

BOARD OF DIRECTORS MEETING
THURSDAY, SEPTEMBER 26, 2024

A•G•E•N•D•A•

CALL TO ORDER - 2:00 PM

Mr. Pagán

1. Executive Session | Facility Governing Body Report

- NYC Health + Hospitals | Woodhull

2023 Performance Improvement Plan and Evaluation (Written Submission Only)

- NYC Health + Hospitals | Cumberland Diagnostic & Treatment Center - Gotham Center

Mr. Pagán

Semi-Annual Governing Body Report (Written Submission Only)

- NYC Health + Hospitals | Coler Rehabilitation and Skilled Nursing Facility
- NYC Health + Hospitals | Gouverneur Skilled Nursing Facility

2. OPEN PUBLIC SESSION - 3:00 PM

3. Report of the Executive Committee Meeting – July 25, 2024

Mr. Pagán

- Authorizing the New York City Health and Hospitals Corporation (the “System”) to execute agreements with each of the vendors: **Proprio LS, LLC, AMN Healthcare Language Services, Inc. (AMN), Birch Language Solutions LLC, Language Line Services, Inc. dba Language Line Solutions, Geneva Worldwide, Inc., American Sign Language Inc. (ALSI), SignTalk, LLC and ALTA Language Services, Inc. for the provision of Medical Interpretation Services** on behalf of the System for an initial period of three-years and two one-year renewal options, exercisable at the discretion of the System, for an amount not to exceed \$126,371,490 over the potential five-year term;
 - and modifying the prior Board resolution, resolved January 2019, which was for OPI services, by increasing the not-to-exceed amount from \$48,241,516 to \$53,000,000;
 - and authorizing previous spend for video-remote interpreting services with Language Line Solutions, Inc, Cyracom, LLC, and Stratus Video LLC d/b/a AMN Language Services, for the period of June 1, 2019 through May 30, 2024 in an amount not to exceed \$15,000,000.
 (Presented Directly to the Board: 07/25/2024)
Vendex: All Approved – except AMN Healthcare Language Services, Inc.
EEO: All Pending
- Authorizing New York City Health and Hospitals Corporation (the “System”) to sign a 1-year extension lease with **Elmhurst Associates, Inc. (“Owner”)** for approximately 5,304 sq. ft. in the 1st floor and basement of the property known as 78-05, 41st Avenue, Elmhurst, NY (the “Premises”) which currently houses administrative staff of NYC Health + Hospitals/Elmhurst (the “Facility”) at a rental rate of \$53.95 /sq. ft for a yearly rent of \$286,151
 (Presented to the Capital Committee: 07/01/2024)
Vendex: NA / EEO: NA
- Authorizing the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to execute a contract with **Sweet Group of New York LLC (the “Contractor”), to undertake a decanting of NYC Health + Hospitals/North Central Bronx Hospital as part of Correctional Health Services (“CHS”) Outposted Therapeutic Housing Units (“OTxHU”),** for a contract amount of \$12,069,614, with a 10% project contingency of \$1,206,961, to bring the total cost not to exceed \$13,276,575.
 (Presented to the Capital Committee: 07/01/2024)
Vendex: Approved / EEO: Approved
- Authorizing the New York City Health and Hospitals Corporation (the “System”) to execute agreements with each of the vendors: **Proprio LS, LLC, AMN Healthcare Language Services, Inc. (AMN), Birch Language Solutions LLC, Language Line Services, Inc. dba Language Line Solutions, Geneva Worldwide, Inc., American Sign Language Inc. (ALSI), SignTalk, LLC and ALTA Language Services, Inc. for the provision of Medical Interpretation Services** on behalf of the System for an initial period of three-years and two one-year renewal options, exercisable at the discretion of the System, for an amount not to exceed \$126,371,490 over the potential five-year term;
 - and modifying the prior Board resolution, resolved January 2019, which was for OPI services, by increasing the not-to-exceed amount from \$48,241,516 to \$53,000,000;
 - and authorizing previous spend for video-remote interpreting services with Language Line Solutions, Inc,

Cyracom, LLC, and Stratus Video LLC d/b/a AMN Language Services, for the period of June 1, 2019 through May 30, 2024 in an amount not to exceed \$15,000,000.

(Presented Directly to the Board: 07/25/2024)

Vendex: All Approved – except AMN Healthcare Language Services, Inc.

EEO: All Pending

- Authorizing New York City Health and Hospitals Corporation (the “System”) to sign a 1-year extension lease with **Elmhurst Associates, Inc. (“Owner”)** for approximately 5,304 sq. ft. in the 1st floor and basement of the property known as 78-05, 41st Avenue, Elmhurst, NY (the “Premises”) which currently houses administrative staff of NYC Health + Hospitals/Elmhurst (the “Facility”) at a rental rate of \$53.95 /sq. ft for a yearly rent of \$286,151
(Presented to the Capital Committee: 07/01/2024)
Vendex: NA / EEO: NA
- Authorizing the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to execute a contract with **Sweet Group of New York LLC (the “Contractor”), to undertake a decanting of NYC Health + Hospitals/North Central Bronx Hospital as part of Correctional Health Services (“CHS”) Outposted Therapeutic Housing Units (“OTxHU”),** for a contract amount of \$12,069,614, with a 10% project contingency of \$1,206,961, to bring the total cost not to exceed \$13,276,575.
(Presented to the Capital Committee: 07/01/2024)
Vendex: Approved / EEO: Approved
- Authorizing New York City Health and Hospitals Corporation (the “NYC Health + Hospitals”) to execute a design-build contract with **LF Driscoll Healthcare, (the “Contractor”) to undertake a renovation of the Women’s Health Labor and Birthing Center at New York City Health + Hospitals/Kings County Hospital** for a contract amount of \$38,630,954, with a 10% project contingency of \$3,863,095, to bring the total cost not to exceed \$42,494,049
(Presented to the Capital Committee: 07/01/2024)
Vendex: Approved / EEO: Pending
- Authorizing the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to execute a contract with **C.D.E. Air Conditioning Co Inc. (the “Contractor”), to undertake a boiler and Building Management System (BMS) upgrade project of NYC Health + Hospitals/North Central Bronx Hospital** for a contract amount of \$8,999,000, with a 15% project contingency of \$1,349,850, to bring the total cost not to exceed \$10,348,850
(Presented to the Capital Committee: 07/01/2024)
Vendex: Approved / EEO: Pending

4. **Adoption of the Executive Committee Meeting Minutes – July 25, 2024**

Mr. Pagán

5. **Chair’s Report**

Mr. Pagán

6. **President’s Report**

Dr. Katz

7. **Fiscal Year 2024 Annual Public Meetings Responses**

Ms. Brown

ACTION ITEMS

- 8. Adopting the attached Mission Statement, Performance Measures and additional information to be submitted on behalf of New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) for **Fiscal Year 2024 to Office of the State Comptroller’s Authorities Budget Office (the “ABO”)** as required by the Public Authorities Reform Act of 2009 (the “PARA”).
(Presented Directly to the Board: 09/26/2024)
Vendex: NA / EEO: NA

Mr. Pagán

<p>9. Authorizing the New York City Health and Hospitals Corporation (the “System”) to execute agreements with the 19 vendors listed in Exhibit A for the provision of Legal Services for false claims act investigations and claims, general health care law, human subject research, employment law, bond counsel services, employment related immigration and labor law on behalf of the System for an initial period of three-years and two one-year renewal options, exercisable at the discretion of the System, for an amount not to exceed \$51,300,000 over the potential five-year term. (Presented Directly to the Board: 09/26/2024) Vendex: All Approved / EEO: All pending except Abell Eskew Landau, Binder & Schwartz, Bryant Rabbino, Garfunken Wild, Harris Beach, Hawkins Delafield & Wood, Schoeman Updike & Kaufman, Whitman Osterman Hanna, Wilson Elser Moskowitz Edelman & Dicker</p>	<p>Ms. Wang</p>
<p>10. Authorizing the New York City Health and Hospitals Corporation (the “System”) to execute an agreement with Press Ganey Associates, LLC for the provision of Care Experience Surveys, including patient experience, employee engagement, nursing excellence, and healthcare consumerism, on behalf of the System for an initial period of three-years and two one-year renewal options, exercisable at the discretion of the System, for an amount not to exceed \$12,380,433 over the potential five-year term. (Presented to the Medical and Professional Affairs / Information Technology Committee: 09/09/2024) Vendex: Approved / EEO: Pending</p>	<p>Dr. Calamia</p>
<p>11. Authorizing New York City Health and Hospitals Corporation (the “System”) to sign a five-year renewal revocable license agreement with Lori’s Gifts, Inc., (“Lori’s”) for its use of approximately 884 square feet to operate a gift shop on the main floor of the “F Link Building” at NYC Health + Hospitals/Bellevue (the “Facility”) at an annual occupancy fee of \$96,000 or 10% of gross sales, whichever is higher to escalate at 2.75% each year for a five-year total of at least \$507,136. (Presented to the Capital Committee: 09/09/2024) Vendex: NA / EEO: NA</p>	<p>Mr. Pagán</p>
<p>12. Authorizing New York City Health and Hospitals Corporation (the “System”) to sign a five-year revocable license agreement with Fresh On the Go (“FOTG”) for its use of approximately 500 square feet to operate a food service on the 1st floor of the Main Hospital at NYC Health + Hospitals/Queens (the “Facility”) at an annual occupancy fee of \$27,600 based on \$55.20/SF. to escalate at 2.75% each year for a five-year total of \$145,802. (Presented to the Capital Committee: 09/09/2024) Vendex: NA / EEO: NA</p>	<p>Mr. Pagán</p>
<p>13. Authorizing New York City Health and Hospitals Corporation (the “System”) to execute requirements contracts with ten architectural and engineering (“AE”) consulting firms (Gensler Architecture, Design & Planning, P.C., LiRo Engineers, Inc., Perkins Eastman Architects, DPC, Moody Nolan Inc., NK Architects, P.A., Lothrop Associate Architects D.P.C., Studio A+T Architects P.C., SBLM Architects P.C., Array Architects, PC., and STV Incorporated) to provide professional AE design services over a term of three years with two 1-year renewal options for an amount not to exceed \$70,000,000. (Presented to the Capital Committee: 09/09/2024) Vendex: All Approved except Moody Nolan, Inc. and Studio A+T Architects P.C. EEO: All Pending except Perkins Eastman Architects, DPC, NK Architects P.A., Array Architects, PC and STV Incorporated</p>	<p>Mr. Pagán</p>
<p>14. Authorizing New York City Health and Hospitals Corporation (the “System”) to execute requirements contracts with six MWBE architectural and engineering (“AE”) consulting firms (Moody Nolan Inc., Twine Architectural Studio, P.C., Matiz Architecture PLLC, Zambrano Architectural Design, LLC, Sabir, Richardson & Weisberg Engineering & Architecture PLLC, and Foit-Albert Associates, Architecture, Engineering & Surveying, P.C.) provide professional AE design services over a term of three years with two 1-year renewal options for an amount not to exceed \$20,000,000. (Presented to the Capital Committee: 09/09/2024) Vendex: All Approved except Moody Nolan, Inc. and Twine Architectural Studio, P.C. EEO: All Pending</p>	<p>Mr. Pagán</p>

15. Authorizing New York City Health and Hospitals Corporation (the “System”) to execute requirements contracts with **six mechanical, electrical, and plumbing (“MEP”) consulting firms (Cameron Engineering & Associates, LLP, Tetra Tech Engineers, Architects & Landscape Architects, P.C., Thornton Tomasetti, Inc., MG Engineering D.P.C., Lizardos Engineering Associates D.P.C., and Loring Consulting Engineers, Inc) to provide professional MEP design services** over a term of three years with two 1-year renewal options for an amount not to exceed \$25,000,000.

Mr. Pagán

(Presented to the Capital Committee: 09/09/2024)

Vendex: All Pending except Thornton Tomasetti, Inc, Cameron Engineering & Associates, LLP and MG Engineering D.P.C.

EEO: All Pending Except MG Engineering D.P.C., and Loring Consulting Engineers, Inc.

16. Authorizing New York City Health and Hospitals Corporation (the “System”) to execute requirements contracts with **three MWBE mechanical, electrical, and plumbing (“MEP”) consulting firms (Milhouse Engineering and Construction, Inc., Shenoy Engineering, PC, and Jacob Feinberg Katz & Michaeli Consulting Group, LLC) to provide professional MEP design services** over a term of three years with two 1-year renewal options for an amount not to exceed \$5,000,000.

Mr. Pagán

(Presented to the Capital Committee: 09/09/2024)

Vendex: All Approved / EEO: All Pending

17. Authorizing the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to execute a contract with **Ark Systems Electrical Corp. (the “Contractor”), to undertake a generator upgrade project of NYC Health + Hospitals/Woodhull Medical Center** for a contract amount of \$11,970,000, with a 15% project contingency of \$1,795,500, to bring the total cost not to exceed \$13,765,500

Mr. Pagán

(Presented to the Capital Committee: 09/09/2024)

Vendex: Approved / EEO: Approved

18. Authorizing the 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 construct two operating rooms at NYC Health + Hospitals/Kings County Hospital Center** for a contract amount of \$5,835,252, with a 10% project contingency of \$583,525, to bring the total cost not to exceed \$6,418,777

Mr. Pagán

(Presented to the Capital Committee: 09/09/2024)

Vendex: Pending / EEO: Approved

COMMITTEE AND SUBSIDIARY REPORTS

- Medical & Professional Affairs/Information Technology Committee
- Capital Committee
- Equity Diversity and Inclusion Committee
- Community Relations Committee
- MetroPlus Health (Subsidiary)

Dr. Calamia
Mr. Pagán
Dr. Marthone
Ms. Rowe-Adams
Ms. Hernandez-
Piñero

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

Mr. Pagán

NEW YORK CITY HEALTH AND HOSPITALS CORPORATION

A meeting of the **Executive Committee 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 **25th day of July, 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:

Dr. Mitchell Katz
Ms. Freda Wang
Ms. Anne Williams-Isom - Left at 3:00 p.m.
Ms. Erin Kelly - Joined at 3:00 p.m.
Ms. Molly Wasow Park - Left at 3:00 p.m.
Ms. Karen St. Hilaire - Joined at 3:00 p.m.
Dr. H. Jean Wright II
Ms. Anita Kawatra - Joined at 3:00 p.m.
Ms. Sally Hernandez-Piñero
Dr. Shadi Chamany

Dr. Mitchell Katz, CEO and President, called the meeting to order at 2:03 p.m. Dr. Katz chaired the meeting and Colicia Hercules, Corporate Secretary, kept the minutes thereof.

Dr. Katz noted that Dr. Shadi Chamany is representing Dr. Ashwin Vasan 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.

OPEN SESSION

The Executive Committee reconvened in public session at 3:03 p.m.

Dr. Katz noted that Erin Kelly is representing Deputy Mayor Anne Williams-Isom, Karen St. Hilaire is representing Molly Wasow-Park and Dr. Shadi Chamany is representing Dr. Ashwin Vasan - all in a voting capacity.

ACTION ITEM 3 - ADOPTION OF MINUTES

The minutes of the Board of Directors meeting held on June 27, 2024 were presented to the Executive Committee for adoption. Then on motion duly made and seconded, the Executive Committee unanimously adopted the minutes.

RESOLVED, that the minutes of the meeting of the Board of Directors held on June 27, 2024 copies of which have been presented to the Executive Committee be, and hereby are, adopted.

ITEM 4 - CHAIR'S REPORT

Dr. Katz advised that during the Executive Session, the Executive Committee received and approved the governing body oral and written reports from NYC Health + Hospitals| Metropolitan.

The Executive Committee received and approved the written submission of the NYC Health + Hospitals| Segundo Ruiz Belvis Gotham Center 2023 Performance Improvement Plan and Evaluation.

The Executive Committee also received and approved the written submission of the NYC Health + Hospitals| Woodhull and NYC Health + Hospitals| Bellevue semi-annual governing body report.

ACKNOWLEDGEMENTS

Dr. Katz along with members of the Board welcomed Dr. Wright, Executive Deputy Commissioner of the Division of Mental Hygiene at the NYC Department of Health, to the NYC Health + Hospitals Board of Directors.

Dr. Katz thanked Dr. Marthone and Ms. Rowe-Adams for attending the Marjorie Matthews Volunteer recognition event.

Dr. Katz also thanked Ms. Wang, Ms. Hernandez-Piñero and Dr. Marthone for visiting the Roosevelt Hotel and a SHOW van. Ms. Hernandez-Piñero shared highlights from their visit at both sites.

Dr. Katz and other members noted the importance of the immunization process at the Arrival Center in preventing a measles epidemic and containment of other communicable diseases.

VENDEX APPROVALS

Dr. Katz noted there are eleven items on the agenda requiring Vendex approval, of which nine have that approval. There is one item from previous Board meetings pending Vendex approval. No approvals have been received since the Board last met.

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

ACTION ITEM 6:

Ms. Wang read the resolution

Authorizing the New York City Health and Hospitals Corporation (the "System") to execute agreements with each of the vendors: **Proprio LS, LLC, AMN Healthcare Language Services, Inc. (AMN), Birch Language Solutions LLC, Language Line Services, Inc. dba Language Line Solutions, Geneva Worldwide, Inc., American Sign Language Inc. (ALSI), SignTalk, LLC and ALTA Language Services, Inc. for the provision of Medical Interpretation Services** on behalf of the System for an initial period of three-years and two one-year renewal options, exercisable at the discretion of the System, for an amount not to exceed \$126,371,490 over the potential five-year term;

and modifying the prior Board resolution, resolved January 2019, which was for OPI services, by increasing the not-to-exceed amount from \$48,241,516 to \$53,000,000;

and authorizing previous spend for video-remote interpreting services with Language Line Solutions, Inc, Cyracom, LLC, and Stratus Video LLC d/b/a AMN Language Services, for the period of June 1, 2019 through May 30, 2024 in an amount not to exceed \$15,000,000.

(Presented Directly to the Executive Committee: 07/25/2024)

Ivelesse Mendez-Justiniano, Chief Diversity, Equity & Inclusion Officer, provided background information regarding the language services regulatory requirements, current services being provided and the fiscal analysis of the utilization of interpretation services. The projected growth is multi-factorial and the System expects the demand for interpretation, in its different forms, and utilization to continue to increase over time. Ms. Mendez-Justiniano described the methods to offset the overall cost of these services and new contract efficiencies. Ms. Mendez-Justiniano also provided an overview of the RFP criteria, procurement process, vendor performance and vendor diversity analysis.

Dr. Katz added that the System encourages the utilization of interpretation services during the provision of medical services. The demand for languages other than Spanish as well as different forms of interpretation services has exponentially grown.

Follow Up: Ms. Mendez-Justiniano committed to come back and report to the Board in a year to better capture the growth and cost of the interpretation services and better understand whether the System is at a new threshold. The team will return to the Board for an increase to the not-to-exceed amount if there are major year over year increases in the utilization of services.

After questions from the members, Ms. Mendez-Justiniano explained the new contract terms: the cost for video-remote interpretation (VRI) will not exceed that of the over-the-phone interpretation, and there will not be additional costs for the equipment to provide video remote interpretation services, which was the case in the previous contract.

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

ACTION ITEM 7:

Ms. Wang read the resolution

Authorizing New York City Health and Hospitals Corporation (the "System") **to sign a 1-year extension lease with Elmhurst Associates, Inc. ("Owner") for approximately 5,304 sq. ft. in the 1st floor and basement of the property known as 78-05, 41st Avenue, Elmhurst, NY (the "Premises") which currently houses administrative staff of NYC Health + Hospitals/Elmhurst** (the "Facility") at a rental rate of \$53.95 /sq. ft for a yearly rent of \$286,151

(Presented to the Capital Committee: 07/01/2024)

Milenko Milinic, Chief Operating Officer, NYC Health + Hospitals/Elmhurst was joined by Deborah Morris, Senior Director Real Estate & Housing. Mr. Milinic provided background information on the historical utilization of the multi-functional space and the transition to new office space on Queens Boulevard, which was previously approved by the Board in 2022. Ms. Morris provided an overview of the lease terms.

Hearing no questions or comments, upon motion duly made and seconded, the Executive Committee unanimously approved the resolution.

ACTION ITEM 8:

Ms. Wang read the resolution

Authorizing the New York City Health and Hospitals Corporation ("NYC Health + Hospitals") to execute a contract with **Sweet Group of New York LLC (the "Contractor")**, to undertake a decanting of NYC Health + Hospitals/North Central Bronx Hospital as part of Correctional Health Services ("CHS") Outposted Therapeutic Housing Units ("OTxHU"), for a contract amount of \$12,069,614, with a 10% project contingency of \$1,206,961, to bring the total cost not to exceed \$13,276,575. (Presented to the Capital Committee: 07/01/2024)

Manuel Saez, Vice President, Office of Facilities Development, provided a historical background on the Outposted Therapeutic Housing Units (OTxHU) program and construction at NYC Health + Hospitals/ Woodhull and North Central Bronx ("NCB"). Oscar Gonzalez, Senior Assistant Vice President, Office of Facilities Development, provided an overview of the renovations and the relocation of the work at NCB, a rendering of the current and future state and the procurement process. He also explained the contract details, including MWBE utilization plan, vendor performance evaluation, the project budget and funding source were also discussed.

In response to questions from the members, Mr. Gonzalez, explained that the timeline for Phase One is expected to begin Fall of 2024 and be completed by Spring 2025. The timeline for Phases Two and Three is yet to be determined. Ms. Yang added that the OTxHU full program is expected to be completed by end of 2027, contingent upon final design. NYC Health + Hospitals/Bellevue is expected to open by Spring of 2025.

Ms. Wang asked for confirmation of the scope of this contract. Mr. Gonzalez explained that the renovation is part of Phase One, which is renovation of the floors to which the staff and services currently occupying the future OTxHU space will be relocated.

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

ACTION ITEM 9

Ms. Wang read the resolution

Authorizing New York City Health and Hospitals Corporation (the "NYC Health + Hospitals") to execute a design-build contract with **LF Driscoll Healthcare, (the "Contractor") to undertake a renovation of the Women's Health Labor and Birthing Center at New York City Health + Hospitals/Kings County Hospital** for a contract amount of \$38,630,954, with a 10% project contingency of \$3,863,095, to bring the total cost not to exceed \$42,494,049

(Presented to the Capital Committee: 07/01/2024)

Mr. Saez provided background information and a description of the current state of the Labor and Delivery Department along with the number of births from 2019-2023. Mr. Gonzalez explained that the proposed future state will enhance the delivery and quality of services and improve workflow. Mr. Gonzalez gave an overview of the RFQ and RFP criteria explaining the design-build requirement for a two-step selection process, the procurement process, contract terms, MWBE utilization and corresponding contract budget. Mr. Gonzalez explained that the design build proposed final price and scope is still being negotiated with the vendor and clarified that the proposed amount will be a not-to-exceed value. Brooklyn Borough President Antonio Reynoso was acknowledged for his generous contributions towards this project.

In response to questions from the members, Mr. Gonzalez explained that the goals of the project are to modernize, improve efficiencies, quality of service and overall patient satisfaction.

The Committee asked for clarification of the cost of the contract. Mr. Gonzalez clarified that the contract is not a guaranteed maximum price but a lump sum contract. The final negotiated price will be either the full value of the not-to-exceed amount or less.

In response to further questions, Mr. Gonzalez explained that over the past few years since the design build legislation passed in 2019, the team has been working on implementing a design build program although the System has already used the design build contract structure for several for infrastructure projects. The team is also looking to expand clinical design build, which can potentially provide cost savings.

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

ACTION ITEM 10

Ms. Wang read the resolution

Authorizing the New York City Health and Hospitals Corporation ("NYC Health + Hospitals") to execute a contract with **C.D.E. Air Conditioning Co Inc. (the "Contractor")**, to undertake a boiler and Building Management System (BMS) upgrade project of NYC Health + Hospitals/North Central Bronx Hospital for a contract amount of \$8,999,000, with a 15% project contingency of \$1,349,850, to bring the total cost not to exceed \$10,348,850

(Presented to the Capital Committee: 07/01/2024)

Mr. Saez provided historical background on the existing boilers and the need for upgrades. Ms. Hiba Hadeed, Director, Office of Facilities Development, provided an overview of the scope of work and timeline for the expected completion of the upgrade. Ms. Hadeed gave an outline of the procurement process and details of the contract including the MWBE utilization plan and the project budget. The contingency of the project was noted to be 15 percent due to the likelihood of unexpected costs associated with the aging infrastructure and equipment.

Hearing no questions or comments upon motion duly made and seconded, the Executive Committee unanimously approved the resolution.

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

Dr. Katz noted that while not included in the report, there was a disruption in the cooling system at NYC Health + Hospitals/Bellevue. As a result, some areas of the hospital were too warm to function and elective surgical procedures were suspended although there was no major impacts to essential care to report. Immediate interventions were implemented to minimize disruption of services.

Mr. Saez reported that, as of moments prior, the cooling system was again made fully operational. The team will continue to test all areas to ensure all remains operational.

NYC HEALTH + HOSPITALS' FACILITIES PROMOTE THEIR FARMERS MARKETS

NYC Health + Hospitals' farmers markets were launched in June at several of the System's facilities, and employees and community members have been taking full advantage of them.

**U.S. NEWS & WORLD REPORT "BEST HOSPITALS 2024-2025" LIST
INCLUDES ALL NYC HEALTH + HOSPITALS' HOSPITALS**

NYC Health + Hospitals were named by U.S. News & World Report to its 2024-2025 'Best Hospitals' list. The hospitals were selected from nearly 5,000 eligible hospitals across 15 specialties and 20 procedures and conditions.

**MAYOR ADAMS ENHANCES LGBTQ+ SERVICES AT NYC HEALTH + HOSPITALS/GOTHAM HEALTH,
JUDSON**

Mayor Eric Adams announced new investments in the Pride Health Center at NYC Health + Hospitals/Gotham Health, Judson, one of seven Pride Health Centers in the System offering culturally-sensitive and comprehensive gender-affirming health care services to LGBTQ+ patients.

**HEALTH CARE SYSTEM'S SIM CENTER LAUNCHES OPIOID USE DISORDER BUPRENORPHINE
TRAINING PROGRAM**

NYC Health + Hospitals' Office of Behavioral Health and The Institute for Medical Simulation and Advanced Learning collaborated to deliver a simulation training program focused on bedside conversations in the Emergency Department addressing opiate use and the associated inherent bias. The program is unique in simulation as providers get to practice with actors staging various degrees of withdrawal, challenging them to consider the appropriate medicine treatment.

**HEALTH CARE SYSTEM IS A NEW 2024 WELLBEING CHAMPION FOR REDUCING STIGMA
AROUND PHYSICIAN MENTAL HEALTH**

NYC Health + Hospitals was recognized as a 2024 WellBeing First Champion for its efforts to remove invasive mental health questions on physician credentialing applications.

**METROPLUS HEALTH HIV SPECIAL NEEDS PLAN (SNP) IS RANKED #1 FOR QUALITY FOR
2022**

MetroPlus Health's HIV Special Needs Plan ("SNP") achieved the top ranking in quality among SNPs for the year 2022. Achieving this recognition for two consecutive years speaks to their hard work and unwavering commitment.

NYC HEALTH + HOSPITALS/JACOBI CERTIFIED AS LEVEL II PEDIATRIC TRAUMA CENTER

NYC Health + Hospitals/Jacobi was recently certified as a Level II Pediatric Trauma Center. The certification, issued by the American College of Surgeons (ACS), means that patients under the age of 15 will receive the highest standards of treatment when it comes to advanced trauma care.

BECKER'S HOSPITAL REVIEW RECOGNIZED FOUR NYC HEALTH + HOSPITALS LEADERS AS "COMMUNITY HOSPITAL CEOS TO KNOW" LIST FOR 2024

NYC Health + Hospitals/Metropolitan CEO Cristina Contreras, NYC Health + Hospitals/South Brooklyn Health CEO Svetlana Lipyanskaya, NYC Health + Hospitals/Carter CEO Floyd Long, and NYC Health + Hospitals/Lincoln CEO and System Chief Growth Officer Christopher Roker were recognized by Becker's Hospital Review as among the "Community Hospital CEOs to Know" list for 2024.

THREE NYC HEALTH + HOSPITALS LEADERS RECOGNIZED BECKER'S HOSPITAL REVIEW AS "PATIENT SAFETY EXPERTS TO KNOW"

The System announced that NYC Health + Hospitals/Jacobi and North Central Bronx Chief Quality Officer Komal Bajaj, MD, NYC Health + Hospitals/Metropolitan Patient Safety Officer Samrina Kahlon, MD, and NYC Health + Hospitals Senior Vice President and Chief Quality Officer Eric Wei, MD, are recognized by Becker's Hospital Review on the "90 Patient Safety Experts to Know" list for 2024.

NEW INTERVENTIONAL RADIOLOGY SUITE OPENS AT NYC HEALTH + HOSPITALS/WOODHULL

NYC Health + Hospitals/Woodhull announced the grand opening of its state-of-the-art interventional radiology suite marking a significant advancement in patient care and community health services.

CITY & STATE RECOGNIZED THREE BROOKLYN FACILITY CEOs ON ITS 2024 "BROOKLYN POWER 100" LIST

Three Brooklyn facility CEOs -- NYC Health + Hospitals/Woodhull CEO Gregory Calliste, NYC Health + Hospitals/South Brooklyn Health CEO Svetlana Lipyanskaya, MPA, and NYC Health + Hospitals/Kings County CEO Sheldon McLeod -- were recognized by City & State New York in their "Brooklyn Power 100" list for 2024.

NYC HEALTH + HOSPITALS/GOTHAM HEALTH OPENS WELLNESS ROOM AT GOTHAM HEALTH, CUMBERLAND

A new wellness room opened at NYC Health + Hospitals/Gotham Health, Cumberland. It is the first of four new wellness rooms to be established at various Gotham Health sites.

NYC HEALTH + HOSPITALS/NORTH CENTRAL BRONX UNVEILS NEW COMMUNITY MURAL

NYC Health + Hospitals unveiled a new mural as part of the Community Mural Project run by the System's Arts in Medicine Department.

RESPONDING TO THE HUMANITARIAN CRISIS - SERVICES FOR ASYLUM SEEKERS

The System continues to accommodate approximately 25,000 individuals across the 13 humanitarian centers and oversee the City's Arrival Center. Since the facility was established in May 2023, the Arrival Center has aided over 160,000 new arrivals from over 160 countries. The System provides all new arrivals screening for communicable diseases and has provided over 130,000 vaccinations at the City's Arrival Center, humanitarian centers, and the System's facilities.

EXTERNAL AFFAIRS UPDATE

City: The New York City Fiscal Year 2025 Budget was adopted on June 30, 2024. NYC Health + Hospitals is grateful for the support from Borough Presidents and Council Members.

State: Of the 804 bills that passed both Houses of the New York State (NYS) Legislature, only 204 have been acted upon by the Governor thus far. No bills have been vetoed thus far.

Federal: Congress continues to debate appropriations bills for Fiscal Year 2025, prior to the end of the fiscal year on September 30th, 2024. Included in these conversations are Congressionally-Directed Spending ("earmark requests"), for which NYC Health + Hospitals has applied. Prior to the end of 2024, Congress also has to address a few expiring provisions, including those that allow expanded use of telehealth and continuing the delay of the Medicaid DSH cuts.

Community Affairs: CABs and Auxiliaries were honored on July 18, 2024, at the 20th Annual Marjorie Matthews celebration hosted at NYC Health + Hospitals/Coler. Over 250 CAB and Auxiliary members from across the System attended.

COMMITTEE REPORTS

Dr. Katz noted that the Committee reports were e-mailed for review and were submitted into the record. He welcomed questions or comments regarding the reports.

OLD BUSINESS/NEW BUSINESS

ADJOURNMENT

Hearing no old business or new business to bring before the New York City Health and Hospitals Corporation Executive Committee, the meeting was adjourned at 4:03 P.M.



Colicia Hercules
Corporate Secretary

COMMITTEE REPORT

Finance Committee Meeting - July 1, 2024

As Reported By: Freda Wang

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

NYC Health + Hospitals Employees in Attendance:

Michline Farag, Salema Tyler, Robert Melican, John Ulberg, James Cassidy, Megan Meagher, 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 11:05 a.m.

Ms. Wang called for a motion to approve the May 6, 2024 minutes of the Finance Committee meeting.

Upon motion made and duly seconded the minutes of the Finance Committee meeting held on May 6, 2024 were adopted.

FINANCIAL UPDATE

Mr. Ulberg opened the presentation with the FY-24 YTD Highlights. He conveyed that May closed with \$616M (22 days cash-on-hand). The budget underperformed by -0.4% and closed YTD April with a negative Net Budget Variance of -\$62.2M.

Mr. Ulberg continued that direct patient care receipts came in \$109.8M higher than the same period in FY-23 due to continued increases in IP and OP services in FY-24, UPL Conversion, and Medicaid rate increases - despite delayed cash performance due to Change Health Care (CHC) billing issues. Patient care revenue is recovering and expected to be back to budget by Fiscal Year-End.

Ms. Wang commented that the receipts number would be higher if the Change Health Care disruption had not happened. Mr. Ulberg agreed and continued.

IP Patient care volume in FY-24 has surpassed pre-COVID levels with IP discharges up by 1.7%, and OP visits up by 10.6%. Revenue base remains strong and resilient primarily driven by returning volume and higher average collectability rate over the base. Overall, our strategic financial initiatives have generated \$834.7M against an annual target of \$1.08B through March. 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. H+H also received \$26.8M in Behavioral Health Centers of Excellence funds against an award amount of \$41M. The System is investing in all areas of its Quality Improvement Plan that focuses on high-risk populations and high utilizers.

Mr. Ulberg presented the cash projections for FY-24. The System is estimated to close June with approximately \$600 million (21 days cash-on-hand) and expects to close July with approximately \$450 million (16 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 360 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.

City and State budgets currently presents a low risk to H+H. The City's Adopted Budget process is underway ahead of the start of the new fiscal year on July 1st. We do not expect major impacts in this plan. Moreover, H+H initial assessment of the SFY24-25 Enacted Budget is net neutral. H+H continues to track the implementation of the budget provisions.

Mr. Cassidy added that the City's Budget was Adopted by the Council on Sunday, June 30th.

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 expedited a planned connection to Experian for all clearinghouse functions. H+H continues to work with Health Plans on ongoing operational issues caused by the disruption.

Ms. Tyler presented the financial performance highlights for FY-24 thru April Net Budget Variance. She noted that April ended with a net budget variance of -\$62.2M (-0.4%). Receipts exceeded budget by \$268M primarily driven by Patient Care and Risk Revenue. Risk is higher due to improved PMPM and other

PY reconciliations. Patient billing revenue is behind target by 3% due to the impact of CHC. Disbursement exceeded budget by \$310M, which includes expenses associated with Temp coverage, Affiliation, Personnel Services including Overtime costs, and other increased patient care costs.

Mr. Wang noted there was a typo in the presentation stating ended in March, instead of ended in April as presented. The team agreed that the financial performance highlights for FY-24 thru April should be corrected to state ended in April.

Ms. Tyler provided the FY-24 thru April performance drivers updates. Cash receipts are 3% ahead of budget. Much of the overage can be attributed to Risk revenue exceeding target due to higher than anticipated PMPM and PY reconciliations.

Ms. Wang inquired regarding the supplemental payments. Once H+H gets the UPL conversion done, will there still be normal UPL.

Mr. Ulberg responded that our goal is to take the UPL dollars that we get on a Fee-for-Service basis coming in as a lump sum, and embed into the rates. There is a State plan awaiting submission to CMS on that, but it is certainly part of our agenda to build those dollars into it. What makes this difficult is that we are still waiting on outstanding payment for FY-23, prior year dollars, for services provided in 2023 and we would like to get those dollars as we are providing the services.

Ms. Tyler continued presenting the FY-24 thru April performance drivers updates. FY-24 thru April, cash disbursements are over budget by 4% primarily resulting from Temp spending and Agency costs exceeding target and other increased patient care costs. The System has redirected its attention to full-time recruitment and retention of H+H and Affiliate patient care staff in alignment with established staffing models to support our clinical services and overall volume increases.

Ms. Hernandez-Piñero inquired regarding the affiliations. Are those additional revenue that we built in that the affiliates can earn, or is it overrun by the affiliates?

Mr. Ulberg responded that it is a great question and we have looked into that. We continue to work on the true cost of the additional sessional and affiliation spending. We factor in that as we are bringing in additional providers it will drive additional revenue. In some cases, for the affiliates, it drives additional revenue for them as well for the work that the physicians provided. The savings opportunity is that we pay the affiliate twice, this is the same situation we had with the nurses, we pay our affiliates twice what we believed is a reasonable salary. The savings is

substituting the affiliate contract which is very expensive for certain types of physicians to just having our own.

Dr. Katz clarified that the cost of sessional or locums is twice what the cost would be if we hired someone on our own. In terms of doctors, the only true H+H doctors are at Kings County and a few of the other hospitals. We also think of them as our own if we hire them thru the affiliate and they are full-time person. As oppose to our locum, we also do locums thru affiliate and we do sessional thru affiliate, but the most efficient from a cost point of view is permanent thru us or thru an affiliate.

Ms. Wang added it is permanent versus temporary.

Dr. Katz added that there is sort of three levels. There is permanent, sessional and locums, and you go higher. Sessional are generally our employees working additional hours and getting a better rate than regular. The locums are not ours and paid much higher, where the affiliates get into a contract with a locum to provide the additional services and those are the most expensive.

From a clinical staff perspective, there is always some bumpiness in going from nurse registry to nurse permanent positions. Sometimes it shows that we are a little overstaffed in the registry but what we think is the staffing plan is actually understaffed. It is not a 100% due to tracking of the registry is not as tight as tracking of actual people. A hospital may have said we need 97 nurses but it may turn out that the staffing plan was 92 nurses. Then we need to figure out which number is correct, we are always focused on clinical operations and we are trying to provide the correct number of nurses, we are not trying to save money or spend more money so we need to figure out if it is 92 or 97. Sometimes the lower number is right and sometimes the higher number is clinically right. Ultimately, having our own makes budgeting much clearer and more accurate, any time you go to registry is definitely different.

Ms. Farag added, that this is where the models are definitely helpful on the nursing side as it gives us a sense of what is the true clinical needs.

Dr. Katz continued adding that we are doing that now for physicians in a much deeper way than H+H has ever done. All physicians hiring has been by tradition, which means each hospital is a little different based on its tradition. One hospital may have always had one anesthesiologist on call, and other may have two anesthesiologists on call for no particular reason or science to tell why there are two or three anesthesiologists on call at night. We are trying to at least get to an agreement on how many patients equal the doctors just as we are doing on nursing so that there is less variability or at least we can explain the variability that there is.

Ms. Wang added if we can predict based on census.

Dr. Katz added that in an ideal world because of our clinical focus everything would be based on census. We have more patients therefore more doctors, more nurses and more revenue to pay for it. You have less patients then you go down. That was not the history 6 years ago as everything was fixed staffing to the nurse plan. This number of people was not all based on history, if census went up then people would be wildly understaffed and if census went down we lost a huge amount of money because people were not productive.

Ms. Wang asked how do we keep the right mix if we go into permanent staffing and away from registry.

Dr. Katz answered that we would watch the census. If the census goes up for instance Bellevue, our chief example where is running 200 censuses higher. There was a nursing plan but that nursing plan is certainly inaccurate, which was created several years ago and we need to keep updating it. Within the nursing plan there are ratios of these many patients leads to these many nurses. As they show our census is higher, then Finance can say you should be hiring X more nurses to deal with it.

Ms. Hernandez-Piñero added that there is going to be a lag. Dr. Katz agreed that there is a little bit of a lag.

Ms. Farag added that there is a percent in the model that allows for flexibility exactly of those things, for coverage, adds or vacancies. There is a percent of the model that includes temps and overtime to be able to step in quickly until they hire people or get them thru orientation. There is always a factor of turnover that we have to account for, a level of flexibility in the model.

Dr. Katz added that registry also has the additional issues that if the nurse does not come we do not pay and the nurse does not earn any money. Registry does not have sick leave, vacation or anything else as we are not the employer. We require 8 hours of nursing and if they do not provide we do not pay. Our staffing is not like that we as a System have generous vacation and sick leave, and that is all good but leads to people being on the schedule but not working. Periodically we receive complaints that we had six on schedule but there were not six who arrived. In a registry setting that does not happen.

Ms. Tyler added that we are also building the revenue budget out to align with those staffing budgets. The period we are picking up for those revenue assumptions is the same period we are picking up for the staffing model assumptions. As more staffing models are built in and we are hiring staff

outside of those models, our PS models will be more aligned with the actual activity.

The revenue performance for FY-24 thru April was presented by Ms. Tyler. FY-24 direct patient care revenue (IP and OP) is \$109.8M higher than FY-23 actuals. Year-over-year variances are understated due to Change Healthcare Billing issues. Patient revenue increases year-over-year can be attributed to approved State Medicaid increases, and Federal approved Billing UPL.

Mr. Melican provided an update on Medicaid Recertification results that remain in line with NYC Health + Hospitals Financial Plan 3/4ths of the way through. NYC H+H is currently averaging 78% for June 2023 through April 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. 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. Lastly, NYC H+H continued focus on helping patients recertify whenever possible.

Ms. Wang commented regarding the financial plan budget line assumptions of 76%, we are averaging 78% and our goal was 80%.

An overview of NYC Health + Hospitals continuing to make progress in recovering from Change HealthCare Cyberattack was presented by Mr. Melican. In terms of CHC Cash Impact to H+H, delayed claims lead to low cash collections in March and April with approximately \$200M behind in cumulative cash collections through April. Further, H+H cash backlog has been fully recovered by mid-May. However, work continues to fully recover cash owed. H+H pockets of claims require attention as Medicaid and other payers' appeals are delayed.

Ms. Wang asked if we can address those issues with our Experian contract.

Mr. Melican responded that we are moving to Experian and is a two-part problem in that. Some of these are coming in through Change Health Care and others are moving to Experian at the same time. Where is that remittance right now, is it being sent by the payor to Change Health Care or are we waiting on it through Experian. We have our tracker on who we are missing and where we think that is and that is what we are waiting on.

Ms. Wang asked if to the extent that those might get aged out, we have a good tracking in being able to recover any.

Mr. Melican responded that we have been working with Megan from Managed Care, communicating with our payors requesting the leniency on timely filing. The

biggest one being Medicaid and on June 17th they came out with a delay reason code, the code we append to our claim to say it was impacted by Change Health Care and they are giving us until August 30th. Other payors, Healthfirst in particular have been good with us and we were able to already send them a list of claims that were impacted and then we will track those receipts. We are working to what we call pockets of denials.

Mr. Ulberg added that we are following the guidance that was put out by the Department of Financial Services, they have asked plans and providers to work together to identify where you had a batch of claims that were hung up and we can track those and we keep communicating with those plans to say please help us and be patient with us because we are moving between two systems.

Ms. Wang asked if the only way to track them is just based on the date.

Mr. Melican responded that we have tagged everyone on the claims. We have a list of 420 thousand plus claims that we have tagged and we are running those claims to make sure we were paid on those or an adjudication as those remittances come in, so that is our pocket.

An update on H+H's operational recovery efforts was presented by Mr. Melican. Revenue Cycle is accelerating planned implementation of paperless billing - live since 02/28, and Change Healthcare ceased statement operations as new vendor identified and planned to go live on July 24th. Expedited planned July 1st implementation of Experian clearinghouse, and optimization is ongoing. H+H is live with eligibility and claims with the exception of dental claims which is planned to go live on 07/24. H+H has reconnected with Change Healthcare for most payers with the largest backlog from Medicaid, and expect to fully transition and go live with Experian by July 15th. The live dates for eligibility, and claims were noted. Revenue Cycle is currently working with facilities to address backlogs in eligibility and claims/denials follow-up due to delays in remits processing.

Dr. Katz commended the team regarding the newly added text messages notification for patients with the payment information, it is very clear and prompt.

Mr. Melican thanked Dr. Katz for his review.

Ms. Meagher provided an update on the VBP Quality Program performance. For Healthfirst average facility improvement by measure for CY-23 versus CY-22, all but 2 measures improved over CY-22. NYC H+H Facilities in top 10 of the Healthfirst's network for overall quality rating in both Medicaid and Medicare programs. NYC H+H incentive earnings increased by 57% in CY-23 with highest earnings to date at \$14.595M. NYC H+H increased earnings by 251% since 2020.

Dr. Katz added that Healthfirst is not our plan and we are not the dominant provider, and we are in the top 10. All the hospitals and all clinical practices in NY and we are 5 of the first 10 in Medicaid and 7 of 10 on the Medicare side. We sent an email to Pat noting that H+H is doing well on your modeling, how about helping us on the housing front as we have had great success with MetroPlusHealth with housing their clients, would you like to help us given our performance and she said she was happy to learn more. It is very objective, it is not us saying we are doing a good job, it is a plan that it is not ours and we are not the dominant providers saying we are doing a really good job on quality.

Ms. Meagher added that one thing to flag on the financial end is that the incentive earnings that we are going to be eligible for in future years may be compromised. Specifically, the State halved the quality pool in the Medicaid program, and there will be a point that we will not be able to exceed the dollar amount year over year because the pool of dollars will be compressed. We can still aim to have in that middle chart as many of our facilities in the top of the quality performance and still feel very proud of that.

Mr. Ulberg added that we would plead with the State and the legislation to restore those dollars. They are so valuable to us as our whole model is based on value-based payments. To the extent that we can earn our margin based on quality metrics is exactly how we planned to bill H+H and for them to cut the pool and they are cutting it year after year, it's a multi-year cut. It is only down to \$50-60M dollars and should be \$100M. It is the right way to spend government money is to let us compete on quality measures as it keeps a focus that you would otherwise lose if it is not there. It has our focus and we are performing pretty well.

Ms. Wang asked if the cut is on the Medicaid side.

Mr. Ulberg responded that it is on the Medicaid side but there is money being added on the Essential Plan, so they are trying to balance it out a little but those are two different populations. We would just ask if they can find the money to restore those pools.

Ms. Wang commended the team for their terrific work.

An overview of the CMS Final Rules issued in April 2024 was presented by Ms. Meagher. The Centers for Medicare and Medicaid Services (CMS) published consequential final rules for the 2025 Medicare Advantage Program and new access, finance and quality rules for the Medicaid and Child Health Plus programs effective July 2024. These Final Rules have an immense amount of details but there are several important impacts that NYC Health + Hospitals will be monitoring over the coming months and years. These include new

standards to enhance access and quality in Medicaid Managed Care and Child Health Plus value-based contracts. Changes to Medicaid State Directed Payments, and requirement for Medicaid Managed Care plans who also offer Dual Special Needs Plans (DSNPs) to coordinate all benefits for members.

Ms. Wang asked if these rules will take effect immediately.

Mr. Ulberg responded that these will take effect in 2027, so we have some time on most of these as they pushed out the dates. He continued stating that he applauds CMS on the rules. We are built to be a good partner with CMS to implement all aspects of the rules. The DSNP is a hard one, the State has been on it for a long time. It has a lot of people that are Fee for Service Medicaid and they are a tough group, they can be SSI, disabled, and we need to understand who they are, what services are they using. It does make sense to coordinate both the Medicaid and Medicare together at-risk relationship. It will require some changes and thoughtful thinking and partnership with providers and plans to get it done and from now to 2027 there is enough time to do this and we believe it will benefit the patients in the long run.

Ms. Wang asked if the Medicaid State Directed payments affects us.

Mr. Ulberg responded that it definitely does. We use the State Directed Payment process to do our UPL payments. CMS again has come up with very good approaches to allow us to perhaps even expand beyond using the UPL as a benchmark. They also have requirements on value and producing good outcomes and there also timeline associated with this that are also reasonable, so we have opportunity here for us and UPL has been fantastic in terms of keeping the financial plan in balance. We have some work to do on that and that will come sooner than 2027.

Ms. Farag presented an overview of the FY-25 Budget Development Planning - Phase III. NYC H+H continues strategizing and raising the bar in Managed Care and Revenue Cycle. Some areas of opportunity on Ambulatory Care OP Growth include provider template optimization and standardization, new patient access innovation, E-consult relaunch and primary care staffing model. Business plans and new cross-facility partnerships emphasis on enterprise radiology, OR efficiency and expansion, and oncology services, therapies and treatment. Continued work on developing physician workforce plan budgeting and recruitment investments and continue locum reduction glidepath. Lastly, other area of focus is managing increased demand including length of stay reduction investments, overtime management, infrastructure investments and temp agency continued glidepath.

Ms. Hernandez-Piñero inquired on the dental benefits not being able to reconnect on Change Health Care.

Mr. Melican responded that dental claims has been a problem and we just reconnected on the 26th. Change Health Care could not reconnect on dental, we connected with all managed care plans on the 25th and with Medicaid and it has been a struggle on the dental side and very difficult for us. We have a big AR and we will get those claims out and then come back to Experian. We will have a bit of a recovery on the dental side.

Ms. Wang commended the team for the update and great work managing all challenges in FY-24 and a good fiscal year end. Planning for FY-25.

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 to bring before this committee, the meeting adjourned at 11:50 A.M.

Capital Committee Meeting - July 1, 2024

As reported by: Freda Wang

Committee Members Present: Mitchell Katz, MD, Sally Hernandez-Piñero, Karen St. Hilaire

Ms. Freda Wang called the meeting to order at 12:13 p.m. and stated for the record that Karen St. Hilaire would be representing Molly Wasow Park in a voting capacity.

Ms. Wang called for a motion to approve the minutes of the June 10, 2024 Capital Committee meeting.

Upon motion made and duly seconded the minutes of the Capital Committee meeting held on June 10, 2024, were unanimously approved.

VICE PRESIDENT REPORT

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

Mr. Saez stated that all our FY-24 commitments have been finalized and we continue to review our planned commitments for FY-25 to ensure we are on track to meet our target.

This month we are bringing our final Maternal Health Project funded by the Brooklyn Borough President. I want to express again how grateful we are to BP Reynoso.

We just finished the second year with the ACE mentorship program. We had a great second group of high school students who were able to learn about the planning, design, budgeting, construction and sustainability elements of healthcare construction projects from Health + Hospitals point of view.

We completed our Climate Resiliency Plan, a significant milestone towards our commitment to ensure the resiliency of the health System's infrastructure in the face of climate change.

At NYC H+H/Harlem, we recently completed emergency work on the roof of Harlem's Central Sterile area after a leak. Our teams quickly responded to ensure there was no impact to service. Also, at Harlem, the Condenser Riser Project was recently completed.

At NYC H+H/South Brooklyn Health, the new Wellness room opened for staff use.

We have four items for the Committee this month, NYC H+H/NCB Decanting for the OTxHU project, NYC H+H/NCB Boilers, NYC H+H/Kings Maternal Health, and NYC H+H/Elmhurst Lease Agreement.

Ms. Wang asked if the Climate Resiliency Plan could be shared. Mr. Saez said yes.

Deborah Morris read the resolution into the record:

Authorizing New York City Health and Hospitals Corporation (the "System") to sign a 1-year extension lease with Elmhurst Associates, Inc. ("Owner") for approximately 5,304 sq. ft. in the 1st floor and basement of the property known as 78-05 41st Avenue, Elmhurst, NY (the "Premises") which currently houses administrative staff of NYC Health + Hospitals/Elmhurst (the "Facility") at a rental rate of \$53.95 /sq. ft for a yearly rent of \$286,151.

Ms. Morris was joined by Milenko Milinic, Chief Operating Officer, NYC H+H / Elmhurst. They presented summary information on services, anticipated services, logistics and lease terms.

- Ms. Hernandez-Piñero asked if there would be adequate space for the ACT program to function efficiently. Mr. Milinic said yes, after we relocate administrative functions.

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 the New York City Health and Hospitals Corporation ("NYC Health + Hospitals") to execute a contract with Sweet Group of New York LLC (the "Contractor"), to undertake a decanting of NYC Health + Hospitals/North Central Bronx Hospital as part of Correctional Health Services ("CHS") Outposted Therapeutic Housing Units ("OTxHU"), for a contract amount of \$12,069,614, with a 10% project contingency of \$1,206,961, to bring the total cost not to exceed \$13,276,575.

Mr. Saez was joined by Oscar Gonzalez, Senior Assistant Vice President, NYC H+H/Office of Facilities Development, who narrated a presentation providing background information, overview of project scope, solicitation process, contract terms, MWBE status, and project budget.

- Ms. Hernandez-Piñero said she was a bit confused on the movement and locations. Mr. Gonzalez explained that the project would essentially be renovating spaces so that they could accommodate the relocations. The renovations would be complete so the decanting could commence.
- Ms. Hernandez-Piñero asked what the square footage of the project would be. Mr. Gonzalez said he was unsure, and would get that information, but they did feel it was in alignment to the contract value. Mr. Saez added that it was a considerable amount of space.
- Ms. Wang asked if this was the beginning of the NCB OTXHU program. Mr. Gonzalez said yes, this would be a prerequisite to beginning the OTXHU work.
- Ms. Wang asked if this work was included in the Correctional Health Services budget. Mr. Gonzalez said yes.
- Patricia Yang, Senior Vice President, Correctional Health Services explained how the services would be shifted as the work was complete.
- Ms. Wang said the OTXHU work will not begin until this is complete. Ms. Yang said yes this is the first of a few phases at NCB. The team would then come back before the Committee prior to next steps. She noted that a benefit of this project was infrastructure work for the hospital and renovations to existing locations.
- Ms. Wang noted that the infrastructure work was a benefit. Ms. Yang agreed.

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 LF

Driscoll Healthcare, (the "Contractor") to undertake a renovation of the Women's Health Labor and Birthing Center at New York City Health + Hospitals/Kings County Hospital for a contract amount of \$38,630,954, with a 10% project contingency of \$3,863,095, to bring the total cost not to exceed \$42,494,049.

Mr. Saez was joined by Oscar Gonzalez, Senior Assistant Vice President, and Geoffrey Gorousingh, Director, NYC H+H/Office of Facilities Development, who narrated a presentation providing background information, overview of project scope, solicitation process, contract terms, MWBE status, and project budget.

- Ms. Hernandez-Piñero asked about the phasing. Mr. Gorousingh explained that the birthing centers would be completed first, the area would remain open and there would be no disruption to services as the construction was completed.
- Ms. Wang asked how long construction was anticipated to take. Mr. Gorousingh said 3-3.5 years. Ms. Wang asked, are you building in some cushion with the contract term of 5 years. Mr. Gonzalez responded yes but we anticipate completion in 3 years.
- Ms. Wang asked what the orange space in the diagram was. Mr. Gonzalez responded it was the roof, which they would be building above.
- Ms. Wang asked about the "CP Pending" note. Mr. Indar responded that the contract execution was running in parallel and the CP was anticipated to be approved shortly.
- Ms. Wang requested clarification that the contract cannot be executed without that CP approval. Mr. Indar said, correct.

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 the New York City Health and Hospitals Corporation ("NYC Health + Hospitals") to execute a contract with C.D.E. Air Conditioning Co Inc. (the "Contractor"), to undertake a boiler and BMS upgrade project of NYC Health + Hospitals/North Central Bronx Hospital for a contract amount of \$8,999,000, with a 15% project contingency of \$1,349,850, to bring the total cost not to exceed \$10,348,850.

Mr. Saez was joined by Oscar Gonzalez, Senior Assistant Vice President, and Hiba Hadeed, Director, NYC H+H/Office of Facilities Development, who narrated a presentation providing background information, overview of project scope, solicitation process, contract terms, MWBE status, and project budget.

- Ms. Hernandez-Piñero noted that there was a 15% contingency for this and asked about useful life for those that were being replaced versus upgrading. Ms. Hadeed explained that there was additional contingency to account for unforeseen conditions when the equipment was opened up. She noted that only one of the boilers was completely out of commission and that one was being replaced. The others would be refurbished. Dr. Katz explained that useful life does not mean we stop using it. He noted that the it could be difficult to obtain funding for unglamorous infrastructure work.

- Ms. Wang noted that we work magic behind the scenes that keep equipment operable. Mr. Saez agreed.

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 12:31 p.m.

AUDIT COMMITTEE MEETING - July 16, 2024

As Reported by: Sally Hernandez-Piñero

COMMITTEE MEMBERS PRESENT: Ms. Sally Hernandez-Piñero, Dr. Mitchell Katz and Ms. Freda Wang

The meeting was called to order by Ms. Sally Hernandez-Piñero, Committee Chair at 10:05am

Ms. Piñero requested a motion to adopt the minutes of the Audit Committee meeting held on May 6, 2024. A motion was made and seconded with all in favor to adopt the minutes.

Ms. Piñero proposed a motion to convene an executive session to discuss confidential and privileged matters.

The Committee reconvened in Open Session:

Ms. Piñero noted for the record that during the executive session - "The committee reviewed and approved the fiscal year 2025 Compliance Work Plan and fiscal year 2025 Internal Audit Plan".

Ms. Piñero next on the agenda will be a presentation of the 2024 Financial Audit Plan by Mr. David Guzman and Ms. Maria Tiso.

Mr. Guzman report that they have completed the onboarding process to have KPMG as our new independent auditors, which included the completion of KPMG's independent review and execution of the engagement letter.

Mr. Guzman then introduce Ms. Tiso, the lead Partner from KPMG.

Ms. Tiso stated her name and mentioned that she will be the lead audit partner on the account. She also provided her background and work history with KPMG for over 34 years. She mentioned that she has spent her entire career working on health systems and done multiple rotations on the audit of Health + Hospitals throughout her career. Ms. Tiso also mentioned that she wears different hats at KPMG, healthcare industry leader, and KPMG network of women, which is one of seven diversity group.

Ms. Tiso stated that her colleagues at the meeting are Camille Fremont, Supporting Partner and Ryan Santonacia, Managing Director. She also mentioned that all three of them have worked together for over 20 years and on the H+H account in different roles.

Presentation:

Ms. Tiso stated that slide 2 of the presentation outlined delivering a better audit experience. She mentioned that this is done in four ways with our number one priority been quality, which is to make sure that KPMG is addressing all the professional standards - government standards and accounting standards. The second way is to make sure that the team members have healthcare experience and government experience. The third way is to make sure that our audit is efficient and effective and that we, KPMG are productive. Another aspect, is to bring to management, the Board and the committee some industry insights from both the local and national perspective.

Ms. Tiso stated that she is planning to invite the National Healthcare Partner Ash Shehata at a later date to talk about the required communication and the audit. He will also talk about what he is seeing at other organizations.

Ms. Tiso stated that the next slide is the key themes such as the software tool that will be used for the audit documentation. She also mentioned that they will go through the audit scope, required communication, timing of the audit and audit plan.

Ms. Tiso mentioned that the next slide which outlines an audit aligned to management and pretty much discusses the audit software audit documentation tool called KPMG Clara, which encompasses data and analytics and helps to do the audit more efficiently. It can identify anomalies, whereas before KPMG used to pick a sample of 20, and if everything was right would move on. This

tool gives KPMG the capability to almost look at 100 percent of the population, also it allows a higher view of risk anomalies to see how KPMG can provide insights to the management team and for benchmarking.

The next slides outlined the audit quality. This entailed communicating with the team on an ongoing basis. If there is a new transaction, questions about accounting standards, last minute adjustments, they will make sure the team is plugged in to avoid any surprises.

This was followed by the deliverables of the audit. She mentioned that this is consistent with what was laid out in the RFP.

Ms. Tiso, discussed a snapshot of the client service team. Ms. Tiso herself, Camille and Ryan who will be the core audit team. They will be assisted by two senior managers Yimiao Chen and Chris Dominanni who will be working on the cost reports. There is also the MetroPlus team of Joceyln Denalsky and Eric Crossett who will be reporting to her. The team is also made up of subject matter professionals in the areas of retirement benefits and claims payables and tax principal Felicia Tucker. KPMG will also have a minority business enterprise that will assist with the audit, Avaloria.

Ms. Fremont noted as a reminder, KPMG would conduct the audit in accordance with standards generally accepted in the United States of America as well as government auditing standards. Throughout the audit they will get an understanding of internal controls over financial reporting to allow us to design audit procedures that are appropriate in the circumstances, but they will not be expressing an opinion on the effectiveness of internal controls over financial reporting. This is something you would more likely see in a SOX audit or a public company audit. On turning the page, KPMG uses professional judgment in determining materiality in the context of the audit.

Ms. Fremont stated that the next slide laid out the timeline for the audit. Mr. Guzman noted they have gone through onboarding and independence procedures, have reviewed predecessor audit work procedures and are here today to communicate the audit plan.

Mr. Santonacita stated that at the initial preliminary risk assessment, they have identified a significant risk of management override of controls. Management is in a unique position to perpetrate fraud because of its ability to manipulate accounting records. Although the risk of management override will vary from entity to entity, it is present in all entities nonetheless.

Dr. Katz mentioned the former chairman of medicine and chief medical Officer from Downstate Medical Center that was charged with using a business card for nearly \$1.5 million in personal purchases and cash advances. This is exactly the sorts of things that they are talking about, someone at the top of the

food chain being able to somehow charge the taxpayers without anybody noticing.

Mr. Santonacita stated on the next slide the additional risk assessment for some additional consideration. Initially, they have determined and elevated or increased risk related to the valuation of accounts receivable, the valuation of claims payable liability, the valuation of pension and post-retirement obligations. Additionally, they have other key audit areas where they will perform either audit or risk assessment procedures. Some of those areas include due to and due from third party payers, premium revenue and receivables, grant revenue and receivables lease obligations as well.

Ms. Wang asked why information technology was not mentioned, and if this capture things like cyber risks?

Mr. Santonacita responded, yes, it is part of their audit procedures, that they will obtain a general understanding of the IT systems, the overarching cybersecurity program, and then any reports systems generated reports. They will ask questions, understand if there have been cybersecurity incidents, cyber security insurance specifically over cybersecurity.

Mr. Santonacita noted they will review the Internal Audit reports, establish a level of coordination between KPMG and the Internal Audit department. Additionally, KPMG will utilize professionals with specialized knowledge, specially to assist in the areas of pension, post-retirement benefits and claims payable liability.

Mr. Santonacita stated that the next slide will cover the newly effective accounting standards for 2024, GASB 100, which is related to the accounting changes and error corrections. He also mentioned that GASB 100 through 103 are effective for years 2025 and beyond. In addition, they have a system of quality controls to ensure that we maintain compliance with the rule, with independence rules and firm policies.

Mr. Santonacita stated that the next slide lays out the responsibilities of both management as well as KPMG.

Mr. Santonacita stated the last slide will address inquires throughout the audit process, which includes conversations with those in charge of governance.

Ms. Piñero thank the team for a very comprehensive presentation.

Now we will have an internal update from Mr. Joseph O'Keefe".

Internal Audits Update

Mr. O'Keefe started with the external audits update. The first one is the audit of Department of Corrections Efforts to ensure access to Mental Health Services for Inmates. Mr. O'Keefe stated that there have been a lot of different issues over access to prisoner's patient information. This audit is on-going

The other external audit is Audit of Language Access Services. This is being done by the State Comptroller office, which is moving along fairly quickly and they have an update meeting with them this afternoon.

The third one is the audit of Behavioral Health Emergency Assistance Response Division and New York City Police Department's role in the response and treatment of mental health crisis. This is another one that had issues over access to information and is on-going.

The next item is internal audit activities. They have 14 audits on the plan, 6 are completed, 7 are in progress and 1 is going to be pushed to the next year. The last item is the auxiliary audits done by the Bonadio Group. They are slowly but surely phasing out these audits, which will in turn phase out internal audit's involvement. That was the last item, and he asked if anyone have any questions.

Ms. Piñero asked a question on Behavioral Health? if it is focused really on the issue of access to mental health? Is that what they are focusing on?

Mr. O'Keefe stated that the first one is correctional health and the prisoner's access to mental health and they are providing the services. They are looking at the initial evaluation and the mental health evaluation that is done when an individual enters the system. So, they are looking at the whole process. For instance, if the prisoners or the patient refuses to leave their cell, things like that and how they handle those situations. They are also looking at their ability to hire people to work in this program.

The Office of Corporate Compliance Report

Ms. Patsos provided updates on what the Office of Corporate Compliance is doing since the last meeting. They have completed the Fiscal year 2025 Risk Assessment as previously stated. The OCC and Internal Audits did a combined risk assessment that was presented to the Enterprise Risk and Compliance Committee in February.

During the April meeting, the ERCC discussed the draft risk assessment further. In June the ERCC approved the risk assessment. The Compliance risks from the risk assessment are incorporated into the FY-2025 Corporate Compliance Work Plan that was presented to the audit committee today.

Ms. Patsos reported that the vendor, Coalfire Systems, Inc. is currently conducting their annual HIPAA risk analysis and Security Assessment RFP. They have done the collection interviews and site visits for the skilled nursing facilities and the acute care facilities.

Ms. Patsos stated that they recently posted an RFP for continued HIPAA risk analysis and security assessment services because Coalfire contract is ending December of this year. On June 11, the contract review committee approved their request to issue and RFP for a new vendor for services for 3 years with two one-year options to renew. They have received questions from some of the vendors responding to the RFP.

Ms. Piñero asked how much are we spending with Coalfire?

Ms. Patsos responded that we have spent three and half million dollars over three years.

Ms. Piñero, said that is a low amount based on the amount of work that they are doing.

They have completed the general compliance training module and expects the enrollment to occur hopefully next year. The compliance training module is split into two sections. One focuses on fraud, waste and abuse and the other focuses on conduct. Since last meeting, they have deployed a new corporate records management officer, and also working on a communication plan to better communicate that they are the Office of Corporate Compliance to the whole work force. They will be doing hot topic emails that are hot compliance topics and will be posting compliance F&Q's on their intranet site.

There have been some new Regulatory rules from the U.S Department of Health and Human Services. It published its final rulemaking in the Federal Register on the Confidentiality of Substance Use Disorder Patient Records. The rule became effective on April 16, 2024, however complying with this rule is not required until February 2026.

Similarly, the Office of Civil Rights published its final rule making on reproductive healthcare privacy and the federal register. Both of these rules will require the Office of Corporate Compliance to revise this notice of privacy practices. The OCC will work with the Office of Legal Affairs to effectuate these changes.

Ms. Patsos displayed the Compliance Report Matrix and the Privacy Report Matrix. The 2022 and 2023 were pretty close. In 2024 she noted they had fewer reports made in Q2 as compared to Q1.

Ms. Wang stated it looks like the graph got duplicated, and the compliance and the privacy are exactly the same.

Ms. Patsos stated "I am sorry, you are may be correct. I apologize for that. I will make sure that it gets fixed".

Ms. Piñero polled any questions.

There were none.

No new or old business.

Meeting adjourned at 11:03am.

Mitchell H. Katz, MD
NYC HEALTH + HOSPITALS - PRESIDENT AND CHIEF EXECUTIVE OFFICER
REPORT TO THE BOARD OF DIRECTORS - EXECUTIVE COMMITTEE
July 25, 2024

NYC HEALTH + HOSPITALS' FACILITIES PROMOTE THEIR FARMERS MARKETS

NYC Health + Hospitals' farmers markets launched in June at several of our facilities, and employees and community members have been taking full advantage of them. Nine of our hospitals, one post-acute, and one Gotham Health site have weekly markets. NYC Health + Hospitals/Lincoln is the only location that hosts the market twice a week, and it's a regular highlight for the community. Bronx News 12 visited NYC Health + Hospitals/Jacobi's market, where, in addition to the fruits and vegetables for sale, a chef was doing a cooking demonstration.

Farmers markets make it easy for anyone in the community to access fresh, local fruits and vegetables at an affordable price. Various payment options are available to help New Yorkers take advantage of farmers markets, and Fresh Food Box sites, including EBT/SNAP, Senior Farmers Market Nutrition Program (FMNP) coupons, and Women, Infants and Children (WIC) coupons.

U.S. NEWS & WORLD REPORT "BEST HOSPITALS 2024-2025" LIST INCLUDES ALL NYC HEALTH + HOSPITALS' HOSPITALS

NYC Health + Hospitals were named by U.S. News & World Report to its 2024-2025 'Best Hospitals' list. The ranking recognizes the hospitals for excellence in treating clinical conditions including heart failure, heart attack, hip fracture, kidney failure, diabetes, and chronic obstructive pulmonary disease (COPD). The hospitals were selected from nearly 5,000 eligible hospitals across 15 specialties and 20 procedures and conditions. Hospitals awarded a "Best" designation excelled at factors such as clinical outcomes, level of nursing care, and patient experience. The U.S. News & World Report rankings build on NYC Health + Hospitals' commitment to providing high-quality, comprehensive health care to all New Yorkers.

MAYOR ADAMS ENHANCES LGBTQ+ SERVICES AT NYC HEALTH + HOSPITALS/GOTHAM HEALTH, JUDSON

At the beginning of the month, Mayor Eric Adams announced new investments in the Pride Health Center at NYC Health + Hospitals/Gotham Health, Judson, one of seven Pride Health Centers in the system offering culturally-sensitive and comprehensive gender-affirming health care services to LGBTQ+ patients. Funded and developed in collaboration with the NYC Unity Project and the New

York City Mayor's Office of Equity & Racial Justice (MOERJ), the new investments include bolstering community and mental health programming, training for Judson staff, renovating the second floor of the clinic's century old facilities to create community spaces, and expanding access to confidential services for HIV prevention efforts.

**HEALTH CARE SYSTEM'S SIM CENTER LAUNCHES
OPIOID USE DISORDER BUPRENORPHINE TRAINING PROGRAM**

NYC Health + Hospitals' Office of Behavioral Health and The Institute for Medical Simulation and Advanced Learning collaborated to deliver a simulation training program focused on bedside conversations in the Emergency Department addressing opiate use and the associated inherent bias. The program is unique in simulation as providers get to practice with actors staging various degrees of withdrawal, challenging them to consider the appropriate medicine treatment and the empathy to greet these patients, their biases, and consider strategies to motivate patients toward help.

The inaugural experience was held at NYC Health + Hospitals/Harlem and was met with overwhelming positive reception and stories about how the course has already begun to change everyday practice. This is a program that will be offered to every physician and mid-level provider in every Emergency Department across the system.

NYC HEALTH + HOSPITALS/SOUTH BROOKLYN HEALTH LAUNCHES SBH CARES, A VOCATIONAL PROGRAM FOR NEARBY LOCAL HIGH SCHOOLS

On Friday, June 28 NYC Health + Hospitals/South Brooklyn Health launched South Brooklyn Health Collaborative Action for Resilience + Empowerment = Success (SBH C.A.R+E=S), which is a first-of-its-kind joint vocational program between South Brooklyn Health and local high schools with a goal of improving job-readiness skills for young people in South Brooklyn and surrounding communities. The 2023-2024 academic school year pilot program focused on students and alumni of Liberation Diploma Plus High School - a transfer high school for "at-risk" students in Coney Island. South Brooklyn Health Public Affairs and Human Resources staff developed an educational series and selected administrative and clinical leaders to instruct students on a monthly basis at the high school on the following topics: substance use disorder, gun violence, teen pregnancy, health & wellness, financial literacy, job readiness, and exploring career options in: nursing, radiology, laboratory, finance, medicine, and medical informatics. In addition to the educational series, currently enrolled Liberation Diploma Plus High School students and alumni were screened and selected by the high school and placed at South Brooklyn Health for paid internships in select departments, including nursing, laboratory, radiology, and the finance departments.

Students were supervised by South Brooklyn Health staff preceptors to support and guide them through work assignments.

HEALTH CARE SYSTEM IS A NEW 2024 WELLBEING CHAMPION FOR REDUCING STIGMA AROUND PHYSICIAN MENTAL HEALTH

Earlier this month NYC Health + Hospitals was recognized as a 2024 WellBeing First Champion for its efforts to remove invasive mental health questions on physician credentialing applications. The award was given by ALL IN: WellBeing First for Healthcare, a coalition of major healthcare organizations led by The Dr. Lorna Breen Heroes' Foundation, the Harvard T.H. Chan School of Public Health, Thrive Global, and the CAA Foundation. NYC Health + Hospitals is one of 19 health systems nationwide recognized by the coalition. According to a 2023 survey by the Physicians Foundation, 4 in 10 physicians were either afraid or knew another physician fearful of seeking mental health care given questions asked in applications for medical licensure, credentialing, or insurance.

METROPLUSHEALTH HIV SPECIAL NEEDS PLAN (SNP) IS RANKED #1 FOR QUALITY FOR 2022

MetroPlusHealth's HIV Special Needs Plan (SNP) achieved the top ranking in quality among SNPs for the year 2022. This accomplishment underscores the plan's unwavering dedication to support its members living with HIV and the ongoing efforts to help end the HIV epidemic.

Among the quality measures used, MetroPlusHealth excelled in viral load suppression. This critical indicator reflects the proportion of members with an undetectable level of HIV in their bloodstream, ensuring their own health and preventing transmission. Adherence to HIV medication remains a major focus of the work of the HIV SNP team through a combination of care management, personalized SMS messaging, and other initiatives, all specially designed to help members stay on their life-saving medications and engaged in care—which, in 2022, resulted in a viral suppression rate of 82.48%.

This success owes much to the talented health and wellness advisors, navigators, peers, and other staff. Their expertise in motivational interviewing, health coaching, and member engagement has been instrumental. Achieving this recognition for two consecutive years speaks to their hard work and unwavering commitment. MetroPlusHealth's SNP is proud to partner with dedicated HIV specialist providers at NYC Health + Hospitals and other committed clinicians across New York City. These efforts together are making a significant impact on the lives of members and advancing toward ending the HIV epidemic.

**NYC HEALTH + HOSPITALS/JACOBI CERTIFIED
AS LEVEL II PEDIATRIC TRAUMA CENTER**

NYC Health + Hospitals/Jacobi was recently certified as a Level II Pediatric Trauma Center. The certification, issued by the American College of Surgeons (ACS), means that patients under the age of 15 will receive the highest standards of treatment when it comes to advanced trauma care. Trauma remains the leading cause of death for young Americans between the ages of one and fourteen years old.

This recognition builds on the hospital's pioneering work in trauma care. Jacobi Hospital is already a Level I Adult Trauma Center for most of the Bronx and Southern Westchester, treating approximately 2,300 adult patients last year with 1,800 trauma admissions. The hospital also hosts one of New York State's strongest CureViolence Programs, Stand Up to Violence, which works to reduce gun violence in the 49th, 47th, and 43rd Precincts.

**BECKER'S HOSPITAL REVIEW RECOGNIZED FOUR NYC HEALTH + HOSPITALS LEADERS AS
"COMMUNITY HOSPITAL CEOS TO KNOW" LIST FOR 2024**

NYC Health + Hospitals announced that NYC Health + Hospitals/Metropolitan CEO Cristina Contreras, NYC Health + Hospitals/South Brooklyn Health CEO Svetlana Lipyanskaya, NYC Health + Hospitals/Carter CEO Floyd Long, and NYC Health + Hospitals/Lincoln CEO and System Chief Growth Officer Christopher Roker are recognized by Becker's Hospital Review as among the "Community Hospital CEOs to Know" list for 2024. The CEOs are recognized as visionary leaders who have helped grow the service lines for primary care, specialized services, rehabilitation, and public health services for patients, while cultivating a positive workforce culture for staff. Becker's Hospital Review is an industry publication focused on hospital business news for health care decision makers.

**THREE NYC HEALTH + HOSPITALS LEADERS RECOGNIZED BECKER'S HOSPITAL REVIEW AS
"PATIENT SAFETY EXPERTS TO KNOW"**

The health care system announced that NYC Health + Hospitals/Jacobi and North Central Bronx Chief Quality Officer Komal Bajaj, MD, NYC Health + Hospitals/Metropolitan Patient Safety Officer Samrina Kahlon, MD, and NYC Health + Hospitals Senior Vice President and Chief Quality Officer Eric Wei, MD, are recognized by Becker's Hospital Review on the "90 Patient Safety Experts to Know" list for 2024. The Chief Quality Officers and Patient Safety Officers from the health system are patient safety leaders and are skilled practitioners of patient harm reduction, disease management and disaster preparedness. They are innovators advocating for improving health care processes and transforming safety standards, ensuring NYC Health + Hospitals continues to be a leader in patient safety. Becker's Hospital Review is an

industry publication focused on hospital business news for health care decision makers.

**NEW INTERVENTIONAL RADIOLOGY SUITE OPENS
AT NYC HEALTH + HOSPITALS/WOODHULL**

NYC Health + Hospitals/Woodhull announced the grand opening of its state-of-the-art interventional radiology suite marking a significant advancement in patient care and community health services. The ribbon-cutting ceremony highlighted the hospital's commitment to enhancing diagnostic and treatment capabilities through the use of cutting-edge technology and clinical excellence. Interventional Radiology plays a crucial role in modern healthcare by offering minimally invasive procedures that diagnose and treat a wide range of medical conditions, including biopsies, catheterizations, and angiograms, performed using advanced imaging techniques to precisely target affected areas. With the newest imaging technology and highly skilled interventional radiologists, the new suite offers patients personalized care that is catered to their individual needs. Compared to traditional surgical techniques, these modern procedures provide reduced discomfort, quicker recovery periods, and shorter hospital stays.

CITY & STATE RECOGNIZED THREE BROOKLYN FACILITY CEOS ON ITS 2024 "BROOKLYN POWER 100" LIST

Three Brooklyn facility CEOs -- NYC Health + Hospitals/Woodhull CEO Gregory Calliste, NYC Health + Hospitals/South Brooklyn Health CEO Svetlana Lipyanskaya, MPA, and NYC Health + Hospitals/Kings County CEO Sheldon McLeod -- were recognized by City & State New York in their "Brooklyn Power 100" list for 2024. The annual recognition list highlights accomplished leaders across a range of industries with significant political influence who have shaped the lives of New Yorkers in Brooklyn and beyond. Calliste, Lipyanskaya, and McLeod are celebrated as trailblazers who led their respective facilities through multiple crises, all while continuing to deliver quality health care and while acting as trusted messengers for their community members. City & State is the premier media organization dedicated to covering New York's local and state politics and policy.

NYC HEALTH + HOSPITALS/GOTHAM HEALTH OPENS WELLNESS ROOM AT GOTHAM HEALTH, CUMBERLAND

A new wellness room opened at NYC Health + Hospitals/Gotham Health, Cumberland. It is the first of four new wellness rooms to be established at various Gotham Health sites, in collaboration with NYC Health + Hospitals H3 Wellness program. This wellness room is designed to provide a quiet place for employees to recharge, de-stress, unwind, and heal. The new wellness room features visually enhanced environments with art, music, and lighting,

offering a satisfying opportunity for all staff to enjoy a serene space for relaxation and rejuvenation, as well as connection with opportunities for debriefs. The wellness room was co-designed with WXY Studios, focusing on comfort and functionality to create an inviting atmosphere that encourages self-care. Following the opening at Gotham Health, Cumberland, additional wellness rooms will include Gotham Health, East New York; Gotham Health, Belvis; and Gotham Health, Morrisania.

NYC HEALTH + HOSPITALS/NORTH CENTRAL BRONX UNVEILS NEW COMMUNITY MURAL

Earlier this month, NYC Health + Hospitals unveiled a new mural as part of the Community Mural Project run by the health System's Arts in Medicine Department. The mural, *Waves of Healing* at NYC Health + Hospitals/North Central Bronx, was developed by artist Sophia Victor through a series of focus groups with community members, staff and patients and brought to life at a paint party where the community was invited to paint the mural together. *Waves of Healing* is one of 7 new murals that will be created this year, adding to 37 murals created at NYC Health + Hospitals since 2019. The first wave of the Community Mural Project is featured in a new book, *Healing Walls: New York City Health + Hospitals Community Mural Project 2019-2021*. This and other murals at NYC Health + Hospitals can be viewed on the free Bloomberg Connects app. The Community Mural Project is made possible through the support of the Laurie M. Tisch Illumination Fund.

RESPONDING TO THE HUMANITARIAN CRISIS - SERVICES FOR ASYLUM SEEKERS

NYC Health + Hospitals remains pivotal to the city's efforts to manage the unprecedented influx of asylum seekers. We continue to accommodate approximately 25,000 individuals across our 13 humanitarian centers and oversee the city's Arrival Center. Since the facility was established in May 2023, the Arrival Center has aided over 160,000 new arrivals from over 160 countries. As the front door to our city, we provide all new arrivals a screening for communicable diseases and have provided over 130,000 vaccinations at the city's Arrival Center, humanitarian centers, and our hospital facilities.

Across our 13 humanitarian centers, we maintain a steadfast commitment to ensure that all of our residents, the majority of whom are families with children, receive compassionate, dignified care. We offer comprehensive services aimed at supporting their journey toward a better life, including medical attention, nutritional support, language services, mental health resources, school enrollment assistance, social programs, and aid in family reunification.

The safety of our humanitarian center guests and staff is paramount. Earlier this month, after two cases of measles were identified at one of our

congregate facilities, we immediately acted to quarantine approximately 200 people exposed. Our staff assessed anyone exposed for symptoms, administered vaccinations to provide post-exposure prophylaxis, and drew serologies to identify those with immunity. Thanks to their thorough and decisive actions, more than 90% of guests exposed have provided proof of vaccination or immunity and were able to leave quarantine and all guests required to remain in quarantine were transported to a hotel to safely and comfortably complete quarantine in private rooms.

EXTERNAL AFFAIRS UPDATE

City: The New York City Fiscal Year 2025 Budget was adopted on June 30, 2024 at \$112.4B. NYC Health + Hospitals received a total of \$48M in capital awards from the Borough Presidents and Council Members. We are grateful for their support.

State: Of the 804 bills that passed both Houses of the New York State (NYS) Legislature, only 204 have been acted upon by the Governor thus far. No bills have been vetoed thus far. The Governor has until the end of the calendar year to consider the remaining 600 bills. Most of the health care bills the External Affairs team is tracking have not been delivered yet to the Governor. External Affairs is working with our subject matter experts to determine if NYC Health + Hospitals should be asking the Governor to (1) sign, (2) veto, or (3) amend bill(s).

Federal: Congress continues to debate appropriations bills for Fiscal Year 2025, prior to the end of the fiscal year on September 30th, 2024. Included in these conversations are Congressionally-Directed Spending ("earmark requests"), for which NYC Health and Hospitals has applied. Prior to the end of 2024, Congress also has to address a few expiring provisions, including those that allow expanded use of telehealth and continuing the delay of the Medicaid DSH cuts.

Community Affairs: CABs and Auxiliaries were honored on July 18, 2024, at the 20th Annual Marjorie Matthews celebration hosted at NYC Health + Hospitals/Coler. Over 250 CAB and Auxiliary members from across the health system attended. In commemoration of the 20th anniversary, proclamations and certificates were presented by the Borough Presidents to the CAB members. Borough President Mark Levine attended to present proclamations to the Manhattan CABs, while representatives from the Queens and Bronx Borough Presidents' offices were present to present their awards to the CABs in their respective boroughs. Council Member Selvena Brooks-Powers also attended to thank volunteers in person.

NEWS FROM AROUND THE SYSTEM

- **Becker's:** [US News & World Report Names NYC Health + Hospitals Among Best in U.S.](#)
- **BronxNet 'The Bronx Buzz':** [NYC Health + Hospitals/NCB Unveils New Community Mural](#)
- **BK Reader:** [NYC Health + Hospitals Recognized For Reducing Physician Mental Health Stigma](#)
- **Brooklyn Daily Eagle:** [CEOs Gregory Calliste, Svetlana Lipyanska, and Sheldon McLeod named in 'Brooklyn Power 100'](#)
- **Politico:** NYC Health + Hospitals Announces the Completion of 20 New Wellness Rooms for Staff
- **Harlem World:** [NYC Health + Hospitals' NYC Care Hits 500,000 Call Milestone, Reflects Program Demand](#)
- **Becker's:** [Christina Contreras, Svetlana Lipyanska, Floyd Long, and Christopher Roker recognized as part of 160 community hospital CEOs to know](#)
- **News12 The Bronx:** [New 'Healing Waves' Mural at North Central Bronx Hospital](#)
- **Politico:** The Adams administration is investing \$775,000 to expand programming and training at NYC Health + Hospitals' Pride Health Center
- **New York Times:** [7,300 Migrants to Get Food Debit Cards as New York City Expands Program](#)
- **Fierce Healthcare:** [NYC Health + Hospitals taps chief biopreparedness officer](#)

Fiscal Year 2024

Annual Public Borough Meetings

Responses

Board of Directors Meeting

September 26, 2024

Deborah Brown
Senior Vice President
Chief External Affairs Officer

Fiscal Year 2024 Annual Public Meetings

In accordance with §7384(10) of the HHC Enabling Act, the Board of Directors of the New York City Health + Hospitals facilitated the Fiscal Year 2024 Annual Public Meetings in all five boroughs of NYC:

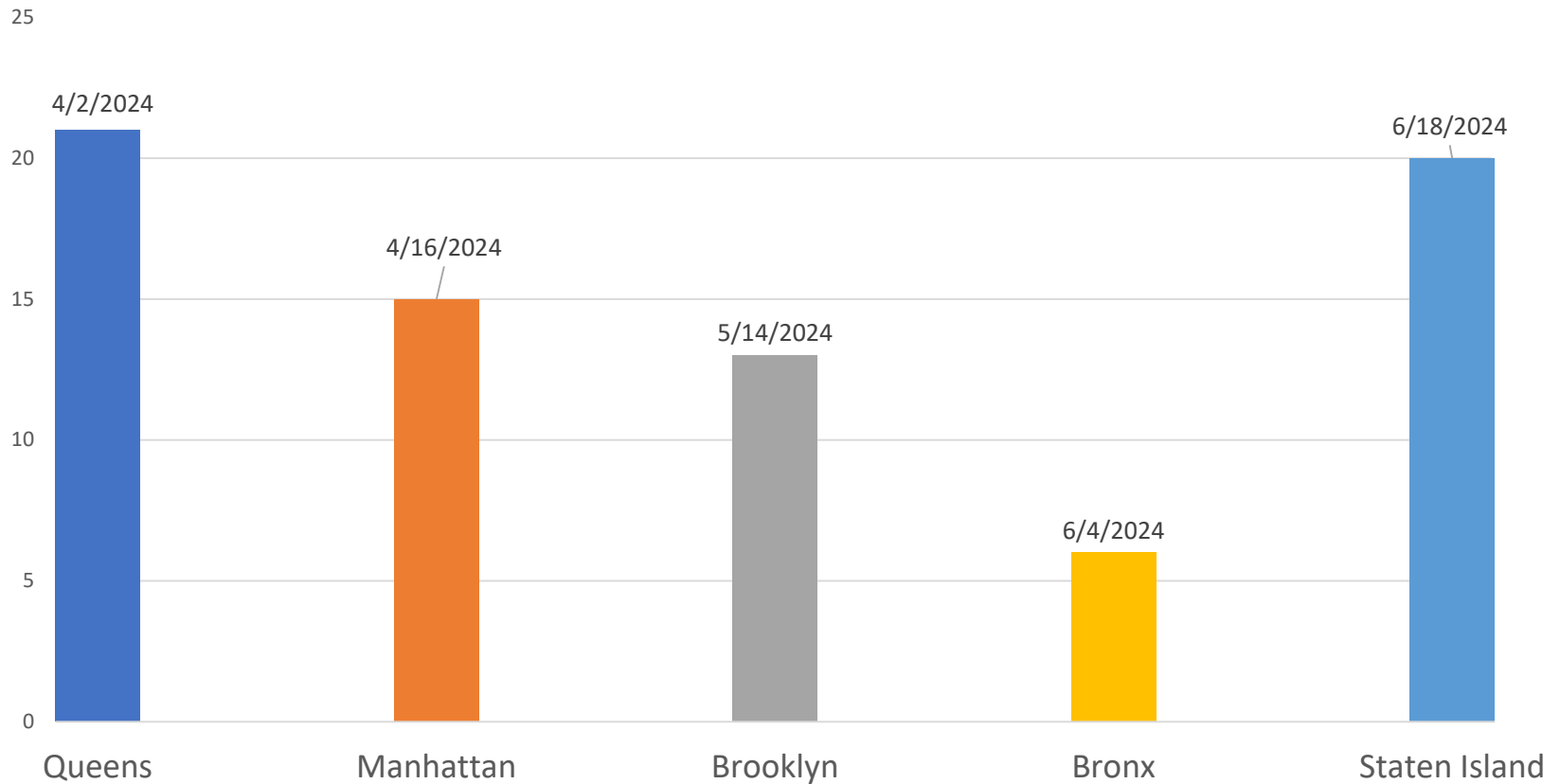
Queens	-	April 2, 2024		NYC Health + Hospitals/Queens
Manhattan	-	April 16, 2024		NYC Health + Hospitals/Bellevue
Brooklyn	-	May 14, 2024		NYC Health + Hospitals/Kings County
Bronx	-	June 4, 2024		NYC Health + Hospitals/Lincoln
Staten Island	-	June 18, 2024		NYC Health + Hospitals/Sea View

The President and CEO informed the public on the programs and plans of NYC Health + Hospitals, as well as afforded the public an opportunity to present oral and/or written testimony concerning the NYC Health + Hospitals performance to the Board of Directors.

Compilation of questions and responses

- NYC Health +Hospitals recorded the individual questions/ concerns from each of the public meetings.
- This deck contains a comprehensive listing of questions/ concerns and responsive information.
- We will provide an overview today.
- The full deck will be posted for public review:
<https://www.nychealthandhospitals.org/public-meetings-notices/>
- Each slide is identified with the name of the borough in which the question/ concern was raised.
- When a specific facility is referenced in the question/ concern, it is also included on the slide.

Total Speakers per Borough



Main Areas of Concern Raised by the Public

Extensive Wait Times

- >6 months for appointments for dental care and specialty care
- Long primary care appointment wait time in Staten Island
- Staffing shortage

Employee Satisfaction and Morale

- Pay parity for Social Work staff and Residents
- Wellness resources for staff morale
- Ensure kindness is implemented towards patients from reception through their care

Aging Structure and Infrastructure

- Buildings need updates and maintenance
- New machinery
- ADA compliance

Housing Projects

- Quality and size of HERRCS in Brooklyn
- Prospective residents of housing project in Bronx

Access to Health Care Locations

- Only one location in Staten Island
- Importance of a Trauma 1 center in South Brooklyn
- Access to Street Health Outreach and Wellness (SHOW) Vans

Public Concern:

Social Workers are asking for support in contract negotiations to include:

- Fair compensation
- Inclusion in City's cost of living compensation

Response:

DC-37 reached a deal with the city/NYC Health + Hospitals on a new collective bargaining agreement in March of 2023.

As part of the new collective bargaining agreement, additional “equity” monies are available as agreed to by the parties. The title of Social Worker did receive an equity increase.

Public Concern:

Resident physicians requested support for advocating for fair compensation for fellowships:

- Concerned low compensation will impact recruitment and retention of residents.

Response:

New York City Mayor Eric Adams, Office of Labor Relations (OLR) Commissioner Renee Campion, and NYC Health + Hospitals President and CEO Dr. Mitchell Katz announced on June 1, 2024 a tentative five-year and six-month contract agreement with the Committee of Interns and Residents Service Employees International Union (CIR-SEIU) that will provide fair wage increases to more than 2,300 medical interns and residents who work for NYC Health + Hospitals, the largest municipal health care system in the nation.

The tentative agreement is retroactive — beginning on December 16, 2021 — and expires on June 15, 2027. The agreement includes compounded wage increases totaling 16.21 percent over the term of the contract and the starting salary for residents will go from the current \$66,247 to \$81,238 in December 2025.

Public Concern:

Staff members expressed the need for a more efficient payroll system, to allow timely resolution of salary payment errors and more transparency on pay stubs regarding the rate at which salary is paid.

Response:

NYC Health + Hospitals is currently working on implementing a new payroll system, which will bring about greater efficiency and transparency into payroll processes and payments, including overtime payments. The new payroll solution will have better tools by which staff can view their earnings information not only on their paystubs, but within the solution itself. NYC Health + Hospitals is working with all appropriate stakeholders to ensure optimal planning, designing, building and implementation of the new payroll system. The precise go-live date for the new payroll system is under review by NYC Health + Hospitals and will be disclosed when available.

Public Concern:

Community member expressed the need to close the congregant Humanitarian Emergency Response and Relief Center (HERRC) shelter on 47 Hall Street which houses 3,200 single males, due to the poor infrastructure and size of the shelter. Suggested to open multiple smaller size shelters across the city. Concerns include the following:

- Current shelter does not have any privacy for shelter residents and is experiencing racial tensions
- Security guards do not assist when there is tension among the residents
- Shelter residents loiter on the street and panhandle
- There are thousands of scooters on the street

Response:

NYC Health + Hospitals is committed to ensuring the health and dignity of all of its community members, including those who are unhoused, and newly arrived immigrant community in North Brooklyn.

The Hall Street HERRC serves two populations in two different models of shelter. Single adult men are housed in congregate settings, which is the standard across NYC's shelter providers, and families with children are housed in pods to allow for privacy. The pods all have locks and the households have their own keys to locks to allow for privacy.

Response Cont'd

NYC Health + Hospitals has behavioral health staff available to help de-escalate any issues that may occur within the shelter, including guest disagreements. Security guards also monitor the site 24/7 to ensure guest and staff safety. Security guards work with behavioral health staff and site managers to identify safety issues and create action plans as needed.

Many guests use bicycles and e-bikes for work, however per FDNY e-bike batteries are not allowed inside. NYC Health + Hospitals works with guests on education to properly store bikes and work with DOT to increase bike racks where possible.

Public Concern:

Community member requested options to access the available language services during the Annual Public Meetings. Currently the only option is dialing a phone number to receive translation services, but there are no phones available to utilize the service.

Response:

NYC Health + Hospitals adheres to the law for interpretation services at each Public Meeting. Language services in Spanish, American Sign language (ASL) and other languages are available by request.

A number is shared at the beginning of each meeting (212-788-3359) and staff is available to help coordinate access.

Public Concern:

Community member expressed the need for a new trauma hospital in Far Rockaway to ensure community members can obtain care in crisis.

Response:

NYC Health + Hospitals supports the efforts of the Rockaway Trauma Healthcare Access Task Force, a blue-ribbon panel formed by City Councilmember Selvena Brooks-Powers to address the persistent lack of healthcare infrastructure in the eastern Rockaways.

Dr. Mitchell Katz, President and CEO of NYC Health + Hospitals, as co-chair of the task force, is committed to ensuring high quality healthcare access to residents of the Rockaway Peninsula.

The task force includes local residents and members of nearby community groups. Efforts are also ramping up for the opening of a new comprehensive community health center in Far Rockaway to expand access to primary care, women's health, dental, vision and mental health services for the peninsula community.

Councilmember Selvena Brooks-Powers has been able to get a \$50M commitment in the Mayor's FY25 Capital budget and an additional \$80,000 in expense funding.

Public Concern:

Does Bellevue Hospital have the capacity to accommodate additional patients, and what is the potential impact on overall patient care following the closure of Mount Sinai Beth Israel?

Response:

NYC Health + Hospitals/Bellevue is currently operating at or near capacity in many of its essential services. Over the last several months there have been ongoing discussions at both System and facility levels to project the potential impact to Bellevue, such as in medical walk in, behavioral health, EMS 911 arrivals and non-911 arrivals, due to the projected Mount Sinai Beth Israel closure.

NYC Health + Hospitals is working with Mount Sinai on plans to mitigate projected volume increases at Bellevue. Mount Sinai has pledged capital funding to support the necessary expansion of services at Bellevue, among other steps.

Public Concern:

Community members expressed satisfaction with medical care but were disappointed at the lack of respect, professionalism, and dignity upon entering the facility and during check-in.

Response:

Patient Satisfaction is a priority for NYC Health + Hospitals/Bellevue and we are committed to work hard to ensure we meet the needs and expectations of each and every patient. We invest in training programs for staff, solicit their workplace concerns through surveys and provide direct feedback on our patients' perceptions of care. As part of our commitment to our patients, when complaints and grievances are brought forward we work with our services and patients to meaningfully address these concerns. Through analysis of patient survey data, we work with our facility leadership to develop processes that enhance our patients' experience.

Public Concern:

Community members emphasized the importance of advocating for elected officials to secure capital funding.

Response:

NYC Health + Hospitals/Bellevue requests allocations every year during the application period from City Council, city, state and federal officials, and NYC Health + Hospitals representatives advocate for funding in Albany and Washington, D.C. We appreciate all capital funding allocations for Bellevue Hospital.

Public Concern:

Due to the aging infrastructure at Coler, the community expressed a profound need for infrastructure repairs and upkeep.

Response:

- Coler continues to work with the NYC Health + Hospitals Office of Facilities Development to identify the needs of the facility and access existing capital funding to address them, in addition to seeking capital improvement awards through the NYC Council and the Manhattan Borough President's Office, among other champions.

Existing projects include:

- installation of outdoor irrigation system and beautification, creating Resident-Staff Flower Gardens;
- scheduled to install LED/energy efficient lighting throughout the facility;
- lobby renovation (in progress);
- Nurse Call Bell project in progress (to be completed 1Q2025)

Future projects include:

- Elevator Modernization
- HVAC Upgrades
- Resident Greenhouse

Response Continued:

Coler continues to work on other internal upgrades, many of which include direct resident input:

- repainting all hallways, and now all Day Rooms;
 - repairing/painting all resident shower rooms;
 - installing new blinds in all Day Rooms;
 - installed new privacy curtains in all resident rooms;
 - installed new flat screen TVs for residents;
 - purchased new nightstands and over-the-bed tables for residents (delivery in Aug/Sep 2024);
 - new cable service for residents;
 - installed new security cameras throughout the building, in the elevators, and outdoors to improve staff and resident safety;
 - installed a permanent emergency generator
-
- Coler is also exploring flood mitigation options that would address existing coastal vulnerabilities. More information available at www.colercoastalresiliency.com

Public Concern:

Community members mentioned the shortage of nursing staff and how it impacts timely service provision.

Response:

- Coler is proud to report that it exceeds the minimum staffing standards required for nursing homes, and received confirmation letter from NYS DOH indicating compliance
- Coler has 5-star CMS rating for Staffing: Staffing levels and turnover of staff in nursing homes may impact the quality of care nursing home residents get. Higher staffing ratings mean there are more nursing staff and less turnover of the staff, which may mean higher quality of care. Total number of nurse staff hours per resident per day (*Higher numbers are better*):
 - **Coler**: 4 hours and 20 minutes
 - **National average**: 3 hours and 47 minutes
 - **New York average**: 3 hours and 37 minutes
- Coler received the Beacon Award for Nursing Excellence in our Memory Care Units (based on resident outcomes, work environment, Nursing workforce)
- Coler has monthly onsite recruitment events and conducts ongoing interviews to fill vacancies
- Coler has recently launched its Certified Nursing Assistant Training program, to create career pathways into the field of nursing; first cohort graduation in May 2024
- Coler continues to network with schools and community organizations to promote career opportunities

Public Concern:

Community members expressed the need for more opportunities for employees to take advantage of available services and perks for their satisfaction and morale.

Response:

- NYC Health + Hospitals Employee Resource Center serves as a hub for all-staff to access benefits including:
 - Direct Deposits
 - Family & Medical Leave (FMLA)
 - Flexible Spending Account Programs
 - Health Insurance Plans
 - Municipal Credit Union (MCU)
 - Retirement Savings Plans (NYCERS, TDA, 403B, 457, NYCE)
 - Transit Benefit
 - Tuition Reimbursement
 - Union Benefits
 - Perks-at-Work (Employee Discount Program)
- Access to the Employee Gym (24/7; free to employee)
- Helping Healers Heal Resources to promote self-care and mental wellness
- Employee Wellness Room (24/7) - Periodic offering of Zumba classes, Meditation Bus/Meditation Classes
- Onsite Occupational Health Services (e.g. free vaccinations)
- Dedicated Employee Dining Hall
- Employee of the Month – Designated Parking Spaces

Public Concern:

Community members expressed the importance of behavioral health education and suggested highlighting educators and innovators like Roberto Clemente to amplify its significance.

Response:

Our comprehensive clinical encounters include patient-specific education on behavioral health. The site hosts tabling events throughout the year in our Lobby where community education on behavioral health is featured. Additionally, the site hosts forums to discuss issues related to health equity and access to care in the communities we serve, in which behavioral health is discussed.

Recently, as one example, Gouverneur sponsored the Lower East Side Community Roundtable. This interactive community engagement opportunity provided a platform for various community organization representatives comprised of specialists in housing, mental health, immigrant rights, LGBTQ+ Advocacy, and tenant rights among others to come together to discuss behavioral health amongst others.

Also, on August 1, 2024, an outdoor health fair featured community education on behavioral health with tabling to include mental health professionals and staff from Gouverneur and the Roberto Clemente Center.

Public Concern:

Community members shared the need for a formal program for patients on financial health.

Response:

Our comprehensive clinical encounters include opportunities for patient-specific financial counseling. The site hosts tabling events throughout the year in our Lobby where community education on financial health is featured. Additionally, the site hosts forums to discuss issues related to health equity and access to care in the communities we serve, in which finance is discussed.

Recently, as one example, Gouverneur sponsored the Lower East Side Community Roundtable. This interactive community engagement opportunity provided a platform for various community organization representatives comprised of specialists in housing, mental health, immigrant rights, LGBTQ+ Advocacy, and tenant rights among others to come together to discuss financial issues amongst others.

Also, on August 1, 2024, an outdoor health fair featured community education on finance with tabling to include our finance teams.

Public Concern:

Community members expressed the need for education on insurance and out-of-pocket payments and deductibles.

Response:

Our comprehensive clinical encounters include opportunities for patient-specific insurance discussions. As part of the site's community engagement efforts, it hosts tabling events throughout the year and hosts forums to discuss issues related to insurance and payments.

On August 1, 2024, the site hosted an outdoor health fair featuring various community education programs

Public Concern:

Community member expressed the need for a new sonogram machine at the facility.

Response:

The site has been actively pursuing capital funding for this imaging modality.

Public Concern:

Community member expressed the need for a more central location and a larger facility with easier public access.

Response:

Gotham Health was created to provide health care to all New Yorkers without exception, and over the years the Sydenham community of patients has grown to the point that a larger site is indeed needed. Gotham Health's leadership team and the Community Advisory Board at Sydenham have actively been scouting for a larger location that will not compromise the needs of the community. Easy access to the site is a priority.

Public Concern:

Community member expressed the need for a Developmental Evaluation Center at St. Nicholas, an essential and much-needed resource in the community, to be more patient-centric, painted, and attractive to patients and families.

Response:

The St. Nicholas site is unique in that it has the only developmental pediatrician in Gotham Health located at that facility. The Gotham Health team has actively worked with the physician to develop an optimal staffing model to best serve the community. It is agreed that the site needs cosmetic and patient-centered improvements, and Gotham Health is actively planning the resources for these.

Public Concern:

Community members expressed the need for accessible bathrooms in all areas, especially at the location where the Annual Public Meeting is to be hosted.

Response:

In response to community members' concerns regarding accessible bathrooms, particularly at the location of the Annual Public Meeting, NYC Health + Hospitals/Kings County is addressing specific issues identified with the restrooms. Facilities Management has initiated a comprehensive plan to address bathroom accessibility, outlining the scope, schedule, and corrective actions. An ADA compliance consultant will review the design to optimize space and ensure the installation of fully functional ADA-compliant restrooms. Support Services will oversee the project and provide regular updates on progress and completion schedules.

Public Concern:

Community members expressed the need to ensure sidewalks are safe and accessible for all participants, including individuals with disabilities and elderly.

Response:

Ensuring safe sidewalks for the public is a top priority at NYC Health + Hospitals/Kings County. All sidewalks within our campus are fully ADA compliant. Sidewalks adjacent to city streets are maintained by the City, and we actively monitor their condition, advocating for necessary repairs as needed. Our commitment to providing accessible walkways throughout the campus meets all regulatory requirements.

Public Concern:

Community member expressed the need for a Level I Trauma Center in South Brooklyn to ensure community members can obtain timely care in crisis. Currently the closest Level I trauma center from Southern Brooklyn is thirty minutes away.

Response:

South Brooklyn Health is prepared to care for hundreds of trauma patients per year in our fully prepared resuscitation rooms. The hospital has a trauma response team on standby for any incoming codes and performs multiple drills to be ready for patients that are brought in for care. In addition, the Emergency Department appointed an EMS and Disaster Fellowship trained Director for Trauma and Prehospital Medicine to ensure preparedness and quality.

Additionally, the hospital is now a New York State certified percutaneous coronary intervention (PCI) Center, which means we can now care for South Brooklyn residents who are having acute heart attacks – they no longer need to have ambulances travel 20+ minutes to the next nearest hospital that offers comprehensive cardiac services. And, we are now an Advanced Primary Stroke Center, which means we can provide state-of-the-art care for patients with acute onset of a stroke.

Public Concern:

Community members shared the need for more dental services. Currently wait time for an appointment is up to a year and a half, often resulting in the need for emergency services for the patient.

Response:

South Brooklyn Health is in the process of expanding its dental service size and capacity to reduce patient wait times. We anticipate construction will be complete by Q1 2025. For patients with emergent care they will be seen the same day, urgent issues will be seen within 2 weeks or less.

Public Concern:

Community members expressed the need to hire more staff, which would increase access to care and reduce wait time for appointments, and increase salaries for staff retention.

Response:

NYC Health + Hospitals/Woodhull's Human Resources Department has made significant progress in recruiting and retention of staff. Since the beginning of the COVID-19 Public Health Emergency (PHE), New York City Health + Hospitals/Woodhull experienced historical reductions in staff due to retirement, resignations and non-compliance to the COVID mandate.

In the past 3 years Human Resources has increased strategies to attract and retain staff:

- Some efforts include hosting weekly job fairs for nursing and social worker positions, partnering with other city agencies and schools to fill clerical associate and administrative positions, and advertising through various social media outlets and campaigns.
- Additionally, Woodhull has implemented on-the-spot hiring and increased New Employee Orientation from monthly to bi-weekly. Also, salaries are maximized for many hard-to-recruit clinical positions (Social Workers, Psychologist, Dental Assistants, Respiratory Therapist) and Registered Nurse salaries were increased through union negotiations, which brought salaries in parity with other governmental healthcare institutions.

Response Cont'd:

In the past 3 years Human Resources has increased strategies to attract and retain staff:

- Lastly, since January to June 2024, 260 new employees were hired, 45 staff were promoted and 65% of nursing vacancies were filled at Woodhull. We continue to implement training programs to enhance employees' skills and prepare them for more promotional opportunities. Our efforts are ongoing, we will continue to look for ways to recruit and retain staff to ensure we are meeting the needs of all patients and the community.

Public Concern:

Community members expressed concern over long wait times to receive appointments for specialty care services.

Response:

Woodhull has expanded access to specialty services with next available appointments within 30 days for certain specialties including: Cardiology, Endocrinology, and General Surgery.

In addition, services such as pain management are now provided as of June 2024 and ENT services are expected to resume later this year. The current referral process used by Woodhull specialists also prioritizes any clinically urgent patients to ensure care is not delayed.

Public Concern:

Staff members expressed the need for the Human Resources Department to improve the approval process for overtime and parental leave for staff members.

Response:

All requests for leave of absences, including parental leave are handled by the Central Office/Leave Administration Team. Employees are required to submit documentation via email to LeaveAdministrationTeam@nychhc.org. The approval process for overtime is handled by the Payroll Department.

Public Concern:

Community Advisory Board member inquired about their suspension for one meeting due to their perceived conduct at a previous meeting. They expressed that volunteers can not be suspended.

Response:

All individuals that represent Gotham Health and/or participate in any capacity that represents the organization are held to a code of conduct that is reflective of behaviors that are consistent with respect and the non-discriminatory mission of Gotham Health and NYC Health + Hospitals. These behaviors include speech and action that reflects non-bias for race, gender, ethnicity, immigration status and ability to pay. This is inclusive of staff, patients, volunteers, contingent workers, vendors, community and board members, and is aligned with our mission and vision as an organization. Volunteers represent Gotham Health, and as such, the executive leadership and CEO of Gotham Health reserves the right to make decisions on any breach of conduct that does not represent the intent of our values and mission. In such circumstances, actions are taken to investigate and determine the remedy or expulsion of individuals who egregiously, knowingly and repeatedly comport themselves in such a manner. Such volunteers are not barred from participating in the facility permanently, only until the immediate issue is resolved.

Public Concern:

Community members expressed concern of long wait times for appointments including dental care and specialist appointments. Appointments can be between 6 months to a year away.

Response:

NYC Health + Hospitals/Gotham Health, Morrisania has brought on new providers. These new providers will allow for more access and will reduce wait times for appointments.

- 2 additional Primary Care providers have been onboarded (Nurse Practitioner)
- 1 full time and 1 part time dentist will be starting in the fall
- 1 additional Optometrist pending credentialing clearance

Public Concern:

Community members shared their opposition and displeasure regarding the housing complex on the NYC Health + Hospital/Gotham Health, Morrisania parking lot. They requested reconsideration due to the following concerns:

- Impact to doctors' accessibility to the facility which could result in a loss of doctors for the community
- Potential loss of programs the facility provides

Response:

There will be no impact to the providers accessibility to the facility. The developer is required to ensure all of those who had parking will continue to have parking during the construction. All services will remain available during the construction. NO services will be affected.

Public Concern:

Community members shared the community's opposition and displeasure regarding the Just Home proposal on the NYC Health + Hospital/Jacobi campus. They requested clarity on the reason the eligibility criteria has expanded to include pre-trial detainees, indicating the original criteria was incarcerated individuals who have complex medical conditions and are under the care of NYC Health + Hospitals/Correctional Health Services (CHS).

Response:

The eligibility criteria have not changed. A pre-trial detainee is a person who is detained on Rikers Island awaiting trial, likely because the individual cannot afford bail. About 87% of people held on Rikers are pre-trial. All of these individuals are patients of NYC Health + Hospitals/Correctional Health Services (CHS). Although potential Just Home residents will complete the initial screening and application process while detained, they cannot be in city custody (i.e. pre-trial detainees) at time of move-in.

Just Home is not a jail, and residents will not be detained or in custody. Just Home will be permanent apartments, and its residents will be free members of the community, just like the thousands of other justice-involved New Yorkers who are our neighbors.

The patients CHS refers to Fortune for Just Home will have complex medical conditions, which may include cancer, chronic obstructive pulmonary disease (COPD), cirrhosis, and end-stage renal disease. Most referred patients will be older individuals, but younger adults with significant health conditions will also be considered.

Public Concern:

Will Just Home residents receive priority for appointments or receive faster appointments? Currently appointment wait time for a dental visit is one year.

Response:

Fortune's case managers will collaborate closely with Jacobi Medical Center medical providers, but the Just Home residents will not receive priority for appointments or receive faster appointments than other Jacobi patients.

Public Concern:

Community members expressed need for a Street Health and Wellness (SHOW) van. Staten Island is lacking in resources and the SHOW van provides much needed care to vulnerable populations such as migrant and low income communities. Community members also expressed need for full time services and increased resources from the SHOW van.

Response:

NYC Health + Hospitals remains committed to bringing the full spectrum of health services to the residents of Staten Island. We are partnering with our former SHOW collaborator Project Hospitality to expand the range and availability of services through walk-in appointments at NYC Health + Hospitals/Gotham Health, Vanderbilt and a dedicated appointment line (718-616-0999). This new low-barrier model will allow Project Hospitality residents to receive pediatric, obstetrics, & gynecologic services in addition to comprehensive adult primary care.

Public Concern:

Community members are seeking expansion of NYC Health + Hospitals clinical services and care in Staten Island to increase access for vulnerable populations such as undocumented and uninsured communities. The Gotham Health facility has long wait times and the nearest NYC Health + Hospitals facilities are almost 2 hours away.

Response:

As part of NYC Health + Hospitals commitment to providing the highest quality health care services to all New Yorkers with compassion, dignity and respect, and regardless of immigration status or ability to pay, NYC Health + Hospitals/Gotham Health, Vanderbilt is proud to offer Project Hospitality Residents high quality, affordable care to healthy adults, children and adolescents, special services, women's health and many more.

RESOLUTION - 08

Adopting the attached **Mission Statement, Performance Measures and additional information to be submitted on behalf of New York City Health and Hospitals Corporation (“NYC Health + Hospitals”)** for Fiscal Year 2024 to Office of the State Comptroller’s Authorities Budget Office (the “ABO”) as required by the Public Authorities Reform Act of 2009 (the “PARA”).

WHEREAS, the Public Authorities Accountability Act was amended by the PARA to add additional reporting and oversight features; and

WHEREAS, the PARA requires local public authorities such as NYC Health + Hospitals to adopt each year a mission statement and performance measures to assist NYC Health + Hospitals in determining how well it is carrying out its mission; and

WHEREAS, the ABO requires reporting of NYC Health + Hospitals’ mission and performance measures, as well as responses to certain questions on a form provided by that office and requires that the NYC Health + Hospitals Board of Directors read and understand the mission statement and the responses provided to the ABO; and

WHEREAS, NYC Health + Hospitals will post on its website the Mission Statement as hereby adopted; and

WHEREAS, the attached Mission Statement, Performance Measures and additional information supplied on the required ABO form will, once read, understood and adopted, comply with the requirements of the PARA as stated above and reflect the mission of NYC Health + Hospitals and the performance measures being used to measure its achievement of its mission;

NOW, THEREFORE, be it

RESOLVED that the attached Mission Statement, Performance Measures and additional information supplied on the required Office of the State Comptroller’s Authorities Budget Office form are hereby adopted as required by the Public Authorities Reform Act of 2009.

**AUTHORIZATION TO MAKE ANNUAL FILING
PURSUANT TO THE PUBLIC AUTHORITIES REFORM ACT**

Executive Summary

NYC Health + Hospitals is required by the Public Authorities Reform Act of 2009 (the “**PARA**”) to adopt and to report to the New York State Office of the State Comptroller’s Authority Budget Office (the “**ABO**”) each year a mission statement and performance measures to assist NYC Health + Hospitals to assess its success in carrying out its mission. The ABO also requires completion of a specific form as part of the annual reporting. Attached is the Mission Statement, Performance Measures and the responses to complete the ABO form, all of which require the Board’s adoption.

NYC Health + Hospitals has made annual filings in compliance with the PARA since its adoption. The Mission Statement reflects the purposes of NYC Health + Hospitals as expressed in its enabling act and in its By-Laws. The Mission Statement on the ABO form is the version that will be posted on the NYC Health + Hospitals’ website.

AUTHORITY MISSION STATEMENT AND PERFORMANCE MEASUREMENTS

- To provide and deliver high quality, dignified and comprehensive care and treatment for the ill and infirm, both physical and mental, particularly to those who can least afford such services;
- To extend equally to all we serve comprehensive health services of the highest quality, in an atmosphere of human care and respect;
- To promote and protect, as both innovator and advocate, the health, welfare and safety of the people of the City of New York;
- To join with other health workers and with communities in a partnership which will enable each of our institutions to promote and protect health in its fullest sense -- the total physical, mental and social well-being of the people.

ADDITIONAL QUESTIONS:

- 1. Have the board members acknowledged that they have read and understood the mission of the public authority?**

Yes.

- 2. Who has the power to appoint the management of the public authority?**

Pursuant to the legislation that created NYC Health + Hospitals, the President is chosen by the members of the Board of Directors from persons other than themselves and serves at the pleasure of the Board. (Unconsolidated Law, section 7394)

- 3. If the Board appoints management, do you have a policy you follow when appointing the management of the public authority?**

The Governance Committee to the Board of Directors has, among its responsibilities, the duty to receive, evaluate and report to the Board of Directors with respect to the submissions of appointments of corporate officers.

- 4. Briefly describe the role of the Board and the role of management in the implementation of the mission.**

In addition to standing and special committees which have defined subject matter responsibilities and which meet on a regular basis, the Board of Directors meets a minimum of 10 times annually as mandated by our Enabling Act to fulfill its responsibility as the governing body of NYC Health + Hospitals and its respective facilities as required by law and regulation by the various regulatory and oversight entities that oversee NYC Health + Hospitals. Corporate by-laws and established policies outline the Board's participation in the oversight of the functions designated to management in order to ensure that NYC Health + Hospitals can achieve its mission in a legally compliant and fiscally responsible manner.

- 5. Has the Board acknowledged that they have read and understood the responses to each of these questions?**

Yes.

AUTHORIZATION TO MAKE ANNUAL FILING PURSUANT TO THE PUBLIC AUTHORITIES REPORT ACT

Board of Directors Meeting

Thursday, September 26, 2024

Jeremy Berman – Deputy General Counsel

**Matthew Siegler – Senior Vice President, Managed
Care & Patient Growth**

Board of Directors Consideration

- **Adopting the attached Mission Statement, Performance Measures and additional information to be submitted on behalf of New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) for Fiscal Year 2024 to Office of the State Comptroller’s Authorities Budget Office (the “ABO”) as required by the Public Authorities Reform Act of 2009 (the “PARA”).**

Public Authorities Reform Act of 2009 Requirements

- the Public Authorities Accountability Act was amended by the PARA to add additional reporting and oversight features
- the PARA requires local public authorities such as NYC Health + Hospitals to adopt each year a mission statement and performance measures to assist NYC Health + Hospitals in determining how well it is carrying out its mission
- the ABO requires reporting of NYC Health + Hospitals' mission and performance measures, as well as responses to certain questions on a form provided by that office and requires that the NYC Health + Hospitals Board of Directors read and understand the mission statement and the responses provided to the ABO and publicly posted on its website

System Dashboard

REPORTING PERIOD – Q3 FY24 (January 1 through March 31 | 2024)

	EXECUTIVE SPONSOR	REPORTING FREQUENCY	TARGET	ACTUAL FOR PERIOD*	VARIANCE TO TARGET	PRIOR PERIOD	PRIOR YEAR SAME PERIOD*	
QUALITY AND OUTCOMES								
1	Post Acute Care All Cause Hospitalization Rate (per 1,000 care days)	SVP CQO+SVP PAC	Quarterly	1.6	2.4	-0.9	2.0	2.5
2	Follow-up appointment kept within 30 days after behavioral health discharge	SVP CMO + SVP CQO	Quarterly	50%	65.4%	15.4%	63.9	51.7%
3	HgbA1c control < 8	SVP AMB + VP CPHO	Quarterly	67.3%	70.1%	2.8%	69.8%	68.5%
4	% Left without being seen in the ED	SVP CMO + SVP CQO	Quarterly	4.0%	5.08%	-1.08%	5.15%	4.8%
5	Integration of Bio Medical devices	SVP CIO	Quarterly-RETIRED METRIC	100%				
CARE EXPERIENCE								
6	Inpatient care - overall rating (top box)	SVP CQO + SVP CNE	Quarterly	66.3%	64.46%	-1.84%	61.91%	62.60%
7	Ambulatory care (medical practice) recommended provider office (top box)	SVP CQO + SVP AMB	Quarterly	87.0%	86.83%	-.17%	86.12%	85.96%
8	MyChart Activations	SVP CQO + SVP AMB	Quarterly	60%	56.2%	-3.8%	50%	58%
FINANCIAL SUSTAINABILITY								
9	Patient care revenue/expenses	SVP CFO + SVP MC	Quarterly	65%	73.1%	8.1%	73.8%	73.8%
10	% of Uninsured patients Enrolled in Health Insurance Coverage or Financial Assistance	SVP CFO + SVP MC	Quarterly	90%	71%	-19%	71%	80%
11	% of M+ medical spend at H+H	SVP MC	Quarterly	45%	46.6%	1.6%	43.3%	46.6%
12	Total AR days per month (Outpatient ,Inpatient)* [lower better for this measure]	SVP CFO	Quarterly	45	40.9	4.1	42.2	48.4
13	Post Acute Care Total AR days(12 months) [lower better for this measure]*	SVP CFO	Quarterly	50	48.0	2.0	45.0	48
14	Enterprise Data Center Migration progress	SVP CIO	Quarterly	100%	100%	0%	100%	100% of deliverables met; 92% complete
ACCESS TO CARE								
15	Unique primary care patients seen in last 12 months	SVP AMB	Quarterly	405,000	416,516	11,516	415,351	424,105
16	Number of e-consults completed/quarter	SVP AMB	Quarterly	95,100	113,813	18,713	103,385	111,445
17	NYC Care	SVP AMB	Quarterly	100,000	136,876	36,876	126,585	116,360
CULTURE OF SAFETY								
18	Total Wellness Encounters	SVP CQO + SVP CNE	Quarterly	600	1,904	1,304	1,274	586
RACIAL AND SOCIAL EQUITY								
19	% of New Physician Hires being underrepresented minority (URM)	SVP CMO + SVP HR	Quarterly	See slide 11				-
20	# of Equity Lenses Applied to PI Projects	SVP CQO	Quarterly (data will lag)	40	51 (partial)	11	85	73

*“Actual for Period” compared to “Prior Period” to designate positive (green), steady (yellow), or negative (red) trends.

*Total AR Days comparison period is from October to December 2023, rather than until March 2024, due to the Change Healthcare cyber attack that impacted the claims and remittance operations of many payers in addition to providers.

System Dashboard Glossary

REPORTING PERIOD – Q3 FY24 (January 1 through March 31 | 2024)

		DESCRIPTION
QUALITY AND OUTCOMES		
1	Post Acute Care All Cause Hospitalization Rate (per 1,000 care days)	Total # residents transferred from a PAC facility to hospital with outcome of admitted, inpatient/admitted over total # of resident care days
2	Follow-up appointment kept within 30 days after behavioral health discharge	Follow-up appointment kept with-in 30 days after behavioral health discharge
3	HgbA1c control < 8	Population health measure for diabetes control
4	% Left without being seen in the ED	Measure of ED efficiency and safety
5	Integration of Bio Medical devices (RETIRED METRIC)	Integration of strategic biomedical devices so that our nurses, doctors and ancillary staff are acting on the most up to date clinical information and are limiting non value added work. Our staff will be freed from data entry and able to spend more time on clinical care.
CARE EXPERIENCE		
6	Inpatient care - overall rating (top box)	Aggregate system-wide Acute Care/Hospital score HCAHPS Rate the Hospital 0-10 (Top Box)
7	Ambulatory care (medical practice) recommended provider office (top box)	Aggregate system-wide Acute Care/Hospital score HCAHPS Rate the Hospital 0-10 (Top Box)
8	MyChart Activations	Number of patients who have activated a MyChart account
FINANCIAL SUSTAINABILITY		
9	Patient care revenue/expenses	Measures patient care revenue growth and expense reduction adjusting for changes in city/state/federal policy or other issues outside H+H management's control
10	% of Uninsured patients Enrolled in Health Insurance Coverage or Financial Assistance	Measures effectiveness of financial counselling and registration processes in connecting patients to insurance or financial assistance
11	% of M+ medical spend at H+H	Global measure of Metro Plus efforts to steer patient volume to H+H, removes pharmacy and non-medical spend
12	Total AR days per month (Outpatient ,Inpatient)	Total accounts receivable days, excluding days where patient remains admitted (lower is better)
13	Post Acute Care Total AR days(12 months)	Total accounts receivable days (lower is better)
14	Data Center Migration progress (TO BE RETIRED, PROJECT COMPLETE)	Measures milestones achieved in major information technology project
ACCESS TO CARE		
15	Unique primary care patients seen in last 12 months	Measure of primary care growth and access; measures active patients only
16	Number of e-consults completed/quarter	Top priority initiative and measure of specialty access
17	NYC Care	Total enrollees in NYC Care program
CULTURE OF SAFETY		
18	Total Wellness Encounters *	This is an aggregate measure that includes the following: Number of 1:1 debriefs, Number of group debriefs, Number of combined support debriefs, & Number of wellness events



System Dashboard Glossary

REPORTING PERIOD – Q3 FY24 (January 1 through March 31 | 2024)

		DESCRIPTION
RACIAL AND SOCIAL EQUITY		
19	% of New Physician Hires being underrepresented minority (URM)	The percentages of physicians hired in the quarter who identify as Asian, Black or African American, Hispanic or Latino
20	# of Equity Lenses Applied to PI Projects	Total number of performance improvement projects that have data to support an equity focus to the project (e.g., quantified to focus on aim statement measure by an equity component such as primary language spoken in the home, race, ethnicity, gender). This metric will lag by 1 quarter as more PI projects are shared with the Office of Quality & Safety from across the System through various venues
COVID-19		
22	COVID-19 Tests Administered (RETIRED)	Total number of COVID-19 tests (swab and rapid) administered
23	COVID-19 Positive Tests (RETIRED)	Total number of tests yielding positive results (some positive results were recorded after June 30 th)
24	Post Acute Care COVID-19 Infection (RETIRED)	COVID-19 Infection Rate per 1,000 resident days
25	1 st dose vaccinations Administered (RETIRED)	Total number of 1 st dose vaccinations administered by NYC Health + Hospitals Facilities
26	2nd dose Vaccinations Administered (RETIRED)	Total number of 2nd dose vaccinations administered by NYC Health + Hospitals Facilities
27	% Bed Occupied(Not Including ED)	Average number of occupied beds divided by all active beds

AUTHORITY MISSION STATEMENT

- To provide and deliver high quality, dignified and comprehensive care and treatment for the ill and infirm, both physical and mental, particularly to those who can least afford such services;
- To extend equally to all we serve comprehensive health services of the highest quality, in an atmosphere of human care and respect;
- To promote and protect, as both innovator and advocate, the health, welfare and safety of the people of the City of New York;
- To join with other health workers and with communities in a partnership which will enable each of our institutions to promote and protect health in its fullest sense -- the total physical, mental and social well-being of the people.

ADDITIONAL QUESTIONS

1. Have the board members acknowledged that they have read and understood the mission of the public authority?
 - Yes
2. Who has the power to appoint the management of the public authority?
 - Pursuant to the legislation that created NYC Health + Hospitals, the President is chosen by the members of the Board of Directors from persons other than themselves and serves at the pleasure of the Board. (Unconsolidated Law, section 7394)
3. If the Board appoints management, do you have a policy you follow when appointing the management of the public authority?
 - The Governance Committee to the Board of Directors has, among its responsibilities, the duty to receive, evaluate and report to the Board of Directors with respect to the submissions of appointments of corporate officers.
4. Briefly describe the role of the Board and the role of management in the implementation of the mission.
 - In addition to standing and special committees which have defined subject matter responsibilities and which meet on a regular basis, the Board of Directors meets a minimum of 10 times per year as mandated by the Enabling Act to fulfill its responsibility as the governing body of NYC Health + Hospitals and its respective facilities as required by law and regulation by the various regulatory and oversight entities that oversee NYC Health + Hospitals. Corporate by-laws and established policies outline the Board's participation in the oversight of the functions designated to management in order to ensure that NYC Health + Hospitals can achieve its mission in a legally compliant and fiscally responsible manner.
5. Has the Board acknowledged that they have read and understood the responses to each of these questions?
 - Yes.

Board of Directors Request for Approval

- Adopting the attached **Mission Statement, Performance Measures** and additional information to be submitted on behalf of **New York City Health and Hospitals Corporation (“NYC Health + Hospitals”)** for **Fiscal Year 2024** to Office of the State Comptroller’s Authorities Budget Office (the “ABO”) as required by the Public Authorities Reform Act of 2009 (the “PARA”).

RESOLUTION - 09

Authorizing the New York City Health and Hospitals Corporation (the “System”) to execute agreements with the **19 vendors listed in Exhibit A for the provision of Legal Services for false claims act investigations and claims, general health care law, human subject research, employment law, bond counsel services, employment related immigration and labor law on behalf of the System** for an initial period of three-years and two one-year renewal options, exercisable at the discretion of the System, for an amount not to exceed \$51,300,000 over the potential five-year term.

WHEREAS, Legal Services support the System by providing expertise and resources that would be cost prohibitive for NYC Health + Hospitals to deploy; and

WHEREAS, the Request for Proposals was released on January 18, 2024 through its Supply Chain Services unit, followed by a pre-proposal conference, attended by forty-six vendors; and

WHEREAS, of the forty-six vendors that attended the pre-proposal conference, thirty-six vendors submitted proposals; and

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

WHEREAS, the 19 vendors listed on Exhibit A were selected for contract award; and

WHEREAS, the Senior Vice President and General Counsel will be responsible for the administration of the proposed agreements.

NOW THEREFORE, be it

RESOLVED, that the New York City Health and Hospitals Corporation (the “System”) be and hereby is authorized to execute agreements with the 19 vendors listed on Exhibit A for Legal Services for false claims act investigations and claims, general health care law, human subject research, employment law, bond counsel services, employment related immigration and labor law on behalf of the System. The initial term shall be three-years and two one-year renewal options, solely exercisable by the System. The total contract value shall not exceed \$51,300,000 over the potential five-year term.

EXECUTIVE SUMMARY
RESOLUTION TO AUTHORIZE CONTRACT
WITH LEGAL SERVICES PROVIDERS

OVERVIEW: The purpose of these agreements is to provide Legal Services.

PROCUREMENT: The System undertook an RFP to procure vendors to provide Legal Services. Thirty-six vendors provided proposals. After evaluation, the 19 vendors listed on Exhibit A were selected for contract award.

NEED: Legal Services support NYC Health + Hospitals' by providing expertise and resources for false claims act investigations and claims, general health care law, human subject research, employment law, bond counsel services, employment related immigration and labor law that would be cost prohibitive for NYC Health + Hospitals to deploy internally.

TERMS: The total not-to-exceed cost for the five-year contract is \$51,300,000.

MWBE: An MWBE goal was not designated for this Agreement.

Exhibit A

BOLD – indicates current incumbent

Abell Eskew Landau LLP
Binder & Schwartz LLP
Bryant Rabbino LLP
Crowell & Moring, LLP
Dentons US LLP
Epstein Becker & Green, P.C.
Fox Rothschild LLP
Garfunkel Wild, P.C
Harris Beach PLLC
Hawkins Delafield & Wood, LLP
Jackson Lewis P.C.
Kellogg, Hansen, Todd, Figel, & Frederick PLLC
Morgan Lewis & Bockius, LLP
Proskauer Rose LLP
Schoeman Updike & Kaufman LLP
Seyfarth Shaw LLP
Sheppard, Mullin, Richter & Hampton, LLP
Whiteman Osterman Hanna LLP
Wilson Elser Moskowitz Edelman & Dicker LLP

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

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

Digitally signed
by Irmali Rivera-
Bazan
Date:
2024.09.19
09:06:36 -0400

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

Contract: Legal Services

Date: September 19, 2024

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

Vendor Name	Vendor Responsibility	EEO	MWBE
Abell Eskew Landau LLP	Approved	Approved	N/A
Binder & Schwartz LLP	Approved	Approved	N/A
Bryant Rabbino LLP	Approved	Approved	N/A
Crowell & Moring, LLP	Approved	Pending	N/A
Dentons US LLP	Approved	Pending	N/A
Epstein Becker & Green, P.C.	Approved	Pending	N/A
Fox Rothschild LLP	Approved	Pending	N/A
Garfunkel Wild, P.C	Approved	Approved	N/A
Harris Beach PLLC	Approved	Approved	N/A
Hawkins Delafield & Wood, LLP	Approved	Approved	N/A
Jackson Lewis P.C.	Approved	Pending	N/A
Kellogg, Hansen, Todd, Figel, & Frederick PLLC	Approved	Pending	N/A
Morgan Lewis & Bockius, LLP	Approved	Pending	N/A
Proskauer Rose LLP	Approved	Pending	N/A
Schoeman Updike & Kaufman LLP	Approved	Approved	N/A
Seyfarth Shaw LLP	Approved	Pending	N/A
Sheppard, Mullin, Richter & Hampton, LLP	Approved	Pending	N/A
Whiteman Osterman Hanna LLP	Approved	Approved	N/A
Wilson Elser Moskowitz Edelman & Dicker LLP	Approved	Approved	N/A

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

Legal services Application to Enter into Contract with the Below 19 Vendors:

Abell Eskew Landau LLP; Binder & Schwartz LLP; Bryant Rabbino LLP; **Crowell & Moring, LLP**; Dentons US LLP; **Epstein Becker & Green, P.C.**; **Fox Rothschild LLP**; **Garfunkel Wild, P.C.**; **Harris Beach PLLC**; **Hawkins Delafield & Wood, LLP**; Jackson Lewis P.C.; **Kellogg, Hansen, Todd, Figel, & Frederick PLLC**; Morgan Lewis & Bockius, LLP; **Proskauer Rose LLP**; Schoeman Updike & Kaufman LLP; Seyfarth Shaw LLP; **Sheppard, Mullin, Richter & Hampton, LLP**; **Whiteman Osterman Hanna LLP**; Wilson Elser Moskowitz Edelman & Dicker LLP

**Board of Directors Meeting
September 26, 2024**

**Andrea G. Cohen
Senior Vice President & General Counsel**

For Board of Directors Consideration

- Authorizing the New York City Health and Hospitals Corporation (the “System”) to execute agreements with the 19 vendors listed in Exhibit A for the provision of Legal Services for general health care law, human subject research, false claims act investigations and claims, employment law, bond counsel services, employment related immigration and labor law on behalf of the System for an initial period of three-years and two one-year renewal options, exercisable at the discretion of the System, for an amount not to exceed \$51,300,000 over the potential five-year term.
 - **Abell Eskew Landau LLP; Binder & Schwartz LLP; Bryant Rabbino LLP; Crowell & Moring, LLP; Dentons US LLP; Epstein Becker & Green, P.C.; Fox Rothschild LLP; Garfunkel Wild, P.C; Harris Beach PLLC; Hawkins Delafield & Wood, LLP; Jackson Lewis P.C.; Kellogg, Hansen, Todd, Figel, & Frederick PLLC; Morgan Lewis & Bockius, LLP; Proskauer Rose LLP; Schoeman Updike & Kaufman LLP; Seyfarth Shaw LLP; Sheppard, Mullin, Richter & Hampton, LLP; Whiteman Osterman Hanna LLP; Wilson Elser Moskowitz Edelman & Dicker LLP**

Background & Current State

- The Office of Legal Affairs has contracted with a variety of outside law firms to provide a broad range of legal services to the System.
- The Board has recently approved procurements for law firms with expertise in medical malpractice matters and in mental health and guardianship matters.
- There is a current need to re-procure and re-contract with general health care law firms and law firms in several different specialty areas.

Future State

- We are now seeking to contract with outside firms to provide services in these seven specialized areas:
 - General Health Care law
 - Human Subject Research
 - False Claims Act investigations and claims
 - Employment law
 - Bond Counsel Services
 - Employment Related Immigration
 - Labor Law
- The contracts as a result of this RFP will provide NYC Health + Hospitals with access to highly specialized legal expertise that would not be feasible or cost-effective to develop and maintain in-house.
 - We continuously assess our outside legal spend and the legal market to determine whether we can bring specialized expertise in-house cost effectively
- We are looking to contract with multiple law firms for each scope of work to ensure that there is adequate capacity for our work and that we have options in case of attorney departures, unanticipated conflicts, and/or to engage in mini-bids for particular bodies of work.
- The scopes of work were developed based the System's evolving needs and our understanding of the market for legal services and how it's organized and priced.

Historical Spend

- Over the last 5 years, outside counsel expenses for these scopes of work has averaged approximately \$7.1 million annually, far below expectations and below prior spend.
- We are seeking authority to spend up to \$51.3m on this group of contracts. The NTE takes into account:
 - Hourly rates proposals are significantly higher than in 2019 reflecting legal services inflation and a changed approach to our solicitation
 - The NTE amount of \$51.3m is substantially lower than the prior contracts NTE of \$65m

RFP Minimum Criteria

- The firm must have been in business for a minimum of 3 years.
- The firm must maintain a minimum of \$5 million in professional liability insurance
- The firm must have the ability to securely handle and maintain any confidential information, including any protected health information (PHI).
- Firms desiring to bid for False Claims Act work must meet these additional criteria:
 - Employ at least 8 attorneys;
 - Maintain an office in the City of New York or surrounding metropolitan area;
 - At least one attorney assigned to any False Claims Act work must have at least 3 years prior relevant litigation experience working for the U.S. Department of Justice. Attorneys must be licensed to practice in New York
 - Partners managing our cases must have at least 5 years of appropriate experience
 - Firms must agree not to represent plaintiffs in actions against H+H or City of New York
- Firms desiring to bid for Bond Counsel work must meet these additional criteria:
 - Employ at least 2 tax attorneys specializing in IRS tax rules and 2-3 attorneys with expertise in Bond Counsel work with healthcare and municipal experience; as well as the capacity to provide arbitrage rebate analysis for tax-exempt bonds/loans.
- Firms desiring to bid for other scopes of work must meet additional criteria and experience based on that scope and the work expected to be assigned, including size of firm and specialty area.

RFP Criteria

- Substantive Criteria (across all scopes of work):
 - 65% Subject matter expertise and experience
 - 25% Cost & Billing
 - 10% MWBE

- Evaluation Committee

The Committee consisted of scope of work subcommittees responsible for evaluating the firms that proposed on specific scopes of work. These subcommittees had subject matter experts from across the System, representing the following departments:

 - Legal Affairs
 - Labor Relations
 - Finance
 - Human Resources
 - Compliance
 - Research
 - GME Metropolitan
 - Research Jacobi

Overview of Procurement

- 11/14/23: Application to issue request for proposals approved by CRC
- 1/18/24: RFP Posted on City Record
- 1/24/24: Pre-proposal conference calls held. 46 vendors attended the call
- 2/7/24: Held MWBE networking event
- 2/22/24: Proposals due, 41 proposals were submitted across all seven Scopes of Work
- May 2024: Vendor Presentations held for five Scopes of Work, with 28 firms invited to participate
- May 2024: Evaluation committee submitted final scores. Below are the top scoring proposers for all scopes of work:
 - Bond Counsel Services (2): Hawkins Delafield & Wood LLP, Bryant Rabbino LLP*
 - False Claims (4): Binder & Schwartz*, Abell Eskew, Kellogg Hansen, Sheppard Mullin
 - General Health Care law (6): Epstein Becker Green, Garfunkel Wild, Katten, Sheppard Mullin, Fox Rothschild, Dentons
 - Human Subject Research (2): Crowell and Moring, Epstein Becker Green
 - Employment Related Immigration (3): Harris Beach, Whiteman Osterman & Hanna LLP, Sheppard Mullin
 - Labor law (3): Epstein Becker Green, Seyfarth Shaw, Proskauer Rose
 - Employment law (5): Seyfarth Shaw, Jackson Lewis, Morgan Lewis & Bockius, Schoeman Updike & Kaufman*, Wilson Elser
- MWBE vendors

Vendor Diversity

- Each vendor is expected to self-perform the work of legal services on an as-needed basis
- Accordingly, no subcontracting goal was set on this solicitation
- 3 of the 19 awarded vendors are MWBEs
 - Schoeman Updike Kaufman & Gerber LLP is a NYC/NYS WBE
 - Bryant Rabbino LLP is a Black Male NYC/NYS MBE
 - Binder & Schwartz is a WBENC Certified WBE. We will assist with NYC MWBE certification.

For Board of Directors Consideration

- Authorizing the New York City Health and Hospitals Corporation (the “System”) to execute agreements with the 19 vendors listed in Exhibit A for the provision of Legal Services for false claims act investigations and claims, general health care law, human subject research, employment law, bond counsel services, employment related immigration and labor law on behalf of the System for an initial period of three-years and two one-year renewal options, exercisable at the discretion of the System, for an amount not to exceed \$51,300,000 over the potential five-year term.
 - Abell Eskew Landau LLP; Binder & Schwartz LLP; Bryant Rabbino LLP; **Crowell & Moring, LLP**; Dentons US LLP; **Epstein Becker & Green, P.C.**; **Fox Rothschild LLP**; **Garfunkel Wild, P.C.**; **Harris Beach PLLC**; **Hawkins Delafield & Wood, LLP**; Jackson Lewis P.C.; **Kellogg, Hansen, Todd, Figel, & Frederick PLLC**; Morgan Lewis & Bockius, LLP; **Proskauer Rose LLP**; Schoeman Updike & Kaufman LLP; Seyfarth Shaw LLP; **Sheppard, Mullin, Richter & Hampton, LLP**; **Whiteman Osterman Hanna LLP**; Wilson Elser Moskowitz Edelman & Dicker LLP

Exhibit A

- Abell Eskew Landau LLP
- Binder & Schwartz LLP
- Bryant Rabbino LLP
- **Crowell & Moring, LLP**
- Dentons US LLP
- **Epstein Becker & Green, P.C.**
- **Fox Rothschild LLP**
- **Garfunkel Wild, P.C**
- **Harris Beach PLLC**
- **Hawkins Delafield & Wood, LLP**
- Jackson Lewis P.C.
- **Kellogg, Hansen, Todd, Figel, & Frederick PLLC**
- Morgan Lewis & Bockius, LLP
- **Proskauer Rose LLP**
- Schoeman Updike & Kaufman LLP
- Seyfarth Shaw LLP
- **Sheppard, Mullin, Richter & Hampton, LLP**
- **Whiteman Osterman Hanna LLP**
- Wilson Elser Moskowitz Edelman & Dicker LLP

RESOLUTION - 10

Authorizing the New York City Health and Hospitals Corporation (the “System”) to execute an agreement with **Press Ganey Associates, LLC for the provision of Care Experience Surveys, including patient experience, employee engagement, nursing excellence, and healthcare consumerism, on behalf of the System** for an initial period of three-years and two one-year renewal options, exercisable at the discretion of the System, for an amount not to exceed \$12,380,433 over the potential five-year term.

WHEREAS, Care Experience Surveys support the System by fulfilling public reporting and mandated regulatory requirements as well as providing expertise and resources that would be cost prohibitive for NYC Health + Hospitals to deploy; and

WHEREAS, the current three-year agreement with two optional one-year renewals began on July 1, 2019 and expired on June, 30, 2024. A best interest extension, which expires on November 30, 2024, was executed in order to complete the procurement process and to finalize the new agreement; and

WHEREAS, the Request for Proposals was released on February 16, 2024 through its Supply Chain Services unit, followed by a pre-proposal conference, attended by sixteen vendors; and

WHEREAS, of the sixteen vendors that attended the pre-proposal conference, seven vendors submitted proposals; and

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

WHEREAS, Press Ganey Associates, LLC was selected for contract award; and

WHEREAS, the Senior Vice President, Chief Quality Officer will be responsible for the administration of the proposed agreements.

NOW THEREFORE, be it

RESOLVED, that the New York City Health and Hospitals Corporation (the “System”) be and hereby is authorized to execute an agreement with Press Ganey Associates, LLC for the provision of Care Experience Surveys, including patient experience, employee engagement, nursing excellence, and healthcare consumerism, on behalf of the System for an initial period of three-years and two one-year renewal options, exercisable at the discretion of the System, for an amount not to exceed \$12,380,433 over the potential five-year term.

EXECUTIVE SUMMARY
RESOLUTION TO AUTHORIZE CONTRACT
WITH
PRESS GANEY ASSOCIATES, LLC.

OVERVIEW: The purpose of these agreements is to provide a Care Survey Experience.

PROCUREMENT: The System undertook an RFP to procure vendors to provide Care Survey Experience Services, including patient experience, employee engagement, nursing excellence, and healthcare consumerism. Seven vendors provided proposals. After evaluation, Press Ganey Associates, LLC was selected to provide services.

NEED: Care Experience Surveys support NYC Health + Hospitals' by fulfilling public reporting and mandated regulatory requirements as well as providing expertise and resources that would be cost prohibitive for NYC Health + Hospitals to deploy internally.

TERMS: The total not-to-exceed cost for the five-year contract is \$12,380,433.

MWBE: A waiver has been approved for this Agreement consistent with the System's Vendor Diversity Policy regarding self-performance.

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

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

Irmali Rivera-Bazan
Digitally signed by Irmali Rivera-Bazan
Date: 2024.08.29 15:37:20 -04'00'

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

Contract: Care Experience

Date: August 16, 2024

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

<u>Vendor Name</u>	<u>Vendor Responsibility</u>	<u>EEO</u>	<u>MWBE</u>
Press Ganey Associates, LLC	Approved	Pending	Waiver

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.

Care Experience

Application to Enter into Contract - Press Garney Associates, LLC

Board of Directors Meeting
September 26, 2024

Jeremy Segall, MA, RDT, LCAT, FPCC
Assistant Vice President, Quality and Safety
Komal Lodaria, MA, FPCC
Senior Director, Quality and Safety

- Authorizing the New York City Health and Hospitals Corporation (the “System”) to execute agreements with **Press Ganey Associates, LLC** for the provision of Care Experience Surveys, including patient experience, employee engagement, nursing excellence, and healthcare consumerism, on behalf of the System for an initial period of three-years and two one-year renewal options, exercisable at the discretion of the System, for an amount not to exceed \$12,380,433 over the potential five-year term.

- The scope of this project is to seek a vendor for the health system's patient experience surveying, employee engagement and safety culture surveying, nursing excellence, and healthcare consumerism solutions and services
 - These services are needed to fulfill public reporting and regulatory requirements such as through CMS Star Ratings, hospital-based value-based purchasing, Leapfrog, Excellence in Person-Centered Care, Pathway to Excellence, Beacon, and Magnet programs, among others
 - The original contract was inclusive of two scopes of work: patient experience and employee engagement. Two additional scopes were added through contract amendment because of system priorities: nursing excellence and healthcare consumerism

- Initiating the RFP process allowed us to:
 - Increase cost-savings by combining multiple contracts into one streamlined procurement with all scopes of work
 - Renegotiate the terms of a new contract with the existing vendor, and/or
 - Leverage better pricing from a single vendor
 - Seek new vendor partnerships, products and service offerings to effectively meet our health system's needs and enhance the human experience strategy

- Press Ganey Associates was procured through an RFP and received a 3-year service agreement, with two 1-year extensions, which expired on June 30, 2024:
 - The total spend for the life of this contract was \$10,342,351
 - A five-month Best Interest Extension, with an expected spend of \$833,333, has been executed through November 30, 2024, in order for the RFP process, internal approvals, and the contracting process to be complete (since the current contract had expired this extension was approved by Management consistent with OP 100-05).
 - The total spend for the life of the current agreement and best interest extension is \$11,175,684

- Over the last five years, our evolving partnership with Press Ganey has allowed for additional opportunities to meet the needs of our workforce and community. We experienced improved collaboration when tailoring products and services, and gained better access to evidence-based improvement planning and best practice application tools and resources

➤ Minimum criteria:

- 5 years in business
- Similar experience in the subject matter areas outlined
- Currently servicing other large Integrated Delivery Network (IDN)

➤ Evaluation Committee:

- Senior Director, Care Experience
- Senior Director, Nursing Excellence/Research
- Care Experience Officer, Gotham Health
- Chief Quality Officer, Post-Acute Care
- Chief Strategy Officer, Community Care
- Director, Value and Safety
- Senior AVP, Human Resources
- AVP, Care Experience + Workforce Wellness
- Chief Experience Officer, Elmhurst
- Senior Director, EITS
- Asst. Director - Communications + Marketing
- AVP, Data and Analytics
- Director, Quality and Safety

Scoring Criteria

➤ Substantive Criteria - Scope 1 - Patient Experience

- 20% Patient surveying
- 20% Rounding Platform
- 20% Value Based Purchasing Calculator
- 20% Advisory
- 10% Cost
- 10% MWBE

➤ Substantive Criteria - Scope 2 - Employee Surveying

- 40% Employee Surveying
- 40% Best Practices Advisory
- 10% Cost
- 10% MWBE

➤ Substantive Criteria - Scope 3 - Nurse Excellence

- 80% Nursing excellence
- 10% Cost
- 10% MWBE

➤ Substantive Criteria - Scope 4 - Healthcare Consumerism

- 27% Digital Listings Management
- 27% Consumer Rating and Review Management
- 26% Consumer Outreach for feedback on services provided
- 10% Cost
- 10% MWBE

Overview of Procurement

- 9/26/23: Application to issue request for proposals approved by CRC
- 2/16/24: RFP Posted on City Record, sent directly to 11 vendors
- 2/23/24: Pre-proposal conference held, 16 vendors attended
- 3/18/24: Proposals due, 7 proposals received
- 5/13/24: Vendor Presentations held, 3 vendors were invited to participate
- 5/20/24: Evaluation committee submitted final scores. Below is the top scoring proposer for all 4 scopes of work:
 - SOW1 (Patient Experience) - Press Ganey
 - SOW2 (Employee Engagement) - Press Ganey
 - SOW3 (Nursing Excellence) - Press Ganey
 - SOW4 (Healthcare Consumerism) - Press Ganey

Vendor Performance

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

Vendor Decision

- Press Ganey has established the relationship and functionality needed to continue to support regulatory and compliance requirements for patient experience surveying
- Press Ganey has a large benchmarking database to compare the health system to meaningful peer groups such as other essential and safety net organizations, large integrated delivery networks, etc
- Other vendors noted longer and costlier implementation timelines.
- Press Ganey's Nursing Excellence solutions allow for the health system nursing teams to meet requirements due for all nursing excellence designations (e.g. Magnet, Pathway to Excellence, Beacon, etc.)
- Working with one vendor for all scopes of work allows for easier collaboration and alignment across patient experience, employee engagement, nursing excellence and healthcare consumerism efforts for the health system, and a more valuable and optimal integration with our electronic health record(s)
- Press Ganey's upgraded human experience platform is more aligned with the health System's experience strategy
- Reference checks were conducted

Vendor Diversity

- The Vendor Diversity team set an MWBE component percentage of 5% allocated to translation services
- Press Ganey submitted a waiver with their proposal as Press Ganey uses proprietary software to perform all work under the agreement, including translation services. This is true for Press Ganey for all of its clients
- Accordingly, and consistent with the System's Vendor Diversity Policy regarding self-performance, the Vendor Diversity team has evaluated and approved the waiver request

- The Quality and Safety, Care Experience department is seeking approval to enter into contract with Press Ganey to provide patient experience, employee engagement, well-being and safety culture surveying, nursing excellence, and healthcare consumerism services at a not-to-exceed amount of \$12,380,433
- Anticipated start date of December 1, 2024 for a initial term of three years with two one-year optional renewals at the discretion of NYC Health + Hospitals.

RESOLUTION - 11

Authorizing New York City Health and Hospitals Corporation (the “System”) to sign a five-year renewal revocable license agreement **with Lori’s Gifts, Inc., (“Lori’s”) for its use of approximately 884 square feet to operate a gift shop on the main floor of the “F Link Building” at NYC Health + Hospitals/Bellevue** (the “Facility”) at an annual occupancy fee of \$96,000 or 10% of gross sales, whichever is higher to escalate at 2.75% each year for a five-year total of at least \$507,136.

WHEREAS, for over 20 years, Lori’s has operated a gift shop in its current location in the Facility pursuant to concession agreements issued directly by the Facility with the most recent being made in 2014 and calling for an annual occupancy fee of the higher of \$72,000 or 10% of gross sales; and

WHEREAS, during the history of its occupancy, Lori’s has never had gross sales great enough to generate an occupancy fee in excess of the minimum annual payment; and

WHEREAS, the Facility has been happy with Lori’s operation and wishes to have its operations continue; and

WHEREAS, Lori’s sells primarily balloons, cards, and other typical gifts for patients as well as snacks and beverages consistent with the System’s Healthy Beverages standards; and

WHEREAS, the Facility has adequate space to house Lori’s operation; and

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

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 renewal revocable license agreement with **Lori’s Gifts, Inc., (“Lori’s”) for its use of approximately 884 square feet to operate a gift shop on the main floor of the “F Link Building” at NYC Health + Hospitals/Bellevue** (the “Facility”) at an annual occupancy fee of \$96,000 or 10% of gross sales, whichever is higher to escalate at 2.75% each year for a five-year total of at least \$507,136.

**EXECUTIVE SUMMARY
LICENSE AGREEMENT LORI’S GIFTS
BELLEVUE HOSPITAL CENTER**

BACKGROUND: The System seeks authorization to execute a 5-year renewal revocable license agreement with Lori’s Gifts Inc. (“**Lori’s**”) for 884 sq. ft. in which to continue to operate a gift shop on the 1st floor of the Facility’s “F Link Building.” Previous agreements for Lori’s operation have been structured as concession agreements made directly by the Facility.

NEED: Lori’s fills a need within the Facility for gifts that visitors can purchase for patients as well as providing a convenient way for staff and visitors to purchase snacks and soft drinks, consistent with the System’s Healthy Beverage Initiative.

TERMS: Lori’s will pay a minimum annual occupancy fee of \$96,000 or 10% of gross sales, whichever is higher. Additionally, Lori’s will pay \$214/month for its use of electricity. These payments represent an increase of more than 30% above the previous rate Lori’s was paying. The term of the License will be 5 years and shall be revocable by either party on 90 days’ notice.

Year	Value
1	\$96,000
2	\$98,640
3	\$101,353
4	\$104,140
5	\$107,004
Total	\$507,136

**Request to Authorize
License Agreement with
Lori's Gifts for Retail Location at
NYC Health + Hospitals/ Bellevue**

**Board of Directors Meeting
September 26, 2024**

**Marcia Peters, Chief Operating Officer, NYC Health + Hospitals/Bellevue
Leora Jontef, AVP, Real Estate & Housing
Jeremy Berman, Deputy General Counsel
Deborah Morris, AICP, Senior Director, Real Estate & Housing**

- Authorizing New York City Health and Hospitals Corporation (the “**System**”) to sign a five-year renewal revocable license agreement with Lori’s Gifts, Inc., (“**Lori’s**”) for its use of approximately 884 square feet to operate a gift shop on the ground floor of the “F Link Building” at NYC Health + Hospitals/Bellevue (the “**Facility**”) at an annual occupancy fee of \$96,000 or 10% of gross sales, whichever is higher to escalate at 2.75% each year for a five-year total of at least \$507,136.

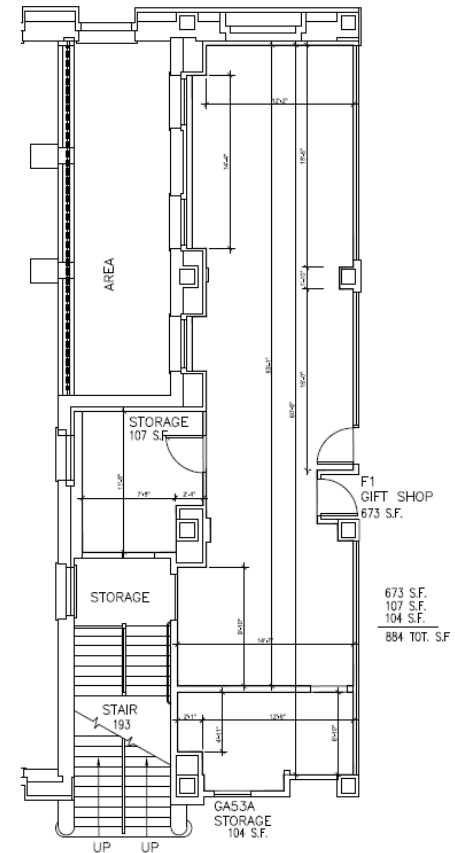
Lori's Gifts at Bellevue

- Hospital gift shops provide a valuable service to the healthcare community by offering a convenient location to purchase gifts, necessities, and snacks for visitors and staff
 - Visitors can purchase gifts to comfort and boost morale for patients, including balloons, cards, and personal care items
 - Staff have access to purchase a variety of snacks and healthy beverages consistent with the System's Healthy Beverage Initiative

- Lori's is the nation's largest provider of hospital gift shop solutions
 - Lori's has operated the gift shop at Bellevue for over 20 years
 - The previous concession agreement was issued directly by Bellevue for the same location
 - This agreement expired in May 2020. As this was at the height of the COVID response, the renewal did not occur. They have been operating without an agreement since.

Gift Shop Location

- Located in the F-Link Hallway on the Ground Floor at Bellevue
 - Total: 884 SF
 - Retail Floor: 673 SF
 - Storage Closet: 107 SF
 - Additional Storage: 104 SF



- **Term:** Five years, terminable by either party upon sixty days notice without cause
- **Hours of Operation:**
 - Weekdays 6:00 AM to Midnight
 - Weekends 9:00 AM to 8:00 PM
- **Occupancy Fee:** The greater of \$96,000 annually or 10% of gross sales, escalating 2.75% each year, generating at least \$507,136 over the course of five years
 - Represents increase from the previous minimum annual occupancy fee of \$72,000.

Year	Value
1	\$96,000
2	\$98,640
3	\$101,353
4	\$104,140
5	\$107,004
Total	\$507,136

- Authorizing New York City Health and Hospitals Corporation (the “System”) to sign a five-year renewal revocable license agreement with **Lori’s Gifts, Inc.**, (“Lori’s”) for its use of approximately 884 square feet to operate a gift shop on the ground floor of the “F Link Building” at NYC Health + Hospitals/Bellevue (the “Facility”) at an annual occupancy fee of \$96,000 or 10% of gross sales, whichever is higher to escalate at 2.75% each year for a five-year total of at least \$507,136.

RESOLUTION - 12

Authorizing New York City Health and Hospitals Corporation (the “System”) to sign a five-year revocable license agreement with **Fresh On the Go (“FOTG”) for its use of approximately 500 square feet to operate a food service on the 1st floor of the Main Hospital at NYC Health + Hospitals/Queens** (the “Facility”) at an annual occupancy fee of \$27,600 based on \$55.20/SF. to escalate at 2.75% each year for a five-year total of \$145,802.

WHEREAS, in November, 2023, the System’s Board of Directors authorized a five-year license with EveryTable to serve food in 500 SF on the Main Hospital’s 1st floor at the Facility; and

WHEREAS, EveryTable abruptly discontinued operations early this year leaving the Facility without other internal food options; and

WHEREAS, the leadership of the Facility looked for a replacement for EveryTable for more than six months; and

WHEREAS, FOTG was established in 2024 by the principal owners of Andy’s Cafe, which has operated in multiple System facilities including NYC Health + Hospitals/Kings and NYC Health + Hospitals/South Brooklyn; and

WHEREAS, FOTG will offer healthy food options such as a chopped salad bar, pasta bar station, healthy grab & go options, as well as sandwiches; and

WHEREAS, the Facility has adequate space to house FOTG using the exact space as had been intended for EveryTable; and

WHEREAS, the System will not be required to perform any work to outfit the space that FOTG will occupy and FOTG will renovate the space at its expense; and

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

NOW, THEREFORE, be it

RESOLVED, that the New York City Health and Hospitals Corporation be and hereby is authorized to sign a five-year revocable license agreement with **Fresh On the Go (“FOTG”) for its use of approximately 500 square feet to operate a food service on the 1st floor of the Main Hospital at NYC Health + Hospitals/Queens** (the “Facility”) at an annual occupancy fee of \$27,600 based on or \$55.20/SF. to escalate at 2.75% each year for a five-year total of \$145,802.

**EXECUTIVE SUMMARY
FRESH ON THE GO (“FOTG”)
QUEENS HOSPITAL CENTER**

BACKGROUND: The System seeks authorization to execute a 5-year revocable license agreement with FOTG for 500 square feet. in which to continue to operate a food service operation on the 1st floor of the Facility’s Main Hospital Building. In November, 2023, the System’s Board of Directors authorized a five-year license with EveryTable to serve food in 500 SF on the Main Hospital’s 1st floor at the Facility however, EveryTable abruptly discontinued operations early this year leaving the Facility without other internal food options. The leadership of the Facility looked for a replacement for EveryTable for more than six months before finding FOTG.

NEED: The Facility currently has no vendor providing food within the Facility. Commercial food options within walking distance of the Facility are limited. The System is committed to improving working conditions for its medical staff and providing healthy and appealing food options conveniently within the building is an important way to deliver on this commitment.

FOTG: FOTG was established in 2024 by the principal owners of Andy’s Cafe, which has operated for many years in multiple System facilities including NYC Health + Hospitals/Kings and NYC Health + Hospitals/South Brooklyn. FOTG is a new venture of the principals of Andy’s designed to meet the current demand for healthy food options.

PROGRAM: FOTG will prepare the space it will license for the new venture. FOTG has committed to a menu of healthy food options including a salad bar, healthy grab and go items, a pasta bar and sandwiches. The prices on the menu will increase only to keep pace with increases in the cost of living.

TERMS: SDI will pay an annual occupancy fee of \$27,600 based on \$55.20/SF. to escalate at 2.75% each year for a five-year total of 145,802. The occupancy fee is the fair market value of the space as assessed by the System’s consultant, Helmsley Spear, in its attached report. The cost of security, utilities, and housekeeping are included in the occupancy fee. The term of the license will be 5 years and shall be revocable by either party on 90 days’ notice.

Year	Price per SF	Total Occupancy Fee
1	\$55.20	\$ 27,600
2	\$56.72	\$ 28,359
3	\$58.28	\$ 29,139
4	\$59.88	\$ 29,940
5	\$61.53	\$ 30,764
Total		\$ 145,802

HELMSLEYSPEAR

August 13, 2024

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

Re: Fair Market Value/Appraisal of space within the
NYC Health + Hospitals/Queens Hospital
Regarding Food Vendor Fresh on the Go
On behalf of NYC Health + Hospitals Corporation

Dear Dion:

Pursuant to your request, you have asked for a broker's opinion letter for the referenced property and location in order to assess its fair market value (FMV) at current rental rates. This assessment is inclusive of the value of any tenant improvements and specified operating expenses such as utilities, housekeeping, security, service contracts, structural repairs, etc. As the licensor/landlord is designated as a not for profit (501C3), real estate taxes are not applicable, accordingly this should be considered when evaluating the value of the space in order to provide a comprehensive FMV. This evaluation will assess the estimated value of now current base rent inclusive of tenant improvements and operating expenses. This evaluation is subject to the following:

- The unit will be currently occupied for food vendor Fresh on the Go for sales and consumption and is appropriately zoned for that use.
- The proposed licensee/tenant will occupy a total of approximately 500 SF within the referenced buildings.
- The licensed/leased space will be located on the first floor of Queens Hospital's main Building.
- Licensed/leased space will be wheelchair accessible.
- This evaluation is for the purpose of establishing the current FMV to lease/license the referenced property and considers numerous factors including but not limited to location, market conditions, market area comparables, lease terms and conditions, as well as tenant improvements.

There are many variables to be considered in this evaluation. It is apparent that being part of the licensee's main campus is attractive. The location of the space provides the tenant with an immediate captured customer base. Additionally, the ability to enter into an all-inclusive transaction with no allocation for real estate taxes or other additional charges has value to the tenant/licensee. The provision of tenant services that are uncommon for non-medical facilities, i.e., 24/7 access and the provision of full-time services such as HVAC and security must also be factored in this evaluation.

The proposed food service space will be located within the medical complex of NYC Health + Hospitals/Queens Hospital. This is a unique property within the referenced market area. The proposal offers the prospective licensee/tenant access to a population in a full-service hospital building with amenities typically only found in hospitals and full-service medical office buildings.

It is our experience that the medical faculty is valued at a premium, simply due the fact that it is a finite resource which is in demand. It is apparent that proximity within the medical facility complex is attractive to the licensee/tenant and benefits the facility's patients, staff, and visitors as well. The provision of tenant services that are uncommon for retail facilities, i.e. 24/7 access, even if not utilized and the provision of full-time services such as HVAC, repairs and maintenance, security, etc. must also be factored into this evaluation. However, when assessing the value, the fact that the client base is limited to foot traffic within the hospital facility impacts the success of the licensee. The licensee has no opportunity to promote its presence, and the average pedestrian walking by the building would not be aware of this food service operation. However, it may not be a factor to this licensee/tenant.

The proposed licensee operates (or will operate) a food service retail location within the NYC Health + Hospitals/Queens Hospital. This report is based on a request for FMV for a 500 square foot space for a Fresh on the Go retail vendor of prepared foods. As it appears that the actual space has not yet been fully vetted as to exact location, it is necessary that for the licensee/tenant success, the location must be found on the ground floor of the hospital. This would give the tenant the most exposure to the prospective customers. Accordingly, this report assumes that the location will be on the ground floor.

CONCLUSION

The ability to access the space and the provision of food services without interruption is an amenity that would benefit any food service licensee/tenant. This retail user, however, remains viable only as long as access to these locations is available. If the Hospital restricts access either by reducing hours of access or adjusting the flow of the ground floor population, then the viability of this use will change. In evaluating these spaces, a significant expense for tenant improvements was assumed since the spaces exist and function as intended.

For the purposes of this appraisal, we should assume that all operating expenses, i.e. security, refuse removal, utilities, repairs and maintenance, service contracts, etc. are provided by the licensee/Landlord hospital.

In conclusion, this analysis finds that the FMV for this space is essentially a hybrid, due to the location of the space, use, captive audience, and lack of ability or need to promote as a true retail food service operation. It does provide the user with an immediate client base. It is our professional opinion, therefore, that the value of the referenced ground floor space is \$43.50 per RSF. Again, the space is improved so the licensor would have minimal expense in retrofitting this space other than previously described for its use or for its own branding.

It would be appropriate for the licensee to negotiate an escalation provision to the base rent/fee of 3.00% commencing in the second year of the license agreement. This increase would be annually and compounded. These terms would be commercially fair and reasonable based on the data and information assessed in this report.

In the event that I can be of any further assistance to you, please do not hesitate to call.

Thank You.

Very Truly Yours,

A handwritten signature in black ink, appearing to read "Michael Dubin", with a stylized flourish at the end.

Michael E. Dubin
Executive Managing Director

Schedule A – Comparables

Address	Cross Streets	Total SF	Price/SF	Sign Date
8315 Parsons Blvd	Parsons Blvd & Grand Central Pkwy	3,267 SF	\$50	9/2023
8315 Parsons Blvd	Parsons Blvd & Grand Central Pkwy	1,017 SF	\$50	7/2023
162-16 Union Tpke	164 th St & Union Tpke	3,700 SF	\$42	2/2023
15916 Union Tpke	160 th St & Union Tpke	725 SF	\$32	10/2021

**Request to Authorize
License Agreement with
Fresh on the Go for Retail Food Location at
NYC Health + Hospitals/ Queens**

**Board of Directors Meeting
September 26 2024**

**Michael Geldert, Associate Executive Director NYC Health + Hospitals/Queens
Leora Jontef, AVP, Real Estate & Housing
Jeremy Berman, Deputy General Counsel
Deborah Helaine Morris, AICP, Senior Director, Real Estate & Housing**

- Authorizing New York City Health and Hospitals Corporation (the “System”) to sign a five-year revocable license agreement with **Fresh On the Go (“FOTG”)** for its use of approximately 500 square feet to operate a food service on the 1st floor of the Main Hospital at NYC Health + Hospitals/Queens (the “Facility”) at an annual occupancy fee of \$27,600 based on \$55.20/SF. to escalate at 2.75% each year for a five-year total of \$145,802.

- Convenient food options are important to staff and patient satisfaction
 - Work schedules require access to food on campus
 - Healthy food choices are core to H+H values
 - Cost conscious pricing allows access to all
- NYC Health + Hospitals/Queens is in need of an option to offer employees, patients, and visitors to Queens
 - The previous establishment “Andy’s Cafe” closed November 2023 in order to make room for Everytable.
 - Currently there are no options internally for Queens Hospital, as the previous selected vendor (Everytable) filed for bankruptcy.
- NYC Health + Hospitals/Queens selected Fresh on the Go because:
 - Fresh On the Go was established in 2024 from the principal owners of Andy’s Café, who have several other H+H locations at NYC Health + Hospitals/South Brooklyn Health and Kings County
 - Fresh on the Go’s food tasting with Hospital staff was highly regarded
 - Fresh on the Go’s proposal offers an affordable, culturally-appropriate, and healthy menu at Queens

Background: Fresh On the Go

- Fresh On the Go will offer a culturally diverse and healthy menu at affordable prices for the Queens community:
 - Breakfast, Lunch and Dinner Foods, including kosher/halal options.
 - Hot and Cold Options – eggs, made to order sandwiches, hot soup, pasta, prepackaged salads, salad bar, and daily hot entrees range \$2.50-\$11.00
 - Queens will approve prices changes other than cost of living adjustments.



CHOPPED SALAD BAR

\$8.25 per Pound

Dressings Available:

Country French

Ranch

Thousand Island

Balsamic Vinaigrette

Creamy Caesar

Creamy Italian

Blue Cheese

Olive Oil & Vinegar

FRESH ON THE GO

Lunch

	<u>Price</u>
Side Orders	
Home Fries	\$3.75
Onion Rings	\$4.25
Kidney Bean Salad	\$2.95
Jamaican Beef Patties	\$3.50
Chicken Patties	\$3.50
Potato Knish	\$3.25
All Puddings	\$2.95
Jello	\$2.25
Greek Yogurt	\$3.50
Chick Pea Salad	\$2.95
Potato Salad	\$2.95
Macaroni Salad	\$2.95
Pasta Salad	\$4.95
Fruit	\$1.25
Apple	
Orange	
Banana	
Pear	
Prepackaged Salads	
Tossed Salad	\$3.95
Greek Salad	\$4.95
Chef Salad	\$5.50
Add Grilled Chicken	\$3.95
Add Tuna	\$3.95
Add Chicken Salad	\$3.95

Soup Selections

One Soup Available Daily On A Rotational Basis availability varies by day

Chicken Noodle

Chicken Rice

Chicken Barley

Cream of Chicken

Lentil

Yankee Bean

Split Pea

Broccoli and Cheddar

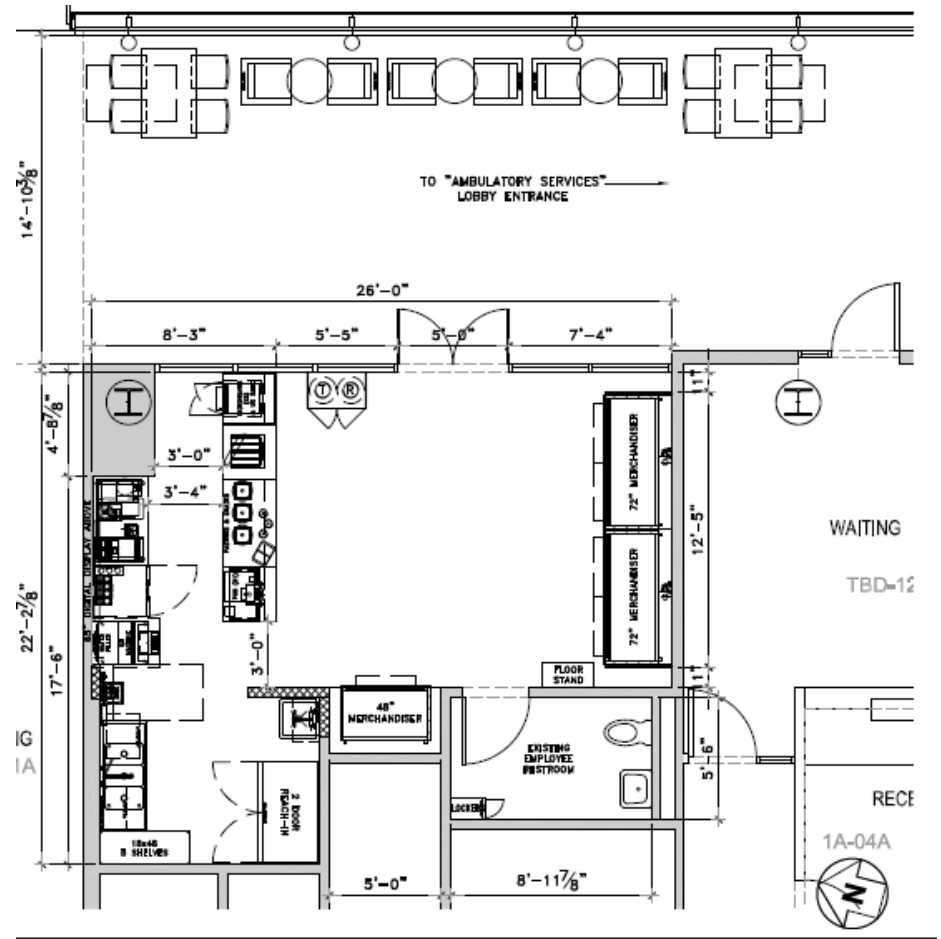
Beef Barley

Minestrone

Vegetable

Proposed Renovation

- Fresh On the Go will be responsible for the cost of construction
- Fresh On the Go estimates capital investment of approximately \$150,000 for the renovation
- Estimated to open by the end of 2024



License Terms

- Term: Five years, terminable by either party upon thirty days notice without cause
- Location: Main Hospital 1st floor of NYC Health + Hospitals/Queens
- Hours of Operation: Approximately 6:00 am to 9:00 pm on weekdays and 6:00 am to 3:00 pm on weekends
- Rent is fair market value
- Occupancy Fee: First year, \$27,600 annually (increasing annually 2.75%)
- Total value of five year occupancy: \$145,802

Year	Price per SF	Total Occupancy Fee
1	\$55.20	\$ 27,600
2	\$56.72	\$ 28,359
3	\$58.28	\$ 29,139
4	\$59.88	\$ 29,940
5	\$61.53	\$ 30,764
Total		\$ 145,802

- Authorizing New York City Health and Hospitals Corporation (the “System”) to sign a five-year revocable license agreement with **Fresh On the Go (“FOTG”)** for its use of approximately 500 square feet to operate a food service on the 1st floor of the Main Hospital at NYC Health + Hospitals/Queens (the “Facility”) at an annual occupancy fee of \$27,600 based on \$55.20/SF. to escalate at 2.75% each year for a five-year total of \$145,802.

RESOLUTION - 13

Authorizing New York City Health and Hospitals Corporation (the “System”) to execute requirements contracts with **ten architectural and engineering (“AE”) consulting firms (Gensler Architecture, Design & Planning, P.C., LiRo Engineers, Inc., Perkins Eastman Architects, DPC, Moody Nolan Inc., NK Architects, P.A., Lothrop Associate Architects D.P.C., Studio A+T Architects P.C., SBLM Architects P.C., Array Architects, PC., and STV Incorporated) to provide professional AE design services** over a term of three years with two 1-year renewal options for an amount not to exceed \$70,000,000.

WHEREAS, NYC Health + Hospitals facilities require, from time to time, professional AE design services, and the needs of its facilities for such services can best be met by utilizing outside firms, on an as-needed basis; and

WHEREAS, the availability of such requirements contractors has proven to be very useful and valuable to NYC Health + Hospitals and has greatly contributed to its ability to respond promptly to construction, planning and maintenance needs; and

WHEREAS, the System’s current contracts with AE firms expire on December 31, 2024; and

WHEREAS, the Contract Review Committee authorized the System to issue a Request for Proposals (“RFP”) to procure such professional services on February 14, 2023, and an RFP was issued on July 6, 2023, pre-proposal conferences were conducted on July 14, 2023 with 122 vendors participating on the general pool conference, 21 firms submitted proposals to the general pool procurement, the evaluation committees gave ten firms the highest rating to provide AE services; and

WHEREAS, all selected firms have all committed to MWBE subcontracting plans of 30% or more; and

WHEREAS, the System’s Office of Facility Development will be responsible for the management of the proposed agreements.

NOW THEREFORE, be it

RESOLVED, that the New York City Health and Hospitals Corporation be and hereby is authorized to execute requirements contracts with **ten architectural and engineering (“AE”) consulting firms (Gensler Architecture, Design & Planning, P.C., LiRo Engineers, Inc., Perkins Eastman Architects, DPC, Moody Nolan Inc., NK Architects, P.A., Lothrop Associate Architects D.P.C., Studio A+T Architects P.C., SBLM Architects P.C., Array Architects, PC., and STV Incorporated) to provide professional AE design services** over a term of three years with two 1-year renewal options for an amount not to exceed \$70,000,000.

EXECUTIVE SUMMARY
SYSTEM-WIDE REQUIREMENTS CONTRACTS TO PROVIDE
ARCHITECTURAL AND ENGINEERING SERVICES

OVERVIEW: NYC Health + Hospitals seeks to execute ten requirements contracts for three years, with separate options to renew each for two additional one-year periods, for a total cost over five years, not-to-exceed \$70,000,000 to provide Architectural and Engineering design services.

NEED: The various facilities of NYC Health + Hospitals from time to time require Architectural and Engineering design services for projects throughout the System. Due to fluctuating demands and the licensing requirements for such services, NYC Health + Hospitals has determined that these needs can best be met by utilizing outside firms on an as-needed basis through requirements contracts.

CONTRACT

TERMS: Each contract will provide that NYC Health + Hospitals will be under no obligation to use any particular firm. Projects will be given to a particular firm following mini-procurements among the vendors. Then the project will be reflected in work orders each of which will specify total pricing, work schedules and any other relevant terms. The vendors' rates will be as set forth in their master agreements which will be made pursuant to this resolution

COST: Not-to-exceed \$70,000,000 over five years, for the ten firms.

FINANCING: Capital, pending development of specific projects to be funded by bond proceeds, expense or other funds.

TERM: Upon contract execution, a base period of three years, with an option to renew for two additional contract periods of one year each, solely at the discretion of NYC Health + Hospitals.

MWBE: Gensler - 30% utilization plan; Liro Group - 30% utilization plan; Perkins Eastman - 30% utilization plan; Lothrop - 30% utilization plan; Array Architects - 30% utilization plan; STV Inc. - 30% utilization plan; SBLM – 56% utilization plan; NK Architects – 50% utilization plan; Moody Nolan – 100% utilization plan; Studio A+T 100% utilization plan.

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

Contracts: Architecture and Engineering Consulting Services

Date: September 18, 2024

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

<u>Vendor</u>	<u>Vendor Responsibility</u>	<u>EEO</u>	<u>MWBE</u>
Gensler Architecture, Design & Planning, P.C.	Approved	Pending	30%
Perkins Eastman Architects, DPC	Approved	Approved	30%
LiRo Engineers, Inc. D/B/A The Liro Group	Approved	Pending	30%
Lothrop Associate Architects D.P.C.	Approved	Pending	30%
NK Architects P.A.	Approved	Approved	50%
Moody Nolan, Inc.	Pending	Pending	100%
Array Architects, PC	Approved	Approved	30%
SBLM Architects PC	Approved	Pending	56%
Studio A+T Architects P.C.	Pending	Pending	100%
STV Incorporated	Approved	Approved	30%

RESOLUTION - 14

Authorizing New York City Health and Hospitals Corporation (the “System”) to execute requirements contracts with **six MWBE architectural and engineering (“AE”) consulting firms (Moody Nolan Inc., Twine Architectural Studio, P.C., Matiz Architecture PLLC, Zambrano Architectural Design, LLC, Sabir, Richardson & Weisberg Engineering & Architecture PLLC, and Foit-Albert Associates, Architecture, Engineering & Surveying, P.C.) provide professional AE design services** over a term of three years with two 1-year renewal options for an amount not to exceed \$20,000,000.

WHEREAS, NYC Health + Hospitals facilities require, from time to time, professional AE/MEP design services, and the needs of its facilities for such services can best be met by utilizing outside firms, on an as-needed basis; and

WHEREAS, the availability of such requirements contractors has proven to be very useful and valuable to NYC Health + Hospitals and has greatly contributed to its ability to respond promptly to construction, planning and maintenance needs; and

WHEREAS, the System’s current contracts with AE firms expire on December 31, 2024; and

WHEREAS, the Contract Review Committee authorized the System to issue a Request for Proposals (“RFP”) to procure such professional services on February 14, 2023, and an RFP was issued on July 6, 2023, pre-proposal conferences were conducted on July 14, 2023 with 110 vendors participating on the MWBE conference, 12 firms submitted proposals for the MWBE procurement, the evaluation committees gave six firms to provide AE services; and

WHEREAS, all selected firms are certified MWBE firms; and

WHEREAS, the System’s Office of Facility Development will be responsible for the management of the proposed agreements.

NOW THEREFORE, be it

RESOLVED, that the New York City Health and Hospitals Corporation be and hereby is authorized execute requirements contracts with six MWBE architectural and engineering (“AE”) consulting firms (Moody Nolan Inc., Twine Architectural Studio, P.C., Matiz Architecture PLLC, Zambrano Architectural Design, LLC, Sabir, Richardson & Weisberg Engineering & Architecture PLLC, and Foit-Albert Associates, Architecture, Engineering & Surveying, P.C.) provide professional AE design services over a term of three years with two 1-year renewal options for an amount not to exceed \$20,000,000

EXECUTIVE SUMMARY
SYSTEM-WIDE REQUIREMENTS CONTRACTS TO PROVIDE
ARCHITECTURAL AND ENGINEERING SERVICES

OVERVIEW: NYC Health + Hospitals seeks to execute six requirements contracts with certified MWBE firms for three years, with separate options to renew each for two additional one-year periods, for a total cost over five years, not-to-exceed \$20,000,000 to provide Architectural and Engineering design services, for a total not to exceed value over all contracts of \$20,000,000.

NEED: The various facilities of NYC Health + Hospitals from time to time require Architectural and Engineering design services for projects throughout the System. Due to fluctuating demands and the licensing requirements for such services, NYC Health + Hospitals has determined that these needs can best be met by utilizing outside firms on an as-needed basis through requirements contracts.

CONTRACT

TERMS: Each contract will provide that NYC Health + Hospitals will be under no obligation to use any particular firm. Projects will be given to a particular firm following mini-procurements among the vendors. Then the project will be reflected in work orders each of which will specify total pricing, work schedules and any other relevant terms. The vendors' rates will be as set forth in their master agreements which will be made pursuant to this resolution

COST: Not-to-exceed \$20,000,000 over five years, for the six firms.

FINANCING: Capital, pending development of specific projects to be funded by bond proceeds, expense or other funds.

TERM: Upon contract execution, a base period of three years, with an option to renew for two additional contract periods of one year each, solely at the discretion of NYC Health + Hospitals.

MWBE: All are certified MWBE vendors.



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

Contract: Architecture and Engineering Consulting Services - MWBE

Date: September 18, 2024

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

<u>Vendor</u>	<u>Vendor Responsibility</u>	<u>EEO</u>	<u>MWBE</u>
Moody Nolan, Inc.	Pending	Pending	100%
Matiz Architecture PLLC	Approved	Pending	100%
Twine Architectural Studio, P.C. D/B/A P. Chow Architect, PC	Pending	Pending	100%
Zambrano Architectural Design, LLC	Approved	Pending	100%
Foit-Albert Associates, Architecture, Engineering & Surveying, P.C.	Approved	Pending	100%
Sabir, Richardson & Weisberg Engineering & Architecture PLLC	Approved	Pending	100%

RESOLUTION - 15

Authorizing New York City Health and Hospitals Corporation (the “System”) to execute requirements contracts with **six mechanical, electrical, and plumbing (“MEP”) consulting firms (Cameron Engineering & Associates, LLP, Tetra Tech Engineers, Architects & Landscape Architects, P.C., Thornton Tomasetti, Inc., MG Engineering D.P.C., Lizardos Engineering Associates D.P.C., and Loring Consulting Engineers, Inc) to provide professional MEP design services** over a term of three years with two 1-year renewal options for an amount not to exceed \$25,000,000.

WHEREAS, NYC Health + Hospitals facilities require, from time to time, professional MEP design services, and the needs of its facilities for such services can best be met by utilizing outside firms, on an as-needed basis; and

WHEREAS, the availability of such requirements vendors has proven to be very useful and valuable to NYC Health + Hospitals and has greatly contributed to its ability to respond promptly to construction, planning and maintenance needs; and

WHEREAS, the System’s current contracts with MEP firms expire on December 31, 2024; and

WHEREAS, the Contract Review Committee authorized the System to issue a Request for Proposals (“RFP”) to procure such professional services on February 14, 2023, and an RFP was issued on July 6, 2023, pre-proposal conferences were conducted on July 14, 2023 with 122 vendors participating on the general pool conference, 12 firms submitted proposals to the general pool procurement, the evaluation committees gave six firms the highest rating to provide MEP services; and

WHEREAS, all selected firms have committed to MWBE subcontracting plans of 30% or more; and

WHEREAS, the System’s Office of Facility Development will be responsible for the management of the proposed agreements.

NOW THEREFORE, be it

RESOLVED, that the New York City Health and Hospitals Corporation be and hereby is authorized to execute requirements contracts with six mechanical, electrical, and plumbing (“MEP”) consulting firms (Cameron Engineering & Associates, LLP, Tetra Tech Engineers, Architects & Landscape Architects, P.C., Thornton Tomasetti, Inc., MG Engineering D.P.C., Lizardos Engineering Associates D.P.C., and Loring Consulting Engineers, Inc) to provide professional MEP design services over a term of three years with two 1-year renewal options for an amount not to exceed \$25,000,000.

**EXECUTIVE SUMMARY
SYSTEM-WIDE REQUIREMENTS CONTRACTS TO PROVIDE MECHANICAL,
ELECTRICAL AND PLUMBING DESIGN SERVICES.**

OVERVIEW: NYC Health + Hospitals seeks to execute six requirements contracts for three years, with separate options to renew each for two additional one-year periods, for a total cost over five years, not-to-exceed \$25,000,000 to provide Mechanical, Electrical and Plumbing design services.

NEED: The various facilities of NYC Health + Hospitals from time to time require Mechanical, Electrical, and Plumbing design services for projects throughout the System. Due to fluctuating demands and the licensing requirements for such services, NYC Health + Hospitals has determined that these needs can best be met by utilizing outside firms on an as-needed basis through requirements contracts.

CONTRACT

TERMS: Each contract will provide that NYC Health + Hospitals will be under no obligation to use any particular firm. Projects will be given to a particular firm following mini-procurements among the vendors. Then the project will be reflected in work orders each of which will specify total pricing, work schedules and any other relevant terms. The vendors' rates will be as set forth in their master agreements which will be made pursuant to this resolution

COST: Not-to-exceed \$25,000,000 over five years, for the six firms.

FINANCING: Capital, pending development of specific projects to be funded by bond proceeds, expense or other funds.

TERM: Upon contract execution, a base period of three years, with an option to renew for two additional contract periods of one year each, solely at the discretion of NYC Health + Hospitals.

MWBE: Cameron Engineering – 30% utilization plan; Consentini - 34% utilization plan; Thornton Tomasetti -30% utilization plan; MGE - 30% utilization plan; Lizardos - 50% utilization plan; Loring Consulting - 61% utilization plan.

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

Contracts: Mechanical, Electrical, and Plumbing Consulting Services

Date: September 18, 2024

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

<u>Vendor</u>	<u>Vendor Responsibility</u>	<u>EEO</u>	<u>MWBE</u>
Thornton Tomasetti, Inc.	Approved	Pending	30%
Cameron Engineering & Associates, LLP	Approved	Pending	30%
Tetra Tech Engineers & Architects & Landscape Architects, P.C. D/B/A Cosentini Associates	Pending	Pending	34%
MG Engineering D.P.C.	Approved	Approved	30%
Loring Consulting Engineers, Inc.	Pending	Approved	61%
Lizardos Engineering Associates D.P.C	Pending	Pending	50%

RESOLUTION - 16

Authorizing New York City Health and Hospitals Corporation (the “System”) to execute requirements contracts with **three MWBE mechanical, electrical, and plumbing (“MEP”) consulting firms (Milhouse Engineering and Construction, Inc., Shenoy Engineering, PC, and Jacob Feinberg Katz & Michaeli Consulting Group, LLC) to provide professional MEP design services** over a term of three years with two 1-year renewal options for an amount not to exceed \$5,000,000.

WHEREAS, NYC Health + Hospitals facilities require, from time to time, professional MEP design services, and the needs of its facilities for such services can best be met by utilizing outside firms, on an as-needed basis; and

WHEREAS, the availability of such requirements vendors has proven to be very useful and valuable to NYC Health + Hospitals and has greatly contributed to its ability to respond promptly to construction, planning and maintenance needs; and

WHEREAS, the System’s current contracts with MEP firms expire on December 31, 2024; and

WHEREAS, the Contract Review Committee authorized the System to issue a Request for Proposals (“RFP”) to procure such professional services on February 14, 2023, and an RFP was issued on July 6, 2023, pre-proposal conferences were conducted on July 14, 2023 with 110 vendors participating on the MWBE conference, 4 firms submitted proposals for the MWBE procurement, the evaluation committees gave three MWBE MEP services; and

WHEREAS, all selected firms are certified MWBE; and

WHEREAS, the System’s Office of Facility Development will be responsible for the management of the proposed agreements.

NOW THEREFORE, be it

RESOLVED, that the New York City Health and Hospitals Corporation be and hereby is authorized to execute requirements contracts with **three MWBE mechanical, electrical, and plumbing (“MEP”) consulting firms (Milhouse Engineering and Construction, Inc., Shenoy Engineering, PC, and Jacob Feinberg Katz & Michaeli Consulting Group, LLC) to provide professional MEP design services** over a term of three years with two 1-year renewal options for an amount not to exceed \$5,000,000.

**EXECUTIVE SUMMARY
SYSTEM-WIDE REQUIREMENTS CONTRACTS TO PROVIDE MECHANICAL,
ELECTRICAL AND PLUMBING DESIGN SERVICES.**

OVERVIEW: NYC Health + Hospitals seeks to execute three MWBE requirements contracts for three years, with separate options to renew each for two additional one-year periods, for a total cost over five years, not-to-exceed \$5,000,000 to provide Mechanical, Electrical and Plumbing design services.

NEED: The various facilities of NYC Health + Hospitals from time to time require Mechanical, Electrical, and Plumbing design services for projects throughout the System. Due to fluctuating demands and the licensing requirements for such services, NYC Health + Hospitals has determined that these needs can best be met by utilizing outside firms on an as-needed basis through requirements contracts.

CONTRACT

TERMS: Each contract will provide that NYC Health + Hospitals will be under no obligation to use any particular firm. Projects will be given to a particular firm following mini-procurements among the vendors. Then the project will be reflected in work orders each of which will specify total pricing, work schedules and any other relevant terms. The vendors' rates will be as set forth in their master agreements which will be made pursuant to this resolution

COST: Not-to-exceed \$5,000,000 over five years, for the three firms.

FINANCING: Capital, pending development of specific projects to be funded by bond proceeds, expense or other funds.

TERM: Upon contract execution, a base period of three years, with an option to renew for two additional contract periods of one year each, solely at the discretion of NYC Health + Hospitals.

MWBE: All selected firms are MWBE.



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

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

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

Contracts: Mechanical, Electrical, and Plumbing Consulting Services

Date: September 4, 2024

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

<u>Vendor</u>	<u>Vendor Responsibility</u>	<u>EEO</u>	<u>MWBE</u>
Shenoy Engineering, PC	Approved	Pending	100%
Milhouse Engineering and Construction, Inc.	Approved	Pending	100%
Jacob Feinberg Katz & Michaeli Consulting Group, LLC D/B/A JFK&M Consulting Group	Approved	Pending	100%

**Request to Award Pool Contract for
Architectural/Engineering (AE) & Mechanical,
Electrical, Plumbing (MEP) Design Services**

**Board of Directors Meeting
September 26, 2024**

**Manuel Saez, PhD, VP OFD
Oscar Gonzalez, SAVP OFD
Al Channer, Sr. Director OFD**

Request for Board of Directors Consideration- AE and MWBE Pool

- Authorizing New York City Health and Hospitals Corporation (the “System”) to execute requirements contracts with **ten architectural and engineering (“AE”) consulting firms (Gensler Architecture, Design & Planning, P.C., LiRo Engineers, Inc., Perkins Eastman Architects, DPC, Moody Nolan Inc., NK Architects, P.A., Lothrop Associate Architects D.P.C., Studio A+T Architects P.C., SBLM Architects P.C., Array Architects, PC., and STV Incorporated)** to provide professional **AE design services** over a term of three years with two 1-year renewal options for an amount not to exceed \$70,000,000.
- Authorizing New York City Health and Hospitals Corporation (the “System”) to execute requirements contracts with **six MWBE architectural and engineering (“AE”) consulting firms (Moody Nolan Inc., Twine Architectural Studio, P.C., Matiz Architecture PLLC, Zambrano Architectural Design, LLC, Sabir, Richardson & Weisberg Engineering & Architecture PLLC, and Foit-Albert Associates, Architecture, Engineering & Surveying, P.C.)** provide professional **AE design services** over a term of three years with two 1-year renewal options for an amount not to exceed \$20,000,000.

Request for Board of Directors Consideration – MEP and MEP MWBE Pool

- Authorizing New York City Health and Hospitals Corporation (the “System”) to execute requirements contracts with **six mechanical, electrical, and plumbing (“MEP”) consulting firms (Cameron Engineering & Associates, LLP, Tetra Tech Engineers, Architects & Landscape Architects, P.C., Thornton Tomasetti, Inc., MG Engineering D.P.C., Lizardos Engineering Associates D.P.C., and Loring Consulting Engineers, Inc)** to provide **professional MEP design services** over a term of three years with two 1-year renewal options for an amount not to exceed \$25,000,000.
- Authorizing New York City Health and Hospitals Corporation (the “System”) to execute requirements contracts with **three MWBE mechanical, electrical, and plumbing (“MEP”) consulting firms (Milhouse Engineering and Construction, Inc., Shenoy Engineering, PC, and Jacob Feinberg Katz & Michaeli Consulting Group, LLC)** to provide **professional MEP design services** over a term of three years with two 1-year renewal options for an amount not to exceed \$5,000,000.

Background

- NYC Health + Hospitals requires professional architectural, engineering, design, and construction phase services on an as needed basis, for projects throughout the system. Services shall include, but not be limited to:
 - Design and Planning services
 - Feasibility studies
 - Preparation of construction documents
 - Construction administration services
 - Independent Cost Estimating

- The current pool is made up of 15 vendors (10 Architecture/Engineering (“AE”) & 5 Mechanical Electrical Plumbing (“MEP”)): Contract to expire on 12/31/2024.

- This was a very large procurement that took over a year to complete

Pooled Contract

- We are looking to increase MWBE-certified firms in our pools – to that end we are looking to bifurcate the AE and MEP pools:
 - Firms that commit to 30% MWBE spend (“General”)
 - Will be allocated projects that are \$1M-20M of total value.
 - MWBE-certified firms (“MWBE”)
 - Will be allocated projects \$0-1.5M of total value.
- 🌀 Distribution of work to be assigned via mini-RFPs
- Cost breakdown of the pools:

	General	MWBE	Total
AE	\$70M	\$20M	\$90M
MEP	\$25M	\$5M	\$30M
Total	\$95M	\$25M	\$120M

RFP Criteria

General Criteria

- Minimum criteria:
 - 30% MWBE Utilization Plan
 - Minimum of 5 years of A/E, MEP services in healthcare facilities
 - Licensed professionals must hold New York State licenses in their discipline

- Substantive Criteria

➤ Proposed Approach & Methodology	25%
➤ Appropriateness & Quality of Experience	25%
➤ Qualifications of Consultant & Staffing	25%
➤ Cost	15%
➤ MWBE Status/Utilization Plan	10%

- Evaluation Committee
- Director of Design, OFD
 - Director of Capital Construction, OFD/ South Brooklyn Health
 - Assistant Director of Design, OFD
 - Senior Director, Finance
 - Chief Infrastructure Officer, Gotham Health

MWBE Criteria

- Minimum criteria:
 - MWBE Certification
 - Minimum of 5 years of A/E, MEP services in healthcare facilities
 - Licensed professionals must hold New York State licenses in their discipline

- Substantive Criteria

➤ Proposed Approach & Methodology	40%
➤ Qualifications of Consultant & Staffing	40%
➤ Appropriateness & Quality of Experience	10%
➤ Cost	10%

Overview of Procurement

- 2/14/23: Application to issue request for proposals approved by CRC
- 7/6/23: RFP Posted on City Record, each pool was an independent procurement
- Vendor List: - 155 vendors: 115 MWBE certified vendors identified with Vendor Diversity Team
- 7/14/23: Pre-proposal conference calls held.
 - 122 vendors attended the General Pool call; 110 vendors attended the MWBE call.
- 9/1/23: Proposals due, 33 General pool proposals and 16 MWBE proposals were submitted
- Feb-Mar 2024: Vendor Presentations held, 36 vendors were invited to participate
- May 2024: Evaluation committee submitted final scores. Below is the top scoring proposer for all pools of work:
 - AE - General Pool (10): Gensler, Liro Group, Perkins Eastman, Moody Nolan, NK Architects, Lothrop, Studio A+T, SBLM, Array Architects, STV Inc
 - MEP - General Pool (6): Cameron Engineering, Consentini, Thornton Tomasetti, MGE, Lizardos, Loring Consulting
 - AE - MWBE Pool (6): Moody Nolan, Twine Architects, Matiz, Zambrano, SRW, Foit-Albert
 - MEP - MWBE Pool (3): Milhouse Engineering, Shenoy Engineering, JFK&M Consulting Group

Contract

- We are seeking approval to enter into contract Mechanical, Electrical, Plumbing services with:
 - General Pool: Cameron Engineering, Consentini, Thornton Tomasetti, MGE, Lizardos, Loring Consulting
 - Contract Amount: \$20,000,000
 - MWBE Pool: Milhouse Engineering, Shenoy Engineering, JFK&M Consulting Group
 - Contract Amount: \$5,000,000
- We are seeking approval to enter into contract Architecture/Engineering services with:
 - General Pool: Gensler, Liro Group, Perkins Eastman, Moody Nolan, NK Architects, Lothrop, Studio A+T, SBLM, Array Architects, STV Inc
 - Contract Amount: \$70,000,000
 - MWBE Pool: Moody Nolan, Twine Architects, Matiz, Zambrano, SRW, Foit-Albert
 - Contract Amount: \$25,000,000
- Vendor Performance for incumbents on following slide
- MWBE Information on following slides – all non-MWBE vendors committed to a 30%+ goal
- Anticipated start date of January 1, 2025 for a initial term of three years with two one-year optional renewals at the discretion of NYC Health + Hospitals.

Vendor Performance – Incumbents

<u>Vendor</u>	<u>Performance and Overall Quality Rating</u>
Gensler	Good
Liro Group	Good
Perkins Eastman	Excellent
Moody Nolan	Good
NK Architects	Excellent
Lothrop	Good
Array Architects	Fair*
MGE	Good
Lizardos	Excellent
Loring Consulting	Good

*Array is the designer of the OTxHU project and has since allocated additional resources for this contract to increase performance

Vendor Diversity AE/MEP - General Pool

AE - General Pool	
Prime Vendor Name	UP Goal %
Moody Nolan (M/WBE, Black/Male), Studio A+T (M/WBE, Hispanic/Male)	100%
SBLM	56%
NK Architects	50%
Gensler, Liro Group, Perkins Eastman, Lothrop, Array Architect, STV	30%

MEP - General Pool	
Prime Vendor Name	UP Goal %
Loring Consulting	61%
Lizardos	50%
Consentini	34%
Cameron Engineering, Thornton Tomasetti, MGE	30%

Subcontractor details are in the appendix.

Vendor Diversity AE/MEP - MWBE Pool

AE - MWBE Pool

Prime Vendor Name	Certification/Eth/Gen
Moody Nolan	NYS/NYC/Black/Male
Twine Architects	NYS/NYC/Non-Minority/Female
Matiz	NYS/NYC/Hispanic/Male
Zambrano	NYS/NYC/Hispanic/Male
SRW	NYC/Black/Male
Foit-Albert	NYC/NYS/Hispanic/Male

MEP - MWBE Pool

Prime Vendor Name	Certification/Eth/Gen
Milhouse Engineering	NYS/NYC/Black/Male
Shenoy Engineering	NYS/NYC/Asian/Male
JFK&M Consulting	NYS/NYC/Non-Minority/Female

Request for Board of Directors Approval AE/MWBE Pool

- Authorizing New York City Health and Hospitals Corporation (the “System”) to execute requirements contracts with **ten architectural and engineering (“AE”) consulting firms (Gensler Architecture, Design & Planning, P.C., LiRo Engineers, Inc., Perkins Eastman Architects, DPC, Moody Nolan Inc., NK Architects, P.A., Lothrop Associate Architects D.P.C., Studio A+T Architects P.C., SBLM Architects P.C., Array Architects, PC., and STV Incorporated)** to provide professional AE design services over a term of three years with two 1-year renewal options for an amount not to exceed \$70,000,000.
- Authorizing New York City Health and Hospitals Corporation (the “System”) to execute requirements contracts with **six MWBE architectural and engineering (“AE”) consulting firms (Moody Nolan Inc., Twine Architectural Studio, P.C., Matiz Architecture PLLC, Zambrano Architectural Design, LLC, Sabir, Richardson & Weisberg Engineering & Architecture PLLC, and Foit-Albert Associates, Architecture, Engineering & Surveying, P.C.)** provide professional AE design services over a term of three years with two 1-year renewal options for an amount not to exceed \$20,000,000.

Request for Board of Directors Approval

MEP/MWBE Pool

- Authorizing New York City Health and Hospitals Corporation (the “System”) to execute requirements contracts with **six mechanical, electrical, and plumbing (“MEP”) consulting firms (Cameron Engineering & Associates, LLP, Tetra Tech Engineers, Architects & Landscape Architects, P.C., Thornton Tomasetti, Inc., MG Engineering D.P.C., Lizardos Engineering Associates D.P.C., and Loring Consulting Engineers, Inc)** to provide professional MEP design services over a term of three years with two 1-year renewal options for an amount not to exceed \$25,000,000.
- Authorizing New York City Health and Hospitals Corporation (the “System”) to execute requirements contracts with **three MWBE mechanical, electrical, and plumbing (“MEP”) consulting firms (Milhouse Engineering and Construction, Inc., Shenoy Engineering, PC, and Jacob Feinberg Katz & Michaeli Consulting Group, LLC)** to provide professional MEP design services over a term of three years with two 1-year renewal options for an amount not to exceed \$5,000,000.

Appendix

Vendor Diversity / AE -General Pool

Prime Vendor Name	Subcontractor	M/WBE Certification	UP Goal %
Gensler	Lakhani & Jordan Engineers	NYS/NYC/Asian/Male	30%
	Lera Consulting	NYS/Asian/Female	
	AEG		
	Kugler Ning	NYS/Asian/Male	
	Outsource Consultants	NYS/NYC/Hispanic/Male	
Liro Group	The McGuire Architects, PC	NYS/Non-Minority/Female	30%
	Domingo Gonzalez Associates	NYS/NYC/Hispanic/Male	
	Cerami Associates	NYS/NYC/Non-Minority/Female	
	JMV Associates, LLC	NYS/NYC/Hispanic/Female	
	PL Engineering P.C.	NYS/NYC/Hispanic/Male	
	Toscano Clements Taylor LLC	NYS/NYC/Non-Minority/Female	
	GdB Geospatial LS, P.C.	NYC/Non-Minority/Female	
	Group PMX, LLC	NYS/NYC/Hispanic/Female	
Perkins Eastman	Setty & Associates LTD PC	NYS/NYC/Asian/Male	30%
	Lera Consulting	NYS/Asian/Female	
	Ellana, Inc.	NYS/NYC/Non-Minority/Female	
	Municipal Expediting, Inc.	NYC/Non-Minority/Female	
	Shen Milsom & Wilke LLC	NYS/NYC/Asian/Male	
	Jablonski Building	NYS/NYC/Non-Minority/Female	
	Cline Bettridge Bernstein	NYS/NYC/Non-Minority/Female	
Moody Nolan	Moody Nolan	NYS/NYC/Black/Male	100%

Prime Vendor Name	Subcontractor	M/WBE Certification	UP Goal %
NK Architects	Lakhani & Jordan Engineers, PC	NYS/NYC/Asian/Male	50%
	Lera Consulting	NYS/Asian/Female	
	Ellana, Inc	NYS/NYC/Non-Minority/Female	
	Shen Milsom & Wilke, LLC	NYS/NYC/Asian/Male	
	Yu & Associates Engineers, PC	NYS/NYC/Asian/Male	
	Watts Architecture & Engineering, DPC	NYS/NYC/Black/Male	
	The Lighting Practice	NYS/NYC/Non-Minority/Female	
	Outsource Consultants, Inc.	NYS/NYC/Hispanic/Male	
	Medical Equipment Resources, LTD	NYS/Non-Minority/Female	
	Naik Consulting Group PC	NYS/NYC/Asian/Male	
Lothrop	Ysrael A, Seinuk	NYS/NYC/Asian/Male	30%
	Lera Consulting	NYS/Asian/Female	
	Lakhani & Jordan Engineers	NYS/NYC/Asian/Male	
	Setty & Associates	NYS/NYC/Asian/Male	
	New York Environmental & Analytical Labs	NYS/NYC/Asian/Male	
	City Wide Expediting Inc	NYC/Non-Minority/Female	
	Jablonski Building Conservation	NYS/NYC/Non-Minority/Female	
	Shen Milsom & Wilke LLC	NYS/NYC/Asian/Male	
	GdB Geospatial LS PC	NYC/Non-Minority/Female	
Studio A+T	N/A	NYC/Hispanic/Male	100%

Prime Vendor Name	Subcontractor	M/WBE Certification	UP Goal %
SBLM	Adelaide Environmental Health Associates I	NYS/NYC/Non-Minority/Female	56%
	AB Consulting	NYC/Asian/Male	
	Shenoy Engineering, PC	NYS/NYC/Asian/Male	
	Ellana, Inc.	NYS/Non-Minority/Male	
	Horton Lees Brogden Lighting Design, Inc.	NYS/NYC/Non-Minority/Female	
	RKLA Studio	NYS/NYC/Non-Minority/Female	
	Shen Milsom & Wilke LLC	NYS/NYC/Asian/Male	
	Ysrael A. Seinuk, P.C.	NYS/NYC/Asian/Male	
	Yu & Associates Engineers	NYS/NYC/Asian/Male	
	Jablonski Building Conservation, Inc.	NYS/NYC/Non-Minority Female	
Array Architects	Lakhani & Jordan Engineering	NYS/NYC/Asian/Male	30%
	Ysrael A Seinuk, PC	NYS/NYC/Asian/Male	
	Yu & Associates Engineers PC	NYS/NYC/Asian/Male	
	Shen Milsom & Wilke, LLC	NYS/NYC/Asian/Male	
	Ellana, Inc	NYS/Non-Minority/Female	
	Edgewater Design LLC	NYS/NYC/Non-Minority/Female	
	The Lighting Practice	NYS/NYC/Non-Minority/Female	
e4 Inc.	NYS/NYC/Non-Minority/Female		

Prime Vendor Name	Subcontractor	M/WBE Certification	UP Goal %
STV, Inc.	CSA Group Architects and Engineers PC	NYS/NYC/Hispanic/Male	30%
	Entech Engineering, Inc.	NYS/NYC/Non-Minority/Female	
	Supermass Studio	NYS/NYC/Asian/Male	
	Domingo Gonzalez Associates	NYS/NYC/Hispanic/Male	
	Jablonski Building Conservation Inc.	NYS/NYC/Non-Minority/Female	
	Shen Milsom & Wilke	NYS/NYC/Asian/Male	
	EJ Russo, Inc.	NYS/Non-Minority/Female	
	JMV Associates, LLC	NYS/NYC/Hispanic/Female	
	Hirani Engineering and Land Surveying	NYS/NYC/Asian/Male	
	Toscano Clements Taylor, LLC	NYS/NYC/Non-Minority/Female	

Vendor Diversity / MEP - General Pool

Prime Vendor Name	Subcontractor	M/WBE Certification	UP Goal %
Cameron Engineering	Yu & Associates	NYS/NYC/Asian/Male	30%
	Ellana, Inc.	NYS/NYC/Non-Minority/Female	
	Ismael Leyva Architects, PC	NYS/NYC/Hispanic/ Male	
	Ronnette Riley Architects	NYS/NYC/Non-Minority/Female	
	Soundsense, LLC	NYS/NYC/Hispanic/Male	
	Noel Business Consulting	NYC/Black/Female	
	Adelaide Environmental Health	NYS/NYC/Non-Minority/Female	
	Munoz Engineering & Land Surveying	NYS/NYC/Hispanic/Male	
	Savkom Inc.	NYS/NYC/Asian/Male	
	Domingo Gonzalez Associates, Inc.	NYS/NYC/Hispanic/Male	
	Municipal Expediting, Inc.	NYC/Non-Minority/Female	
	Jablonski Building Conservation, Inc.	NYS/NYC/Non-Minority/Female	
	JMV Associates, LLC	NYS/NYC/Hispanic/Female	
Consentini	Moody Nolan, Inc	NYS/NYC/Black/Male	34%
	Ellana, Inc.	NYS/NYC/Non-Minority/Female	
	Lera Consulting	NYS/Asian/Female	
	Municipal Expediting, Inc.	NYC/Non-Minority/Female	

Vendor Diversity / MEP - General Pool continues

Prime Vendor Name	Subcontractor	M/WBE Certification	UP Goal %
Thomson Tomasetti	Boyd Consulting, Inc.	NYS/NYC/Black/Female	30%
	Toscano Clements Taylor, LLC	NYS/NYC/Non-Minority/Female	
Lizardos	Twine Architectural Studio	NYS/NYC/Non-Minority/Female	50%
	Ysrael A. Seinuk	NYS/NYC/Asian/Male	
	Insight Civil Engineering	NYS/NYC/Non-Minority/Female	
	Infinite Consulting Corp	NYS/NYC/Asian/Male	
	Watts Architecture & Engineering	NYS/NYC/Black/Male	
	Elizabeth Kennedy Landscape Architect	NYS/NYC/Black/Female	
	Shen Milsom & Wilke	NYS/NYC/Asian/Male	
	Domingo Gonzalez	NYS/NYC/Hispanic/Male	
	Construction Permit Services Corp.	NYC/Non-Minority/Female	
	DM Engineers	NYC/Hispanic/Male	

Prime Vendor Name	Subcontractor	M/WBE Certification	UP Goal %
Loring	Bolt Architecture	NYC/Black/Male	61%
	Ysrael A. Seinuk PC	NYS/NYC/Asian/Male	
	Razak Associates	NYS/NYC/Asian/Male	
	Ellana, Inc.	NYS/NYC/Non-Minority/Female	
	Goldstick Lighting Design, LTD	NYS/NYC/Non-Minority/Female	
	JLC Environmental Consultants	NYS/NYC/Non-Minority/Female	
	Shen Milsom & Wilke, LLC	NYS/NYC/Asian/Male	
	Nancy Owens Studio Landscape	NYS/NYC/Non-Minority/Female	
	SAVKOM, Inc.	NYS/NYC/Asian/Male	
	Ronnette Riley Architect	NYS/NYC/Non-Minority/Female	

Prime Vendor Name	Subcontractor	M/WBE Certification	UP Goal %
MGE	Envision Architects DPC	NYS/Non-Minority/Female	30%
	Design Ideas Group Architecture and Planning	NYC/Black/Male	
	Ahuja Partnership Architects	NYS/NYC/Asian/Male	
	Ysrael A. Seinuk	NYS/NYC/Asian/Male	
	Lera Consulting	NYS/Asian/Female	
	Ellana, Inc.	NYS/Non-Minority/Female	
	Accu-Cost Construction Consultants	NYS/NYC/Non-Minority/Female	
	Adelaide	NYC/Non-Minority/Female	
	Yu & Associates	NYS/NYC/Asian/Male	
	Domingo Gonzalez	NYS/NYC/Hispanic/Male	
	W. Allen Engineering, PLLC	NYS/NYC/Black/Male	
	Cerami & Associates, Inc.	NYS/NYC/Non-Minority/Female	
	Caso & Associates Inc.	NYS/NYC/Hispanic/Female	
	Elizabeth Kennedy Landscape Architects	NYS/NYC/Black/Female	
	Gedeon Engineering PC	NYS/NYC/Black/Male	
	CBA Elevator Consultants, LLC	NYS/NYC/Hispanic/Male	
	Shen Milsom & Wilke	NYS/NYC/Asian/Male	

RESOLUTION - 17

Authorizing the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to execute a contract with **Ark Systems Electrical Corp. (the “Contractor”)**, to undertake a generator upgrade project of NYC Health + Hospitals/Woodhull Medical Center for a contract amount of \$11,970,000, with a 15% project contingency of \$1,795,500, to bring the total cost not to exceed \$13,765,500.

WHEREAS, the Woodhull Medical Center (“Woodhull”) has two sets of generators that serve emergency load of the facility that have reached their useful life; and

WHEREAS, generator operability is critical for the facility to provide emergency back-up power to all essential and non-essential building systems during power outages

WHEREAS, due to the current state of the generators, Woodhull purchased two new generators whose delivery is set to begin in Spring, 2025, such delivery necessitating a project to remove the existing outdated generators, modify the space for the new generators, and install such generators; and

WHEREAS, in accordance with Operating Procedure 100-5 a solicitation was issued, pursuant to which bids were received and publicly opened on July 3, 2024, and NYC Health + Hospitals determined that the Contractor submitted the lowest responsible bid; and

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

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

NOW, THEREFORE, be it

RESOLVED that the New York City Health and Hospitals Corporation be and hereby is authorized to execute a contract with Ark Systems Electrical Corp. (the “Contractor”), to undertake a generator upgrade project of NYC Health + Hospitals/Woodhull Medical Center for a contract amount of \$11,970,000, with a 15% project contingency of \$1,795,500, to bring the total cost not to exceed \$13,765,500.

EXECUTIVE SUMMARY
WOODHULL MEDICAL CENTER
GENERATOR UPGRADE CONTRACT
ARK SYSTEMS ELECTRICAL CORP.

CONTRACT SCOPE: Generator Upgrade

NEED: NYC Health + Hospitals facilities needs general construction and electrical services to undertake the generator upgrade project at Woodhull Medical Center.

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

PROCUREMENT: A competitive sealed bid was issued on 4/23/2024; twelve contractors attended the pre-bid on site visits on 5/6/2024 and 5/7/2024; four contractors submitted bids with the lowest responsible and responsive bidder being Ark Systems Electrical Corp. for a contract not to exceed total of \$13,765,500.

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

CONTRACT AMOUNT: \$11,970,000.

PASSPORT APPROVAL: Approved

EEO APPROVAL: Approved

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



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

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

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

Vendor: Ark Systems Electrical Corp.

Date: August 23, 2024

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

Vendor Responsibility

Approved

EEO

Approved

MWBE

100%

Request to Award Contract to Ark Electric Systems for Generator Upgrade Project at Woodhull Medical Center

**Board of Directors Meeting
September 26, 2024**

Dr. Lisa Scott-McKenzie, COO, NYC H+H/Woodhull

Manuel Saez, PhD, VP, OFD

Oscar Gonzalez, SAVP, OFD

Anniqua Brown, Senior Director, OFD

Kristina “Kiki” Blazeovski-Charpentier, Director , OFD

- Authorizing the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to execute a contract with **Ark Systems Electrical Corp. (the “Contractor”)**, to undertake a generator upgrade project of **NYC Health + Hospitals/Woodhull Medical Center** for a contract amount of \$11,970,000, with a 15% project contingency of \$1,795,500, to bring the total cost not to exceed \$13,765,500

Program Background/ History

- NYC Health + Hospitals' Woodhull Medical Center has two sets of generators which can only serve emergency load, which is 70% of the total 5.8 MW electrical load of the facility.
 - One set of generators is permanent and is 50 years old and has exceeded its expected lifespan. They are part of the building's original construction.
 - One set of generators is temporary and arrived circa 2004 from United States Department of Homeland Security.
 - Generator operability and reliability is critical for the facility to provide emergency back-up power to all essential and non-essential building systems and equipment such as:
 - Fire alarm and life safety systems
 - HVAC equipment for temperature and humidity control
 - IT infrastructure for information systems, applications and security
 - Pumps for domestic water distribution
 - Sterilization of surgical instruments
 - Medical equipment for patient care and monitoring
- Engineering staff at the facility must conduct monthly tests on each set of generators.

Construction Scope & Schedule

- Woodhull Medical Center will have a new state of the art emergency generator system:
- New System:
 - Generators from original construction will remain, and temporary generators will be removed
 - Construction of new concrete pad and foundation for new generator set location
 - Connections to new generator set: three (3) new diesel fired 2 MW Tier 4 emergency generators, and one (1) new diesel fired 2 MW Tier 2 emergency generator, within prefabricated enclosure
 - Provide new diesel pumps, filtration and piping
 - Provide new ventilation and combustion air system, and new chimney/stack system
 - Provide new instrumentation and controls, and switchgear
- Project Benefits:
 - Provide full demand of facility power needs in case of loss of power, plus a standby generator
 - With new generator system, Woodhull can participate in the Con Ed Demand Response program during peak electrical load season.
 - Demand Response provides a financial incentive to organizations who are able to shift electrical loads from the Con Ed grid to generators during periods of peak electrical load, significantly reducing the risk of blackouts and brownouts ensuring the Woodhull community can continue to receive power and Woodhull can receive additional revenue.
- Project Logistics:
 - New generators were pre-purchased in Spring 2023; expected delivery begins first quarter 2025.
 - No impact to patient care
- Project Timeline:
 - Contract Terms: One year
 - Anticipated Contract Start – Fall 2024
 - Anticipated Contract Completion – Fall 2025

Overview of Procurement

- 04/23/2024: Contract solicitation notice posted to City Record
- 05/06/2024, 05/07/2024 : Mandatory Pre-bid Conference, twelve contractors attended
- 07/03/2024: Bid Opening, four bids received
- 07/18/2024: Determination of low bid finalized, and contractor was selected based on the lowest bid amount and responsibility requirements

Construction Contract

- Ark Systems Electrical Corp. is an NYS/NYC Certified MBE vendor and will self-perform construction services
- Ark Systems Electrical Corp is an electrical contractor. The ratings listed in MOCs included 1 Excellent and 3 Good.
- Ark Systems has previously worked with DASNY on the Bellevue Men's Shelter project. Other public agency work includes NYCHA, SCA, DDC, and DHS.
- Contract amount is \$11,970,000
- Construction expected to begin Fall 2024 completion in expected in Fall 2025 (12 Months)

Project Budget

Woodhull/Generator Upgrade	
Construction	\$11,970,000
Project Contingency (15%)	\$1,795,500
Total	\$13,765,500

*Full funding for this project has been allocated and CP is pending with OMB.

Request for Board of Directors Approval

- Authorizing the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to execute a contract with **Ark Systems Electrical Corp. (the “Contractor”)**, to undertake a generator upgrade project of **NYC Health + Hospitals/Woodhull Medical Center** for a contract amount of \$11,970,000, with a 15% project contingency of \$1,795,500, to bring the total cost not to exceed \$13,765,500

RESOLUTION - 18

Authorizing the 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 **construct two operating rooms at NYC Health + Hospitals/Kings County Hospital Center** for a contract amount of \$5,835,252, with a 10% project contingency of \$583,525, to bring the total cost not to exceed \$6,418,777

WHEREAS, the Kings County Hospital Center (“Kings County”) has ten general operating rooms (“OR”) in the S building that are used for inpatient and emergency procedures; and

WHEREAS, these same OR are used for ambulatory care procedures, however, due to competing ambulatory care and urgent care needs patients are sometimes impacted; and

WHEREAS, due to this current situation, it has been determined that a project should be undertaken to construct two new operating room specifically designed for a high volume of out-patient and same-day surgical procedures to be located in space that previously served as the cardiac catheterization lab, in the C building, a space that has not been in use since 2020; and

WHEREAS, in accordance with Operating Procedure 100-5 a solicitation was issued, pursuant to which bids were received and publicly opened on March 27, 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 and Development Co., Inc. (the “Contractor”), to undertake a project to construct two operating rooms at NYC Health + Hospitals/Kings County Hospital Center for a contract amount of \$5,835,252, with a 10% project contingency of \$583,525, to bring the total cost not to exceed \$6,418,777.

EXECUTIVE SUMMARY
KINGS COUNTY HOSPITAL CENTER
OPERATING ROOM CONTRACT
VANGUARD CONSTRUCTION AND DEVELOPMENT CO., INC.

- CONTRACT SCOPE:** Construction of two operating rooms
- NEED:** NYC Health + Hospitals facilities needs general construction and electrical services to undertake the operating room construction project at Kings County Hospital Center.
- CONTRACT DURATION:** 9 months, slated to commence Spring of 2025 with anticipated completion in Winter 2025/26.
- PROCUREMENT:** A competitive sealed bid was issued on 3/27/2024; nineteen contractors attended the pre-bid on site visit on 4/2/2024; five contractors submitted bids with the lowest responsible and responsive bidder being Vanguard Construction and Development Co., Inc. for a contract not to exceed total of \$6,418,777.
- PRIOR EXPERIENCE:** Vanguard Construction and Development Co., Inc. has previously worked on the Elmhurst Renovation of the H Building DSRIP behavioral health integration project and received a rating of excellent, the Jacoby Hospital 10th floor DSRIP integration of behavioral health into primary care setting and received a rating of good, and the Harlem Hospital 4th floor post- partum unit renovation of the MLK building and received a rating of good.
- CONTRACT AMOUNT:** \$5,835,252
- PASSPORT APPROVAL:** Pending
- EEO APPROVAL:** Approved
- MWBE STATUS:** Contractor has committed to a 32% 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: August 23, 2024

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

Vendor Responsibility

Pending

EEO

Approved

MWBE

32%

Request to Award Contract to Vanguard Construction for New Ambulatory Operating Rooms at New York City Health + Hospitals/Kings County Hospital Center

**Board of Directors Meeting
September 26, 2024**

Graham Gullian, COO, NYC/ H+H Kings County Hospital Center

Manuel Saez, PhD, VP, OFD

Oscar Gonzalez, Senior AVP, OFD

Anniqua Brown, Senior Regional Director, OFD

Geoffrey Gorousingh, Director, OFD

- Authorizing the 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 construct two operating rooms at **NYC Health + Hospitals/Kings County Hospital Center** for a contract amount of \$5,835,252, with a 10% project contingency of \$583,525, to bring the total cost not to exceed \$6,418,777

- NYC H+H/Kings County has 10 General Operating Rooms ("OR") in the S building used for inpatient and emergency procedures.
- Ambulatory Surgery procedures are on scheduled block times utilizing the existing OR suites
- When urgent or emergency cases arise, these ambulatory care procedures are canceled or rescheduled, which creates an inconvenience for the ambulatory care patients.
- NYC H+H/Kings is anticipating a volume growth of ambulatory cases, and could potentially reach an additional 3,000 surgeries a year.
- NYC H+H/Kings is requesting to construct two new ORs specifically designed for a high-volume of out-patient and same-day surgical procedures.
- This project will remodel 2,370 Square Feet (SF) of space that was previously the Cardiac Catheterization Lab, located on the second floor of the "C" Building. This space has not been in use since early 2020.
- The two new operating rooms will be designed and constructed in accordance with current safety and infection prevention standards, and will provide a space for the efficient utilization of specialized medical equipment and a large volume of ambulatory surgical procedures.

New Ambulatory Operating Rooms (Two)

- Demolition existing suite, which is currently located on the second floor of the C building.
- Renovation and replacement of all interior finishes within two operating rooms, incl. new walls, ceilings, floors, doors, and fixtures;
- New layout to support ambulatory surgical services, incl. patients' lockers and gowning areas;
- Construction of new pre-surgery area for final tests and medical treatments, incl. pharmacological infusions before surgeries;
- Construction of new recovery area;
- Construction of utility rooms required for the storage of surgical supplies in proximity of the new ORs, as required for high volume surgical schedules;
- Construction of new nurses' station;
- Installation of new HVAC chiller, air handlers, medical vacuum, air compressors, and upgraded electrical distribution;
- Installation of new building automation system for temperature and relative humidity controls, as required for compliance with current code and infection prevention standards.

Overview of Procurement

- 03/27/2024: Posted to City Record
- 04/02/2024: Site tour conducted with 19 contractors attended
- 07/03/2024: Bid Due Date, with (5) bids received
- 07/05/2024: Determination of low bid finalized, and Vanguard Construction was selected based as the lowest responsive and responsible bidder.

Construction Contract

- Procurement is sourced via public bid
- Contract amount is \$5,835,252
- 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 Postpartum Unit Renovation, MLK Building. \$3,997,837 (Good)
- Commencement of Construction is anticipated in the Spring 2025 (or earlier) with completion expected by Early 2026 (9 Months)
- Vanguard Construction has committed to 32% MWBE subcontractor utilization plan presented below

Subcontractor	Certification	Supplies/Services	Utilization Plan %
Mac Fielder Inc	NYC Non-Minority WBE	Plumbing	11%
Redd Electric	NYC/NYS Black Male MBE	Electric	15%
Atlas Custom Design	NYS Black Male MBE	Millwork	2%
Custom Design Innovation	NYC/NYS Hispanic Male MBE	Carpentry	4%
			32%

Vendor Performance

Department of Supply Chain	
Vendor Performance Evaluation	
Vanguard Construction	
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 extend 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
	Yes
Performance and Overall Quality Rating	Good

Project Budget

Kings County Hospital Center New Ambulatory Operating Rooms	
Construction	\$5,835,252
Project Contingency (10%)	\$583,525
Total	\$6,418,777

- CP Amendment for Full Funding is in process at OMB

- Authorizing the 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 construct two operating rooms at **NYC Health + Hospitals/Kings County Hospital Center** for a contract amount of \$5,835,252, with a 10% project contingency of \$583,525, to bring the total cost not to exceed \$6,418,777