

BOARD OF DIRECTORS MEETING

THURSDAY, JUNE 26, 2025

A•G•E•N•D•A•

<p><b><u>CALL TO ORDER – 2:00 PM</u></b></p>	<p>Mr. Pagán</p>
<p>1. <b><u>Executive Session   Facility Governing Body Report</u></b>  ➤ NYC Health + Hospitals   Woodhull</p> <p><b>2024 Performance Improvement Plan and Evaluation (Written Submission Only)</b>  ➤ NYC Health + Hospitals   Morrisania - Gotham Center</p> <p><b>Semi-Annual Governing Body Report (Written Submission Only)</b>  ➤ NYC Health + Hospitals   Susan Smith McKinney Nursing and Rehabilitation Center</p>	<p>Mr. Pagán</p>
<p>2. <b><u>OPEN PUBLIC SESSION – 3:00 PM</u></b></p>	
<p>3. <b>Adoption of the Board of Directors Meeting Minutes – May 29, 2025</b></p>	<p>Mr. Pagán</p>
<p>4. <b>Chair’s Report</b></p>	
<p>5. <b>President’s Report</b></p>	<p>Mr. Pagán</p>
<p><b><u>ACTION ITEMS</u></b></p>	<p>Dr. Katz</p>
<p>6. <b>AMENDED TO REMOVE HENRY J. CARTER NURSING FACILITY</b> - Adopting in the name of the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) Board of Directors the <b>2025 twelve Community Health Needs Assessments (“CHNA”) prepared for each of NYC Health + Hospitals’ ten acute care hospitals over 11 campuses and for the NYC Health + Hospitals/Henry J. Carter Hospital.</b>  (Presented to the Strategic Planning Committee: 06/16/2025)  <b>Vendex: NA / EEO: NA</b></p>	<p>Mr. Pagán</p>
<p>7. Authorizing the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) <b>to execute a contract with the New York Power Authority (“NYPA”) for the planning, design, procurement, construction, construction management and project management services necessary for lighting upgrades at New York City Health + Hospitals/Jacobi</b>, (the “Project”) with a contract amount of \$9,552,820, with a 10% project contingency of \$ 743,332 to bring the total cost not to exceed \$10,296,152 for a term of 24 months.  (Presented Directly to the Board 06/26/2025)  <b>Vendex: NA / EEO: NA</b></p>	<p>Mr. Pagán</p>
<p>8. Authorizing the Executive Director of MetroPlus Health Plan, Inc. (“MetroPlus or “the Plan”) <b>to increase the contract authority for Accenture, LLP (“Accenture”)</b> in the amount of \$3,100,000, which includes \$1,400,000 of contingency, for a new total not to exceed authority amount of \$23,100,000, for the remaining contract term.  (Presented to MetroPlus Board 06/05/2025)  <b>Vendex: Approved / EEO: Approved</b></p>	<p>Ms. Hernandez-Piñero</p>
<p>9. Authorizing the Executive Director <b>of MetroPlus Health Plan, Inc. (“MetroPlus”), to execute a 9-month contract extension and to increase the contract authority with Deloitte Consulting, LLP (“Deloitte”)</b> in the amount of \$3,000,000 which includes \$2,000,000 of contingency, for a new total not to exceed authority amount of \$12,500,000.  (Presented to MetroPlus Board 06/05/2025)  <b>Vendex: Approved / EEO: Approved</b></p>	<p>Ms. Hernandez-Piñero</p>

10. Authorizing the Executive Director of MetroPlus Health Plan, Inc. (“MetroPlus”), to execute a 9-month contract extension and to increase the contract authority with SourcEdge Solutions LLC (“SourcEdge”) in the amount of \$4,030,000, which includes \$2,030,000 of contingency, for a new total not to exceed authority amount of \$10,000,000  
(Presented to MetroPlus Board 06/05/2025)  
**Vendex: Approved / EEO: Approved**

Ms. Hernandez-Piñero

## COMMITTEE REPORTS AND FISCAL YEAR ANNUAL PUBLIC MEETING SUMMARY

- Fiscal Year 2025 Annual Public Meeting – Brooklyn
- Fiscal Year 2025 Annual Public Meeting - Bronx
- Fiscal Year 2025 Annual Public Meeting – Staten Island
- Community Relations Committee
- Audit Committee
- Capital Committee
- Strategic Planning Committee
- MetroPlus Health - Subsidiary

>>Old Business<<

>>New Business<<

>>Adjournment<<

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

Mr. Pagán

**NEW YORK CITY HEALTH AND HOSPITALS CORPORATION**

A meeting of the Board of Directors of New York City Health and Hospitals Corporation was held in room 1701 at 50 Water Street, New York, New York 10004 on the **29th day of May, 2025** at 2:00 P.M., pursuant to a notice, which was sent to all of the Directors of New York City Health and Hospitals Corporation and which was provided to the public by the Secretary. The following Directors participated in person:

Mr. José A. Pagán  
Dr. Mitchell Katz  
Ms. Suzanne Miles-Gustave - Arrived at 2:18 PM Left at 3:14 PM  
Ms. Erin Kelly - Joined at 3:14 PM  
Dr. Vincent Calamia  
Ms. Freda Wang  
Ms. Molly Wasow-Park - Left at 3:14 PM  
Ms. Karen St. Hilaire - Joined at 3:14 PM  
Dr. H Jean Wright - Left at 3:14 PM  
Dr. Michelle Morse - Left at 3:08 PM  
Dr. Zahira McNatt - Joined at 3:14 PM  
Ms. Sally Hernandez-Piñero  
Dr. Michael Espiritu  
Ms. Vanessa Rodriguez  
Ms. Tricia Taitt - Left at 3:14 PM

José Pagán, Chair of the Board, called the meeting to order at 2:09 p.m. Mr. Pagán chaired the meeting and Colicia Hercules, Corporate Secretary, kept the minutes thereof.

**EXECUTIVE SESSION**

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

**OPEN SESSION**

The Board reconvened in public session at 3:14 PM

Mr. Pagán noted for the record, Erin Kelly is representing Deputy Mayor Suzanne Miles-Gustave, Karen St. Hilaire is representing Molly Wasow Park and Dr. Zahira McNatt is representing Dr. Michelle Morse all in a voting capacity.

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

The minutes of the Board of Directors meeting held on April 24, 2025 were

presented to the Board. Then, on motion duly made and seconded, the Board unanimously adopted the minutes.

**RESOLVED**, that the minutes of the **Board of Directors Meeting held on April 24, 2025** copies of which have been presented to the Board be, and hereby are, adopted.

#### **ITEM 4 - CHAIR'S REPORT**

##### **GOVERNING BODY**

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

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

The Board also received and approved the written submission of the NYC Health + Hospitals| Gouverneur Gotham Center governing body 2024 performance improvement and evaluation plan

##### **BOARD ACKNOWLEDGEMENT**

Mr. Pagán thanked Dr. Wright and Dr. Espiritu for their visit to Harlem hospital. He also thanked Sally Hernandez-Piñero for participating in the Joint Commission Leadership session at Jacobi/NBC.

Dr. Espiritu shared highlights from their visit and commented on the impressive work being carried out at the Facility.

Ms. Hernandez-Piñero shared that it was a fantastic experience and a great opportunity to discuss the System's interoperability with the surveyors. She also noted how impressed the surveyors were by the Board's expertise and active involvement in the System.

##### **VENDEX APPROVALS**

Mr. Pagán noted there were two items on the agenda requiring Vendex approval, both are pending approval. There are twenty-one items from previous Board meetings pending Vendex approval.

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

##### **FISCAL YEAR 2025 ANNUAL PUBLIC MEETINGS**

Mr. Pagán shared a reminder about the upcoming NYC Health + Hospitals FY-

2025 Annual Public Meeting series as follows:

Staten Island: Tuesday, June 17, 2025 at Sea View

**ACTION ITEM 6:**

Mr. Pagán read the resolution

Authorizing New York City Health and Hospitals Corporation (the "NYC Health + Hospitals") to execute a design-build contract with **Barr & Barr Inc. (the "Contractor") to undertake the renovation and construction of the RISE (Recovery, Integrated Support, Empowerment) Center at New York City Health + Hospitals| Lincoln** for a contract amount of \$11,183,855, with a 10% project contingency of \$1,118,386, to bring the total cost not to exceed \$12,302,241 for a duration of 36 months.

(Presented to the Capital Committee: 05/05/2025)

Michael Rawlings, Chief Operating Officer of NYC Health + Hospitals | Lincoln, explained that the RISE Center will consolidate Family Substance Use Disorder (SUD) services, Lincoln Recovery Center (LRC), CATCH, and SBIRT programs at Lincoln Hospital, improving access and continuity of care for patients—including pregnant women and youth. The new center will offer daily services, rapid opioid induction, and comprehensive recovery support, with a full renovation of the 6th floor at Lincoln Hospital's main building. The current services in 6th floor D wing, will be decanted prior to construction to ensure continuity of services. Mahendranath Indar, Assistant Vice President, Office of Facilities Development provided an overview of the procurement process, criteria and rationale for the RFQ and RFP. The Contract budget, terms and funding source as well as the vendor's MWBE utilization plan of 41.5% were also discussed.

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

**ACTION ITEM 7:**

Mr. Pagán read the resolution

Authorizing the New York City Health and Hospitals Corporation ("NYC Health + Hospitals") to **execute a contract with Johnson Controls, Inc., (the "Contractor"), to provide Building Management System preventative maintenance and repair services at various NYC Health + Hospitals facilities** for a contract amount of \$12,128,122.89, with a 10% project contingency on preventative maintenance portion of the contract of \$548,793.41, to bring the total cost not to exceed \$12,676,916 for an initial term of 3 years with 2 one-year options to extend.

(Presented to the Capital Committee: 05/05/2025)

Manuel Saez, Vice President, Office of Facilities Development, provided

background information on the Building Management Systems, and a brief history of the prior procurement process and current state of contract. Mr. Indar provided an overview of the procurement process, RFP requirements, and a breakdown of the contract budget, noting that the 10% contingency will only be accessed if needed for additional work. Mr. Indar discussed the vendor's previous contract MWBE utilization and current performance rating.

In response to questions from the Board, Mr. Indar explained that the current contract involves less equipment for maintenance due to a reduction in inventory. The System is transitioning from proprietary systems to more open-source equipment, allowing for support from multiple vendors as funding allows.

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

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

Mr. Pagán read the resolution

Approving the application of New York City Health and Hospitals Corporation (the "System") **for verification by the American College of Surgeons (the "ACS") of NYC Health + Hospitals| Harlem ("Harlem") as a Level II Pediatric Trauma center;** and Committing to maintain the high standards needed to provide optimal care of all pediatric trauma patients, and that the multidisciplinary trauma performance improvement program has the authority to evaluate care across disciplines, identify opportunities for improvement, and implement corrective actions; and Authorizing the appropriate officers of the System to execute any and all documents necessary to verify Level II Pediatric Trauma Center designation for Harlem through the ACS, Committee on Trauma.

(Presented to the Medical and Professional Affairs/Information Technology Committee: 05/05/2025)

Dr. Arthur Cooper, Director of Trauma Services at NYC Health + Hospitals |Harlem Hospital, provided a list of the System's current ACS Verified adult and pediatric level 1 and level 2 Trauma Centers across the City. Trauma center verification now follows the 2022 ACS standards, with remote surveys every three years. Harlem Hospital's Level II Pediatric Trauma Center is due for re-verification to align with the standard cycle. NYS recognizes trauma centers only if verified by ACS-COT. Dr. Cooper explained that a subtle rule change now requires the exact level of Verification to be specified in the Governing Board resolution. Dr. Cooper also discussed the different requirement and activity components for each trauma level designation.

Following questions from the Board, Dr. Cooper explained, that pediatric trauma cases at Harlem dropped below 100 due to a temporary loss of orthopedic coverage but have since rebounded with the addition of a skilled pediatric orthopedic surgeon. Volume is expected to reach 120-125 this year. While Level

II centers no longer require a minimum volume, Level I requires over 200 cases. The Harlem continues to excel in injury prevention, particularly in violence reduction and community safety programs; these efforts play a critical role in mitigating trauma incidences.

After further questions, Dr. Cooper responded most trauma patients arrive via EMS. There is no indication that EMS preferences have reduced patient volume; in fact, Harlem is well-regarded by EMS personnel in Northern Manhattan as a preferred destination for trauma care.

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

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

**NYC HEALTH + HOSPITALS FACILITIES RECOGNIZE NATIONAL NURSES MONTH**

NYC Health + Hospitals facilities recognized National Nurses Month throughout the month of May. This year's theme, set by the American Nurses Association, was "The Power of Nurses," which was selected to shine a national spotlight on nurses as the driving force behind compassionate care, innovation, and transformative changes in health care.

**NYC HEALTH + HOSPITALS| METROPOLITAN APPOINTS DR. ANITHA SRINIVASAN AS CHIEF MEDICAL OFFICER**

NYC Health + Hospitals| Metropolitan announced that Anitha Srinivasan, MD, MPH, FACS, was appointed Chief Medical Officer (CMO) at the hospital, effective June 1. She has worked at Metropolitan Hospital for over two decades and brings a wealth of experience to her new role.

**NYC HEALTH + HOSPITALS LAUNCHES WORKFORCE DEVELOPMENT PROGRAM FOR BEHAVIORAL HEALTH NURSES**

As part of Mental Health Awareness Month, NYC Health + Hospitals announced a new Behavioral Health Nursing Career Ladder, which will provide 24 staff with educational support and financial assistance to enroll in nursing school. In exchange for a three-year commitment to NYC Health + Hospitals, participants will receive tuition assistance, coverage of exam fees, and support moving into full-time behavioral health nursing roles at the health care system after earning their nursing license.

**NYC HEALTH + HOSPITALS| QUEENS DEDICATES "CLAIRE SHULMAN PAVILION" IN HONOR OF LATE QUEENS BOROUGH PRESIDENT**

NYC Health + Hospitals| Queens unveiled the newly renamed Claire Shulman Pavilion during a ceremony honoring the late Claire Shulman, Queens' first female Borough President and a trailblazer for equitable healthcare. The renaming commemorates Shulman's lifelong dedication to public health, beginning

with her career as a nurse at Queens Hospital in the 1940s and culminating in her historic 16-year tenure as Borough President (1986-2002).

**NYC HEALTH + HOSPITALS| GOTHAM HEALTH LAUNCHES DERMATOLOGY SERVICES TO EXPAND ACCESS TO SPECIALIZED SKIN CARE**

NYC Health + Hospitals| Gotham Health announced the launch of its dermatology services, a strategic expansion designed to provide comprehensive skin care screenings, early detection, and treatment for a broad range of skin conditions for all New Yorkers.

**NYC HEALTH + HOSPITALS| GOTHAM HEALTH UNVEILS NEWLY RENOVATED BEHAVIORAL HEALTH SUITE IN EAST NEW YORK, EXPANDING ACCESS TO ESSENTIAL MENTAL HEALTH CARE**

NYC Health + Hospitals| Gotham Health announced the grand opening of its newly renovated Behavioral Health suite at Gotham Health, East New York, marking a major investment in expanding access to critical mental health services for the Brooklyn community.

**NYC HEALTH + HOSPITALS| COLER RECEIVES STATE-OF-THE-ART EQUIPMENT UPGRADE FROM WHEELCHAIR CHARITIES INC. TO EXPAND ACCESS TO REHABILITATIVE CARE**

NYC Health + Hospitals| Coler received an equipment donation for its rehabilitation gym from long-time benefactor and founder of Wheelchair Charities, Inc., Henry J. 'Hank' Carter. The equipment allows for broader resident access to rehabilitative care, improving physical function, mobility, and the strength needed to perform daily activities, independently.

**NYC HEALTH + HOSPITALS| QUEENS AND ELMHURST ACHIEVE PRESTIGIOUS BABY-FRIENDLY REDESIGNATION**

NYC Health + Hospitals| Queens and Elmhurst received re-designation as Baby-Friendly hospitals, a global recognition of excellence in maternity care and infant feeding support. This achievement underscores their dedication to advancing equitable health outcomes, reducing racial disparities, and empowering families through evidence-based practices, including breastfeeding education, culturally competent doula care, and comprehensive women's health services.

**CITY & STATE NEW YORK RECOGNIZES TWO NYC HEALTH + HOSPITALS LEADERS ON 2025 "ASIAN TRAILBLAZERS" LIST**

The System announced that NYC Health + Hospitals Chief Biopreparedness Officer Syra Madad and NYC Health + Hospitals| Elmhurst Chief Financial Officer Roger Zhu were named to City & State New York's inaugural "Asian Trailblazers" list for 2025. The list honored more than 50 distinguished individuals of Asian descent who have made meaningful contributions across industries and communities throughout New York.

**25 NYC HEALTH + HOSPITALS DOCTORS RECOGNIZED FOR OUTSTANDING PATIENT CARE AT ANNUAL DOCTORS' DAY CELEBRATION**

The System celebrated its Doctors' Day and the 25 doctors recognized for their outstanding patient care. The physicians were nominated for their unwavering



commitment to compassionate, patient-centered care, and their exceptional leadership in advancing equitable health care in NYC's largest public hospital System.

#### **CITY CELEBRATES NATIONAL NURSES MONTH WITH \$2 MILLION IN INVESTMENT TO SUPPORT NEW REGISTERED NURSES AND NURSE EDUCATORS**

The City announced \$2 million in new investments in the local nurse training and education pipeline to support a stronger healthcare workforce across the five boroughs. One piece of this effort included supporting the New York City-wide Nurse Residency Program, which has supported nurse residents (recently graduated Registered Nurses in their first year of clinical work) with ongoing education training and peer support that are proven to increase worker skills, satisfaction, and retention.

#### **IN HONOR OF MILITARY APPRECIATION MONTH, NYC HEALTH + HOSPITALS AND NYC DEPARTMENT OF VETERANS' SERVICES COLLABORATE ON VETERAN POP-UPS**

In honor of Military Appreciation Month, NYC Health + Hospitals and the NYC Department of Veterans' Services announced upcoming monthly veteran pop-ups across the health System. The events offer one-on-one support for accessing benefits from the US Department of Veterans Affairs and are open to health System staff and members of the community who have served in any branch of the military.

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

The System continues to wind down its humanitarian center operations in May as it scales back its role to meet the needs of the City's ongoing response. The System will turn over the majority of asylum seeker housing operations to the City's Department of Homeless Services.

#### **NYC CARE AND NYC MAYOR'S PUBLIC ENGAGEMENT UNIT LAUNCH 'IMMIGRANT HEALTH CARE DAY OF ACTION'**

NYC Health + Hospitals' NYC Care program partnered with the NYC Mayor's Public Engagement Unit's GetCoveredNYC team on a city-wide "Immigrant Health Care Day of Action." The outreach effort mobilized dozens of agency staff, community-based organization partners, and volunteers who participated in canvassing, tabling, and posting social media messaging to get the word out.

#### **METROPLUSHEALTH DELIVERS STRONG FINANCIAL PERFORMANCE IN 2024**

MetroPlusHealth concluded 2024 with robust financial results, significant savings, steady membership, and positive trends. Emergency room visits declined, while outpatient care—including mental health services and ExpressCare visits—increased.

#### **External Affairs Update City**

The City's Executive Budget was released on May 1st at \$115.1B. NYC Health + Hospitals received funding to continue the Mental Health Continuum initiative

in FY-26 with the Department of Education and NYC Health Department, and preliminary capital awards.

### **State**

The NYS Budget for state Fiscal Year '25-'26 was enacted on May 8. The \$254 billion enacted budget was \$2B more than the proposed Executive budget. There is uncertainty surrounding the viability of this funding based on proposed Federal actions. The System will continue to work with our partners in State government to ensure we are protected by this contingency assumption. The System is evaluating the full impact of the entire state budget.

### **Federal**

The House passed a bill that would make significant cuts and changes to Medicaid to meet target spending reductions necessary for Congress to extend existing tax cuts. These changes would result in hundreds of millions of dollars in cuts to the System.

### **Community Affairs**

The Community Affairs team hosted the first Systemwide Community Affairs Staff Recognition Luncheon, which was attended by 40 community affairs staff from across the System, leadership, and elected officials.

### **CONTRACT DEVIATION**

Dr. Katz provided an update on contract deviations.

Since the last meeting of the Board of Directors, Dr. Katz authorized an extension of a **BioReference contract through June 30, 2026 and an increase in the not-to-exceed amount by \$4.8M**. The original contract was approved by the Board in June 2020, with a not to exceed amount of \$25 million through the contract expiration date of June 30, 2025. We are currently in a request for proposal process that began on January 22, 2025 to once again procure these services for specific, high quality oncology-related lab tests at competitive pricing.

### **LICENSE AGREEMENTS**

There are two license agreements that did not come before the Board, because they were less than \$5M over their entire terms.

- The first license agreement is with **Eric Degis DC Wellness PC for wellness services for staff at NYC Health + Hospitals/Metropolitan**. The license commenced December 16, 2024 and the term is for 5 years, at an annual cost of \$8,820 for a total of \$46,826.58. This is based on third party fair market value assessment of the neighborhood.
- The second license agreement is with **Andy's of Kings County, Corp. for two food service retail establishments at NYC Health + Hospitals/South**

**Brooklyn Health.** The license commenced December 18, 2024 and the term is for 5 years, at an annual cost of \$66,906 for a total of \$364,692. While this is not fair market value, it complements patient and staff services and escalation at 5% above industry norm. The agreement allows for annual assessment for fee based on service volume.

#### COMMITTEE REPORTS

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

#### OLD BUSINESS/NEW BUSINESS

#### ADJOURNMENT

Hearing no old business or new business to bring before the New York City Health + Hospitals Corporation Board of Directors, the meeting was adjourned at 3:46 p.m.



Colicia Hercules  
Corporate Secretary

## COMMITTEE REPORTS

### **GOVERNANCE COMMITTEE**

**As Reported by: José Pagán**

**Meeting Date: Thursday, April 24, 2025 - Time: 1:00 p.m.**

Attendees Committee Members - José Pagán; Michell Katz; Freda Wang;  
Vincent Calamia; Michelle Morse  
Staff - Colicia Hercules

The meeting was called to order at 1:33 p.m. pm by José Pagán.  
Mr. Pagán called a motion to accept the minutes of the Governance Committee meeting held on February 27, 2025. The motion was seconded and the minutes were unanimously approved.

On motion duly made, seconded and unanimously approved by all the meeting of the Governance Committee convened in executive session to deliberate on personnel actions.

#### ***Open Session***

During the Executive Session the Committee discussed the President's recommendation to appoint:

- Kenra Ford - Senior Vice President of Clinical Services Operations and Clinical Support Services
- Divya Pathak - Vice President Chief Data and Artificial Intelligence Officer

The Committee unanimously approved Dr. Katz recommendations to be presented to the Board.

There being no further business, the meeting adjourned at 1:47 p.m.

### **Medical and Professional Affairs/Information Technology Committee - May 5th, 2025**

**As Reported by Dr. Vincent Calamia**

**Committee Members Present-** José Pagán, Dr. Theodore Long, Erin Kelly - join at 9:09 a.m., Dr. Vincent Calamia Chairman of the committee.

Dr. Vincent Calamia, Chair of the Committee, called the meeting to order at 9:01AM. Adoption of the minutes of the November 4th, 2024 Medical and Professional Affairs/Information Technology Committee were on hold.

Dr. Calamia noted for the record according to the - By-Laws - Section 14. Committee Attendance. If any member of a standing or special committee of the Board will not be present at a scheduled committee meeting, the member may ask the Chair of the Board to request that another Board member, not a member of that committee, attend the scheduled meeting and be counted as a member for purposes

of quorum and voting:

Therefore, Sally Hernandez-Piñero has request that Suzanne Miles-Gustave - represented by Erin Kelly be counted for the purposes of quorum and voting on his behalf. That request was approved.

Also, noted for the record Dr. Theodore Long will be representing Dr. Mitchell Katz in a voting capacity.

#### Action Item

Kenra Ford, Sr. Vice President of Clinical Services Operation and Arthur Cooper, MD, Chief of Pediatric surgery Harlem Hospital, presented to the committee, the resolution for American College of Surgeons on Trauma Verification Process for Trauma Centers.

**Approving the application of New York City Health and Hospitals Corporation (the "System") for verification by the American College of Surgeons (the "ACS") of NYC Health + Hospitals/Harlem ("Harlem") as a Level II Pediatric Trauma center;**

**Committing to maintain the high standards needed to provide optimal care of all pediatric trauma patients, and that the multidisciplinary trauma performance improvement program has the authority to evaluate care across disciplines, identify opportunities for improvement, and implement corrective actions; and**

**Authorizing the appropriate officers of the System to execute any and all documents necessary to verify Level II Pediatric Trauma Center designation for Harlem through the ACS, Committee on Trauma.**

Dr. Cooper provided detail on the Harlem level II Pediatric Trauma Center. A map was present to show the System has six trauma centers, 2 are identified as adults as well as pediatric trauma centers, Harlem is seeking pediatric level II as well. There is a vigorous process that needs to be met; the last review was in 2022. The upcoming survey is to verify level II Pediatric trauma center for the Harlem community.

New York State Department of Health accepts the American College of Surgeons verification process for a hospital to become a designated trauma center. This Optimal Resources is coded by reference" in the NYS 408 health code regulations, and are now accepted by the State. New York State hospitals are not recognized as trauma centers unless verified by the State, which is the reason for this presentation today. There has been a subtle rule change requiring the exact level of verification to be approved by the Governing Board - NYC HHC Board of Directors.

Research and scholarly activities are required only for level I Trauma centers

All trauma centers must participate in a public professional education and train the next generation of residents, EM, surgery and subspecialties and others. All hospitals are required to participate in Trauma performance improvement (PIP) and patient safety must be independent, but report to hospital PI program.

There are a couple of special things that trauma centers need to do and the intense resources that is needs to be in place; The OR has to be available within 15 minutes and have the ability to open up a second room if necessary, the blood bank has to have products immediately, the radiology department, has to have an MRI ready within 2 hours, and interventional in 1 hour. Other special clinical equipment is required for the trauma registry and provides the outcome of each patient.

Hearing no questions, the resolution was duly seconded, and unanimously adopted by the Committee for consideration by the full Board.

Upon motion duly made and seconded the minutes of the M&PA / Information Technology Committee meeting held on November 4, 2024 was unanimously adopted.

#### **CLINICAL SERVICES OPERATION REPORT**

Kenra Ford, Sr. Vice President of Clinical Services Operation, and Steven Pulitzer, MD, Chief Enterprise Radiology Services, highlighted the following:

Dr. Pulitzer introduce the Enterprise Radiology program, a uniformed system has been created to streamline the process. The first phase was to assure 24/7 hours coverage. The second phase was to established productivity. The efficiency was to be achieved with the 24-hour coverage. Which has been to move it into tour 2, making each member more productive and work efficiently. In phase 3 more patients were able to be seen. A Daily Metric Dashboard was created to identify where the delays were in the System. Serving the community more efficient is key, over the last ten years with systems that have been put in place, patient outreach, patient navigation, improvement in equipment, and expanding access to patients, the patient is coming in sooner and ending up with good outcome in their results and a better plan of care.

**Questions raised by the Board:** how far along are we in the progress? Dr. Pulitzer response; in phase 1 we got everyone on one platform and utilized the EITS platform that goes across the System. With that more complete and uniforms coverage can be provided. The volume increases in the ED and stat inpatient by about 10%-year end, we were able to meet that volume and add about 4% to the budget. Going forward

with the single platform, we are going to staff to volume across the System. We can do this remotely in the afterhours. It is anticipating a decrease in size to the department if we are working together across the System. We have seen success in phase 1 and now are working on phase 2, and is becoming more efficient during the day.

**Questions raised by the Board:** what does the picture look like at the end point? Dr. Pulitzer response; we have longer access times at the acute sites and when we have open time at the outpatient sites. The goal is to take the patient that are truly outpatient and put them in the proper location and truly get the outpatient experience. This will open up space at the acute site for patient that need certain procedures in 30 days. This allows us to read all the cases on the same platform. The radiologist can sit in one place and read cases at multiple sites. This will get patients seen quicker and get their studies read faster with higher efficiency.

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

Natalia Cineas, DNP, System Chief Nurse Executive, Office of Patient Center Care, provided the following highlights.

A special Fireside Chat was held on October 16th from 11 AM - 12 PM, which was focused on the ancillary staff. The topic of this event was Career Ladder for Ancillary Staff - a special program providing pathway for them to become registered nurses.

The sixteenth iteration of our Fireside Chat was held on March 13th, 2025, where Natalia Cineas, DNP, MSM-N, MBA, RN, NEA-BC, FAAN, FADLN, had an intimate chat about the important topics within the nursing system. The event had over 374 attendees and the topic were Medication Administration. The third annual virtual celebration for Respiratory Care Week was held October 21st with over 71 people in attendance, the theme was JourneyTOGETHER. ImpactFOREVER. The keynote speaker was Ricardo Lopez, MD, FACP, FCCP, Director, Division of Pulmonary Medicine and Critical Care, and Director of Medical Intensive Care. The 5-Year Strategic Planning Retreat was a multi-day retreat from November 21-22, December 2, and January 13, 2025. The keynote speaker for the event was Marc A. Bertrand, MSA, M.Ed.

The nursing Strategic planning retreat was head with about 160 people in attendance. Dr's. Machelles Allen, Omar Fattal, and Eric Wei were part of the panel.

The Nursing Excellence Awards ceremony, held at the Central Office on December 17th, honored 35 nurse professionals from across the health system; 25 nurses were recognized for Excellence in Clinical Nursing, and five nurses were recognized systemwide for their efforts in leadership, volunteering, education, and mentorship, home or ambulatory care, and technology and innovation. Five nurses received the DAISY Award for Nurses advancing Health Equity. Other awards handed out at the special ceremony included the fifth annual

Structural Empowerment Award, presented to the nursing leadership and staff at NYC Health + Hospitals/Queens. The fifth annual Josephine Bolus Nursing Champion Award, a prestigious designation bestowed upon supporters of nurses and the nursing profession was given to Sharon H. Pappas, PhD, RN, NEA-BC, FAAN. The first Josephine Bolus Shining Light Award recognized five-units that embody the values of compassion, dedication, and excellence in the nursing profession. The awards were presented by Michael H. Bolus, son of the late Ms. Bolus, to both Dr. Pappas and the five units.

Metropolitan received the Gold Beacon Award for their Adult ICU on January 30, 2025. Celebration was held to honor Metropolitan Hospital on March 11th, 2025 with over 100 people in attendance. Julian John, CEO of Metropolitan gave the welcome remarks.

The 2025 Virtual Systemwide Certified Nurses Day celebration was held on March 17, 2025, with over 255 attendees, Dr. Jennifer Graebe was the keynote speaker. As a result, here are over one thousand and six hundred certified nurses, with hundreds more studying for their certification.

The third and final Fall & Injury Summit was held on March 24th, 2025 with over 100 participants from the 11 acute care hospitals. In this summit, the Behavioral Health Fall Prevention Bundle was introduced. The Behavioral Health (BH) specific Fall Risk Assessment Tool was also introduced on this summit. Queens received last April 4, 2025 recognition from the Academy of Medical-Surgical Nurses (AMSN) PRISM Award - 4BE unit. NYC H+H/Queens proudly joined the other 105 units in the country and three hospitals in New York State to receive this prestigious award. Queens also received the AORN award.

The nursing fellowship programs; Emergency Department (ED) - 389 nurse fellows completed their six-month fellowship program. 179 fellows enrolled in Phase 1. Intensive Care Unit (ICU) - 67 nurse fellows completed their six-month fellowship program; 73 fellows enrolled in Phase 1; peri-Operative - 17 nurse fellows completed their six-month fellowship program. 41 fellows enrolled in Phase 1.

**Question on the nursing strategic planning retreat,** does it get deep into staffing needs for the next five years when it comes to nursing? Dr. Cineas response; we were blown away with the number of attendees. The previous five years strategic planning retreat were and all goal were completed in spite of COVID. What is done now, on a quarterly basis we review to see are we on track.

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

Dr. Kim Keziah Mendez, Senior Vice President and Corporate Chief Information Officer, provided the following highlights.

Dr. Mendez presents the updates for EITS which begins with introduction of her team that includes Chief Health and Medical



Informatics Officer Dr. Michael Bouton, AVP Apoorva Karia who manages EITS Finance & contracts, Chief Technology Officer Jeff Lutz, and Chief Information Security Officer Soma Bhaduri. Dr. Mendez also introduces Divya Pathak who was recently named Vice President and Chief Data and AI Officer whose team became a part of EITS in December 2024. Since joining the DnA team in 2023, Dr. Mendez mentions that Ms. Pathak conducted a review and assessment of the DNA program which resulted in a new operating model that includes DNA champions in each facility and the formation of the new Artificial Intelligence Service line. Dr. Mendez also mentions the new policy management system will be an enterprise wide solution, which is managed by Andrew Vegoda's team.

Dr. Bouton then highlights the achievement of Epic's honor roll status for the third year in a row. He states that only about 18% of EPIC customers achieve this in any given year, and having achieved these three times, is a real achievement. The achievement is a result of teamwork and partnership from various groups within the System including but not limited to EITS, Ambulatory Care and partnership with the Peri-operative group. Dr. Bouton also reported the team is preparing for a new EPIC upgrade, ensuring they stay up to date with new platform innovations. He also mentions the EPIC Care Companion is being implemented to ensure appropriate education for patients. The patient portal, MyChart, is being leveraged for messages, reminders, and appointment management and the integration of infusion pumps into EPIC will save time for documentation.

Dr. Mendez briefly discusses plans to transition from PeopleSoft HR to the new payroll system Oracle Cloud. The first phase will focus on payroll and the schedule system within 18 to 24 months, with a multi-year project timeline.

Dr. Mendez continues with the presentation by discussing a strategic initiative started in summer 2024 aims to reduce printing costs across the System. The UnPrint initiative includes awareness campaigns, collaboration with service lines, and focusing on high print areas. The initiative began with understanding people's awareness and putting a new website in place. The goal is to focus on high print areas, starting with administrative offices and moving to HR and HIM offices. The total volume of black and white and color printing has shown a steady decline with detailed percentages shown in graphs as part of the presentation. The initiative will be reported in the strategic committee of the board, providing ongoing updates from each quarter.

Dr. Mendez reports on the status of ServiceNow Virtual Agent, which is being leveraged to handle Enterprise Support Services, reducing the need for live agents. The bot chat has increased, while agent chat has decreased, indicating the success of the virtual agent. The virtual agent helps with easier solutions, reducing the volume of more complex issues. She also discussed that user satisfaction is

monitored through surveys, with consistent high ratings for the support desk.

Dr. Mendez concluded her report by highlighting recognition and achievements of member of the EITS team. The EITS radiology support team and Archit Trivedi from DnA received nominations for NYC Health + Hospitals' 2024 Amazing Employee of the Year and Daniel Mackall was awarded the 2025 OTI Hayes Award. She also highlights the first coat drive for facilities was initiated with Patricia Ruiz and her team leading the effort.

The Committee complimented the Team on achieving the EPIC honor roll for three years in a row.

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

On behalf of Talya Schwartz, CEO of MetroPlus, Sanjiv Shah, MD, Chief Medical Officer, MetroPlus Health Plan, provided the following highlights.

#### **Membership**

MPH Membership Trend(12M) and Market Share: As of March 31, 2025, MetroPlus had 691,848 members across its plan offerings, representing growth of over 154,000 (28.6%) since January 2020, for annual growth of 1.5 % since April 31st, Medicaid and EP market share remained stable since the unwind. Largest membership percentage growth among H+H facilities was observed in Harlem hospital.

#### **Regulatory Update**

Single Fiscal Intermediary: New York State has adopted a single intermediary called Public Partnerships LLC (PPL) for the CDPAP services, as of April 1st 2025. However, due to a Court Order, Members now have until May 15 and Personal Assistants (PAs) until June 8 to complete their registration with PPL.

#### **Quality Performance**

Essential Plan - Tier 1: MetroPlus Health's Essential Plan (EP) has over 150,000 members. It is the second largest plan to Medicaid. There are 5 aspects to the Essential Plan, EP 1 through 5. Since 2021 the State introduced a Quality Incentive Award recognizing the rise in membership across the state. From measurement year 2021 The State retrospectively reviewed plans performances. There were 5 scoring Tier, 1 through 5, MetroPlus rate in the middle in Tier 3. Performance improvement strategies were introduced for measurement year 2022, the second tier was achieved, it was announced on March 27th, 2025 by NYSDOH for measurement 2023, MetroPlus is now at Tier 1.

The Quality Measures assessed by NYS align closely with the quality standards monitored by H+H, other health systems and community providers. The QM team has strong working relationship with Quality at H+H Central Office, and key quality contacts at H+H sites and community providers. Although the Plan's Quality scores substantially

improved year over year, our Tier 1 ranking was also based on improved Member Satisfaction results, a particular area of focus for the Plan and H+H. Not only is there a huge clinical and reputational impact but this performance is associated with a significant monetary award.

**Breast Cancer screening importance;** MetroPlus worked closely with H+H radiologist to improve outcomes in breast cancer screening. It is a measure that has been selected by NYS, along with cervical and colon rectal screening. This is due to many people falling behind in their cancer screenings. Additionally, the NYS DOH Office of Quality instituted a two-year performance improvement project (PIP) for 2024-2025 to improve cancer screening, including Breast Cancer Screening, among Medicaid Managed Care Plans, and HIV Special Needs Plans.

Breast Cancer Screening/Meaningful Improvement  
Measurement Year (MY) 2022: MetroPlus achieved the 90th percentile in Medicaid and HIV SNP in the BCS measure, however Essential Plan was below the 50th percentile. Measurement Year 2023: MetroPlus is projecting to maintain the 90th percentile in Medicaid and HIVSNP surpass the 50th percentile for Essential Plan. Measurement Year 2024: MetroPlus is, on average, 5% higher year-over-year (YOY) with claims through August

Collaboration with H+H Office of Women's Health to identify system-wide and site-based screening barriers and jointly investigate/resolve. Through this forum, identified the need for patient outreach to assist 2 facilities in scheduling mammograms. As a result, these sites are now 11.67 and 5.82 percentage points higher YOY, respectively. Harlem is one the sites, increasing their breast cancer screening to almost 12% and the other site is East New York achieving incremental improvement.

Salesforce Marketing Cloud: In 2024, MetroPlus Health began embarking on a transformative journey to modernize our marketing strategy through Salesforce Marketing Cloud. This digital shift is intended to streamline operations, improve efficiency, and deliver superior results, all while enhancing member engagement and satisfaction. It is cost efficient saving MetroPlus 1.3 million annually, but not compromising on quality. It expands more channels for communication with the members.

**Board member raised a concern:** On the breast cancer screening in many sites with the differences is interesting. It is a lot of variation data across the system. Trying to do something in a clinic where rates are low is concerning. Dr. Shah response; we understand the local issues, you know where the radiologist is, and people can get to it on the day of the visit. We also made sure that sites that were not doing well got the extra assist in terms of outreach calls, and focused the efforts on messaging the members. The feedback from the members are very helpful.

**Board member raised a question:** When the data is reviewed for the Essential Plan Tier 1, they look at 2023 and they tell you now? Dr. Shah response; yes, it is extremely delayed, for measurement for 2024, which they are in the mist of reporting now. You have to make sure all the claims data from December come in, then the State wants to make sure any additional registry data, city immunization registry is in corporate and data from electronic health systems that are not link to epic are included. The data from Health Fix and Bronx Rio data is submitted right now. The State then takes 3 to 4 months to immaculate all plans. The CAPS Essential Plan for 2024 is taking place now, and ends the end of May. That data incorporates 20% of the results. Then they look to see how much money they have when the award is ready. Board member raised a question: you do have the formula while you are going through the process? Dr. Shah response; yes, they announce the measures in January 2025, after the year is complete.

There being no further business, the meeting was adjourned 9:58AM.

**Capital Committee Meeting – May 5, 2025**

**As reported by:** José Pagán

**Committee Members Present:** Dr. Theodore Long, MD, Freda Wang, Karen St. Hilaire; Erin Kelly;

José Pagán called the meeting to order at 10:08 a.m. and stated for the record that Theodore Long, MD is representing Mitchell Katz, MD, President, Erin Kelly is representing Suzanne Miles-Gustave, and Karen St. Hilaire would be representing Molly Wasow Park, all in a voting capacity.

Mr. Pagán called for a motion to approve the minutes of the April 8, 2025 Capital Committee meeting.

**Upon motion made and duly seconded the minutes of the Capital Committee meeting held on April 8, 2025, were unanimously approved.**

**VICE PRESIDENT REPORT**

Mr. Saez provided update on Essential infrastructure and clinical renovation projects throughout the system:

NYC H+H/Queens: We have recently completed the N-Building cooling project, replacement of two air handling units for the data rooms for the hospital. This is critical for the operations of Queens as these data rooms store all IT needs.

NYC H+H/Elmhurst: The Medical ICU and the Central Sterile both have completed new Air Handler Unit projects. The previous units were nearing the end of their useful life and these new units will ensure the continuity of service for both of these critical hospital areas.

At NYC H+H/Harlem: The Martin Luther King Building 15th Floor Critical Care Unit Renovation is reaching conclusion. This project provided much needed upgrades to the unit, including a New HVAC system, new isolation room, telescopic doors, new flooring, electric upgrades, plumbing upgrades, dialysis upgrades, medical gas upgrades, nurse call upgrade, new patient monitors, cameras, and TVs. This overhaul of the unit will provide a better environment for patients and staff.

### **ACTION ITEMS**

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 Barr & Barr Inc. (the "Contractor") to undertake the renovation and construction of the RISE (Recovery, Integrated Support, Empowerment) Center at New York City Health + Hospitals/Lincoln for a contract amount of \$11,183,855, with a 10% project contingency of \$1,118,386, to bring the total cost not to exceed \$12,302,241 for a duration of 36 months.**

Mr. Saez was joined by Michael Rawlings, Chief of Operations, NYC H+H/Lincoln and Mahendranath Indar, Assistant Vice President, Facilities Development. The group presented background information, project scope, budget and funding overview, solicitation details and contract terms.

- Ms. Wang asked what is the criteria to determine when to use the design build methodology and what benefits they anticipated seeing.

Mr. Indar said that time savings and cost savings are factors that determine the use of design build. A minimum criterion is estimated project value as design build can only be used on projects over \$10M. We ask; Is the project over \$10M? Is the space a shell-space? Is timing a factor?

- Ms. Wang asked, is there was a gross maximum on the contracts. Mr. Indar said no but the goal of design build is to be collaborative and all risk is shifted to the designer and the builder to limit change orders. There could still be unforeseen conditions but those should be limited.
- Ms. Wang asked if references were for performance on design build projects. Mr. Indar said no, since design build is new to New York, but there is experience on CM build projects which is a similar methodology. Mr. Rawlings added that the architectural firm that is being engaged has performed work at NYC H+H/Lincoln and the facility has been pleased with their services.

Mr. Saez noted that design build collaboration should increase efficiency.

- Ms. Wang asked if decanting was included in the contract. Mr. Indar said no that work would be done in-house.
- Mr. Pagán asked what would happen to those being served out of Belvis. Mr. Rawlings said moves would begin in the coming months to Lincoln, which should be a benefit to the community.

Mr. Indar said he believed the facility has plans for the space.

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 Johnson Controls, Inc., (the "Contractor"), to provide Building Management System preventative maintenance and repair services at various NYC Health + Hospitals facilities for a contract amount of \$12,128,122.89, with a 10% project contingency on preventative maintenance portion of the contract of \$548,793.41, to bring the total cost not to exceed \$12,676,916 for an initial term of 3 years with 2 one-year options to extend.**

Mr. Indar presented details on the background and current state of the contract services, the procurement process was discussed, MWBE plans, vendor evaluations, and anticipated value of contracts.

- Ms. Wang asked if they were the only potential vendor. Mr. Indar explained that there had been effort to incorporate third party vendors but it had not been successful. It was a proprietary system and they did not have a process to train third party vendors.
- Ms. Wang asked if there was a way we could avoid getting in a similar situation in the future. Mr. Indar said that if we were slowly pulling out equipment, as opportunity to presents, to decrease the equipment under contract.
- Mr. Pagán said it would be interesting to know more about the systems and how they are used to optimize energy. Mr. Indar said retrofitting equipment helps to modernize and increase performance.

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

There being no further business, the Committee Meeting was adjourned at 10:28 a.m.



*Mitchell H. Katz, MD*

*NYC HEALTH + HOSPITALS - PRESIDENT AND CHIEF EXECUTIVE OFFICER  
REPORT TO THE BOARD OF DIRECTORS  
May 29, 2025*

**NYC HEALTH + HOSPITALS FACILITIES  
RECOGNIZE NATIONAL NURSES MONTH**

NYC Health + Hospitals facilities recognized National Nurses Month throughout the month of May. This year's theme, set by the American Nurses Association, was "The Power of Nurses," which was selected to shine a national spotlight on nurses as the driving force behind compassionate care, innovation, and transformative changes in health care.

As part of the recognition, NYC Health + Hospitals/Bellevue held a ribbon cutting for a new nurse's lounge, Jacobi Hospital clapped in all its nurses as they entered the facility, and Harlem Hospital held an award ceremony to recognize its outstanding nurses. NYC Health + Hospitals/Community Care held its Daisy Award celebration event for its nurses.

**HEALTH SYSTEM APPOINTMENTS**

**NYC HEALTH + HOSPITALS/METROPOLITAN APPOINTS  
DR. ANITHA SRINIVASAN AS CHIEF MEDICAL OFFICER**

This week NYC Health + Hospitals/Metropolitan announced that Anitha Srinivasan, MD, MPH, FACS, was appointed Chief Medical Officer (CMO) at the hospital, effective June 1. She has worked at Metropolitan Hospital for over two decades and brings a wealth of experience to her new role. She is the first woman Chief Medical Officer at Metropolitan Hospital, and currently one of two female CMOs across the 11 NYC Health + Hospitals hospital facilities, and the only woman of color in that role.

Dr. Srinivasan began her medical career at NYC Health + Hospitals in the 1990s with a surgical residency at NYC Health + Hospitals/Lincoln. After several years at an academic research center, she joined Metropolitan Hospital as an attending surgeon and associate professor of surgery at New York Medical College, where she has remained since. She founded the Metropolitan Breast Cancer Center and has served as its Director since 2017. In 2019, she was appointed Deputy Chief Medical Officer, and in 2020, she expanded her leadership role by

becoming Director of Perioperative Services. As Chief Medical Officer, she will be the third person to hold this title at Metropolitan Hospital.

## **HEALTH SYSTEM AND FACILITY ANNOUNCEMENTS**

### **NYC HEALTH + HOSPITALS LAUNCHES WORKFORCE DEVELOPMENT PROGRAM FOR BEHAVIORAL HEALTH NURSES**

As part of Mental Health Awareness Month, NYC Health + Hospitals announced a new Behavioral Health Nursing Career Ladder, which will provide 24 staff with educational support and financial assistance to enroll in nursing school. In exchange for a three-year commitment to NYC Health + Hospitals, participants will receive tuition assistance, coverage of exam fees, and support moving into full-time behavioral health nursing roles at the health care system after earning their nursing license. The goal of the initiative is to develop a group of individuals who are invested – both intellectually and financially – in advancing their career at NYC Health + Hospitals, while building our health System's behavioral health nursing capacity. The program is funded with \$550,000 from the Solon E. Summerfield Foundation and \$50,000 from The Louis and Rachel Rudin Foundation, Inc.

The announcement builds on the range of initiatives that NYC Health + Hospitals has launched to grow and support its behavioral health workforce, including the Psychiatric Physician Assistant Career Pathways Program, the NextGen Public Psychiatry Leadership Program, and the BH4NYC Loan Repayment Program.

### **NYC HEALTH + HOSPITALS/QUEENS DEDICATES "CLAIRE SHULMAN PAVILION" IN HONOR OF LATE QUEENS BOROUGH PRESIDENT**

At the beginning of this month, NYC Health + Hospitals/Queens unveiled the newly renamed Claire Shulman Pavilion during a ceremony honoring the late Claire Shulman, Queens' first female Borough President and a trailblazer for equitable healthcare. The renaming commemorates Shulman's lifelong dedication to public health, beginning with her career as a nurse at Queens Hospital in the 1940s and culminating in her historic 16-year tenure as Borough President (1986-2002). Shulman's advocacy led to the creation of the Queens Cancer Center of Excellence and critical upgrades to emergency services, ensuring access to care for over 400,000 annual patients. Renderings of the renamed pavilion, displayed at the ceremony, showcased the permanent tribute to her contributions. Claire Shulman began her career as a nurse at Queens General Hospital (now NYC Health + Hospitals/Queens), where she met her husband, Dr. Melvin Shulman, a psychiatrist. Her political career started as chair of a local Community Board, eventually leading to her election as Queens Borough President. During her tenure, she prioritized healthcare access for immigrant



communities, expanded emergency care, and championed modernization projects at Queens and Elmhurst Hospitals.

#### **PATIENT NAVIGATORS COMPLETE ONCOLOGY NAVIGATION TRAINING**

Eleven patient navigators across the hospital System completed the American Cancer Society Leadership in Oncology Navigation (LION) Program which included modules aligned with Centers for Medicare & Medicaid Services (CMS) requirements. Graduates earned the ACS LION credential, enhancing their cancer care knowledge and patient support skills. This training helps navigators deliver this essential support to individuals, caregivers, and families experiencing cancer and it reduces barriers and health disparities among various patient groups.

#### **HELATH SYSTEM RELEASES TWO NEW EPISODES OF ITS PODCAST, THE REMEDY**

NYC Health + Hospitals released the fifth and sixth episodes of its podcast, *The Remedy*, featuring leaders and health care providers from the nation's largest municipal health care system. *Season 2 Episode 5: Street Medicine in NYC* covers the efforts of social workers with NYC Health + Hospitals' Street Health Outreach + Wellness (SHOW) program, a street medicine program that provides medical care, behavioral health, and social services to New Yorkers who are experiencing homelessness or historically disconnected from care. Host Dr. Michael Shen spoke with three SHOW social workers to learn about their work bringing social services to vulnerable patients and building the trust necessary to connect them to behavioral health, social, and harm reduction services.

The sixth episode looks at "How AI Will Transform Healthcare in NYC." It covers how the public health System is using artificial intelligence to enhance patient care, improve efficiency, and support its workforce. In the episode, Dr. Shen sat down with Chief Data and Artificial Intelligence Officer Divya Pathak and Chief Medical Officer of Ambulatory Care Dr. Andrew Wallach to discuss the ways AI technologies support clinical workflows, address health equity, and provide a more personalized patient experience, as well as ethical considerations for responsible adoption.

#### **NYC HEALTH + HOSPITALS/GOTHAM HEALTH LAUNCHES DERMATOLOGY SERVICES TO EXPAND ACCESS TO SPECIALIZED SKIN CARE**

NYC Health + Hospitals/Gotham Health announced the launch of its dermatology services, a strategic expansion designed to provide comprehensive skin care screenings, early detection, and treatment for a broad range of skin conditions for all New Yorkers. Dermatology services are now available at Gotham Health, Broadway and will be expanded to other locations. The dermatology team offers evaluation and treatment for a wide range of skin conditions, including eczema, acne, and psoriasis. A central component of the new services is

comprehensive skin cancer screenings, which are essential for detecting skin cancers such as melanoma, basal cell carcinoma, and squamous cell carcinoma in their early stage, when they are most treatable. In addition to medical dermatology, cosmetic procedures and laser dermatology services are also offered, giving patients access to services that enhance skin appearance and boost confidence. These include skin tag removal, chemical peels for acne scarring, personalized cosmetic consultations, and laser treatments for hyperpigmentation.

**NYC HEALTH + HOSPITALS/GOTHAM HEALTH UNVEILS NEWLY RENOVATED  
BEHAVIORAL HEALTH SUITE IN EAST NEW YORK, EXPANDING ACCESS TO  
ESSENTIAL MENTAL HEALTH CARE**

NYC Health + Hospitals/Gotham Health announced the grand opening of its newly renovated Behavioral Health suite at Gotham Health, East New York, marking a major investment in expanding access to critical mental health services for the Brooklyn community. With the newly renovated suite, Gotham Health, East New York will increase its capacity to serve patients, reduce wait-times, and introduce new programs to better meet the growing mental health needs of the community. The redesigned space features a bright, welcoming reception area that streamlines patient check-ins and improves staff workflows.

**NYC HEALTH + HOSPITALS/COLER RECEIVES STATE-OF-THE-ART EQUIPMENT  
UPGRADE FROM WHEELCHAIR CHARITIES INC. TO EXPAND ACCESS TO  
REHABILITATIVE CARE**

Last week, NYC Health + Hospitals/Coler received an equipment donation for its rehabilitation gym from long-time benefactor and founder of Wheelchair Charities, Inc., Henry J. 'Hank' Carter. The equipment allows for broader resident access to rehabilitative care, improving physical function, mobility, and the strength needed to perform daily activities, independently. The new equipment includes:

- Bariatric Standing Frames - will assist residents with significant mobility limitation to help stand and bear weight on lower extremities in preparation for transferring and walking.
- Bariatric Parallel Bars - will provide stable and adjustable support aimed at improving mobility, balance and strength in preparation for ambulation.
- Training Stairs - will support residents in regaining mobility and safely learning to navigate stairs after an injury.
- Sci-fit Steppers - will promote full-body strengthening with low-impact exercise.

- Omni Cycle - will assist residents in regaining strength, coordination, and endurance especially for those experiencing difficulty with traditional exercise.
- PhysioGait - will provide a controlled, dynamic environment that allows residents to practice walking with different degrees of support.
- Lingraphica - will allow residents to communicate when they are unable to speak or communicate clearly.

### **8TH ANNUAL SIMULATION SYMPOSIUM HOSTED AT NYC HEALTH + HOSPITALS/JACOBI**

The NYC Health + Hospitals' Institute for Simulation and Advanced Learning created content and hosted the 8<sup>th</sup> Annual Simulation Symposium at Jacobi Hospital, welcoming more than 90 guests. The program featured in-person experiences applying simulation to quality improvement and opportunities to practice coaching in debriefing with a validated tool. The keynote speaker, Dr. Kim Leighton, discussed the "illusion" of competency and strategies to create assurances around skill acquisition and retention.

### **HEALTH CARE SYSTEM'S QUALITY ACADEMY GRADUATES FOURTH COHORT**

On Thursday, May 15, NYC Health + Hospitals' Quality Academy came together from all sites of care, all services lines and MetroPlusHealth for a symposium to share best practices from quality-focused improvement projects and to graduate the nearly 300 participants in the program. Since the program launched in 2021, almost 800 participants have matriculated.

### **NYC HEALTH + HOSPITALS EMPLOYEE AND FACILITY RECOGNITIONS**

#### **NYC HEALTH + HOSPITALS/QUEENS AND ELMHURST ACHIEVE PRESTIGIOUS BABY-FRIENDLY REDESIGNATION**

NYC Health + Hospitals/Queens and Elmhurst received redesignation as Baby-Friendly hospitals, a global recognition of excellence in maternity care and infant feeding support. This achievement underscores their dedication to advancing equitable health outcomes, reducing racial disparities, and empowering families through evidence-based practices, including breastfeeding education, culturally competent doula care, and comprehensive women's health services. The redesignation, awarded by Baby-Friendly USA, validates both hospitals' adherence to the World Health Organization's Ten Steps to Successful Breastfeeding, a framework proven to improve maternal and infant health. At Queens and Elmhurst Hospitals, these practices are part of a broader commitment to addressing systemic inequities, particularly

for women of color who face disproportionately high rates of pregnancy-related complications.

### **CITY & STATE NEW YORK RECOGNIZES TWO NYC HEALTH + HOSPITALS LEADERS ON 2025 "ASIAN TRAILBLAZERS" LIST**

NYC Health + Hospitals announced that NYC Health + Hospitals Chief Biopreparedness Officer Syra Madad and NYC Health + Hospitals/Elmhurst Chief Financial Officer Roger Zhu were named to City & State New York's inaugural "Asian Trailblazers" list for 2025. The list honored more than 50 distinguished individuals of Asian descent who have made meaningful contributions across industries and communities throughout New York. It highlights the honorees' extensive experience, leadership, and service, showcasing their ties to a wide-range of cultural backgrounds, including Chinese, Indian, Filipino, Korean, Vietnamese, Bangladeshi, South Korean, Hong Kong, Taiwanese, and more. City & State New York is a media organization dedicated to covering New York's local and State politics and policy through in-depth, non-partisan coverage.

### **25 NYC HEALTH + HOSPITALS DOCTORS RECOGNIZED FOR OUTSTANDING PATIENT CARE AT ANNUAL DOCTORS' DAY CELEBRATION**

Earlier in the month NYC Health + Hospitals celebrated its Doctors' Day and the 25 doctors recognized for their outstanding patient care. The physicians were nominated for their unwavering commitment to compassionate, patient-centered care, and their exceptional leadership in advancing equitable health care in NYC's largest public hospital System. The doctors have transformed the lives of countless patients. This year's honorees include pediatricians, primary care doctors, emergency department physicians, an oncologist, a podiatrist, a psychiatrist, an HIV specialist, a gastroenterologist, and others. They come from a diverse array of nations such as Liberia, Nigeria, Poland, Guyana, Argentina, Bangladesh, Iran, Egypt, India, and Sudan.

### **NYC HEALTH + HOSPITALS AND CITY COLLABORATIONS**

#### **CITY CELEBRATES NATIONAL NURSES MONTH WITH \$2 MILLION IN INVESTMENT TO SUPPORT NEW REGISTERED NURSES AND NURSE EDUCATORS**

Yesterday, the City announced \$2 million in new investments in the local nurse training and education pipeline to support a stronger healthcare workforce across the five boroughs. One piece of this effort included supporting the New York City-wide Nurse Residency Program, which has supported nurse residents (recently graduated Registered Nurses in their first year of clinical work) with ongoing education training and peer support that are proven to increase worker skills, satisfaction, and retention.

To date NYC Health + Hospitals has enrolled 2,636 nurse residents in the program, and retention rates have risen to 87% since 2019, resulting in hiring cost savings of \$88 million for the System. Through our Nurse Residency Program, NYC Health + Hospitals is enhancing staff sustainability to enable our municipal healthcare System to fulfill its mission to serve the most vulnerable and underserved patients, families and communities.

#### **IN HONOR OF MILITARY APPRECIATION MONTH, NYC HEALTH + HOSPITALS AND NYC DEPARTMENT OF VETERANS' SERVICES COLLABORATE ON VETERAN POP-UPS**

In honor of Military Appreciation Month, NYC Health + Hospitals and the NYC Department of Veterans' Services announced upcoming monthly veteran pop-ups across the health System. The events offer one-on-one support for accessing benefits from the US Department of Veterans Affairs and are open to health System staff and members of the community who have served in any branch of the military. The pop-ups have served over 300 people since launching in early 2024. Military Appreciation Month celebrates all members of the military, including people currently serving and those who have already served, during the month of May.

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

NYC Health + Hospitals continued to wind down its humanitarian center operations in May as we scale back our role to meet the needs of the City's ongoing response. As we prepare for the closure of the Arrival Center and Roosevelt Hotel at the end of June, the public health System will turn over the majority of asylum seeker housing operations to the City's Department of Homeless Services.

Over the month of May, the Humanitarian Emergency Response and Relief Center (HERRC) team successfully decompressed and decommissioned its humanitarian centers at the Stewart Hotel and Candler Building. These centers, which opened in December 2022 and March 2023 respectively, provided dedicated housing and services to over 3,000 asylum seekers at any given time.

The HERRC Case Management program, which began providing dedicated on-site case management and exit planning services in October 2023, will also conclude at the end of June. Since the program began, and thanks to the close coordination of our Case Management Community Advisory Board (CAB), we have provided nearly one million exit planning meetings to 90,000 unique asylum seekers. Our dedicated, community-informed approach to case management has ensured that over 90% of eligible adults have applied for or received work authorization, a key step for asylum seekers to leave the City shelter system and achieve self-sufficiency.

#### **NYC CARE UPDATE**

**NYC CARE AND NYC MAYOR'S PUBLIC ENGAGEMENT UNIT  
LAUNCH 'IMMIGRANT HEALTH CARE DAY OF ACTION'**

Last week, NYC Health + Hospitals' NYC Care program partnered with the NYC Mayor's Public Engagement Unit's GetCoveredNYC team on a city-wide "Immigrant Health Care Day of Action." The outreach effort mobilized dozens of agency staff, community-based organization partners, and volunteers who participated in canvassing, tabling, and posting social media messaging to get the word out. NYC Care Executive Director Dr. Jonathan Jiménez and the NYC Mayor's Public Engagement Unit Executive Director Adrienne Lever helped to kick off the day of action that morning by joining a health fair organized NYC Care partner Mixteca.

Mixteca and NYC Care partner South Asian Council for Social Services (SACSS) celebrated their organizations' 25-year anniversaries by launching health fairs and organizing their staff to join the outreach effort. As the day progressed, organizers and volunteers canvassed in neighborhoods with the highest concentration of NYC Care-eligible immigrant New Yorkers to speak about the importance of health care access and primary care. The city-wide mobilization served to remind all New Yorkers that health care is available regardless of one's immigration status or ability to pay. Photos from the day's events can be downloaded [here](#).

**ARTS IN MEDICINE UPDATE**

**NEW MICKALENE THOMAS ART INSTALLATION DEBUTS AT NYC HEALTH +  
HOSPITALS/SOUTH BROOKLYN HEALTH**

Last week, NYC Health + Hospitals and RxART debuted a new large-scale installation by Brooklyn-based artist Mickalene Thomas, "Freesia on My Mind: The Beauty of Ruth Bader Ginsburg." Located in the lobby of the Ruth Bader Ginsburg Hospital on the campus of NYC Health + Hospitals/South Brooklyn Health, the mosaic will welcome patients, visitors, and staff as they enter the hospital. Justice Ginsburg worked tirelessly throughout her career to advance health equity, supporting fair and just opportunity for all people to achieve optimal health regardless of circumstance. In honor of the hospital's namesake, the bold mosaic includes images of the late Supreme Court Justice's favorite flowers: freesias and white hydrangeas. The mural showcases a meticulously arranged collage of paper cutouts, combining solid blocks of blues, yellows, and oranges to evoke a sky-like backdrop for a lush landscape of found floral imagery. At 76 feet by 8 feet, the mosaic covers an entire wall of the lobby mezzanine. The mosaic was supported by the Rallis Foundation and the Ruth Stanton Foundation and made possible by RxART in partnership with the Arts in Medicine department at NYC Health + Hospitals and the Laurie M. Tisch Illumination Fund.

This is the twelfth collaboration between RxArt and NYC Health + Hospitals.

**"FLOURISHING," A COMMUNITY HEALTH WORKER  
EXHIBITION, OPENS AT JACOBI HOSPITAL**

Flourishing is a collaboration between NYC Health + Hospitals' Arts in Medicine program, Jacobi Hospital's Public Health Corps, and the Brooklyn Museum to bring together artworks created by Community Health Workers (CHW) and two patients, alongside works from the NYC Health + Hospitals' art collection. The artworks reflect on themes of memory, identity, urgency, self-care, labor, freedom, and culture. The exhibition is viewable in-person at Building 8 on Jacobi's campus and virtually on Bloomberg Connects.

**METROPLUSHEALTH UPDATE**

**METROPLUSHEALTH DELIVERS STRONG FINANCIAL PERFORMANCE IN 2024**

MetroPlusHealth concluded 2024 with robust financial results, achieving a 1% profit margin. This success was driven largely by value-based payment arrangements with NYC Health + Hospitals, which reward high-quality, cost-effective care. In fact, MetroPlusHealth delivered 31.6% more in shared savings than projected back to NYC Health + Hospitals. This funding is being reinvested to support community needs and help serve the City's most vulnerable populations more effectively.

Additionally, MetroPlusHealth maintained a strong medical loss ratio of 92.1% and a lean administrative loss ratio of 7.7%. These metrics underscore MetroPlusHealth's strong financial health and effective management moving into 2025.

Several lines of business saw meaningful growth. Medicare revenue increased due to favorable regional rates and improved risk scores. Qualified Health Plan (QHP) revenue increased year-over-year, while enhanced capitation rates for Medicaid, HARP, and Child Health Plus contributed to an overall revenue increase above expectations. Membership remained steady across most products, supporting overall financial stability.

MetroPlusHealth also reported encouraging trends in member access to care. Emergency room visits declined, while outpatient care—including mental health services and ExpressCare visits—increased. These trends indicate that more members are receiving care in the appropriate settings. With a solid financial foundation, continued focus on quality, and a strategic outlook, MetroPlusHealth is well-positioned to tackle the challenges of 2025 and beyond.

**External Affairs Update**

***City***

The City's Executive Budget was released on May 1st at \$115.1B. NYC Health + Hospitals received \$3.6M in funding to continue the Mental Health Continuum initiative in FY-26 with the Department of Education and NYC Health Department.

Borough President FY-26 capital awards were announced as part of the Executive Budget. NYC Health + Hospitals preliminarily received \$16.4M for various capital projects across all sites. We expect more to come at the time of Adopted Budget in July.

On May 22, NYC Health + Hospitals participated in the Executive Budget Hearing at the New York City Council, held jointly by the Committee on Hospitals and Committee on Finance. Dr. Katz provided testimony and participated in Q&A.

### **State**

The NYS Budget for state Fiscal Year '25-'26 was enacted on May 8, making it the latest State budget in 15 years. The \$254 billion enacted budget was \$2B more than the proposed Executive budget. While we were pleased to see Medicaid investments for hospitals, nursing homes, and health center providers, these Medicaid reimbursement increases were achieved through the Managed Care Organization provider tax. However, there is uncertainty surrounding the viability of this funding based on proposed Federal actions. Also, the enacted budget would discontinue Upper Payment Limit and Indigent Care Pool funding for H+H. The Executive budget briefing book explained this action was proposed because of a Directed Payment Template proposal submitted to the federal government. We will continue to work with our partners in State government to ensure we are protected by this contingency assumption. We are evaluating the full impact of the entire state budget.

### **Federal**

The House passed a bill that would make significant cuts and changes to Medicaid in order to meet target spending reductions necessary for Congress to extend existing tax cuts. Per the Congressional Budget Office (CBO), this bill will cause \$715 billion in Medicaid cuts and Affordable Care Act (ACA) rollbacks, and New York State estimates a ~\$14B loss if this version of the bill were to be finalized.

Though we continue to assess the bill for potential impacts, we estimate it would result in hundreds of millions of dollars in cuts to our System, as Dr. Katz explained in our recent City Council budget hearing. We have been working to engage the NYC Congressional delegation to ensure they are aware of the significant negative consequences of this legislation and its impact on the system. Our advocacy will continue as the bill moves to the Senate.

### **Community Affairs**

The Community Affairs team hosted the first Systemwide Community Affairs Staff Recognition Luncheon, which was attended by 40 community affairs staff from across the System, leadership, and elected officials. The first Jackie Rowe-Adams Community Affairs Staff of the Year Award was presented to Jessica Arocho, Director of Community Affairs at NYC Health + Hospitals/Woodhull.



The Peer Academy attended the Council of CABs meeting in May to share its program's impact on the community.

About 80 CAB members from across the system attended the CAB Education Conference "Enhancing CAB Impact Through Assertive Communication and Team Building" on May 16.

The Central Council of Auxiliary will meet on Wednesday, June 4th, for its quarterly meeting.

### **CONTRACT DEVIATIONS**

Since the last meeting of the Board of Directors, I have authorized an extension of a BioReference contract through June 30, 2026 and an increase in the not-to-exceed amount by \$4.8M. The original contract was approved by the Board in June 2020, with a not to exceed amount of \$25 million through the contract expiration date of June 30, 2025. We are currently in a request for proposal process that began on January 22, 2025 to once again procure these services for specific, high quality oncology-related lab tests at competitive pricing.

### **LICENSE AGREEMENTS**

There are two license agreements that did not come before the Board, because they were less than \$5M over their entire terms.

- The first license agreement is with Eric Degis DC Wellness PC for wellness services for staff at NYC Health + Hospitals/Metropolitan. The license commenced December 16, 2024 and the term is for 5 years, at an annual cost of \$8,820 for a total of \$46,826.58. This is based on third party fair market value assessment of the neighborhood.
- The second license agreement is with Andy's of Kings County, Corp. for two food service retail establishments at NYC Health + Hospitals/South Brooklyn Health. The license commenced December 18, 2024 and the term is for 5 years, at an annual cost of \$66,906 for a total of \$364,692. While this is not fair market value, it complements patient and staff services and escalation at 5% above industry norm. The agreement allows for annual assessment for fee based on service volume.

### **NEWS FROM AROUND THE SYSTEM**

- **Becker's Hospital Review:** [Protecting Access and Advancing Care: Erfan Karim on Medicaid, Innovation, and Health Equity](#)
- **Becker's Hospital Review:** [NYC Health + Hospitals names CMO of Metropolitan Hospital](#)
- **Queen's Ledger:** [Elmhurst CFO Honored as One of NYC's Asian Trailblazers](#)

- **PIX 11:** [Stroke Awareness Month: Know the signs before it's too late](#)
- **New York Times:** [How Healthy Are Mangoes?](#)
- **Becker's Healthcare Podcast:** [Building Ethical, Equitable AI in Public Healthcare with Divya Pathak of NYC Health + Hospitals](#)
- **Brooklyn Daily Eagle:** [City's public hospital system launches dermatology services at Gotham Health-Broadway](#)
- **Everyday Health:** [Cancer-Related Fatigue and Depression Are Tougher for Women Than Men](#)
- **City & State:** [Asian Trailblazers](#)
- **New York Times:** [The New York Nonprofit Where Generations of Artists Got Their Start](#)
- **The Bump:** [Can You Use Retinol While Pregnant?](#)
- **NBC News:** [Cancer-Related Fatigue and Depression In Women | AACR](#)
- **PIX 11:** [Seasonal Allergies](#)
- **NBC News:** [The key to healthy aging? Eating a variety of these kinds of carbs](#)
- **Newz9:** [Transforming Care: NYC Health + Hospitals/Coler Boosts Rehabilitative Services with New Equipment from Wheelchair Charities Inc.](#)
- **Becker's Hospital Review:** ['We're ready every day': 1 nursing home CEO's 5-star leadership strategy](#)
- **New York Post:** [NYC's hospital cops - the unsung heroes of the Big Apple - finally honored during moving Brooklyn ceremony](#)
- **World Today News:** [NY Nonprofit Trailblazers 2025: City & State](#)

**AMENDED TO REMOVE HENRY J. CARTER NURSING FACILITY  
RESOLUTION – 06**

Adopting in the name of the New York City Health and Hospitals Corporation (“**NYC Health + Hospitals**”) Board of Directors the **2025 twelve Community Health Needs Assessments (“CHNA”)** prepared for each of **NYC Health + Hospitals’ ten acute care hospitals over 11 campuses and for the NYC Health + Hospitals/Henry J. Carter Hospital.**

**WHEREAS**, NYC Health + Hospitals operates ten acute care hospitals over 11 campuses and Henry J. Carter, Hospital; and

**WHEREAS**, NYC Health + Hospitals has tax exempt status under Section 501(c)(3) the Internal Revenue Code; and

**WHEREAS**, The Patient Protection and Affordable Care Act, signed into law in 2010 (the “**Affordable Care Act**”), added to the Internal Revenue Code Section 501(r)(3) which requires that hospitals with 501(c)(3) tax status conduct a CHNA at least once every three years; and

**WHEREAS**, regulations adopted under the Affordable Care Act specify that a CHNA be prepared for each licensed facility operated by hospital organizations enjoying 501(c)(3) status; and

**WHEREAS**, NYC Health + Hospitals has conducted CHNAs covering the three-year period since the last CHNA in 2022 summaries of which are attached; and

**WHEREAS**, under the Affordable Care Act, a hospital organization’s governing body or a committee authorized by the governing body must adopt the CHNA.

**NOW, THEREFORE, BE IT RESOLVED**, that the New York City Health and Hospitals Corporation’s Board of Directors hereby adopts the 2025 twelve Community Health Needs Assessments prepared for each of NYC Health + Hospitals’ ten acute care hospitals over 11 campuses and for NYC Health + Hospitals/Henry J. Carter Hospital.

**EXECUTIVE SUMMARY  
ADOPTION OF  
2025 NYC HEALTH + HOSPITALS COMMUNITY HEALTH NEEDS ASSESSMENT**

- OVERVIEW:** Through an amendment to the Internal Revenue Code (the “**IRC**”) the Affordable Care Act imposed on all tax-exempt hospital organizations the obligation to conduct a CHNA not less often than every three years with respect to all acute care hospitals they operate. Regulations adopted under the IRC make clear that CHNAs may properly be prepared for multiple acute care hospitals at one time provided that there is a separate analysis made for each facility. New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) has prepared a CHNA every three years since 2010 and its Board has duly adopted the same.
- PROPOSAL:** NYC Health + Hospitals’ Strategic Planning Committee has collaborated with the Office of External and Regulatory Affairs to prepare the current CHNA. To prepare the proposed CHNA, the team made extensive efforts to engage the various communities through the hospitals’ Community Advisory Boards, new focus group meetings, Advisory Group, over 6,500 quantitative surveys, and in other ways. A copy of the full CHNA titled, 2025 NYC Health + Hospitals Community Health Needs Assessment has been distributed to every member of the NYC Health + Hospitals’ Board of Directors and upon its adoption by the Board of Directors, the CHNA will be posted on the NYC Health + Hospitals’ public website as required by IRC Section 501(r).

# 2025 Community Health Needs Assessment



**Board of Directors Meeting**  
June 26, 2025

Deborah Brown, Senior Vice President  
External & Regulatory Affairs

### **AMENDED TO REMOVE HENRY J. CARTER NURSING FACILITY**

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## About the Community Health Needs Assessment

The Community Health Needs Assessment (CHNA) identifies and assesses the priority health needs of the communities served by NYC Health + Hospitals.

### Bronx

NYC Health + Hospitals/Jacobi  
NYC Health + Hospitals/Lincoln  
NYC Health + Hospitals/North Central Bronx

### Brooklyn

NYC Health + Hospitals/Kings County  
NYC Health + Hospitals/South Brooklyn Health  
NYC Health + Hospitals/Woodhull

### Manhattan

NYC Health + Hospitals/Bellevue  
NYC Health + Hospitals/Carter  
NYC Health + Hospitals/Harlem  
NYC Health + Hospitals/Metropolitan

### Queens

NYC Health + Hospitals/Elmhurst  
NYC Health + Hospitals/Queens





## COMMUNITY HEALTH NEEDS ASSESSMENT (CHNA) BACKGROUND

- IRS requirement for non-profit provider systems
- Opportunity to understand prioritized community health needs and co-create solutions through an implementation strategy
- To be adopted by the NYC Health + Hospitals Board
- 2022 CHNA was approved and made publicly available on the NYC Health + Hospitals website

### FY25 CHNA

- Define the community served
- Assess the community's priority health needs from community input
- Identify assets to address priority needs
- Evaluate impact of actions taken in prior CHNA
- Made publicly available by June 26

### FY26 – FY2028 IMPLEMENTATION STRATEGY

(to be developed)

- Actions the system will take to address identified needs
- Anticipated impact of these strategies
- Programs, partnerships and resources the system will commit
- Made publicly available by November 2025



# 2022 CHNA

## 2022 CHNA FINDINGS FOCUSED ON:

**PRIORITY #1:** Advancing health equity and  
combatting chronic disease

**PRIORITY #2:** Enhancing access to resources

## **ACTIONS IMPLEMENTED TO ADDRESS THE HEALTH NEEDS IDENTIFIED IN THE 2022 CHNA**

**Following the 2022 Community Health Needs Assessment, the Implementation Strategy Plan to address the identified needs was adopted by the Board of Directors in November 2022. The following actions were adopted:**

1. Address existing health equity challenges
2. Optimize the patient care experience by increasing access to information and promoting continuity of care
3. Promote longitudinal, integrated care for all New Yorkers to improve health outcomes
4. Address lifestyle behavior change by empowering patients to move towards healthier practices
5. Improve access and service navigation
6. Continued recovery from the impact of the COVID-19 pandemic

## 2022 Key Priority #1

# ADVANCING HEALTH EQUITY AND COMBATting CHRONIC DISEASE

### ACHIEVEMENTS:

- NYC Health + Hospitals received recognition from the American Heart Association and American Medical Association for delivering high-quality care in critical areas, including type 2 diabetes, high blood pressure, heart failure, stroke and resuscitation.
- A Lung Cancer Screening program was launched at ten hospital sites. Over 10,000 scans have been performed since the beginning of the Lung Cancer Screening program in September 2022.
- A comprehensive three-year plan was launched to strengthen and expand behavioral health services, with \$41 million in funding from the State.
- New services were introduced, including a state-of-the-art surgical retina service at Harlem Hospital and 3D mammogram machines at multiple Gotham Health sites.
- Our post-acute facilities were recognized in America's Best Nursing Homes 2023 and 2024 lists by Newsweek, and NYC Health + Hospitals/Sea View ranked #1 in NY State.
- All eleven of our hospitals are now officially Baby-Friendly.
- Twenty new wellness rooms were opened across the system, providing staff with dedicated spaces to decompress and prioritize mental health.

## 2022 Key Priority #2

# ENHANCING ACCESS TO RESOURCES

### ACHIEVEMENTS:

- NYC Health + Hospitals celebrated the opening of the Ruth Bader Ginsburg Hospital at NYC Health + Hospitals/South Brooklyn Health, designed to withstand future storms and enhance care delivery in the region.
- Telehealth abortion access was launched through Virtual ExpressCare, expanding access to essential care.
- NYC Health + Hospitals/Correctional Health Services opened the first-ever reentry service on Rikers Island, providing a critical resource hub for individuals released from jail.
- NYC Health + Hospitals successfully advocated for \$146 million in funding to support medical equipment funding and infrastructure upgrades across the system.
- The Housing for Health team assisted over one thousand patients in securing permanent housing, directly supporting stable living conditions for vulnerable New Yorkers.
- The health system led a team of Community Health Workers who assisted 35,000 patients, connecting them to specialty care and addressing day-to-day needs, such as housing, financial, food, and legal services, as well as scheduling health care appointments and coordinating transportation.

## **2022 CHNA IN USE**

- Used internally by
  - NYC Health + Hospitals facilities
  - NYC Health + Hospitals Philanthropy
  - NYC Health + Hospitals Community Affairs
- Used by Centers for Medicare and Medicaid Services (CMS) during their borough health insurance forums
- Used by Downstate Community Advisory Board for their proposal that will modernize their hospital

# 2025 CHNA

## **NYC HEALTH + HOSPITALS CONDUCTED A COMPREHENSIVE CHNA PROCESS THAT INCLUDED:**

### **QUALITATIVE ANALYSIS**

#### **+35 Expert Interviews**

- System clinical service line leads
- NYC Health + Hospitals Central Office and facility leadership
- NYC Health + Hospitals Board Members
- New York City Department of Health and Mental Hygiene (DOHMH) leadership
- MetroPlusHealth leadership

#### **19 Community Forums**

- 12 forums total, one at each NYC Health + Hospitals facility, in conjunction with Community Advisory Board (CAB) meetings
- 5 Borough-wide focus groups
- 1 Gotham Health CABs focus group
- 1 Youth forum
- Input from CHNA Advisory Board

### **QUANTITATIVE ANALYSIS**

#### **+6,589 Surveys**

- Intensive primary data review and analysis with internal Data and Analytics team
- DOHMH and New York State
- Department of Health (NYSDOH) literature review and data sources





## **BOROUGH-WIDE FOCUS GROUP PARTICIPANTS**

- Brooklyn Center for Independence of the Disabled
- Brooklyn Community Board 5
- Chatham Green Cooperative
- Dreamers Helping Hands
- Harlem Dowling
- NMPP Cares
- NYC Health + Hospitals Community Advisory Board Members
- NYC Department of Education
- Office of Assembly Member Sam Pirozzolo
- Police Athletic League, Inc.
- Project Hospitality
- Staten Island Partnership for Community Wellness
- United Activities Unlimited, Inc.

# OVER 6,500 COMMUNITY STAKEHOLDERS IDENTIFIED TOP RISKS AND CAUSES OF POOR HEALTH AND DEATH IN THEIR COMMUNITIES

## Top 10 Perceived Risk Factors for Poor Health and Death by Community Stakeholders

	Average ranking (Scale 1 to 5)
High out-of-pocket costs	4.03
Fear of medical cost	3.99
Stress and emotional health	3.86
Lack of housing access, affordability and quality	3.80
Lack of exercise and physical activity	3.74
Lack of health insurance	3.68
Lack of knowledge of when and how to use health care services	3.62
Limited economic opportunity	3.58
Poverty and limited resources	3.58
Lack of mental health and behavioral health care providers	3.58

## Top 10 Perceived Causes of Poor Health and Death by Community Stakeholders

	Average ranking (Scale 1 to 5)
Diabetes and high blood sugar	3.92
High blood pressure	3.87
Mental health disorders	3.77
Obesity (high BMI)	3.70
Heart disease	3.53
Substance use	3.51
Cancer	3.41
Asthma, breathing issues and lung disease	3.37
Violence	3.31
Infectious disease (COVID-19, flu, hepatitis)	3.24

1 - Not a significant problem

5 - Significant problem

## 2025 CHNA FINDINGS FOCUSED ON:

**PRIORITY #1:** Advancing inclusive care services and strategies

**PRIORITY #2:** Bridging health gaps

## 2025 Priority Area

# ADVANCING INCLUSIVE CARE SERVICES AND STRATEGIES

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### IDENTIFIED CHALLENGES

- Chronic disease prevention and management, with a particular focus on hypertension and diabetes
- Maternal health care
- Respiratory care, with a particular focus on asthma
- Mental health care
- Holistic care for substance use disorder
- Cancer prevention and care
- Patient experience

### Chronic Disease Prevention and Management

“One of the most critical priorities is addressing the social determinants of health, such as poverty, education, housing, and food security, which directly influence health outcomes. Under-resourced communities often experience higher rates of chronic diseases and mental health challenges, largely due to limited access to healthy food, safe environments, and economic stability. Expanding access to affordable, high-quality health care is an essential priority.”

– Michelle Lewis,  
CEO NYC Health + Hospitals/Gotham Health



### Mental Health

“The child mental health crisis is a top health issue following the pandemic. They are the future generation of adults and do not have a voice to advocate for their own behavioral health needs.”

– Omar Fattal, MD, MPH,  
System Chief for Behavioral Health, co-Deputy Chief Medical Officer



## 2025 Priority Area

# BRIDGING HEALTH GAPS

### OUR COMMUNITIES REPORT NEEDING ADDITIONAL ACCESS TO ECONOMIC AND SOCIAL SUPPORTS INCLUDING:

- Health system access and education
- Quality, accessible housing
- Access to nutritious and affordable food
- Economic opportunity
- Safe outdoor spaces
- Violence prevention

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#### Health System Access and Education

“A lot of people in our community don’t know what services we offer or what programs we have. We must let people know how to utilize and use the hospitals and clinics.”

– Jackie Rowe-Adams, Board of Directors,  
NYC Health + Hospitals



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#### Housing

“With housing and rent burdens being so high, it affects everything else—can you afford childcare? Can you afford food and other things you need to take care of yourself and live well?”

– Community forum participant,  
NYC Health + Hospitals/Metropolitan

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## EXPERT INSIGHTS



Taking a deeper dive into the health needs that were raised consistently and highlighting system efforts and initiatives to address them:

### MATERNAL HEALTH CARE

- **The Maternal Medical Home Program** provides comprehensive, wraparound support for individuals with complex clinical, behavioral health, or social needs.
- Protocols from the **Safe Motherhood Initiative** have been integrated into care protocols.
- **The RISE Center** at NYC Health + Hospitals/ Lincoln, set to open in late 2026 or early 2027, will provide comprehensive, family-centered care.

### STAFF WELLNESS

- One significant initiative has been the focus on addressing burnout, stress, and morale, all of which have been exacerbated by the challenges of working in a high-pressure health care environment.
- Leadership has also worked to equip managers with the skills to support their teams and foster a more empathetic, collaborative environment.

### PATIENTS EXPERIENCING HOMELESSNESS

- Patients experiencing homelessness are more likely to visit emergency departments three times as often and have longer hospital stays. To address this, the Housing for Health initiative was established to help move patients experiencing homelessness into permanent housing to improve their health and wellbeing. This includes the City's largest medical respite program, housing placement services, and the ability to develop housing on hospital owned land.

### YOUTH INSIGHTS

- Participants shared insights on the strengths and challenges within their communities, highlighting both the resources they rely on and the barriers they face in accessing health care, healthy food, and wellness support.

## **NEXT STEPS**

- Disseminate findings
- Identify and engage community and agency stakeholders for implementation planning
- From August to October, the Office of External Affairs will convene stakeholders to develop strategies and identify effective solutions to address the priority needs presented in the CHNA
- Present Implementation Plan to the NYC Health + Hospitals Board by November 2025
- Monitor and evaluate progress from 2025 to 2028
- Continue growing community relationships and opportunity for input

### **AMENDED TO REMOVE HENRY J. CARTER NURSING FACILITY**

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# Appendix A:

Facilities At A Glance

# NYC HEALTH + HOSPITALS/BELLEVUE

## Patients and visit types

<b>156,305</b>	Total patients	<b>30,086</b>	Inpatient
<b>828,560</b>	Total visits	<b>120,659</b>	Emergency Department
		<b>686,056</b>	Outpatient

## Community stats



**1,678**

Babies delivered



**11,000**

Jobs generated



**\$2.80B**

Economic activity

## Why are patients coming in?

- Routine preventative visits
- Opioid dependence
- Obesity
- Pregnancy
- Pre-procedural exam
- Surgical follow-up
- Type 2 diabetes
- Children's routine preventative visits
- Post traumatic stress disorder

## Assets and challenges identified by community members

### Assets

- Diversity
- Access to transportation
- Local hospitals and education

### Challenges

- Environmental health
- Housing
- Mental health
- Substance use
- Access to food
- Senior health

## Community forum participant comments

"It is very difficult to change an adult's way of life and influence their habits. It's why it's so important to focus our efforts on teaching children good habits early on."

"There is a gap between what people need and want, what they know how to access, and what the services want and are able to provide."

## NYC HEALTH + HOSPITALS/CARTER

### Patients and visit types

<b>2,096</b> Total patients	<b>433</b> Inpatient
<b>3,303</b> Total visits	<b>2,870</b> Outpatient

### Community stats



**1,300**  
Jobs  
generated



**\$253M**  
Economic  
activity

### Why are patients coming in?

- Physical exam, pre-employment
- Routine adult health maintenance
- Chronic respiratory failure
- Immunization
- Dysphagia
- PEG (percutaneous endoscopic gastrostomy)
- Pain

### Assets and challenges identified by community members

#### Assets

- Multiculturalism
- Community bonds and resilience
- Proximity to health care

#### Challenges

- Mental health
- Chronic conditions
- Environmental health
- Access to resources

#### Community forum participant comments

“A lot of the same providers and NYC Health + Hospitals are taking the brunt of patient care in this community, and the appointments are so far away that it gets people discouraged.”

“The supermarkets continue to go up in prices, which messes with our access to food. It’s all about their profit, not about our community.”

# NYC HEALTH + HOSPITALS/ELMHURST

## Patients and visit types

<b>152,688</b>	Total patients	<b>21,319</b>	Inpatient
<b>828,607</b>	Total visits	<b>144,13</b>	Emergency Department
		<b>673,049</b>	Outpatient

## Community stats



**2,603**

Babies delivered



**6,600**

Jobs generated



**\$1.72B**

Economic activity

## Why are patients coming in?

- Routine adult well and preventive visits
- Pregnancy
- Opioid dependence
- Routine child well and preventive visits
- Type 2 diabetes
- Immunization
- Shizoffective disorder

## Assets and challenges identified by community members

### Assets

- Diversity
- Civic engagement
- Community collaboration

### Challenges

- Housing
- Mental health
- Substance use
- Food access
- Senior health

## Community forum participant comments

“Infrastructure can lead to a healthier lifestyle. Open streets have made it so more kids walk, bike or take scooters to school. Cultural changes in infrastructure make a change in lifestyle and health.”

“We have to be truthful about how life and our environment has changed and how that has caused an enormous eruption psychologically and otherwise.”

# NYC HEALTH + HOSPITALS/HARLEM

## Patients and visit types

<b>87,070</b>	Total patients	<b>10,415</b>	Inpatient
<b>386,973</b>	Total visits	<b>99,215</b>	Emergency Department
		<b>282,060</b>	Outpatient

## Community stats



**671**

Babies  
delivered



**4,400**

Jobs  
generated



**\$1.13B**

Economic  
activity

## Why are patients coming in?

- Routine adult well and preventive visits
- Routine child well and preventive visits
- Surgical follow up
- Schizophrenia
- Dental caries
- Type 2 diabetes
- Hypertension
- End stage renal disease
- Chest pain

## Assets and challenges identified by community members

### Assets

- Faith based institutions
- Community engagement
- History

### Challenges

- Housing
- Access to resources
- Public safety and crime

## Community forum participant comments

“One of the contributing factors to the health challenges in our community is that we don’t have the same amount of resources to contribute to our quality of life.”

“When you’re already a community with racial and social inequities, what’s going to happen? Who’s not going to get services?”

## NYC HEALTH + HOSPITALS/JACOBI

### Patients and visit types

<b>126,440</b>	Total patients	<b>20,413</b>	Inpatient
<b>546,301</b>	Total visits	<b>118,408</b>	Emergency Department
		<b>418,798</b>	Outpatient

### Community stats



**1,736**

Babies  
delivered



**9,700**

Jobs  
generated



**\$2.70B**

Economic  
activity

### Why are patients coming in?

- Routine adult well and preventive visits
- Routine child well and preventive visits
- Pregnancy
- Hypertension
- Type 2 diabetes
- Surgical follow-up
- Dental caries
- Cancer screening

### Assets and challenges identified by community members

#### Assets

- Community members
- Diverse cultures
- Strong institutions

#### Challenges

- Health care access
- Mental health
- Substance use
- Maternal health
- Senior health
- Access to resources

#### Community forum participant comments

“It’s important to pause and think about how inaccessible outpatient care is and how challenging it is to access primary care. The Bronx has many parts that have primary care shortages.”

“I’m forced to go into Manhattan for my primary care because most of the clinics in the Bronx are not accepting new patients or there are no appointments available.”

# NYC HEALTH + HOSPITALS/KINGS COUNTY

## Patients and visit types

<b>145,324</b>	Total patients	<b>19,235</b>	Inpatient
<b>872,119</b>	Total visits	<b>136,318</b>	Emergency Department
		<b>728,128</b>	Outpatient

## Community stats



**1,390**

Babies  
delivered



**9,700**

Jobs  
generated



**\$2.14B**

Economic  
activity

## Why are patients coming in?

- Routine adult well and preventive visits
- Opioid dependence
- Hypertension
- Opioid abuse
- Hypertension
- Type 2 diabetes
- Routine child well and preventive visits
- Hyperglycemia
- Worried well visit
- Malignant tumor of prostate

## Assets and challenges identified by community members

### Assets

- Sense of community
- Diversity
- Unity

### Challenges

- Mental health
- Substance use
- Housing
- Food insecurity
- Maternal health
- Senior health

## Community forum participant comments

“If you have to think about what you’re going to eat and where you’re going to lay your head, that increases stress and impacts your health in general.”

“The problem is racism. It’s why we have less food and more alcohol and nicotine and less access to parks. It’s why we encounter racism in the hospital also. We need to name it and address the root cause of it to be able to move forward in a meaningful way.”

# NYC HEALTH + HOSPITALS/LINCOLN

## Patients and visit types

<b>135,500</b>	Total patients	<b>18,294</b>	Inpatient
<b>604,022</b>	Total visits	<b>152,574</b>	Emergency Department
		<b>728,128</b>	Outpatient

## Community stats



**1,495**

Babies  
delivered



**7,000**

Jobs  
generated



**\$1.56B**

Economic  
activity

## Why are patients coming in?

- Routine adult well and preventive visits
- Routine child well and preventive visits
- Dental caries
- Pregnancy
- Hypertension
- Surgical follow-up
- Type 2 diabetes
- Chest pain

## Assets and challenges identified by community members

### Assets

- Sense of unity
- Community organization
- Commitment to education

### Challenges

- Mental health
- Substance use
- Access to resources
- Environmental health
- Chronic illness

## Community forum participant comments

“Poison is cheap—the fast food options are affordable, but anything that contributes to a healthier lifestyle is not.”

“I will take a cab home to avoid taking the train so I don’t have to pass the drug use in the streets. I grew up here so I know what the ‘80s looked like - and we have the same problem now, with needles in the street.”



# NYC HEALTH + HOSPITALS/METROPOLITAN

## Patients and visit types

<b>83,233</b>	Total patients	<b>8,369</b>	Inpatient
<b>508,779</b>	Total visits	<b>65,478</b>	Emergency Department
		<b>434,195</b>	Outpatient

## Community stats



**1,153**

Babies  
delivered



**3,800**

Jobs  
generated



**\$889M**

Economic  
activity

## Why are patients coming in?

- Routine adult well and preventive visits
- Routine child well and preventive visits
- Pregnancy
- Opioid dependence
- Hypertension
- Type 2 diabetes
- Anxiety
- Dental caries

## Assets and challenges identified by community members

### Assets

- Green space
- Transportation
- Cultural institutions

### Challenges

- Food insecurity
- Housing
- Safety
- Senior health
- Mental health

## Community forum participant comments

“With housing and rent burdens being so high it affects everything else—can you afford childcare? Can you afford food and other things you need to take care of yourself and live well?”

“We are a community in need that bears the burden of so many recovery services. You can’t bring all of that here in one place—we’ve been carrying that burden for so long.”

## NYC HEALTH + HOSPITALS/NORTH CENTRAL BRONX\*

### Patients and visit types

<b>56,758</b>	Total patients	<b>7,757</b>	Inpatient
<b>266,752</b>	Total visits	<b>53,176</b>	Emergency Department
		<b>209,669</b>	Outpatient

### Community stats



**942**

Babies  
delivered



**9,700<sup>†</sup>**

Jobs  
generated



**\$2.7B**

Economic  
activity

### Why are patients coming in?

- Routine adult well and preventive visits
- Routine child well and preventive visits
- Dental caries
- Pregnancy
- Type 2 diabetes
- Cancer screening
- Hypertension
- Gynecological exam
- Chest pain

### Assets and challenges identified by community members

#### Assets

- Sense of unity
- Communication
- Community engagement

#### Challenges

- Safety
- Housing
- Mental health
- Substance use
- Environmental health
- Senior health

### Community forum participant comments

“The Bronx is so neglected in terms of community services.”

“Mental health issues are everywhere - they don’t have a certain face to it. It affects everyone.”

\*NCB serves as the North Bronx campus of NYC Health + Hospitals/Jacobi

<sup>†</sup>NCB data is calculated together with Jacobi

## NYC HEALTH + HOSPITALS/QUEENS

### Patients and visit types

<b>107,947</b>	Total patients	<b>12,477</b>	Inpatient
<b>600,967</b>	Total visits	<b>111,239</b>	Emergency Department
		<b>481,223</b>	Outpatient

### Community stats



**1,319**

Babies  
delivered



**4,300**

Jobs  
generated



**\$1.09B**

Economic  
activity

### Why are patients coming in?

- Routine adult well and preventive visits
- Hypertension
- Type 2 diabetes
- Shizoaffective disorder
- Routine child well and preventive visits
- Pregnancy
- Chest pain
- Schizophrenia

### Assets and challenges identified by community members

#### Assets

- Community groups
- Tight knit communities
- Mutual support

#### Challenges

- Mental health and substance use
- Housing
- Education
- Food insecurity
- Health care access

### Community forum participant comments

“As a single mother, if my child has an appointment at school, but I will be penalized for missing 2 hours at work to get there—where does that leave me? What choice do I have to make?”

“The general hustle and bustle to get to one place or the next—that’s the biggest factor in why people aren’t at a place where they’re even at a level to be functional.”

\*NCB serves as the North Bronx campus of NYC Health + Hospitals/Jacobi

†NCB data is calculated together with Jacobi

# NYC HEALTH + HOSPITALS/SOUTH BROOKLYN HEALTH

## Patients and visit types

<b>90,781</b>	Total patients	<b>14,298</b>	Inpatient
<b>437,343</b>	Total visits	<b>102,078</b>	Emergency Department
		<b>327,138</b>	Outpatient

## Community stats



**1,410**

Babies  
delivered



**4,600**

Jobs  
generated



**\$2.41B**

Economic  
activity

## Why are patients coming in?

- Routine adult well and preventive visits
- Hypertension
- Type 2 diabetes
- Shizoaffective disorder
- Routine child well and preventive visits
- Pregnancy
- Chest pain
- Schizophrenia

## Assets and challenges identified by community members

### Assets

- Natural environment
- Health care infrastructure
- Sense of community

### Challenges

- Health care costs
- Food accessibility
- Mental health
- Substance use
- Senior health

## Community forum participant comments

“There is not enough focus on preventative measures, but a lot of focus on cures. Health care companies won’t pay for prevention, they’ll just wait until you get sick and then they will pay.”

“Eighteen and nineteen-year-olds are so depressed and withdrawn, they are always on their phones or sitting alone. Depression can lead to a lot of other illnesses.”

\*NCB serves as the North Bronx campus of NYC Health + Hospitals/Jacobi

†NCB data is calculated together with Jacobi

## NYC HEALTH + HOSPITALS/WOODHULL

### Patients and visit types

<b>95,859</b>	Total patients	<b>9,500</b>	Inpatient
<b>505,146</b>	Total visits	<b>93,497</b>	Emergency Department
		<b>404,095</b>	Outpatient

### Community stats



**1,169**

Babies  
delivered



**4,300**

Jobs  
generated



**\$1.03B**

Economic  
activity

### Why are patients coming in?

- Routine adult well and preventive visits
- Dental caries
- Pregnancy
- Hypertension
- Opioid abuse
- Hypertension
- Routine child well and preventive visits
- Dental examination
- Type 2 diabetes
- Preventative health care
- Worried well visit
- Human immunodeficiency virus infection

### Assets and challenges identified by community members

#### Assets

- Diversity
- Community engagement
- Sense of community

#### Challenges

- Mental health
- Food insecurity
- Air quality
- Maternal health
- Senior health
- Access to health care

### Community forum participant comments

“When you’re affected by mental health issues or domestic violence or food insecurity or homelessness, it holds you back. It stops you from taking advantage of the resources that the city has for their residents.”

“I’ve met families who came from Mexico, and none of their children had asthma before they came here. After moving to Brooklyn, all five of their children developed it.”

\*NCB serves as the North Bronx campus of NYC Health + Hospitals/Jacobi

†NCB data is calculated together with Jacobi

**RESOLUTION - 07**

Authorizing the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) **to execute a contract with the New York Power Authority (“NYPA”) for the planning, design, procurement, construction, construction management and project management services necessary for lighting upgrades at New York City Health + Hospitals/Jacobi**, (the “Project”) with a contract amount of \$9,552,820, with a 10% project contingency of \$ 743,332 to bring the total cost not to exceed \$10,296,152 for a term of 24 months.

**WHEREAS**, effective January 1, 2021, the City of New York (the “City”), through DCAS, NYC Health + Hospitals, the City University of New York, and the Board of Education of the City School District of the City of New York entered into the Energy Efficiency-Clean Energy Technology Program (“ENCORE III”) Agreement with NYPA that establishes the framework for NYPA to manage energy related-projects for City agencies and affiliated entities; and

**WHEREAS**, in April 2019, the City passed Local Law 97 where City-owned buildings are mandated to reduce their operational emissions 40 percent by 2025, 50 percent by 2030, and 80 percent by 2050; and

**WHEREAS**, the City, through DCAS, has allocated capital funding for building infrastructure improvements and upgrades to lower energy costs, increase energy efficiency and reduce energy and greenhouse gas emissions of municipal operations at City-owned buildings to comply with Local Law 97; and

**WHEREAS**, NYC Health + Hospitals has determined that it is necessary to upgrade lighting at New York City Health + Hospitals/Jacobi by undertaking the Project to improve the lighting systems, as well as increase efficiency of lighting and achieve compliance; and

**WHEREAS**, NYPA undertook the procurement of the Project pursuant to the design-build method of project delivery in accordance with the “New York City Public Works Investment Act”; and

**WHEREAS**, funding for this project has been secured through a partnership with the DCAS Division of Energy Management, utilizing City Capital Funds; DCAS has committed to fully cover the total project cost of \$10,296,152; and

**WHEREAS**, NYPA has determined that the Project will result in an annual energy savings of 2,731,299 KWh which represent approximately 884 Metric Tons CO2 reduction & \$348,842 in energy savings; and

**WHEREAS**, the NYC Health + Hospitals’ Office of Facility Development will be responsible for the management of the proposed agreement.

**NOW, THEREFORE, be it**

**RESOLVED**, the New York City Health and Hospitals to execute a contract with the New York Power Authority (“NYPA”) for the planning, design, procurement, construction, construction management and project management services necessary for lighting upgrades at New York City Health + Hospitals/Jacobi, (the “Project”) with a contract amount of \$9,552,820, with a 10% project contingency of \$ 743,332 to bring the total cost not to exceed \$10,296,152 for a term of 24 months.

**EXECUTIVE SUMMARY  
NYC HEALTH + HOSPITALS/COLER  
ENERGY EFFICIENCY UPGRADES**

**OVERVIEW:** NYC Health + Hospitals seeks for lighting upgrades at NYC Health + Hospitals/Jacobi to improve lighting systems, improve energy efficiency and achieve legal compliance. NYPA has procured the Project under the design/build method of project delivery in accordance with the “New York City Public Works Investment Act” (effective on December 31, 2019).

**SCOPE:** The scope of work for the Project includes but is not limited to the following:

- Replacement of 20,000 existing fluorescent lighting fixtures with energy-efficient LED fixtures
- Installation of advanced lighting controls, including vacancy, occupancy, and daylight sensors.
- Full coordination with facility operations to prevent disruption to patient care.

**PROCUREMENT:** NYPA has procured the project through a competitive public solicitation under its Direct Install Lighting Program, consistent with the NYC Public Works Investment Act.

**SAVINGS:**    **Electrical:**  
Energy Consumption Savings (quantity):      2,731,299 kilowatt-hours (KWh)  
Annual Electric Energy Savings (dollars):      \$348,842

**FINANCING:** City Capital to be fully covered by DCAS

**SCHEDULE:** 24 months with anticipated completion by Winter of 2027

**M/WBE:** NYPA committed to achieving a 36% M/WBE goal

# **NYC Health + Hospitals/Jacobi Lighting Fixtures/Controls Upgrade**

**Board of Directors Meeting  
June 26, 2025**

**Manny Saez, PhD., Vice President, Office of Facilities Development**  
**Omer Cabuk, Chief Decarbonization Officer, Office of Facilities  
Development**



## For Board of Directors Consideration

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- Authorizing the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to execute a contract with the **New York Power Authority (“NYPA”)** for the **planning, design, procurement, construction, construction management and project management services necessary for lighting upgrades at New York City Health + Hospitals/Jacobi, (the “Project”)** with a contract amount of \$9,552,820, with a 10% project contingency of \$ 743,332 to bring the total cost not to exceed \$10,296,152 for a term of 24 months.

## Project Background

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- NYC Health + Hospitals / Jacobi has mostly T12 & T8 fixtures that have fluorescent Light bulbs
- Fluorescent bulbs need to be replaced every 10,000-15,000 hours
- Due to a lack of controls, many of the light fixtures in unoccupied areas stay on 24/7
- Many fixtures and ballasts are aging and prone to failure, leading to inconsistent lighting levels and increased maintenance needs.

## Project Scope & Benefits

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- Replace approximately 20,000 T8/T12 fixtures containing fluorescent bulbs with energy-efficient LED fixtures
- Install advanced lighting controls, including occupancy/vacancy sensors and daylight sensors in alignment with LL88.
- The new LED Light fixtures will have a longer life span (75,000 hours) and lower operating costs
- The LED Light fixtures do not contain toxic materials and do not emit ultraviolet light.
- Projected annual electrical savings of 2,731,299 KWh which equates to 884 Metric Tons CO2 reduction & \$348,842 of cost savings.

# Existing and Proposed Lighting Fixtures

Existing



Proposed

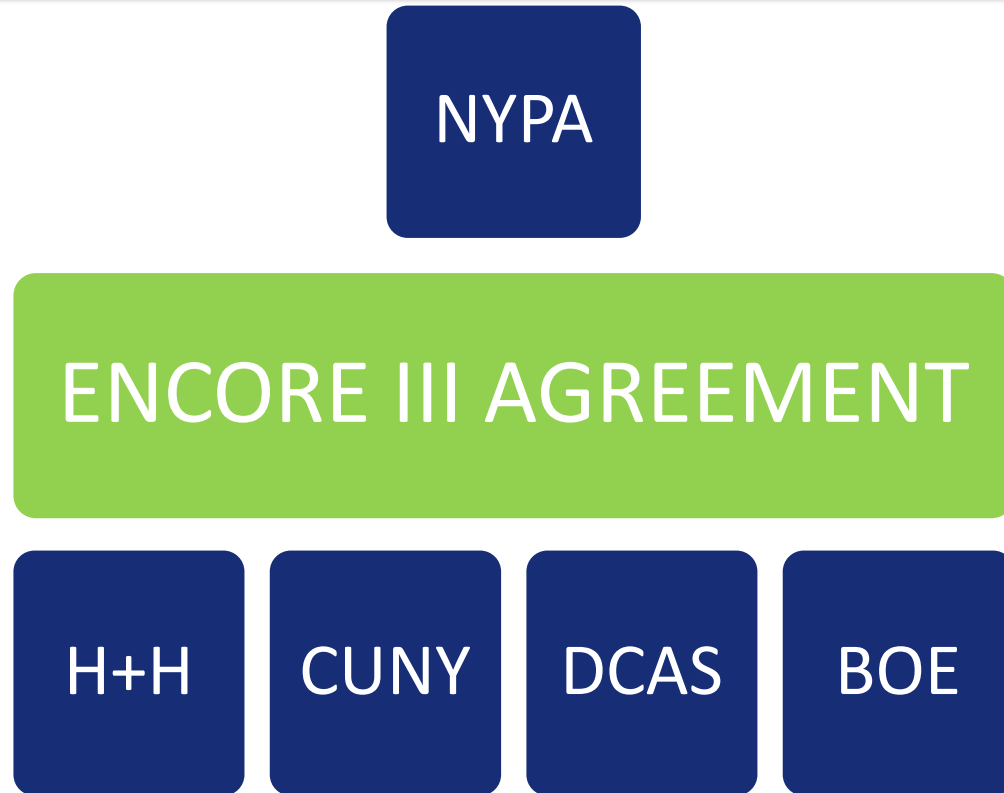


# Proposed Lighting controls



- These intelligent wireless lighting control systems provide comprehensive functionality, including occupancy sensing, adaptive dimming, daylight harvesting, zone-based grouping, and programmable scheduling to optimize energy efficiency and user comfort

## Our Relationship with NYPA



- **Encore III Agreement** has been in place since January 1, 2021 and ends December 31, 2030 (10 years). The ENCORE agreement is executed between NYPA and various City entities including H+H to plan, fund, and implement energy efficiency and clean energy projects in City-owned facilities such as schools, hospitals, and municipal buildings.

- NYPA selected LaBella Associates, as the “Direct Install” contractor for this project.
  - Labella’s service was procured by NYPA through competitive public solicitation under its Lighting Direct Install Program.
- NYC Health + Hospitals is undertaking numerous LED upgrade projects through NYPA’s Direct Install Program, leveraging its cost-effectiveness and accelerated implementation timeline, in alignment with DCAS’ guidance.

## PROJECT LOGISTICS:

- All project logistics will be carefully coordinated with the Facility Management staff, no impact is expected to facility operations as well as patient care during construction.

## M/WBE Summary

- NYPA's contract amount is \$9,552,820
- M/WBE commitment is 36%
- Project is expected to last 24 months and expected completion is Winter of 2027

M/WBE Entity	Contract Amount	M/WBE Certification	Percentage
Ohm's Electrical Corporation	\$3,429,778	NYC/NYS (WBE)	36%



# Project Budget

Jacobi Lighting Upgrade	
Design & Construction	\$7,433,324
Hazardous Waste Disposals	\$190,833
NYPA Project Mgmt. & Administrative Services*	\$1,928,663
Contingency (10% of Design & Construction)**	\$743,332
<b>Total</b>	<b>\$10,296,152</b>

*\*Administrative services include but not limited to engineering & design oversight, procurement services, management of hazardous waste disposal and related environmental compliance, coordination of special inspections and legal support as needed*

*\*\* Contingency will not be a part of the contract and will only be accessed if needed for additional work.*

## PROJECT FUNDING

- Funding for this project has been secured through a partnership with the DCAS Division of Energy Management, utilizing City Capital Funds. DCAS has committed to fully cover the total project cost of **\$10,296,152**.

## Board of Directors Approval Request

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- Authorizing the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) **to execute a contract with the New York Power Authority (“NYPA”) for the planning, design, procurement, construction, construction management and project management services necessary for lighting upgrades at New York City Health + Hospitals/Jacobi, (the “Project”)** with a contract amount of \$9,552,820, with a 10% project contingency of \$ 743,332 to bring the total cost not to exceed \$10,296,152 for a term of 24 months.

**RESOLUTION - 08**

Authorizing the Executive Director of **MetroPlus Health Plan, Inc. (“MetroPlus or “the Plan”)** to increase the contract authority for **Accenture, LLP** (“Accenture”) in the amount of \$3,100,000, which includes \$1,400,000 of contingency, for a new total not to exceed authority amount of \$23,100,000, for the remaining contract term.

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

**WHEREAS**, MetroPlus required a management consulting vendor to lead the business implementation efforts for Project Edge; and

**WHEREAS**, an RFP for Consulting Partner services was issued in October 2023, in compliance with MetroPlus’ contracting policies and procedures; and

**WHEREAS**, Accenture was the vendor selected to provide Management Consulting services; and

**WHEREAS**, on December 7th, 2023, the Board of Directors of MetroPlus recommended adoption of the resolution for approval by the Board of Directors of the NYC Health + Hospitals, for the proposed contract between MetroPlus and Accenture; and

**WHEREAS**, on December 14, 2023, the Board of Directors of the NYC Health + Hospitals approved a contract resolution between MetroPlus and Accenture for a not-to-exceed of \$20,000,000 for a total of 26 months; and

**WHEREAS**, MetroPlus seeks additional spending authority of \$3,100,000 for a new total not to exceed authority amount of \$23,100,000; and

**WHEREAS**, The MetroPlusHealth Board approved these actions on June 5, 2025.

**NOW THEREFORE**, be it

**RESOLVED**, that the Executive Director of MetroPlus Health Plan, Inc. (“MetroPlus” or “the Plan”) is hereby authorized to increase the contract authority for Accenture, LLP (“Accenture”) in the amount of \$3,100,000, which includes \$1,400,000 of contingency, for a new total not to exceed authority amount of \$23,100,000, for the remaining contract term.

**AMENDMENT OF RESOLUTION AUTHORIZING  
METROPLUS HEALTH PLAN, INC.  
TO INCREASE THE CURRENT SPENDING AUTHORITY**

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

Accenture, LLP (“Accenture”) is MetroPlus’ Management Consulting vendor providing consulting support for Project Edge, including advisory support, implementation planning, requirements gathering, technical leadership, program management, change enablement, and regulatory support.

**NEED:** MetroPlus is seeking an increase in spending authorization to support continued technical and functional resources, from Accenture, to ensure a successful completion of the implementation.

**PROPOSAL:** MetroPlus is seeking an increased contract authority of \$3,100,000, which includes \$1,400,000 of contingency, for a total not to exceed amount of \$23,100,000, to continue working with Accenture, on Project Edge.



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

From: Steven Stein Cushman  
Chief Counsel, Legal

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

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

Vendor: Accenture, LLP

Date: Wednesday, June 11, 2025

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

**Vendor Responsibility**  
Approved

**EEO**  
Approved

**MWBE**  
30% Utilization Plan

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

# **Application for Increased Spending Authority**

**Accenture LLP**

**Management Consulting - MetroPlus Health**

**Board of Directors Meeting**

**June 26, 2025**

## For Board of Directors Consideration

- Authorizing the Executive Director of **MetroPlus Health Plan, Inc. (“MetroPlus or “the Plan”)** to increase the contract authority for **Accenture, LLP (“Accenture”)** in the amount of \$3,100,000, which includes \$1,400,000 of contingency, for a new total not to exceed authority amount of \$23,100,000, for the remaining contract term.

# Background

- MetroPlus is currently undergoing a major core system transition, entailing the migration from the SS&C legacy system to the new HealthEdge system platform. The implementation project, known as Project Edge, is a company-wide effort, with an anticipated completion date of December 2026, and includes multiple go-live events throughout 2025 and 2026.
- Accenture, LLP (“Accenture”) provides consulting support for the migration including advisory support, implementation planning, requirements gathering, technical leadership, program management, change enablement, and regulatory support.
- Accenture was selected in December 2023, as MetroPlus’ Management Consultant vendor for Project Edge.
- In December 2023, both the Board of Directors of MetroPlus and the Board of Directors of NYC Health + Hospitals approved contract resolutions for Accenture for a not-to-exceed of \$20,000,000 for a total of 26 months.
- MetroPlus is seeking an increased contract authority of \$3,100,000, for a total not to exceed amount of \$23,100,000, to continue working with Accenture, on the Project Edge implementation
- This resolution was presented and approved by the MetroPlus Board of Directors on June 5, 2025.



## **AUTHORITY INCREASE FOR RESOURCE EXTENSION**

- The Project Edge implementation timeline has shifted, and the first Go-live (Wave I) has changed from the originally planned April 2025 date, to October 2025.
- This shift to the go-live date for Wave 1 will impact subsequent waves.
- MetroPlus needs continued technical and functional resources, from Accenture, to ensure a successful completion of the HealthEdge implementation.
  - The functional resources were originally slated to roll off in June 2025, but their support is now needed through December 2025.
  - The technical resources were initially scheduled to roll off starting in October 2025, but MetroPlus will need to retain them until Q1 2026.
- The main responsibilities of the functional leads:
  - Provide industry and technical expertise required to complete design requirements.
- The main responsibilities of the technical leads:
  - Manage the environment strategy, release management plans, advise on the integrations, and solution design.

# Spending Authority Request

<b>Original Contract Authority</b>	<b>\$20,000,000</b>
Increased Contract Authority Request	\$3,100,000 – Includes additional functional and technical resources, and \$1,400,000 in contingency which equates to 3-months of resource costs.
<b>New Total Contract Authority</b>	<b>\$23,100,000</b>

# Vendor Performance

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
<b>Performance and Overall Quality Rating Satisfactory</b>	<b>Good</b>

- Authorizing the Executive Director of MetroPlus Health Plan, Inc. (“MetroPlus or “the Plan”) to **increase the contract authority for Accenture, LLP (“Accenture”)** in the amount of \$3,100,000, which includes \$1,400,000 of contingency, for a new total not to exceed authority amount of \$23,100,000.

**RESOLUTION - 09**

Authorizing the Executive Director of **MetroPlus Health Plan, Inc. (“MetroPlus”)**, to execute a 9-month contract extension and to increase the contract authority with **Deloitte Consulting, LLP (“Deloitte”)** in the amount of \$3,000,000 which includes \$2,000,000 of contingency, for a new total not to exceed authority amount of \$12,500,000.

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

**WHEREAS**, MetroPlus required a vendor to provide to provide testing resources for Project Edge;  
and

**WHEREAS**, Deloitte was the vendor selected to provide these services; and

**WHEREAS**, on March 28, 2024, the Board of Directors of MetroPlus recommended adoption of the resolution for approval by the Board of Directors of the NYC Health + Hospitals, for the proposed contract between MetroPlus and Deloitte; and

**WHEREAS**, on April 25, 2024, the Board of Directors of the NYC Health + Hospitals approved a contract resolution between MetroPlus and Deloitte for a not-to-exceed of \$9,500,000 for a total of 26-months; and

**WHEREAS**, MetroPlus seeks to exercise a nine-month best interest contract extension through March 31, 2027; and

**WHEREAS**, MetroPlus seeks additional spending authority of \$3,000,000 for a new total not to exceed authority amount of \$12,500,000; and

**WHEREAS**, The MetroPlusHealth Board approved these actions on June 5, 2025.

**NOW THEREFORE**, be it

**RESOLVED**, that the Executive Director of MetroPlus Health Plan, Inc. (“MetroPlus” or “the Plan”) is hereby authorized to execute a 9-month contract extension and to increase the contract authority with Deloitte Consulting, LLP (“Deloitte”) in the amount of \$3,000,000 which includes \$2,000,000 of contingency, for a new total not to exceed authority amount of \$12,500,000.

**AMENDMENT OF RESOLUTION AUTHORIZING  
METROPLUS HEALTH PLAN, INC.  
TO INCREASE THE CURRENT SPENDING AUTHORITY**

- BACKGROUND:** MetroPlusHealth, a subsidiary corporation of NYC Health + Hospitals, is a Managed Care Organization and Prepaid Health Services Plan, certified under Article 44 of the Public Health Law of the State of New York. The Certificate of Incorporation of MetroPlusHealth reserves to NYC Health + Hospitals the power to approve MetroPlusHealth contracts, other than with NYC Health + Hospitals or a health care service provider, with an annual value in excess of \$3,000,000.
- Deloitte Consulting, LLP (“Deloitte”) is MetroPlus' current vendor for testing resources for Project Edge. Deloitte provides development of test strategy, test scenario and script design, requirements traceability management, test data creation, test execution, defect identification, management, and reporting across all program phases of testing (In-Sprint, Systems Integration, End to End, Parallel, Data Conversion, and Performance).
- NEED:** MetroPlus is seeking a 9-month contract extension and an increase in spending authorization for continued testing resources from Deloitte, to ensure a successful completion of the HealthEdge implementation.
- PROPOSAL:** MetroPlus is seeking authorization to execute a 9-month contract extension and an increased contract authority of \$3,000,000, which includes \$2,000,000 of contingency for a total not to exceed amount of \$12,500,000.



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

From: Steven Stein Cushman  
Chief Counsel, Legal

DocuSigned by:  
*Steven Stein Cushman*  
73B886F913A04A0...

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

Vendor: Deloitte Consulting LLP

Date: Wednesday, June 11, 2025

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

**Vendor Responsibility**

Approved

**EEO**

Approved

**MWBE**

30% Utilization Plan

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

# **Application for Best Interest Contract Extension and Increased Spending Authority**

**Deloitte Consulting, LLP for MetroPlus Health  
Testing Resources**

**Board of Directors Meeting  
June 26, 2025**



## For Board of Directors Consideration

- Authorizing the Executive Director of **MetroPlus Health Plan, Inc. (“MetroPlus or “the Plan”)** to execute a 9-month contract extension and to increase the contract authority with **Deloitte Consulting, LLP (“Deloitte”)** in the amount of \$3,000,000, which includes \$2,000,000 of contingency, for a new total not to exceed authority amount of \$12,500,000.

# Background

- MetroPlus is currently undergoing a major core system transition, entailing the migration from the SS&C legacy system to the new HealthEdge system platform. The implementation, known as Project Edge, is a company-wide effort, with an anticipated completion date of December 2026, and includes multiple go-live events throughout 2025 and 2026.
- Deloitte, LLP (“Deloitte”) was selected in March 2024, to provide testing resources for Project Edge.
- The Board of Directors of MetroPlus approved the original contract resolution on March 28, 2024.
- The Board of Directors of NYC Health + Hospitals approved the original contract resolution on April 25, 2024 for a not-to-exceed of \$9,500,000 for a total of 26-months.
- MetroPlusHealth is seeking a 9-month contract extension and an increased contract authority of \$3,000,000 for a total not to exceed amount of \$12,500,000, to continue working with Deloitte, on the Project Edge implementation of HealthEdge’s platforms.
- This resolution was presented to and approved by the MetroPlus Board of Directors on June 5, 2025.

- The Project Edge implementation timeline has shifted, and the first Go-live (Wave I) has changed from the originally planned April 2025 date to October 2025.
- This shift to the go-live date for Wave 1 will impact subsequent waves.
- MetroPlus needs continued testing resources from Deloitte, to ensure a successful completion of the HealthEdge implementation.
  - Deloitte's testing services were initially planned to conclude in March 2026. However, due to the shift in timeline and ongoing project needs, services are now required through December 2026.
  - Deloitte's contract was originally set to expire June 30, 2026. A 9-month contract extension will account for six additional months of support and a three-month stabilization period, post the last go live.
- Deloitte will continue to provide the following services:
  - Development of test strategy, test scenario and script design.
  - Requirements traceability management.
  - Test data creation, test execution, defect identification, management, and reporting across all program phases of testing (In-Sprint, Systems Integration, End to End, Parallel, Data Conversion, and Performance).
  - Execution oversight for user acceptance testing performed by MetroPlus' subject matter experts.

# Spending Authority Request

<b>Original Contract Authority</b>	<b>\$9,500,000</b>
Increased Contract Authority Request	\$3,000,000– includes additional testing resources and \$2,000,000 in contingency which equates to 6-months of resource costs.
<b>New Total Contract Authority</b>	<b>\$12,500,000</b>

# Vendor Performance

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
<b>Performance and Overall Quality Rating Satisfactory</b>	<b>Good</b>

## Board of Directors Approval Request

- Authorizing the Executive Director of MetroPlus Health Plan, Inc. (**“MetroPlus or “the Plan”**) to **execute a 9-month contract extension and to increase the contract authority with Deloitte Consulting, LLP (“Deloitte”)** in the amount of \$3,000,000, which includes \$2,000,000 of contingency, for a new total not to exceed authority amount of \$12,500,000.
- **New Contract Term: 8/19/2024-3/31/2027.**
- **Additional spending authority requested: \$3,000,000.**

**RESOLUTION - 10**

Authorizing the Executive Director of MetroPlus Health Plan, Inc. (“MetroPlus”), to execute a **9-month contract extension and to increase the contract authority with SourcEdge Solutions LLC (“SourcEdge”)** in the amount of \$4,030,000, which includes \$2,030,000 of contingency, for a new total not to exceed authority amount of \$10,000,000.

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

**WHEREAS**, MetroPlus required a vendor to provide technical and operational subject matter experts, to handle the configuration and data conversion requirements for Project Edge; and

**WHEREAS**, SourcEdge was the vendor selected to provide Technical and Operational services; and

**WHEREAS**, on March 28, 2024, the MetroPlus Board of Directors approved a contract resolution between MetroPlus and SourcEdge for a not-to-exceed of \$5,970,000 for a total of 26-months; and

**WHEREAS**, at that time the contract did not meet the requirements for the Board of Directors of NYC Health + Hospitals approval;

**WHEREAS**, MetroPlus seeks to exercise a nine-month contract extension through March 31, 2027; and

**WHEREAS**, MetroPlus seeks additional spending authority of \$4,030,000 for a new total not to exceed authority amount of \$10,000,000; and

**WHEREAS**, The MetroPlusHealth Board approved these actions on June 5, 2025.

**NOW THEREFORE**, be it

**RESOLVED**, that the Executive Director of MetroPlus Health Plan, Inc. (“MetroPlus” or “the Plan”) is hereby authorized to execute a 9-month contract extension and to increase the contract authority with SourcEdge Solutions LLC (“SourcEdge”) in the amount of \$4,030,000, which includes \$2,030,000 of contingency, for a new total not to exceed authority amount of \$10,000,000.

**AMENDMENT OF RESOLUTION AUTHORIZING  
METROPLUS HEALTH PLAN, INC.  
TO INCREASE THE CURRENT SPENDING AUTHORITY**

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

SourceEdge Solutions LLC (“SourceEdge”) is MetroPlus' current vendor for technical and operational support for Project Edge. SourceEdge provides analysis, development, and deployment support for all data migration activities including conversion of historical data from existing core systems to HealthEdge’s platforms.

**NEED:** MetroPlus is seeking to a 9-month contract extension and an increase in spending authorization to support additional and continued technical and operational resources from SourceEdge in order to complete the Project Edge implementation.

**PROPOSAL:** MetroPlus is seeking authorization to execute a 9-month contract extension and to increase the contract authority with SourceEdge Solutions LLC (“SourceEdge”) in the amount of \$4,030,000 which includes \$2,030,000 of contingency, for a new total not to exceed authority amount of \$10,000,000.





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

From: Steven Stein Cushman  
Chief Counsel, Legal

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

Vendor: SourcEdge Solutions, LLC

Date: Wednesday, June 11, 2025

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DocuSigned by:  
*Steven Stein Cushman*  
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The below chart indicates the vendor's status as to vendor responsibility, EEO and MWBE:

<u>Vendor Responsibility</u>	<u>EEO</u>	<u>MWBE</u>
Approved	Approved	30% Utilization Plan

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

# **Application for Best Interest Contract Extension and Increased Spending Authority**

**SourcEdge Solutions LLC – MetroPlus Health  
Technical and Operational SME Resources**

**Board of Directors Meeting  
June 26, 2025**

- Authorizing the Executive Director of **MetroPlus Health Plan, Inc. (“MetroPlus or “the Plan”)** to execute a 9-month contract extension and to increase the contract authority with **SourcEdge Solutions LLC (“SourcEdge”)** in the amount of \$4,030,000, which includes \$2,030,000 of contingency, for a new total not to exceed authority amount of \$10,000,000.

# Background

- MetroPlusHealth is currently undergoing a major core system transition, entailing the migration from the SS&C legacy system to the new HealthEdge system platform. The implementation project, known as Project Edge, is a company-wide effort, with an anticipated completion date of December 2026, and includes multiple go-live events throughout 2025 and 2026.
- SourcEdge Solutions LLC (“SourcEdge”) provides analysis, development, and deployment support for all data migration activities including conversion of historical data from existing core systems to HealthEdge’s platforms.
- SourcEdge was selected in March 2024, to provide technical and operational support for Project Edge.
- The Board of Directors of MetroPlusHealth approved the original contract resolution on March 28, 2024 for a not-to-exceed of \$5,970,000 for a total of 26-months.
  - At the time, the contract did not require approval of the Board of Directors of NYC Health + Hospitals.
- MetroPlusHealth is seeking a 9-month contract extension and an increased contract authority of \$4,030,000, for a total not to exceed amount of \$10,000,000, to continue working with SourcEdge, on the Project Edge implementation of HealthEdge’s platforms.
- This resolution was presented and approved by the MetroPlus Board of Directors on June 5, 2025.

- The Project Edge implementation timeline has shifted, and the first Go-live (Wave I) has changed from the originally planned April 2025 date, to October 2025.
- This shift to the go-live date for Wave 1 will impact subsequent waves.
- MetroPlus needs continued support, from SourcEdge, to ensure a successful completion of the HealthEdge implementation.
- The revised timeline, coupled with greater than anticipated complexity in the data mapping and transformation logic, has necessitated an extension of current resources and the onboarding of additional resources to ensure a successful implementation.
- In addition, SourcEdge will bring on 12 additional configuration and technical resources to support the elongated design schedule and added data conversion work required for a successful implementation.
- SourcEdge's contract was originally set to expire June 30, 2026. A 9-month contract extension will account for 6 additional months of support and a 3-month stabilization period, post the last go live.

# Spending Authority Request

<b>Original Contract Authority</b>	<b>\$5,970,000</b>
Increased Contract Authority Request	\$4,030,000 – Includes additional configuration and technical resources, and \$2,030,000 of contingency which equates to six months of resource costs.
<b>New Total Contract Authority</b>	<b>\$10,000,000</b>

# Vendor Performance

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
<b>Performance and Overall Quality Rating Satisfactory</b>	<b>Good</b>

## Board of Directors Approval Request

- Authorizing the Executive Director of MetroPlus Health Plan, Inc. (“MetroPlus or “the Plan”) to execute a 9-month contract extension and to increase the contract authority with SourcEdge Solutions LLC (“SourcEdge”) in the amount of \$4,030,000, which includes \$2,030,000 of contingency, for a new total not to exceed authority amount of \$10,000,000.
- **New Contract Term:** 5/15/2024-3/31/2027.
- Additional spending authority requested: \$4,030,000.