

Ms. Rowe-Adams asked if patients have been receptive to the plant-based food. Ms. Sales stated that some meal items are embraced more than others, and the food service staff has been hosting tasting to see what could be changed to make the meals more palatable.

### **NYC Health + Hospitals/Lincoln**

Mr. Richard Izquierdo, CAB Liaison of the Lincoln CAB presented the report to the CRC. The facility has received support from elected officials including from Bronx borough President, councilmembers and US senators. Guest experience hours have extended to 9PM, to improve patient experience. The facility has also been awarded the Silver Level Beacon Award for Excellence and the Brown Certificate for Excellence in People Centered Care, Planetree Certification. Frequent complaints include communication, attitude-behavior, coordination of care, and waiting time, in addition to mishandling of property.

Issues impacting the community includes gun violence. The facility has implemented initiatives targeting gun violence through its Guns Down Life Up program. The lifestyle medicine program has also been implemented at the facility and helps to improve sleep patterns, stress reduction, and

avoidance of substance use.

Dr. Katz recognized the challenges at NYC Health + Hospitals/Lincoln and health disparities among the community.

Dr. Marthone and Ms. Rowe-Adams commended the team for their efforts in the fight against gun violence.

Hearing no old or new business to come before the Committee.

**ADJOURNMENT:**

Meeting adjourned at 5:52 P.M



**Mitchell H. Katz, MD**  
**NYC HEALTH + HOSPITALS - PRESIDENT AND CHIEF EXECUTIVE OFFICER**  
**REPORT TO THE BOARD OF DIRECTORS**  
**May 30, 2024**

**NYC HEALTH + HOSPITAL FACILITIES RECOGNIZE  
NURSES AND HOSPITAL POLICE DURING SPECIAL MAY OBSERVANCES**

At various ceremonies and recognition events, NYC Health + Hospitals highlighted the critical roles our nurses and hospital police play at our facilities.

The System's 9,600 nurses are a vital part of the high-quality care that we deliver every day to our patients. NYC Health + Hospitals/Lincoln hosted multiple events throughout the month and had a closing ceremony last week. It has been a great year for our nurses. Our Chief Nurse Executive and Senior Vice President Natalia Cineas, SVP, has hired over 1,000 new nurses in the past 8 months, and we expect several hundred more to join our health system before the end of the year.

Our highly-trained hospital police are also on the frontlines of our facilities - they are often the first people that our patients meet when they enter a facility. The officers provide patient and family assistance, on-site security, and enforce state and city laws at all NYC Health + Hospitals facilities. In recognition of National Peace Officers Day, on May 16, NYC Health + Hospitals/Woodhull unveiled a newly renovated hospital police command center.

**MAYOR ADAMS AND NYC HEALTH + HOSPITALS HAS HIRED OVER 1000 NEW NURSES**

New York City Mayor Eric Adams and NYC Health + Hospitals President and CEO Dr. Mitchell Katz today announced that more than 1,000 new union nurses have been hired over the past eight months at the City's public hospital System, replacing many temporary nurses. This investment in the health System's workforce ensures patients are served by permanent employees who are committed to the mission, come from the community, and have developed institutional knowledge. New Nurses Can Take Advantage of Nurse Residency Program, Nursing Fellowships, Tuition Reimbursement, Loan Forgiveness, and Scholarship Programs

**CHIEF QUALITY OFFICER DR. ERIC WEI AND NYC HEALTH + HOSPITALS/ELMHURST CEO  
HELEN ARTEAGA LANDAVERDE JOINED SENATOR GILLIBRAND IN CALLING FOR MORE  
INTERAGENCY COORDINATION TO RESPOND TO THE AVIAN FLU OUTBREAK IN CATTLE**

On Tuesday, May 21, Senator Gillibrand held a press conference to advocate for additional interagency coordination to respond to the avian flu outbreak in cattle. She was joined by NYC Health + Hospitals/Elmhurst CEO Helen Arteaga Landaverde, Chief Quality Officer and Senior Vice President Dr. Eric Wei, and the CEO of Mt. Sinai. In a letter the Senator wrote to the White House Office of Pandemic Preparedness and Response Policy, she urged the agency to give information regarding its role in coordinating amongst Federal agencies and continue to provide the public and State agencies with

up-to-date, accurate information on the spread of Highly Pathogenic Avian Influenza (HPAI), also known as H5N1.

NYC Health + Hospitals officials spoke to the health System's critical role at the front line in responding to the public health crisis in New York City, including its response to Ebola and the recent COVID-19 pandemic.

**OMER CABUK, ME APPOINTED TO LEAD HEALTH SYSTEM DECARBONIZATION EFFORTS**

NYC Health + Hospitals appointed Omer Cabuk, ME as its first ever Chief Decarbonization Officer. In this role, Cabuk will spearhead the organization's robust decarbonization initiatives, adhering to the targets set by Local Law 97 of 2019, which mandates a 40% reduction in operational emissions by 2025 and a 50% reduction by 2030. He will serve as an executive-level strategist, partnering with leadership team, capital project leads, facilities management staff, and other key stakeholders to fully embed energy efficiency, electrification, and renewable energy initiatives for the built environment into corporation's policy, operations, and capital planning. He will also advise executive leadership on strategic opportunities, critical issues, and risks impacting decarbonization efforts within the organization's operations. His appointment was effective April 8.

Cabuk will also support the health System's Climate Resiliency Goals by implementing decarbonization projects and initiatives that reduce environmental impacts, enhance energy reliability, improve public health, and ensure sustainable and resilient infrastructure. Today's announcement builds on the health System's Climate Resiliency Plan announced last week.

Cabuk brings experience and a proven track record to his new role. As the former Senior Director of Decarbonization and Sustainability at NYC Health + Hospitals, he led significant decarbonization projects that substantially reduced both direct and purchased energy emissions. These initiatives were crucial in enabling the organization to sign the U.S. Department of Health and Human Services Health Sector Climate Pledge in May 2022, which included commitments to reduce direct and purchased energy emissions, complete a climate resilience study, and conduct an inventory of all indirect greenhouse gas emissions that occur in an organization's value chain. Additionally, during his tenure, Cabuk managed an annual utilities budget of \$100 million, optimizing and reducing costs associated with gas, electricity, and district steam utilities.

**NYC HEALTH + HOSPITALS CELEBRATED NATIONAL SKILLED NURSING CARE WEEK AND RECOGNIZED THE HIGH-QUALITY SERVICES ACROSS ITS FIVE NURSING HOMES**

In celebration of National Skilled Nursing Care Week, formerly Nursing Home Week, NYC Health + Hospitals/Post-Acute Care proudly celebrated its five skilled nursing facilities and Long-Term Acute Care Hospital, recognizing their new services and high-performance ratings. In the past year, NYC Health + Hospitals/McKinney and NYC Health + Hospitals/Sea View began offering Parkinson's care, NYC Health + Hospitals/Carter launched telemetry services and hospice care, NYC Health + Hospitals/Gouverneur launched enhanced dining for its residents, and NYC Health + Hospitals/Coler opened The Coler Café.

The facilities are widely recognized for providing high quality care. In 2024, Newsweek ranked Carter, Coler, Gouverneur, and Sea View in the Top 10 of Best Nursing Homes 2024 in New York State, and McKinney ranked in the Top 30. U.S. News & World Report recognized NYC Health + Hospitals/Carter, Gouverneur, McKinney, and Sea View for high performance in short-term



rehabilitation, and for the latter three sites, high performance in long-term care. NYC Health + Hospitals/Sea View, Coler, Carter, Gouverneur and McKinney consistently earn four- and five-star ratings from the U.S. Centers for Medicare & Medicaid Services (CMS), which designates five-star rated skilled nursing facilities among the top 10 percent of nursing homes in the country. Additionally, NYC Health + Hospitals/Post-Acute Care facilities are ranked in the top 1st quintile in the New York State Department of Health Nursing Home Quality Pool.

#### **LEGAL SERVICES FOR PATIENTS EXPAND AT THE HEALTH SYSTEM**

In late April, the health System announced the expansion of free health-related legal services for its patients in partnership with LegalHealth, a division of the New York Legal Assistance Group (NYLAG). Nearly 5,000 patients accessed legal services at NYC Health + Hospitals in 2023. The expansion includes increased staffing, capacity building for increased patient access, and data-driven analysis on how legal services can impact patient health. Patients can access free health-related legal services over the phone or in person at one of twelve brick-and-mortar sites in the health system through a referral by a doctor, social worker, or community health worker. This is one of the longest-running and largest medical-legal partnerships in the country, which dates back to 2002 and has provided free legal assistance to thousands of New Yorkers seeking help with public benefits, immigration, health insurance, advance planning, and housing, among other legal issues. The medical-legal partnership is funded in part by the New York City Council.

#### **26 NYC HEALTH + HOSPITALS DOCTORS RECOGNIZED AT ANNUAL DOCTOR'S DAY CELEBRATION**

At the beginning of May, NYC Health + Hospitals celebrated its Doctors' Day and the 26 doctors recognized for their outstanding patient care. This year, for the first time, NYC Health + Hospitals honored three physicians at the new Gotham Health Centers of Excellence, which provide Long COVID services as well as primary care services. The doctors were nominated by their facility's Chief Medical Officer to qualify for the achievement. This year's honorees include pediatricians, primary care doctors, emergency department physicians, an oncologist, a pathologist, a neurologist, an HIV specialist, an optometrist, and others. They come from a diverse array of nations such as Ukraine, Nigeria, China, Burma, Nepal, Bangladesh, Cyprus, Haiti, India, and Pakistan.

#### **NEW PSYCHIATRY RESIDENCY ESTABLISHED AT NYC HEALTH + HOSPITALS/QUEENS**

Earlier this month, NYC Health + Hospitals/Queens received initial accreditation for a new psychiatry residency at the hospital. This new program will allow the health System to be more equipped to face the challenges of hiring in the behavioral health workforce. Recruitment of adult psychiatrists in our region has become increasingly competitive in recent years. Residents will have a rich clinical and educational exposure during their training at Queens Hospital. The addition of residents will also enhance the psychiatric service provided to our patients, particularly in busy rotations, including, but not limited to our Comprehensive Psychiatric Emergency Program for adult, Extended Emergency Length of Stay (EELoS) for child and adolescent patients, inpatient psychiatry service, outpatient mental health clinic, Consultation-Liaison Service, Addiction Psychiatry Service, Partial Hospitalization Program, Assertive Community Treatment Teams, Medicine, and Neurology.

We anticipate that a prolific and rewarding experience will continue to encourage retention within the NYC Health + Hospitals system upon graduation.

**NYC HEALTH + HOSPITALS HAS SERVED NEARLY 14,000 PATIENTS THROUGH ITS TELEHEALTH BEHAVIORAL HEALTH SERVICE**

Nearly 14,000 patients have received behavioral health care through the health System's telehealth service, Virtual ExpressCare, since the program launched in 2022. Through this service, patients can speak to a provider on demand via video or phone for help with anxiety, depression, stress, burnout, substance use disorders, withdrawal, and emotional distress. The service provides patients with immediate access to a wide range of behavioral health professionals, including psychiatrists, social workers, addiction counselors, and mental health nurse practitioners. A significant enhancement to this service is its expanded capacity to provide specialty services to children and adolescents, addressing a crucial need within this population. This responsive on-demand service model is tailored to meet the urgent behavioral health needs of the City.

NYC Health + Hospitals is the largest provider of behavioral health in New York City. The system provides almost 60% of behavioral health services citywide serving over 75,000 patients annually across emergency, inpatient and outpatient care.

**NYC CARE HOSTS ITS 22 NEW AND RETURNING COMMUNITY BASED ORGANIZATIONS TO ASSIST WITH CONNECTING NEW YORKERS TO HEALTH CARE**

The NYC Health + Hospitals' NYC Care program hosted its 22 community-based organizations (CBOs) from across the city to provide outreach, education, and NYC Care enrollment services. The CBOs have a presence across all five boroughs, and have a proven track record of serving NYC Care priority zip codes, which represent areas with the highest rates of uninsured New Yorkers and the lowest rates of NYC Care enrollment. Additionally, the organizations have staff that speak over 30 different languages and many come from the communities they serve, highlighting their roles as trusted messengers. The majority of the selected CBOs are multi-service organizations representing additional programmatic areas, including civic engagement, housing and homelessness, and food security, among others. Many of the CBOs have worked with the program previously since it launched in the Bronx in 2019. The current CBO partners' success in outreach and enrollment is such that the zip codes they currently serve were not included as priority targets in the new round of funding.

**INAUGURAL BLACK MATERNAL HEALTH FORUM HELD AT NYC HEALTH + HOSPITALS/GOTHAM HEALTH, GOUVERNEUR**

The health System held its inaugural Black Maternal Health Forum on Tuesday, May 21 at NYC Health + Hospital/Gotham Health, Gouverneur. Gotham Health's Regional Medical Director Morris Gagliardi, MD, MBA and system Chief Medical Officer and Senior Vice President Mabelle Allen, MD gave open remarks alongside Gotham Health's Regional Director of Nursing Marie Wilson, DNP, APRN, WHNP. The forum focused on the current state of Black perinatal health, the legacy of Black midwives, and a panel discussed "A Solution Approach to Supporting Black Birthing People." The event was open to all NYC Health + Hospitals staff in person and virtually via Webex.

**NYC HEALTH + HOSPITALS AND METROPLUS LEADERS RECOGNIZED AS "AAPI POWER PLAYERS" BY POLITICSNY AND amNY**

Four leaders from across the health system and MetroPlusHealth were named to PoliticsNY and amNY Metro's 2024 "AAPI Power Players" list. Launched in honor of Asian American and Pacific Islander Heritage Month, the recognition list honors leaders from a range of industries and fields making a bold impact across New York. This year, the list recognizes Lila Benayoun, Chief Operating Officer for MetroPlusHealth; Dr. Zeshan Chaudhry, Director of Neuroradiology for NYC Health + Hospitals/Kings County; Dr. Khoi Luong, Senior Vice President of Post-Acute Care for NYC Health + Hospitals; and Dr. Eric Wei, Senior Vice President and Chief Quality Officer for NYC Health + Hospitals. The 2024 AAPI Power Players recognition list is part of a monthly series by PoliticsNY and amNY Metro on New York's Power Players, including business executives, educators, government affairs experts, and nonprofit directors.

**BLOOMBERG CONNECTS APP FEATURES NEARLY 850 PIECES  
OF NYC HEALTH + HOSPITAL ART**

NYC Health + Hospitals is the first health care organization on Bloomberg Connects, which features more than 350 cultural organizations, including many of the world's major museums. The Arts in Medicine department has been working closely with Bloomberg Connects to add content to its app. Nearly 850 works of art from the health System's collection are available to view worldwide on the free app. The NYC Health + Hospitals guide includes artwork by nearly 400 artists and can be accessed by searching the artist's last name, the location of the art, or in a featured story. In addition, nearly 850 artworks across the health System's facilities now have informational wall text and a QR code leading to additional material on Bloomberg Connects. The Arts in Medicine department at NYC Health + Hospitals is made possible in part with the generous support of the Laurie M. Tisch Illumination Fund.

**NEW MURALS INSTALLED ON THE FENCING OUTSIDE OF NYC HEALTH +  
HOSPITALS/METROPOLITAN**

In partnership with ArtBridge, two new murals were installed on the scaffolding of NYC Health + Hospitals/Metropolitan. The works were developed by artists Dario Mohr and JR in collaboration with residents from the nearby East River Houses over a series of workshops and community engagement events. Dario Mohr's work, *Adinkrahene*, is tied together through Adinkra symbols originating from the Asante Kingdom. East River Houses residents contributed their own Adinkra symbols to this mural, which also features elements of works by Knii Shippie Afotey of Ghana and Faith Omole of Nigeria. The second mural, *The Peoples' Art Project*, is an exhibition based on input from the East River Houses community, created by renowned artist/activist JR as part of his well-known Inside Out Project, drawing on global participation from 152 countries with nearly 600,000 photos contributed to date, intended to spark conversations and collaborations that lead to social change. The two murals are located on 2nd Avenue between 97th Street and 99th Street. Once the scaffolding is taken down, Metropolitan Hospital will host a permanent display of the works. ArtBridge transforms construction fencing and scaffolding in New York City with new art developed by artists. The project received support from the health system's Arts in Medicine program.

**NYC HEALTH + HOSPITALS/HARLEM'S BURN INTENSIVE CARE UNIT RECOGNIZED WITH  
SILVER-LEVEL BEACON AWARD FOR EXCELLENCE**

Harlem Hospital's Burn Intensive Care Unit recently received a silver-level

Beacon Award for Excellence from the American Association of Critical-Care Nurses (AACN). The unit at NYC Health + Hospitals/Harlem is the only Burn Intensive Care Unit in New York City, only the second in New York State, and only one of four in the United States to earn this silver-level designation. The Beacon Award for Excellence – a significant milestone on the path to exceptional patient care and healthy work environments – recognizes unit caregivers who successfully improve patient outcomes and align practices with AACN’s six Healthy Work Environment Standards.

The silver-level Beacon Award for Excellence signifies an effective approach to policies, procedures and processes that includes engagement of staff and key stakeholders. The unit has evaluation and improvement strategies in place and good performance measures when compared to relevant benchmarks.

**HEALTH SYSTEM LAUNCHES NEW COMPREHENSIVE PATIENT BLOOD MANAGEMENT INITIATIVE TO IMPROVE PATIENT OUTCOMES**

As patient blood management has become standard across health care systems, the NYC Health + Hospitals’ Office of Medical and Professional Affairs and Office of Quality and Safety launched the Comprehensive Patient Blood Management initiative. The initiative is focused on improving patient outcomes by managing and preserving a patient’s own blood, while promoting patient safety and empowerment.

**DIAGNOSTIC RADIOLOGIC INTERPRETATION SERVICES GOES ONLINE**

NYC Health + Hospitals has embarked on the implementation of teleradiology to provide diagnostic radiologic interpretation services to several acute care hospitals for some inpatient and Emergency Department exams performed evenings, nights, and weekends. It will also include all NYC Health + Hospitals/Gotham Health outpatient radiology exams with the exception of mammography.

With teleradiology the health System is able to improve both the quality of clinical care and operational efficiencies. The system will continue to employ on-site radiologists to effectively coordinate care for patients. The second phase of the effort is expected to begin this fall, will bring to 24/7 coverage utilizing a hybrid of onsite and Teleradiology models.

**NYC HEALTH + HOSPITALS/SOUTH BROOKLYN HEALTH MARKS ONE YEAR WITHOUT A CATHETER-ASSOCIATED URINARY TRACT INFECTION (CAUTI)**

NYC Health + Hospitals/South Brooklyn Health reached a significant milestone in ensuring the highest quality of care for its patients: one year without a single catheter-associated urinary tract infection (CAUTI). A CAUTI is a common infection that occurs when bacteria enter and infect the urinary tract through a urinary catheter, a tube placed in the body to drain and collect urine from the bladder. Up to three-quarters of urinary tract infections are caused by a placed urinary catheter. The hospital achieved this milestone by implementing a daily review system for its patients, accountability protocols and care team collaboration. There were two reported CAUTI infections in the previous year.

**NYC HEALTH + HOSPITALS/WOODHULL UNVEILS NEWLY RENOVATED HOSPITAL POLICE COMMAND CENTER**

On May 16, Woodhull Hospital unveiled its newly renovated Hospital Police Command Center, which is situated in the main floor lobby. The revamped space is characterized by its modern design, spacious layout, and abundant natural lighting, providing an optimal environment for effective command operations. Equipped with state-of-the-art technology, including multiple

screens displaying real-time footage from hospital cameras, the command center empowers hospital police officers to monitor events throughout the facility. With the ability to monitor all areas of the hospital, the dedicated team of Hospital Police can efficiently coordinate responses to ensure a safe and secure environment for employees, patients, and visitors.

**HEALTH SYSTEM DETAILS CLIMATE RESILIENCE PLAN,  
BUILDING ON EXISTING EFFORTS AND COMMITMENT**

Last week, NYC Health + Hospitals announced the completion of its Climate Resilience Plan, a significant milestone in its commitment to ensuring the resilience of the health System's infrastructure in the face of climate change. The plan fulfills a key commitment under the U.S. Department of Health and Human Services Health Sector Climate Pledge, which NYC Health + Hospitals signed in May 2022. It is the result of a thorough survey of the health System's hospitals and post-acute care facilities. A team studied the impact of climate hazards, such as stormwater flooding, coastal flooding, extreme heat, and wind, on each facility under different levels of projected greenhouse gas emissions and the resulting extreme weather due to climate change. It considered the impacts on key facility operations, including electrical power, natural gas, steam, telecommunication, potable water, wastewater, transportation, and logistics. The Plan recommends a series of infrastructure projects, such as installation of additional emergency generators linked to critical HVAC equipment, improving the drainage capacity of roofs and windows, building additional flood barriers, and installing green infrastructure to reduce ponding and heat island effect. This effort builds on the health System's commitment to addressing climate change while reducing its carbon footprint. NYC Health + Hospitals has already achieved a 30% reduction in carbon dioxide emissions since 2006 and is continuing its efforts to achieve a 50% reduction by 2030. The Climate Resilience Plan aligns with the Mayor's PlaNYC: Getting Sustainability Done long-term strategic climate plan.

**PRIDE CENTER AT NYC HEALTH + HOSPITALS/BELLEVUE HONORED FOR ADVANCING  
EFFORTS TO TRAIN AND EDUCATE LGBTQ+ PROVIDERS**

Building the Next Generation of Academic Physicians (BNGAP) selected Bellevue Hospital's Pride Health Center as the recipient of its Organizational/Institutional Leadership Award. The award recognizes Bellevue's commitment to advancing efforts to train and educate health care professionals on LGBTQ+ health and healthcare. The award was presented during the LGBTQ+ Health Workforce 12th Anniversary Conference, held in early May in New York City.

Building the Next Generation of Academic Physicians (BNGAP) works to help diverse medical students and residents become aware of academic medicine as a career option and to provide them with the resources to further explore and potentially embark on an academic medicine career. The theme of this year's conference was Creating a Roadmap to Empower the LGBTQ+ Health Community.

The Pride Health Center at Bellevue was established in 2018 to address the needs of LGBTQ patients and communities across New York City.

**NEW STUDY WILL EVALUATE THE IMPACT OF MURALS IN HOSPITALS**

NYC Health + Hospitals is participating in a first-of-its-kind global evaluation of the impact of murals in hospitals, being led by the Jameel Arts & Health Lab (JAHL) and NYU Steinhardt in collaboration with the World

Health Organization.

In the first study of its kind, HoME seeks to advance understanding of the impact that murals in hospitals and other clinical settings can have on people who view these large visual artworks including patients, staff, and visitors. The project will involve a mixed-methods study at sites in Slovenia, Nigeria, the UK and US, assessing possible correlations between viewing murals and workplace belonging, perceived quality of care, and wellbeing.

The HoME research team, overseen by NYU Steinhardt Associate Professor and JAHL Co-Director, Dr. Nisha Sajnani, and co-led with JAHL Research & Evaluation Associate, Marcel Foster, MPH. The team consists of members from the Jameel Arts & Health Lab, the Center for Arts in Medicine at the University of Florida, Harvard University, a research team from the Lagos University Teaching Hospital, The Art of Healing, Norwich University of the Arts, Hospital Rooms, the Arts in Medicine department at NYC Health + Hospitals, the University Children's Hospital in Ljubljana, and the Nordic Art Initiative.

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

The public health System continues to help lead the City's response to the historic influx of asylum seekers. Last week, New York City's Arrival Center, the city's one-stop, centralized intake facility for all newly arriving asylum seekers, celebrated its one-year anniversary of dedicated service. Since the Arrival Center first opened its doors in May 2023, our staff have registered and provided care to nearly 150,000 people from over 160 countries, creating a modern-day Ellis Island that expedites asylum seekers' access to streamlined, responsive services moments after they arrive in New York City.

The Arrival Center successfully addresses three significant challenges of the asylum seeker crisis – providing immediate medical screenings and healthcare for all new arrivals, coordinated reconnections for people whose intended destination is not New York City, and case management services to help people complete their journeys quickly, including same day referrals for legal assistance.

Since the crisis began, we have seen asylum seekers' with acute and urgent need for medical care. At the Arrival Center, our staff address this need by offering immediate medical screenings, urgent care, behavioral health screenings and care, and vaccinations. Clinicians provide urgent care for common medical conditions and dispense medications and prescriptions as needed and can refer asylum seekers to NYC Health + Hospitals' facilities to receive more intensive care. To date, staff at the Arrival Center and NYC Health + Hospitals' 13 Humanitarian Emergency Response and Relief Centers (HERRCs) have performed over 130,000 depression screenings and administered over 70,000 vaccinations.

From managing the Arrival Center, to establishing emergency humanitarian centers that currently house 25,000 people, and coordinating case management services across the City shelter sites, NYC Health + Hospitals remains a cornerstone of the City's efforts to provide life-changing care to the nearly 200,000 asylum seekers who turned to our City for help.

#### **METROPLUSHEALTH OFFERS MEDICALLY TAILORED MEALS (MTM) AS A PERMANENT**

### **MEDICAID BENEFIT**

Increasingly, food is recognized as medicine, whether as part of a plant-based lifestyle or medically-tailored meals. Evidence is mounting that securing access to nutritional food is critical to health and well-being. Notably, NYC Health + Hospitals is leading the way nationally in creating unique opportunities for New Yorkers to be able to benefit from this progress. In 2022, New York State Medicaid approved MetroPlusHealth to implement the cost-effective medically-tailored meals (MTM) program, designed to be delivered to members' homes either in lieu of Personal Care Aide (PCA) service hours used for meal preparation and food shopping, or in lieu of hospital inpatient stays and/or emergency department visits. Initially launched as a pilot program, it is now approved as part of the permanent Medicaid benefit package.

The largest plan of its size to implement this State-funded program, MetroPlusHealth delivers MTM through unique partnerships: with God's Love We Deliver, the direct provider of the meals, and with NYC Health + Hospitals, which helps identify and refer members to the program in addition to the members the Plan identifies. Once enrolled, participants living with certain chronic conditions such as diabetes and heart disease, meet with a registered dietician who designs their menu, taking their chronic conditions into consideration, and provides them with unlimited nutrition education and counseling. Through the program, members receive up to two meals a day delivered to their homes, seven days a week.

To date, MetroPlusHealth and its partners have enrolled almost 1,200 members. Among those enrolled, 82% are aged 40+, 66% are Black or Hispanic, 59% live in the Bronx or Brooklyn. The top chronic conditions of enrolled members were diabetes, hypertension, hyperlipidemia, and chronic kidney disease.

According to a formal evaluation conducted among enrolled members, member feedback has been overwhelmingly positive, with 95% expressing satisfaction with the MTM program, and 94% feeling that the meals assist them in managing their disease. Through this program and the unique partnerships that support it, MetroPlusHealth is doing more to ensure that an increasing number of New Yorkers have access to a healthy lifestyle and diet to improve their health.

### **ROBOTIC SURGERY PROGRAM EXCELS AT NYC HEALTH + HOSPITALS/HARLEM**

Harlem Hospital celebrated the one-year anniversary of its Robotic Surgery program. In 2023, Harlem Hospital introduced the state-of-the-art da Vinci surgical system as a means to perform surgical procedures with the advanced capabilities of robotic technology. The Robotics team has since grown to include a total of seven highly skilled surgeons specializing in Bariatrics, General Surgery, Gynecology and Urology. Together, they have leveraged the da Vinci system to perform complex procedures with precision, leading to enhanced patient outcomes including improved patient recovery times and overall satisfaction. Within just one year, the Robotic Surgery team has successfully completed over 400 surgeries using the da Vinci system. This remarkable achievement reflects not only the advanced capabilities of robotic technology, but also the dedication, skill, and teamwork of the staff.

### **NYC HEALTH + HOSPITALS/COLER OPENS WELLNESS ROOM TO OFFER EMOTIONAL AND MENTAL HEALTH SUPPORT FOR STAFF**

NYC Health + Hospitals/Coler opened its new, dedicated wellness room to

support the physical and mental well-being of more than 700 employees serving its five-star rated nursing home and rehabilitation center. This new, permanent space includes amenities designed to help busy staff relax and destress, such as coffee machines, aromatherapy, calm music, fruit-infused water, healthy snacks, and designated areas for creative activities or just healthy conversation between colleagues. The dedicated space has modern lounge-style furniture, soothing color patterns, and windows adorned with natural green landscapes. The designers focused on comfort and functionality to create an inviting space that will encourage staff to invest time in their self-care. The wellness room also includes art from the health system's art collection installed by the Arts in Medicine department.

**ELEVEN NYC HEALTH + HOSPITAL AND METROPLUSHEALTH  
EMPLOYEES HONORED AS "HEALTHCARE HEROES"**

Eleven staff members were recognized as honorees in Schneps Media's annual "Healthcare Heroes" recognition list. Health care professionals from New York City to Long Island were celebrated for their dedication to serving their patients and advancing their fields. Schneps Media is a local media company that reaches over 2 million readers per week across two daily newspapers and a large group of community newspapers, magazines, and websites.

**ONE OF THE OLDEST MEDICAL HONOR SOCIETIES, ALPHA OMEGA ALPHA, INDUCTS NYC  
HEALTH + HOSPITAL'S PARTNER CUNY SCHOOL OF MEDICINE**

Located in Harlem, a Federally designated Health Professional Shortage Area (HSPA), CUNY School of Medicine is the only public medical school in Manhattan and is distinguished by its mission to recruit and train diverse students, many of whom come from, and go on to practice in, communities that are underserved and underrepresented in medicine. As a partner, many CUNY Medicine students join the health System after graduating to further their career in medicine. NYC Health + Hospitals has six providers who have been previously inducted into the prestigious society.

**HEALTH SYSTEM PARTNERS WITH THE NYC ADMINISTRATION FOR CHILDREN'S SERVICES  
TO ENHANCE FAMILY SUPPORT FROM COMMUNITY-BASED ORGANIZATIONS**

NYC Administration for Children's Services (ACS) and NYC Health + Hospitals launched Pathways to Prevention, a new pilot initiative aimed at connecting more families in need with family support services, while also reducing unnecessary reports made to the State's child abuse hotline. The initiative is just one of the ways in which New York City is working to make sure families have direct access to the resources and services they need. As part of the pilot, social workers, physicians and other staff at NYC Health + Hospitals/Elmhurst and Lincoln, and NYC Health + Hospitals/Gotham Health, Morrisania will be trained on how to best identify and connect patients to beneficial family support services. Staff will be able to facilitate such connections through the findhelp.org social services directory or by contacting one of the participating ACS prevention providers directly. The pilot will be rolled out with the following ACS community-based prevention partners: JCCA, Children's Aid, Cardinal McCloskey, Good Shepherd Services, SCO Family of Services and The New York Foundling.

**NEW HOME HEALTH SIMULATION SATELLITE OPENS**

NYC Health + Hospitals/Community Care opened a new Home Health Simulation Satellite site for all home health nurses to use. The site gives home health nurses a way to practice various scenarios, from routine procedures to



emergencies, in a simulated home or other community-based setting. Nursing simulation is a training technique that provides an opportunity for students and qualified nurses to practice responding to various clinical situations and then to reflect on how they performed, what went well and what needs to be changed. This is key to their development of clinical skills and judgement, including critical thinking, decision-making, and problem-solving skills.

**LOCAL AUTHOR CARMEN NOBOA-ESPINAL READS TO CHILDREN AND FAMILIES AT NYC HEALTH + HOSPITALS/QUEENS EVENT**

Local author Carmen Noboa-Espinal recently promoted children's literacy through family reading at NYC Health + Hospitals/Queens. Noboa-Espinal, a talented author known for her captivating storytelling in adult fiction and children's literature, shared her children's book "Abuelita and the Magic Stove" with children and families in the Pediatric Clinic waiting area. Her visit to the hospital served as an important reminder of the power of storytelling and the impact it can have on young minds.

Through readings in both English and Spanish, the author captivated the audience with her narrative that celebrates the cherished values of love and family. Inspired by her personal experiences with influential women in her family, Noboa-Espinal's storytelling resonated with all those present, spreading joy and fostering a love for reading.

The event highlighted NYC Health + Hospitals/Queens' commitment to promoting children's literacy through various initiatives. The hospital has an 18-year partnership with the Reach Out and Read program and participates in New York City's Pediatric Bundle Initiative. Reach Out and Read encourages parents to read to their children regularly, while the Pediatric Bundle Initiative focuses on comprehensive care for pediatric patients, such as HealthySteps, developmental screening, maternal depression screening, and Triple P - Positive Parenting Program.

**HEALTH SYSTEM EXPANDS LIVE CONCERTS FOR STAFF, PATIENTS, AND VISITORS THROUGH NEW PARTNERSHIP WITH SING FOR HOPE**

NYC Health + Hospitals is expanding its live concert series, Music for the Soul, with a new partnership with Sing for Hope. For the first time, the program will offer concerts during the night shift and in locations throughout the hospital beyond the main lobby. The live concert series began as virtual performances in 2020 in partnership with the Mayor's Office as a way to honor the work of NYC Health + Hospitals frontline staff during the height of the pandemic and support local musicians while music venues were closed. The program has since transitioned to in-person concerts and includes New York City-based musicians who perform a variety of genres, including Jazz, Classical, Folk, Hip Hop, and Latin music. The first concert of the season took place last month at NYC Health + Hospitals/North Central Bronx, where the musicians Larry Siegel, Hasan Bakr, and Victoria Paterson played during the night shift, followed by a concert at NYC Health + Hospitals/Queens by The FAB 4 String Quartet and one at NYC Health + Hospitals/Jacobi by The JuanMa Trio. Music for the Soul is run by the health system's Arts in Medicine department and funded by the Laurie M. Tisch Illumination Fund.

**AS PART OF INTERNATIONAL EARTH MONTH,  
NYC HEALTH + HOSPITAL/ELMHURST GOES GREEN**

Elmhurst Hospital hosted a series of activities in April to highlight the hospital's commitment to energy conservation and environmental stewardship. These included community outreach activities, a virtual and in-person conference called "Decarb the OR" on greening operating rooms and reducing medical waste, and an Earth Day celebration featuring a plant-based cooking demo and a presentation by ConEdison on the impact of climate change and how consumers can reduce energy consumption.

#### **EXTERNAL AFFAIRS UPDATE**

**City:** The City released its FY-25 Executive Budget on April 24. The budget is balanced at \$111.6B, and does not reflect any further PEGs. NYC Health + Hospitals' Executive Budget hearing was held on May 13. Dr. Katz testified along with John Ulberg and Patsy Yang. We are grateful to the Chairs of the Hospital, Health, and Finance Committees and to all of our Council Member partners for their ongoing support of our system.

**State:** The NYS Legislature is in the final stages of the 2024 session, with less than two weeks remaining. We are advocating for workforce provisions that were not accomplished during the budget negotiations.

We will also be watching the NYS primary, which takes place on June 25, and is expected to impact some facility representations due to retirements. We will be encouraging staff to vote, no matter their political affiliations, as we do before every election.

**Federal:** Congress continues to debate appropriations priorities for FY-25, which begins on October 1. NYC Health + Hospitals submitted several Congressionally-Directed Spending ("earmarks") requests to Senators Schumer and Gillibrand, and we remain thanking for their consistent support.

**Community Affairs:** Community Affairs hosted our annual CAB Education Conference on May 17, titled "Utilizing Effective Communication Techniques to Develop Influential, Culturally Competent Leaders." The conference was well attended, with over 80 CAB members and staff liaisons actively participating in the discussions and activities.

Community Affairs also hosted two internal Billing and Revenue Educational Webinars on May 22 with the Health + Hospitals Revenue Cycle Institute and NGS (National Government Services). Topics covered included Medicare Part A and B, national coverage determination versus local coverage determination, top billing errors, and coding edit procedures. The two webinars were well attended by NYC Health + Hospitals staff, with over 200 attendees.

The next Central Council of Auxiliaries meeting will be on June 5, and the next Council of CABs meeting will be on June 11 before the summer break. The current Chair of the Council of CABs will be terming out, so they will be voting in a new Chairperson for the Council of CABs, along with all the seats on the Executive Committee.

The 20th Annual Marjorie Matthews Celebration will be on July 18 at NYC Health + Hospitals/Coler, where we will be celebrating all our CAB and Auxiliary volunteers.

#### NEWS FROM AROUND THE SYSTEM

- **NY1:** [Arrival Center Announces One-Year Anniversary of Opening](#)
- **Becker's:** [Mayor Adams Announces 1,000+ New Nurses Hired By NYC Health + Hospitals](#)
- **Time Out:** [These murals in front of NYC Health + Hospitals/Metropolitan are turning ugly scaffolding into beautiful art](#)
- **Harlem World:** [NYC Care Program Teams Up With Community Orgs To Enhance Health Access](#)
- **mHealth Intelligence:** [How telehealth is boosting care access among NYC's homeless population](#)
- **NPR:** [A Girl Scouts troop offers hope and 'sisters for life' for migrant children](#)
- **Politics NY:** [Dr. Wei, Dr. Luong, Dr. Chaudhry, Lila Benayoun Named AAPI Power Players](#)
- **STAT News:** [From sewage to safety: Hospital wastewater surveillance as a beacon for defense against H5N1 bird flu](#)
- **Brooklyn Paper:** [South Brooklyn Health honors the 'profound impact' of its nurses during National Nurses Month](#)
- **WNYC:** [Morning Edition with Guests CM Brooks-Powers and Dr. Katz](#)
- **Becker's:** [New York City hospital goes 1 year CAUTI-free](#)

**RESOLUTION - 06**

Authorizing New York City Health and Hospitals Corporation (the “**System**”) to sign a lease with **175 Varick Street LLC (“Landlord”)** for approximately 10,000 square feet on the 7<sup>th</sup> floor at 145 East 32<sup>nd</sup> Street, New York, NY (the “**Premises**”) to house the **World Trade Center Environmental Health Center** (the “**Center**”) that is currently located in NYC Health + Hospitals/Bellevue (“**Bellevue**”) for an initial term of approximately 16 months with the System holding two 5-year options to extend the lease at an initial rent of \$54/sf to increase annually at 2.75% for an initial annual rent of \$540,000 and a total rent over the potential term of 12 years and 4 months of \$7,805,015.

**WHEREAS**, Bellevue first saw patients from the World Trade Center on the day of the attack; and

**WHEREAS**, since the World Trade Center attack, Bellevue has housed a center to treat survivors of the attack and the first responders to the site using funding from various sources and programs; and

**WHEREAS**, due to the growth of the Center and a sharp increase in Bellevue’s patient census it is urgent for the Center to relocate from Bellevue to free space for a significant number of medical surgical beds; and

**WHEREAS**, in 2010 the federal James Zadroga Act was passed into law and has provided funding for the Center to this date due to extensions of the statute that will not expire until 2090; and

**WHEREAS**, the current grant for the Center ends September 30, 2025 but the start of the lease depends on how quickly the lease is finalized and thus the initial term is “approximately” 20 months; and;

**WHEREAS**, grants of funding for the Center are awarded on five-year cycles; and

**WHEREAS**, the length of the initial and the renewal terms of the proposed lease allow the System to exercise its renewal options only once it has secured funding for the Center so the System is never exposed to an unfunded lease obligation; and

**WHEREAS**, other centers treating patients injured in the WTC attack are housed at NYC Health + Hospitals Gouverneur and at NYC Health + Hospitals/Elmhurst will remain at their current locations; and

**WHEREAS**, responsibility for administering the proposed lease will be with the System’s Sr. Vice President for Ambulatory Care.

**NOW, THEREFORE, be it**

**RESOLVED**, that New York City Health and Hospitals Corporation (the “**System**”) be and hereby is authorized to sing a lease with **175 Varick Street LLC (“Landlord”)** for approximately 10,000 square feet on the 7<sup>th</sup> floor at 145 East 32<sup>nd</sup> Street, New York, NY (the “**Premises**”) to house the **World Trade Center Environmental Health Center** (the “**Center**”) that is currently located in NYC Health + Hospitals/Bellevue (“**Bellevue**”) for an initial term of approximately 20 months with the System holding two options to extend the lease at an initial rent of \$54/sf to increase annually at 2.75% for an initial annual rent of \$540,000 and a total rent over the potential term of 12 years and 4 months of \$7,805,015.

**EXECUTIVE SUMMARY  
LEASE FOR 10,000 SF AT 145 E. 32<sup>nd</sup> STREET  
WORLD TRADE CENTER PROGRAM**

- OVERVIEW:** Bellevue received WTC-related patients starting on 9/11. A pilot healthcare program for WTC survivors at Bellevue was first funded in 2003. Other funding was received until 2008's Non-Responder Grant from CDC, followed in 2010 with the James Zadroga Act. The Center serves the majority of the System's 14,000+ WTC patients (69%) versus Elmhurst/Gouv (31%). The World Trade Center Health Program, legislated under the Zadroga Act and funded by CDC/NIOSH through 2090, covers care for 9/11 FDNY members, General Responders, and enrolled community members ("**Survivors**"). The Zadroga Act consolidated many different community-based/locally funded programs that began as early as 2003 at Bellevue. The program provides healthcare to Responders and Survivors, through CCEs and enrolled external providers. There are multiple CCEs across the metropolitan area for FDNY, General Responders, and Survivors. The System is funded as one of two NYC-based CCEs for Survivors.
- PROGRAM:** The Center provides initial assessments, monitoring/surveillance, ongoing treatment, and diagnostic services to 9,500+ enrolled/active members, with ~30 new members every week. In calendar year the Center had 13,000+ visits for treatment, diagnostic evaluations, initial assessments and monitoring. The Center provides medical care/treatment, behavioral health treatment, medical management, pharmacy assistance for WTC medications, Care Management services, and ongoing surveillance for approved WTC-related conditions, such as pulmonary, some cancers, aerodigestive disorders, mental health).
- TERMS:** To accommodate Bellevue's urgent need to recover the use of the space the Center now occupies; the Landlord will initially make available to the Center 5,500 square feet on the 11<sup>th</sup> floor of 145 E. 32<sup>nd</sup> Street which is empty and is in move-in condition. The Center will be on the 11<sup>th</sup> floor for the 4-6 months needed to prepare the 7<sup>th</sup> floor for the Center's use. Rent will be charged at \$54/sf. The initial rent on the 7<sup>th</sup> floor will be \$540,000 for the first year. Rent will increase at 2.75% per year. The System will get 4 months of free rent at the start of each of the two option terms. The System will pay for its own electrical consumption by direct payments to the utility. The System will pay for its share (computed based on the size of the Premises relative to the size of the entire building) of increases in real estate taxes assessed against the building over the taxes in effect during the first year of the lease.
- FINANCING:** It is expected that substantially all of the rent and operational costs of the program will be covered by the NIOSH grant and third-party billing.

Request to Lease with  
175 Varick Street LLC  
for New York City Health + Hospitals  
World Trade Center Program  
Environmental Health Center  
145 East 32nd Street  
NY, NY, 10016

Board of Directors Meeting  
June 27, 2024

Matt Siegler, Senior Vice President of Managed Care and Patient Growth  
John Ulberg, Chief Financial Officer  
Scott VanOrden, Assistant Vice President, World Trade Center  
Marlee Ickowicz, Assistant Vice President, Quality & Safety

## For Board Consideration

- Authorizing New York City Health and Hospitals Corporation (the “System”) to sign a lease with **175 Varick Street LLC (“Landlord”)** for approximately **10,000 square feet on the 7<sup>th</sup> floor at 145 East 32<sup>nd</sup> Street, New York, NY (the “Premises”)** to house the **World Trade Center Environmental Health Center (the “Center”)** that is currently located in **NYC Health + Hospitals/Bellevue (“Bellevue”)** for an initial term of approximately 16 months with the System holding two 5-year options to extend the lease at an initial rent of \$54/sf to increase annually at 2.75% for an initial annual rent of \$540,000 and a total rent over the potential term of 12 years and 4 months of \$7,805,015.

# World Trade Center Program at NYC Health + Hospitals

- The World Trade Center Health Program is legislated under the James Zadroga Act (2010)
  - Funded by Centers for Disease Control and Prevention (CDC) /National Institute for Occupational Safety and Health (NIOSH) through 2090
  - Covers care for 9/11 FDNY members, General Responders, and enrolled community members (“Survivors”)
  - Zadroga Act consolidated many different community-based/locally funded programs that began as early as 2003 at Bellevue center
- H+H contracted as one of two NYC-based Clinical Centers of Excellence (CCEs) for Survivors
  - Three NYC H+H WTC locations: Bellevue, Gouverneur, Elmhurst
- Contract details requirements for CCE operations/performance, and provides reimbursement structure(s)
  - Federal reimbursement covers the cost of the program and it is net revenue generating for NYC H+H



## Background

- Bellevue received WTC-related pts starting on 9/11
- Pilot healthcare program for survivors at BE first funded in 2003. Other funding received until 2008's Non-Responder Grant from CDC, followed by 2010's Zadroga Act
- The program is located in an inpatient unit and was used as surge unit during COVID-19.

## Services

- The center provides initial assessments, monitoring/surveillance, ongoing treatment, and diagnostic services
  - 13,000+ virtual and in person visits for eligible patients in 2023
  - Services include medical care/treatment, behavioral health treatment and medical management, pharmacy assistance for WTC medications, Care Management services, and ongoing surveillance for approved WTC-related conditions (e.g. pulmonary, some cancers, aerodigestive disorders, mental health)

# Need for Relocation

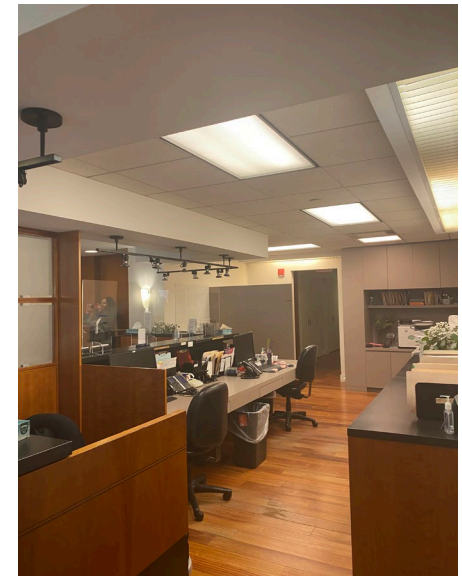
- ✓ Growing Enrollment and Insufficient Space
  - Survivor enrollment continues to grow past original Zadroga estimates. Population is aging and seeing increased 9/11 related health conditions, cancers, etc.
  - H+H receives about 30 new enrollments every week from CDC/NIOSH, space at Bellevue no longer sufficient – neither clinically nor administratively
  
- ✓ Bellevue Census Growth and Urgent Capacity Expansion Needs
  - The space will be repurposed for a significant number of critically needed inpatient beds
  - Bellevue census is very high and climbing
  
- ✓ Stakeholders invested in staying close to Bellevue
  - Survivor Steering Committee, CDC/NIOSH, and staff expressed this as a priority
  - Current contract funding continues for 16 months; CDC/NIOSH has indicated they will cover costs of lease for remainder of current contract and are favorably disposed to continued H+H participation in the program over the long term

# Evaluating New Space Options

- Looked extensively at NYC H+H facilities, no space adequate to satisfy program needs
- Turned to built-out healthcare commercial space for other options, which is standard for other WTC programs around the city and nation.
- Visited 7 properties, 145 E 32nd met largest number of requirements
  - Condition and layout
  - # of exam and consulting rooms
  - Pt. flow through space
  - Building location
  - Building security

# 32<sup>nd</sup> Street 7<sup>th</sup> Floor Space

- Distance to Bellevue and Security:
  - Quiet street, easy patient drop off and pick up
  - Short walk to elevator and into clinical space.
  - Doorman and video security.
  - Little disruption to member / staff travel, short walk to Bellevue
- Space and Floorplan:
  - 10,000 sq. ft, high quality and excellent condition
  - 11 Exam Rooms, 4 MH Consulting Rooms (currently have 8 exam, 2 consulting/PCA rooms)
- Stakeholders:
  - NIOSH and Survivor Steering Committee reps viewed space, very positive feedback and support for move to this property



# Lease Terms

- **Two-Part Move:**
  - 7th Floor space currently occupied by tenant
  - Program will initially move to immediately available 11th floor space (5500 sq. ft) to accommodate Bellevue's need for current inpatient space
  - Move to 7th floor within 4-6 months
  - Allows us to vacate Bellevue while current tenant vacates permanent space on the 7th floor
- **Term and Renewals:**
  - Term is 16 months followed by two 5 year renewal options; aligned with Program contract and funding periods
  - Option terms align with NIOSH funding cycles so H+H is never at risk of an unfunded lease obligation
- **Rent:**
  - \$54/sf. \$540,000 per year.
  - Increases at 2.75% annually
  - 4 months of free rent given at beginning of each of the two 5-year renewal terms
  - H+H to pay its share of increased taxes over 2024-2025 base year; expect to be covered by Federal reimbursement

- Authorizing New York City Health and Hospitals Corporation (the “System”) to sign a lease with **175 Varick Street LLC (“Landlord”)** for approximately **10,000 square feet on the 7<sup>th</sup> floor at 145 East 32<sup>nd</sup> Street, New York, NY (the “Premises”)** to house the **World Trade Center Environmental Health Center (the “Center”)** that is currently located in **NYC Health + Hospitals/Bellevue (“Bellevue”)** for an initial term of approximately 16 months with the System holding two 5-year options to extend the lease at an initial rent of \$54/sf to increase annually at 2.75% for an initial annual rent of \$540,000 and a total rent over the potential term of 12 years and 4 months of \$7,805,015.

**RESOLUTION - 07**

**AMENDED** - Authorizing the New York City Health and Hospitals Corporation (the “System”) to sign a five-year license agreement with **Sodexo (“Sodexo”) for its use and occupancy of approximately 4,936 square feet at NYC Health + Hospitals/Bellevue (“Bellevue”) for a retail food operation** for which it will pay a minimum annual amount of \$100,000, plus 8% of annual gross sales over \$3M and 12% of annual gross sales over \$3.5M with such agreement to be terminable by each party on thirty days’ notice without cause.

**WHEREAS**, for many years Bellevue had both a “grab and go” type retail food operation and a sit-down diner-type restaurant, however since Fall 2022, Bellevue has not had the restaurant operation leaving Bellevue staff and visitors without this option; and

**WHEREAS**, the System’s primary goal in establishing retail food service operations is to ensure affordable and healthy food for staff and visitors and not to maximize the revenue; and

**WHEREAS**, Sodexo is an international food service and facilities management company that has prepared patient meals for all of the system’s patients since 2005; and

**WHEREAS**, Sodexo also operates retail food establishments in institutional settings such as hospitals, schools and private companies; and

**WHEREAS**, Bellevue and Central Office staff toured a comparable Sodexo retail food operation in the area and found an impressive variety of healthy food options at low prices and in attractive settings; and

**WHEREAS**, Sodexo will offer a culturally diverse and healthy menu at affordable prices for the Bellevue community, and Bellevue will approve the rotating menus & prices other than cost of living adjustments; and

**WHEREAS**, responsibility for the operation of the proposed food service operation and administering the proposed agreement will be with the Executive Director of Bellevue.

**NOW, THEREFORE, be it**

**RESOLVED**, that the New York City Health and Hospitals Corporation (the “System”) be and hereby is authorized to sign a five-year license agreement **with Sodexo (“Sodexo”) for its use and occupancy of approximately 4,936 square feet at NYC Health + Hospitals/Bellevue (“Bellevue”) for a retail food operation** for which it will pay a minimum annual amount of \$100,000, plus 8% of annual gross sales over \$3M and 12% of annual gross sales over \$3.5M with such agreement to be terminable by each party on thirty days’ notice without cause.

## **EXECUTIVE SUMMARY**

### **SODEXO**

#### **LICENSE AGREEMENT FOR FOOD SERVICE OPERATIONS AT NYC HEALTH + HOSPITALS/BELLEVUE**

**OVERVIEW:** Bellevue, the largest hospital in the System has long had multiple food vendors operating within the hospital with one or more “grab and go” operations and a sit-down restaurant. The former operator of the restaurant, Moonstruck, closed in Fall 2022 and Bellevue has been searching for a replacement vendor since then.

**VENDOR:  
BACKGROUND:** Sodexo is an international company that offers food services and various facility management services. Sodexo has worked for the System for close to 20 years having responsibility for the preparation of meals for patients and also handling the System’s laundry needs. Additionally, Sodexo operates retail food establishments. A team of Central Office and Bellevue representatives visited a Sodexo restaurant at Stamford Hospital in Stamford, CT. Sodexo will model the Bellevue restaurant after the Stamford restaurant. The food to be offered is indicated in the attached menu. The team of System staff that visited the Stamford restaurant found the food to be quite varied, tasty, health and inexpensive.

**TERMS:** The proposed agreement will be for five years and will be terminable by each party without cause on thirty days’ notice. Sodexo will be bound to the menu and prices attached except for increases necessary to keep pace with cost of living expenses.

Sodexo will pay a minimum occupancy fee of \$100,000/year. In addition, Sodexo will pay the System 8% on gross sales over \$3M and 12% on gross sales over \$3.5M. Sodexo will invest approximately \$1M to outfit the space licensed including bringing in all new kitchen equipment. The System will not pay any portion of such renovation and outfitting cost.

Sodexo will manage its own employees rather than managing H+H’s unionized staff as it does with its other contracts with H+H for patient food preparation or environment services.

Because of the percentage rent approach to this transaction, it is not possible to determine an equivalent fair market value. In comparing this transaction to others, one also has to factor in the substantial investment Sodexo will make in the physical restaurant.



**Request to Authorize  
License Agreement with  
Sodexo for Retail Food Location at  
NYC Health + Hospitals/ Bellevue**

**Board of Directors Meeting  
June 27, 2024**

Marcia Peters, Chief Operating Officer, NYC Health + Hospitals/Bellevue  
Mercedes Redwood, Assistant Vice President, Managed Services  
Leora Jontef, Assistant Vice President, Housing and Real Estate  
Jeremy Berman, Deputy General Counsel

## For Board Consideration

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- **AMENDED:** Authorizing the New York City Health and Hospitals Corporation (the “System”) to sign a five-year license agreement with **Sodexo (“Sodexo”)** for its use and occupancy of approximately 4,936 square feet at NYC Health + Hospitals/Bellevue (“Bellevue”) for a **retail food operation** for which it will pay a minimum annual amount of \$100,000, plus 8% of annual gross sales over \$3M and 12% of annual gross sales over \$3.5M with such agreement to be terminable by each party on thirty days’ notice without cause.

## Current State at Bellevue

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- Convenient onsite food options is important to staff and patient satisfaction.
  - Many facilities are not near retail corridors
  - Work schedules require easy access to food 24/7
  - Healthy food options are core to H+H values
  - Cost conscious pricing allows access to all hospital visitors
- Covid caused several food service vendors to close, leaving many hospitals without food services or with old operations in need of updating.
  - Moonstruck diner closed in July 2022.
  - The old Moonstruck license agreement had required Moonstruck to pay a minimum of \$150,000/yr or 12% of Gross Sales, whichever was higher.
- Currently the only option on campus is “grab and go” style at Panera Bakery, which does not have seating for dining.
- NYC Health + Hospitals/Bellevue selected Sodexo based on:
  - Sodexo’s organizational experience with NYC Health + Hospitals for almost two decades
  - Sodexo’s qualifications and reputation for appetizing food options next door at NYU Langone Health.
  - Sodexo’s proposal to offer affordable menu prices at Bellevue.

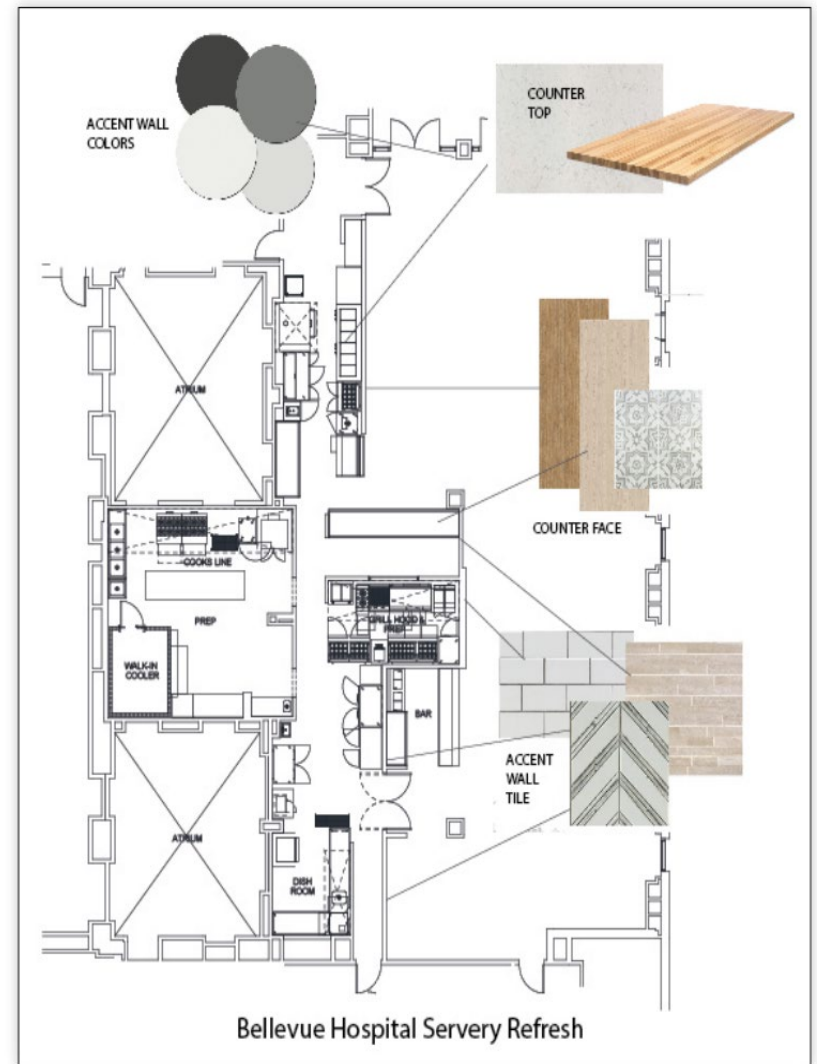
- Sodexo was established in 1966 and has grown to be a global leader in on-site food services in the healthcare industry across 45 countries
- Sodexo partnerships for retail food venues include:
  - Tisch Café at NYU Langone Health, New York, NY
  - The Café at Stamford Hospital, Stamford, CT
  - Casey's Café at RWJ Barnabas Health, Livingston, NJ
- NYC Health + Hospitals and Sodexo have partnered together for over 19 years:
  - Patient Food & Nutrition Systemwide (\$1.12 Billion, 2005-2029)
  - Laundry & Linen services (\$339.5 million, 2011-2029)
- Sodexo has embraced the NYC Health + Hospitals plant-based patient dining program since March of 2022
  - Served over 1.2 million plant-based patient meals
  - Reduced carbon emissions by 36%
  - Reduced cost by 22%

# Proposed Menu

- Sodexo will offer a culturally diverse and healthy menu at affordable prices for the Bellevue community
  - Bellevue will approve the rotating menus & prices other than cost of living adjustments.
- **Hot Breakfast**
  - Made to Order Eggs, Breakfast Meats, French Toast, Pancakes \$2.99 - \$5.69
  - Breakfast Combos: Eggs, Sausage & Potatoes or Eggs, Pancakes, Sausage \$9.99 - \$12.99
- **From the Grill**
  - Entrees: Tacos, Quesadillas, Grilled Sandwiches \$6.49 - \$8.59
  - Sides: Baked French Fries, Baked Sweet Potato Fries \$2.29 - \$4.29
- **Pizza Slices & Pizzettas**
  - Whole Grain, Vegetable, Chicken Slices \$2.99 - \$7.29
- **Entrees**
  - Rotating Menu: Grilled Spiced Shrimp Salad, Noodle Bowls, Irish Beef Stew, Shakshuka, BBQ Pork Loin \$5.59 - \$8.99
  - Kosher & Halal options from a third party vendor
- **Other**
  - Hot Meals: Breakfast Bowls, Chicken Francese, Orecchiette & Meatballs \$10.00 - \$15.00
  - Snacks: Snack Boxes, Parfaits \$6.50 - \$9.50

## Proposed Renovation

- Sodexo will be responsible for the cost of construction.
- Sodexo estimates capital investment of over \$1 million for the renovation.



# License Terms

- Term: Five years, terminable by either party upon thirty days notice without cause.
  - If we terminate early without cause, then we will be obligated to refund Sodexo's documented and unamortized costs of renovating the premises.
  - If we terminate with cause, then we do not need to refund the renovation costs.
- Location: Ground floor in the F-Link of NYC Health + Hospitals/Bellevue
- Hours of Operation: Approximately 6:30 am to 7:00 pm on weekdays and 6:30 am to 3:00 pm on weekends
- Will be open by the end of the year.
- FMV is not relevant when part of the rent is a percentage of sales.
- Staffing: Sodexo will manage its own employees rather than managing H+H's unionized staff as it does with its other contracts with H+H for patient food preparation or environmental services.
- Occupancy Fee: \$100,000 annually, guaranteeing at least \$8,333.33 per month. In addition, there will be revenue sharing of:
  - 8% of annual gross sales over \$3M
  - 12% of annual gross sales over \$3.5M

- **AMENDED:** Authorizing the New York City Health and Hospitals Corporation (the “System”) to sign a five-year license agreement with **Sodexo (“Sodexo”)** for its use and occupancy of approximately 4,936 square feet at NYC Health + Hospitals/Bellevue (“Bellevue”) for a retail food operation for which it will pay a minimum annual amount of \$100,000, plus 8% of annual gross sales over \$3M and 12% of annual gross sales over \$3.5M with such agreement to be terminable by each party on thirty days’ notice without cause.



**RESOLUTION - 08**

Authorizing New York City Health and Hospitals Corporation (the “System”) to **amend the existing agreement with Tasty Picks, Inc. #5 (“Tasty Picks”) for its occupancy of space at NYC Health + Hospitals/Jacobi (“Jacobi”)** for a retail food operation to increase the area licensed from 1,000 square feet to 1,890 square feet and to increase the occupancy fee, calculated at \$25/square foot, from \$25,000 per year to \$47,250 per year.

**WHEREAS**, the System Board of Directors voted in May 2023 to approve a 5-year terminable license of 1,000 square feet at Jacobi to EveryTable for the operation of a food service business at \$25/square foot; and

**WHEREAS**, EveryTable abruptly closed all of its east coast operations in January 2024 once again depriving Jacobi staff and visitors of this needed service after many previous months without a food purveyor extending back to the onset of Covid; and

**WHEREAS**, in recognition of the negative impact on staff morale of again being without food service, the System President, Mitchell Katz, authorized an exception to policy to allow Tasty Picks to take over the EveryTable operation at Jacobi on the same terms as had been approved for EveryTable; and

**WHEREAS**, Tasty Picks was able to quickly step into the space that had been used by EveryTable and commenced operations in mid-February; and

**WHEREAS**, staff at Jacobi has been so enthusiastic about Tasty Picks that Jacobi leadership wants Tasty Picks to expand its operations into an additional 890 square feet at a corresponding increase in the occupancy fee; and

**WHEREAS**, responsibility for the operation of the proposed food service operation and administering the proposed agreement will be with the Jacobi Executive Director.

**NOW, THEREFORE, be it**

**RESOLVED**, that the New York City Health and Hospitals Corporation (the “System”) be and hereby is authorized to amend the existing agreement with Tasty Picks, Inc. #5 (“Tasty Picks”) for its occupancy of space at NYC Health + Hospitals/Jacobi (“Jacobi”) for a retail food operation to increase the area licensed from 1,000 square feet to 1,890 square feet and to increase the occupancy fee, calculated at \$25/square foot, from \$25,000 per year to \$47,250 per year.

**EXECUTIVE SUMMARY  
TASTY PICKS, INC. #5  
AMENDMENT OF LICENSE AGREEMENT FOR  
FOOD SERVICE OPERATIONS AT  
NYC HEALTH + HOSPITALS/JACOBI**

- OVERVIEW:** After not having any food service for well over a year, in May 2023, Jacobi obtained Board approval for an agreement with EveryTable to operate a restaurant at Jacobi. Unfortunately, EveryTable ceased all business operations on the east coast leaving Jacobi again without a food purveyor. In recognition of the negative impact on staff morale of again being without food service, the System President authorized an Exception to Policy to permit Tasty Picks to take over from EveryTable on the same terms as had been approved for EveryTable. Tasty Picks commenced operations in mid-February 2024 and has been so enthusiastically received by Jacobi staff that Jacobi leadership wants to expand the area licensed to Tasty Picks so it can enlarge its operations. The approval of the System’s Board of Directors to the expansion of the existing space license is requested.
- VENDOR:  
BACKGROUND:** Tasty Picks is a local business that started operation at Jacobi’s NCB campus in Fall 2021. Tasty Picks brought affordable, healthy and tasty food to NCB that was particularly well oriented to the ethnic preferences of staff and patients. NYC Health + Hospitals/Jacobi, being aware of Tasty Pick’s good work at NCB and Metropolitan, sought them out.
- TERMS:** The previously approved terms were for 1,000 square feet of space at \$25/foot on a five-year terminable license. The proposed amendment to the license agreement will not change its duration or any of its terms other than to increase the area licensed to 1,890 at \$25/ft for a total annual fee of \$47,250. As before, the rate will increase by 2% per year.

# Lease Comps Summary

Deals

NNN Asking Rent Per SF

NNN Starting Rent Per SF

Avg. Months On Market

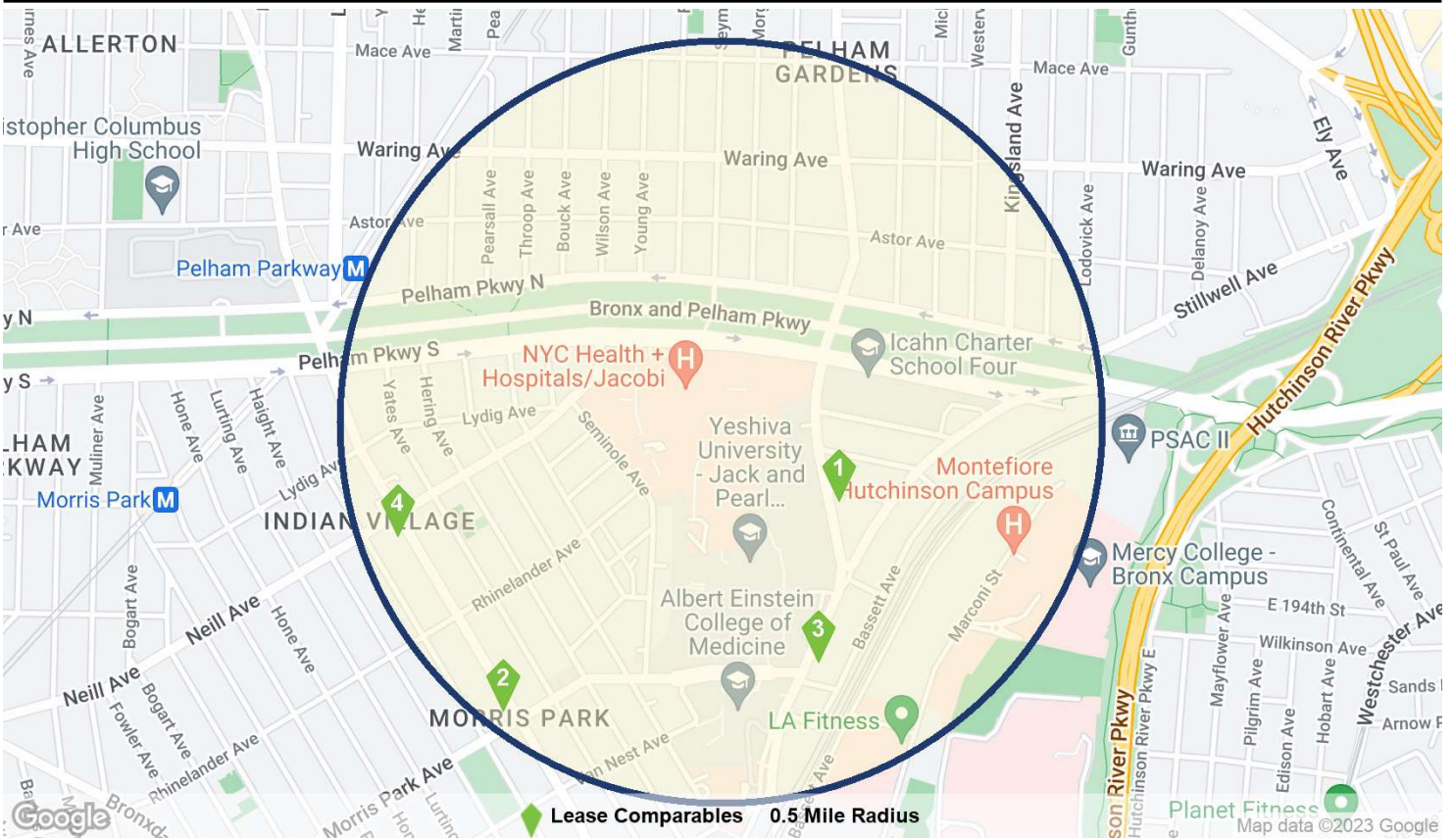
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## LEASE COMPARABLES



## SUMMARY STATISTICS

Rent	Deals	Low	Average	Median	High
NNN Asking Rent Per SF	-	-	-	-	-
NNN Starting Rent Per SF	-	-	-	-	-
NNN Effective Rent Per SF	-	-	-	-	-
Asking Rent Discount	-	-	-	-	-
TI Allowance	-	-	-	-	-
Months Free Rent	1	2	2	2	2

Lease Attributes	Deals	Low	Average	Median	High
Months on Market	5	5	11	8	22
Deal Size	6	520	795	850	1,000
Lease Deal in Months	6	60.0	64.0	60.0	84.0
Floor Number	6	1	1	1	2

# Lease Comps Summary

Property Name - Address	Rating	Lease				Rents	
		SF Leased	Floor	Sign Date	Type	Rent	Rent Type
1 2040-2046 Eastchester Rd	★★★★★	1,000	1st	7/23/2022	New	\$33.60/mg	Effective
2 1801-1807 Williamsbridg...	★★★★★	520	1st	3/21/2019	New	\$41.54/mg	Effective
2 1801-1807 Williamsbridg...	★★★★★	550	1st	8/2/2016	New	\$46.62/mg	Effective
3 1888-1892 Eastchester Rd	★★★★★	1,000	1st	6/1/2016	New	\$54.00/mg	Effective
3 1888-1892 Eastchester Rd	★★★★★	950	1st	2/1/2016	New	\$50.53/mg	Effective
4 1965 Williamsbridge Rd	★★★★★	750	2nd	10/1/2015	New	\$31.69/fs	Effective

Mg = modified gross (can run the gamut of included and excluded costs, likely excludes taxes and includes some maintenance or utilities),  
 fs= full service gross (a type of commercial lease often found in multi-tenant office buildings, and occasionally retail and industrial space and may include utilities, janitorial, and sometimes trash.)

**Tasty Picks**  
**License Agreements**  
**NYC Health + Hospitals/  
Jacobi Hospital**

**Board of Directors Meeting**  
**June 27, 2024**

**Christopher Mastromano, CEO, Jacobi | North Central Bronx Hospitals**  
**Leora Jontef, Assistant Vice President Housing and Real Estate**  
**Jeremy Berman, Deputy Counsel**

- Authorizing New York City Health and Hospitals Corporation (the “**System**”) to amend the existing agreement with Tasty Picks, Inc. #5 (“Tasty Picks”) for its occupancy of space at NYC Health + Hospitals/Jacobi (“Jacobi”) for a retail food operation to increase the area licensed from 1,000 square feet to 1,890 square feet and to increase the occupancy fee, calculated at \$25/square foot, from \$25,000 per year to \$47,250 per year.

- Convenient onsite food options is important to staff and patient satisfaction.
  - Many facilities are not near retail corridors
  - Work schedules require easy access to food 24/7
  - Healthy food options are core to H+H values
  - Cost conscious pricing allows access to all hospital visitors
- The System Board of Directors voted in May 2023 to approve a 5-year terminable license of 1,000 square feet at Jacobi to EveryTable for the operation of a food service business at \$25/square foot.
- EveryTable abruptly closed all of its east coast operations in January 2024 once again depriving Jacobi staff and visitors of this needed service after many previous months without a food purveyor extending back to the onset of COVID19.

# Selection Process

- Each facility independently selects the vendors that suit their patient and staff needs taking into consideration:
  - evaluating menus for healthy options
  - ability to provide culturally sensitive foods
  - pricing and tastings
  - cultural sensitivities
  - 24/7 operations
- Tasty Picks has shown its affordable, appealing, and healthy food by its successful launch and continued operations at NYC Health + Hospitals/North Central Bronx.
- In recognition of the negative impact on staff morale of again being without food service, the System President, Mitchell Katz, authorized an exception to policy to allow Tasty Picks to take over the EveryTable operation at Jacobi on the same terms as had been approved for EveryTable.
- As their operations have been successful, Jacobi is requesting that Tasty Picks be able to expand the footprint of their operation by an additional 890 SF, making a total space of 1,890 SF.
- Under the System's rules, real estate space license agreements, such as the proposed agreement, do not require an RFP.



# Food Vendor: Tasty Picks

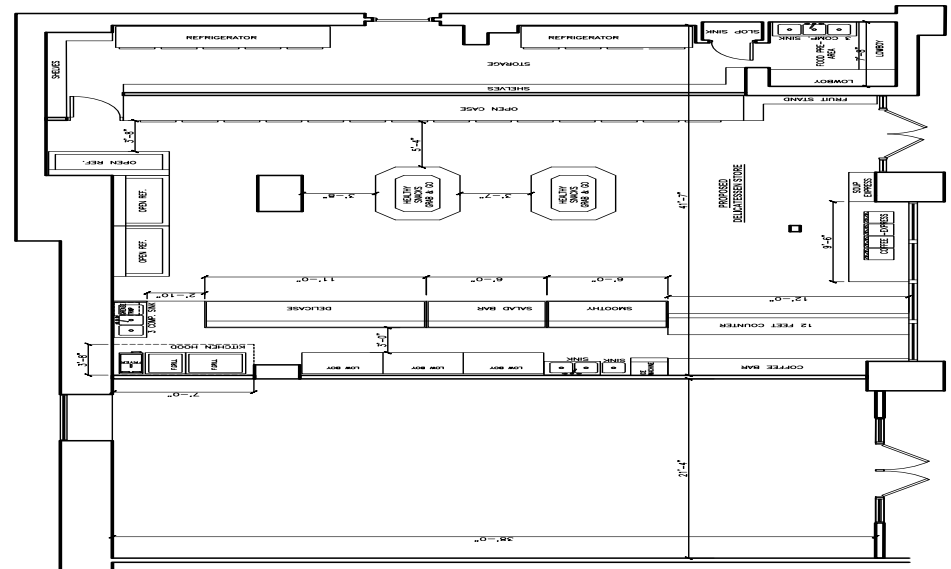
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- Tasty Picks is a North Central Bronx-based food store that boasts a diverse range of culinary offerings. It has operated for over 10 years and has been a food vendor at NYC Health + Hospitals/North Central Bronx for two years.
- Hours of operation will be 24 hours per day, 7 days per week
- Tasty Picks will offer a diverse menu of fresh food within a price range \$1.99 - \$11.99
  - Smoothies, Acai Bowls, and Juices: \$7.99-\$10.99
  - Hot breakfast and bakery items \$1.99-\$11.99
  - Fresh Salads \$7.99-\$10.99
  - Mexican, Halal, and Meatless Options \$6.50 - \$11.99
  - Fresh Sandwiches and Paninis \$8.50 - \$11.99
  - Full complement of drinks, hot and iced coffee and tea. \$1.89 - \$3.75
  - Catering available for all hospital staff needs
  - Culturally sensitive foods will be offered

➤ Current Space



➤ Expanded Layout



# License Terms

- Location: Increase the previously approved terms for 1,000 sf to 1,890 ft on first floor of Building 1 at NYC Health + Hospitals/Jacobi.
- License Fee: \$25/SF, with a 2% increase per year.
  - Year 1 fee: \$47,250
  - Term: 5 years with annual 2% increase
  - Total rent over 5 years: \$245,891
- Agreement may be terminated for convenience.
- Price increases other than those to keep pace with cost of living increases must be approved by facility

Year	Price PSF	Current 1,000 SF Space Annual Occupancy Fee	Proposed 1,890 SF Space Annual Occupancy Fee <sup>2</sup>
1	\$ 25.00	\$ 25,000	\$ 47,250
2	\$ 25.50	\$ 25,500	\$ 48,195
3	\$ 26.01	\$ 26,010	\$ 49,159
4	\$ 26.53	\$ 26,530	\$ 50,142
5	\$ 27.06	\$ 27,061	\$ 51,145
<b>Total</b>		<b>\$ 130,101</b>	<b>\$ 245,891</b>

- Authorizing New York City Health and Hospitals Corporation (**the “System”**) to amend the existing agreement with Tasty Picks, Inc. #5 (“Tasty Picks”) for its occupancy of space at NYC Health + Hospitals/Jacobi (“Jacobi”) for a retail food operation to increase the area licensed from 1,000 square feet to 1,890 square feet and to increase the occupancy fee, calculated at \$25/square foot, from \$25,000 per year to \$47,250 per year.

**RESOLUTION – 09**

Authorizing New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to execute a contract with **Vanguard Construction and Development Co., Inc. (the “Contractor”), to undertake a project to renovate the D5 Labor & Delivery suite at NYC Health + Hospitals/Elmhurst Hospital** for a contract amount of \$11,783,528, with a 10% project contingency of \$1,178,353, to bring the total cost not to exceed \$12,961,881.

**WHEREAS**, Elmhurst Hospital, one of the primary maternity care facilities in Queens, has seen a 47% increase in births from FY 21’ to FY 23’; and

**WHEREAS**, Elmhurst Hospital’s labor and delivery unit was last renovated in 1996 and, due to the current state of the facility and the increase in births, it has been determined that a project should be undertaken to address such issues and to provide expanded care for maternal fetal medicine; and

**WHEREAS**, in accordance with Operating Procedure 100-5 a solicitation was issued, pursuant to which bids were received and publicly opened on March 28, 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 Vanguard Construction & Co. in the amount of \$11,783,528, with a 10% project contingency of \$1,178,353, to bring the total cost not to exceed \$12,961,881 for a renovation project of the labor and delivery unit at NYC Health + Hospitals/Elmhurst Hospital.

**EXECUTIVE SUMMARY  
ELMHURST HOSPITAL  
LABOR AND DELIVERY RENOVATION PROJECT  
VANGUARD CONSTRUCTION AND DEVELOPMENT CO., INC.**

**CONTRACT SCOPE:** Labor and delivery renovation project.

**NEED:** NYC Health + Hospitals facilities needs general construction services to undertake the labor and delivery renovation project at Elmhurst Hospital.

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

**PROCUREMENT:** A competitive sealed bid was issued on 1/17/2024; twenty-eight contractors attended one of two pre-bid on site visits on 1/24/2024 and 1/25/2024; ten contractors submitted bids with the lowest responsible and responsive bidder being Vanguard Construction and Development Co., Inc., for a contract value of \$11,783,528.

**PRIOR EXPERIENCE:** Vanguard Construction and Development Co., Inc has previously worked on projects at Elmhurst, Jacobi and Harlem Hospitals and has received one excellent and two good ratings.

**CONTRACT AMOUNT:** Not to Exceed \$12,961,881.

**PASSPORT APPROVAL:** Approved

**EEO APPROVAL:** Pending

**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: Vanguard Construction and Development Co., Inc.

Date: May 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**

Pending

**MWBE**

38%

# **Request to Award Contract for to Vanguard Construction and Development Co., Inc. for D5 Labor & Delivery Renovation Project at NYC Health + Hospitals/ Elmhurst**

**Board of Directors Meeting  
June 27, 2024**

Helen Arteaga-Landaverde, PhD, Chief Executive Officer, NYC H+H/Elmhurst  
Mike Milinic, Chief Operations Officer, NYC H+H/Elmhurst  
Manuel Saez, PhD, Vice President, OFD  
Oscar Gonzalez, Senior Assistant Vice President, OFD  
Erin Egan, Senior Regional Director, OFD  
George Asadoorian, Director, NYC H+H/Elmhurst + OFD



## For Board Consideration

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- Authorizing New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to execute a contract with Vanguard Construction and Development Co., Inc. (the “Contractor”), to undertake a project to renovate the D5 Labor & Delivery suite at NYC Health + Hospitals/Elmhurst Hospital for a contract amount of \$11,783,528, with a 10% project contingency of \$1,178,353, to bring the total cost not to exceed \$12,961,881

# Program Background/ History

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- NYC H+H/Elmhurst is one of the primary maternity care providers in Queens. Built in 1957, the facility has seen deliveries increase 47% from 1,799 births (FY 21) to 2,651 births (FY 23).
  - To meet this increased need, we are expanding our Labor and Delivery to continue providing quality care and excellent service
  
- Newly renovated unit will serve as the Maternal Fetal Medicine (MFM) Unit for expanded care of High-Risk Mothers
  
- The Labor and Delivery unit is located on the 5th Floor, D wing, (Unit D5). The current space was last renovated in 1996
  
- Renovation of the unit will include new equipment, a new layout, and upgrades to six (6) Delivery rooms, two (2) Nurses' Stations, one (1) Operating Room, eight (8) bed recovery rooms, and the Triage/ Antepartum/ Holding/ Waiting Areas
  
- Labor and Delivery services will not be disrupted by construction
  - Six part phasing plan that will allow us to maintain services as we cycle through various sections of the department
  - In order to achieve this, we will be decanting outpatient sonogram services off of the unit to create swing space

# Construction Scope & Schedule

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- Elmhurst, D-Wing, Fifth Floor, Labor & Delivery (L&D):
  - Complete interior demolition and renovation of existing L&D and Sonogram Suites
  - Project consists of a combined 15,400 SF demolition and construction build out of the D5 Labor and Delivery Suite (14,000 SF) + Sonogram Suite (1,400 SF)
  - Provide one (1) new operating room with enhanced ceiling strut-mounted medical gas and vacuum ports, and LED surgical lighting fixtures
  - Outfit with new equipment (i.e., Electric Fetal Monitors, Cardiac Monitors, Ultrasound Equipment, Baby Scales) to improve the standard of care
  - Provide new reception and waiting areas to enhance the environment of care
  - Installation of new Medical Gas lines
  - Work to be performed in six (6) coordinated phases over 24 months
  - Mechanical, Electrical and Plumbing upgrades throughout the space
  - Construction is expected to begin Fall 2024 with completion planned by Fall 2026

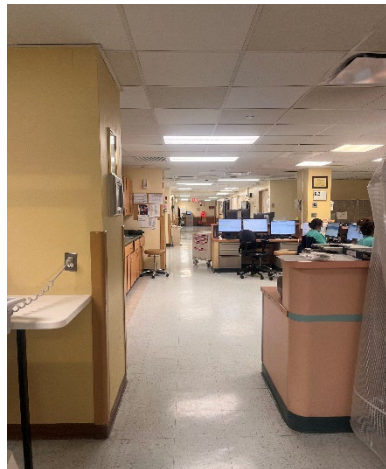
# Phasing Plan



➤ Phase 6 is HVAC system and not on this floorplan

**Current State**

**Future state**



# Overview of Procurement

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- January 2024: Publicly advertised, Site tours held for perspective bidders; Total of 28 contractors attended
- March 2024: Bid due date 3/15/24, 10 bids received
- April 2024: Determination of low bid finalized, and Vanguard Construction was selected as the lowest responsive and responsible bidder

# Construction Contract

- Sourced via public bid
- Vanguard Construction was the lowest of ten (10) bidders
- Vanguard has committed to a 38% MWBE subcontractor utilization plan presented below:

Subcontractor	MWBE Status	Supplies/Services	Utilization Plan %	Utilization \$s
<b>Redd Electrical Services</b>	Black MBE	Electrical	13%	\$1,531,858
<b>Mason Technologies</b>	Non-minority WBE	Low Voltage	2%	\$235,670
<b>Cardoza Plumbing</b>	Hispanic MBE	Plumbing	14%	\$1,649,693
<b>Greenebuild, LLC</b>	Black MBE	Drywall/Carpentry	9%	\$1,060,517
<b>Total</b>			38%	\$4,595,573

- Contract amount is \$ 11,783,528
- Expected to begin September 2024 with completion by October 2026
- The vendor has completed three previous projects for the system – at Elmhurst, Jacobi, and Harlem, and has received one excellent and two good reviews.
  - Elmhurst, Renovation of the H bldg. 3rd floor DSRIP behavioral health integration into primary care setting. \$2,086,727 (Excellent)
  - Jacobi, 10th floor DSRIP integration of behavioral health into primary care setting. \$5,646,362 (Good)
  - Harlem, 4th Floor Post-Partum Unit Renovation, MLK Building. \$3,997,837 (Good)

# Performance Evaluation

Vendor Performance Evaluation	
Vanguard	
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	Good

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





# Project Budget

<b>NYC H+H/ Elmhurst Labor &amp; Delivery Renovation Project</b>	
<b>Construction</b>	<b>\$11,783,528</b>
<b>Project Contingency (10%)</b>	<b>\$1,178,353</b>
<b>Total</b>	<b>\$12,961,881</b>

- \$3M of the budget was generously provided by Congresswomen Meng & Ocasio-Cortez
- \$7.5m Mayoral Funding

- Authorizing New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to execute a contract with Vanguard Construction and Development Co., Inc. (the “Contractor”), to undertake a project to renovate the D5 Labor & Delivery suite at NYC Health + Hospitals/Elmhurst Hospital for a contract amount of \$11,783,528, with a 10% project contingency of \$1,178,353, to bring the total cost not to exceed \$12,961,881

## RESOLUTION - 10

Authorizing the Executive Director of MetroPlus Health Plan, Inc. (“MetroPlus or “the Plan”) to negotiate and execute a **best-interest extension of the current contract with Clarity Software Solutions, Inc. for fulfillment and distribution services** for a period of two years and 1 one-year renewal option, for an amount not to exceed \$31,500,000, which includes a 6% contingency, over the lifetime of the contract, effective August 8, 2024.

**WHEREAS**, MetroPlus, a subsidiary corporation of NYC Health + Hospitals, is a Managed Care Organization and Prepaid Health Services Plan, certified under Article 44 of the Public Health Law of the State of New York; and

**WHEREAS**, MetroPlus is required to provide essential fulfillment and distribution services in accordance with established regulatory guidelines and to timely distribute materials to members consistent with regulatory guidelines for all lines of business; and

**WHEREAS**, an RFP for fulfillment and distribution services was issued in 2017 in compliance with the contracting policies and procedures of MetroPlus; and

**WHEREAS**, Clarity Software Solutions, Inc. was selected as the successful respondent and has since demonstrated its ability to provide said services effectively; and

**WHEREAS**, in June 2022, the MetroPlus and NYC Health + Hospitals Board of Directors approved the Plan to enter into a best-interest extension of the current contract with Clarity for an additional two years; and

**WHEREAS**, MetroPlus seeks a second best-interest extension to allow for continuity of fulfillment services while the Plan undergoes its CPS CORE system transition from SS&C to HealthEdge; and

**WHEREAS**, extending MetroPlus’ contract with Clarity and keeping the current fulfillment services intact, is in the best interest of the Plan as we undergo the significant system transition to replace the Plan’s Core platform because continuing with the existing fulfillment vendor at this time, will avoid risks of any disruption in the Plan’s operations and provide a seamless member experience.

**WHEREAS**, due to the complexity of the CPS Core system implementation currently underway, a separate implementation to a new fulfillment vendor during the implementation period poses risks to timeline, configuration and service delivery.

**WHEREAS**, on Thursday, June 6, 2024, the MetroPlusHealth Board of Directors considered and approved the submission of the resolution to execute a best-interest extension of the contract with Clarity Software Solutions, Inc. for fulfillment and distribution services.

**NOW THEREFORE**, be it

**RESOLVED**, that the Executive Director of MetroPlus Health Plan, Inc. (“MetroPlus or “the Plan”) to negotiate and execute a **best-interest extension of the current contract with Clarity Software Solutions, Inc. for fulfillment and distribution services** for a period of two years and 1 one-year renewal option, for an amount not to exceed \$31,500,000, which includes a 6% contingency, over the lifetime of the contract, effective August 8, 2024.

**EXECUTIVE SUMMARY**  
**METROPLUS HEALTH - BEST INTEREST EXTENSION**  
**CLARITY SOFTWARE SOLUTIONS, INC**  
**FULFILMENT AND DISTRIBUTION SERVICES**

**BACKGROUND:** MetroPlus, a subsidiary corporation of NYC Health + Hospitals, is a Managed Care Organization and Prepaid Health Services Plan, certified under Article 44 of the Public Health Law of the State of New York. The Certificate of Incorporation of MetroPlus reserves to NYC Health + Hospitals the power to approve MetroPlus contracts, other than with NYC Health + Hospitals or a health care service provider, with an annual value in excess of \$3,000,000.

In 2017, Clarity Software Solutions, Inc. (“Clarity”) was selected through an RFP process, to provide fulfilment and distribution services to MetroPlus and on July 12, 2017, the MetroPlus Board of Directors authorized MetroPlus to enter into a three-year contract with two one-year options for renewal, with Clarity at an annual cost not to exceed \$2,900,000.

In 2022, MetroPlus re-engaged Clarity for an additional two-year term. The MetroPlus Board and NYC Health + Hospitals Board of Directors both approved the Clarity resolution for a total amount not to exceed of \$8,000,000 in June 2022.

**NEED:** In the best interest of the Plan, MetroPlus seeks to extend its current contract with Clarity for an additional 2-year term and 1 one-year option to renew. Due to the complexity of the CPS Core System implementation currently underway; a separate implementation to a new fulfillment vendor during this period, poses risks to timeline, configuration, and service delivery.

Continuing with Clarity during the implementation period will mitigate any disruption of services during the transition from the legacy platform to HealthEdge’s platform. SS&C, the Plan’s current core system vendor, provides pass-through fulfillment services from their own direct contract with Clarity for EOPs, EOBs and letters. With the CPS core implementation, MetroPlus will be directly responsible for the fulfillment of these items. Continuing with Clarity will simplify the integration of these fulfillment services.

The best-interest extension will yield cost savings associated with implementation. Pricing for services will be maintained at the same rates as the current contract. The \$31,500,000 not to exceed amount request, accounts for approximately 2 million additional letters, EOPs and EOBs the Plan will need to directly fulfill once moving off of the SS&C platform and over to HealthEdge. The Plan is also requesting a 6% contingency to account for any regulatory requirements that may arise and require fulfillment and distribution of plan materials.

In 2023 the Plan sent out approximately 9.3 million pieces of mail across all lines of business. Approximately 5.5 million was fulfilled by MetroPlus’ direct contract with Clarity and includes the fulfillment of ID cards, member welcome kits, and letters. Approximately 3.8 million was fulfilled by SS&C, through their direct contract with Clarity, as a pass-through service to MetroPlus. The Plan anticipates future volume to be close to 13 million annually.

**PROPOSAL:** The term of the proposed agreement is two years, and 1 one-year option to renew.

**MWBE:** Clarity submitted a 30% MWBE utilization plan. Clarity will continue to utilize Highroad Press, LLC, a supplier of paper, a NYS MWBE certified vendor.



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

From: Steven Stein Cushman  
Chief Counsel, Legal

DocuSigned by:  
*Steven Stein Cushman*  
73B666F913A04A0...

Re: Vendor responsibility, EEO and MWBE status or Board review of contract

Vendor: Clarity Software Solutions, Inc.

Date: June 11, 2024

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

**Vendor Responsibility**  
Approved

**EEO**  
Approved

**MWBE**  
30% Utilization Plan

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.

# **MetroPlusHealth | Clarity Software Solutions**

## **Fulfillment and Distribution Services**

**NYC Health + Hospitals Board of Directors Meeting**  
**Thursday, June 27<sup>th</sup>, 2024**

**Dr. Mitchell Katz, NYC H+H CEO**

**Dr. Talya Schwartz, MetroPlusHealth CEO**

# FOR BOARD OF DIRECTORS CONSIDERATION

- Authorizing the Executive Director of MetroPlus Health Plan, Inc. (“MetroPlus or “the Plan”) to negotiate and execute a **best-interest extension of the current contract with Clarity Software Solutions, Inc. for fulfillment and distribution services** for a period of two years and 1 one-year renewal option, for an amount not to exceed \$31,500,000, which includes a 6% contingency, over the lifetime of the contract, effective August 8, 2024.

# BACKGROUND

- Clarity Software Solutions ("Clarity") provides fulfillment and distribution services: fulfilling ID cards, plan enrollment materials, correspondence, and other member mailings on behalf of MetroPlusHealth.
- Clarity is integrated with MetroPlusHealth's customer relationship management system, member/provider portals and data warehouse.
- In 2023 the Plan sent out approximately 9.3 million pieces of mail
  - Approximately 5.5 million ID cards, member welcome kits, and letters were printed and mailed by Clarity through MetroPlusHealth's direct contract.
  - Approximately 3.8 million Explanation of Benefits, Explanation of Payments, and letters were printed and mailed by Clarity as a pass-through service to MetroPlusHealth from its SS&C contract.
  - Future fulfillment volume will be close to 13 million annually.
- MetroPlusHealth is currently undergoing a major core system transition, entailing the migration from SS&C legacy system to the new HealthEdge system platform.
- As an outcome of this migration, MetroPlusHealth will also inherit responsibility of the fulfillment services SS&C is currently fulfilling beginning in April 2025.



# BACKGROUND CON'T.

- The Plan originally entered in a contract with Clarity Software Solutions (“Clarity”) in August 2017 for three years with 2 one-year options for renewal.
  - The MetroPlusHealth Board approved the Clarity Resolution in June 2017 for an amount not to exceed \$14,500,000 for total of five (5) years.
  - At the time, the contract did not require approval of the NYC Health + Hospitals Board.
- In 2022, to conform and keep preparation intact for the upcoming electronic fulfillment mandate, ensure continuity of essential fulfillment and distribution, the Plan contracted with Clarity for an additional 2-year term.
  - Clarity demonstrated its ability to provide services effectively for the Plan.
  - The MetroPlusHealth Board and the NYC Health + Hospitals Board approved the Clarity Resolution in June 2022, for an amount not to exceed \$8,000,000, for two years.
- MetroPlusHealth plans to issue an RFP in 2025, to award a new contract and align with the completion of the system migration from the legacy platform to HealthEdge’s core admin and clinical platforms.

# BEST-INTEREST RATIONALE

## **Extending Clarity's contract is in the best interest of MetroPlus for the following reasons:**

- Due to the complexity of the Core system migration underway; a separate implementation to a new fulfillment vendor will require intense coordination and pose risks to the migration timeline, configuration and service delivery.
- Continuing our existing partnership with Clarity will mitigate any disruption of fulfillment services and ensure a seamless transition during the complex system migration from the legacy platform to HealthEdge's platform.
- The extension will yield cost savings associated with implementation. Clarity has agreed to waive ~\$400,000 in implementation fees.
- Clarity will maintain pricing at the same rates as the current contract. The additional funding required is due to the increased volume of notices being fulfilled.

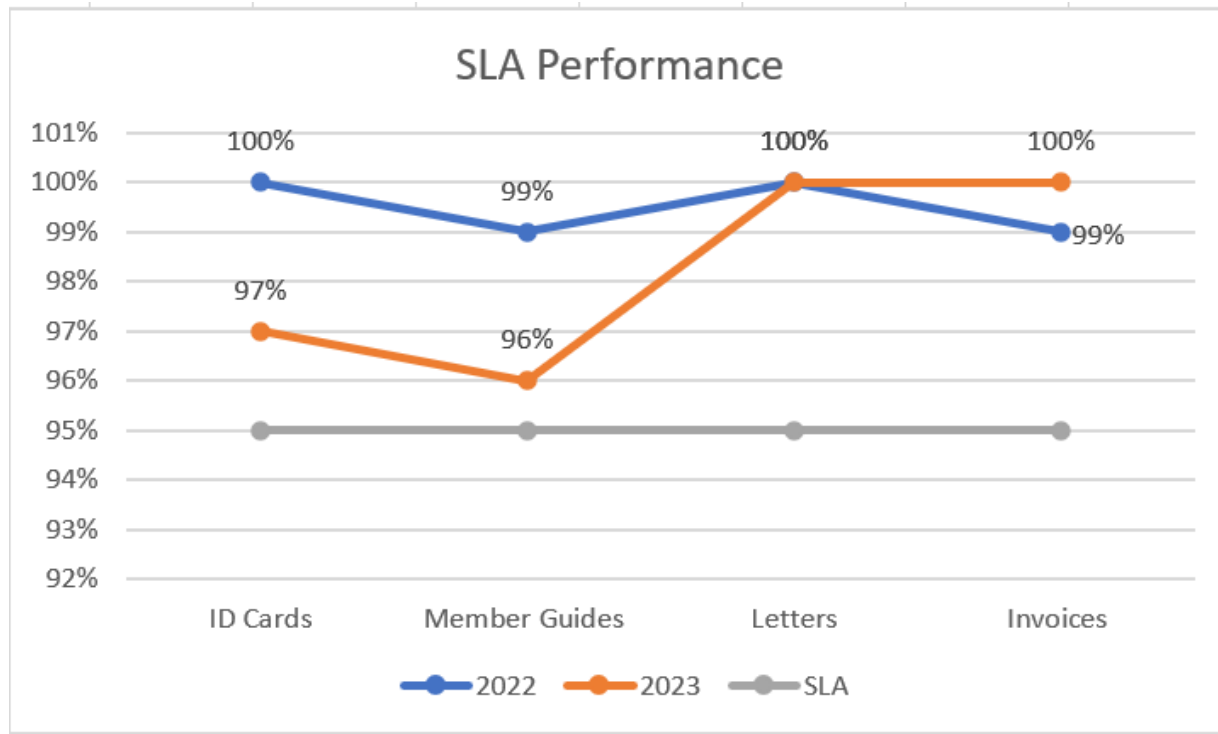
# SPENDING AUTHORITY REQUEST BREAKDOWN

	MPH Volumes	SS&C Volumes	Total (\$s)
Fulfillment Services (includes ID Cards, Member Kits, Letters, EOP, EOBs, and others)	5,467,000	7,510,000	\$9,872,600

<b>Contingency (%)</b>	<b>6%</b>
Total Annual Request	\$10,500,000
<b>Not to Exceed Amount Request</b>	<b>31,500,000</b>

- The spending authority request combines MetroPlusHealth and current third-party agreements to one contract for the full suite of fulfillment services.
- Pricing represents fair market pricing for on demand printing services and includes previous discounts received by MetroPlusHealth.
- Contingency is requested as part of the not to exceed amount to account for any regulatory requirements that may arise and require fulfillment and distribution of materials.

# CLARITY SLA PERFORMANCE



- Clarity continues to meet or exceed established 95% service level agreements for both turnaround time and production quality.

## CURRENT MWBE UTILIZATION PLAN

Vendor Name	MWBE Vendor	Subcontractor SOW	Certification	UP Goal %
Clarity Software Solutions	Highroad Press, LLC	Paper Supplier	NYS WBE	30%

- Clarity will continue to utilize Highroad Press, LLC to meet the full MWBE utilization goal.

- Authorizing the Executive Director of MetroPlus Health Plan, Inc. (“MetroPlus or “the Plan”) to negotiate and execute a **best-interest extension of the current contract with Clarity Software Solutions, Inc. for fulfillment and distribution services** for a period of two years and 1 one-year renewal option, for an amount not to exceed \$31,500,000, which includes a 6% contingency, over the lifetime of the contract, effective August 8, 2024.

