NYC HEALTH+ HOSPITALS

50 Water Street ▪ New York, NY ▪ 10004

BOARD OF DIRECTORS MEETING
THURSDAY, OCTOBER 30, 2025
A•G•E•N•D•A•

CALL TO ORDER - 2:00 PM	Mr. Pagán
1. **Executive Session | Facility Governing Body Report** **Medical Staff Credentialing Initial Appointments, Reappointments and Changes of Privileges** ➢ October 2025 **Facility Governing Body Report** ➢ NYC Health + Hospitals l South Brooklyn Health **2024 Performance Improvement Plan and Evaluation (Written Submission Only)** ➢ NYC Health + Hospitals| Sydenham Diagnostic & Treatment Center - Gotham Center **Semi-Annual Governing Body Report (Written Submission Only)** ➢ NYC Health + Hospitals | Kings County	Mr. Pagán
2. **OPEN PUBLIC SESSION - 3:00 PM**	
3. **Adoption of the Board Meeting Minutes – September 25, 2025**	Mr. Pagán
4. **Chair's Report**	Mr. Pagán
5. **President's Report**	Dr. Katz
ACTION ITEMS	
6. Authorizing the Executive Director of MetroPlus Health Plan, Inc. ("MetroPlus or "the Plan") **to execute contract(s) with HealthPlan Services Inc., ("HPS or "Wipro") a Business Process as a Service (BPaaS) solution, for the Medicare and Exchange (QHP) lines of business**, for a total not to exceed amount of $30,000,000, including a 20% contingency, for a 5-year term. (Presented to the MetroPlus Board of Directors: 09/25/2025) **Vendex: Pending / EEO: Pending**	Ms. Hernandez-Piñero
7. Authorizing the New York City Health and Hospitals Corporation (the "**System**") to execute contracts with **Third Party Reimbursement Solutions, LLC, Forvis Mazars, LLP, Baker Tilly Advisory Group, LP (formerly Moss Adams), and Manatt Health Strategies, LLC for Medicare and Medicaid Reimbursement Consulting services** at a not to exceed amount of $10,800,000, which includes a 20% contingency, for a contract term of three years and two one-year renewal options exercisable at the discretion of the System. (Presented to the Finance Committee: 10/14/2025) **Vendex: Third Party and Forvis - Approved; Manatt and Baker Tilly - Pending** **EEO: Manatt and Forvis Pending; Third Party and Baker Tilly Approved**	Ms. Wang
8. Authorizing New York City Health and Hospitals Corporation (the "System") **to increase the funding by $10,896,459 for its previously executed agreements with each of Institute for Community Living, Inc. ("ICL") and Comunilife, Inc. ("Comunilife") for the provision of medical respite beds and services such that the funding is increased from $17,960,500 to $28,856,959 thereby funding the increasing capacity of the program from 51 beds to 75 beds.** (Presented to the Finance Committee: 10/14/2025) **Vendex: Both Approved / EEO: Both Pending**	Ms. Wang

9. Authorizing the New York City Health and Hospitals Corporation ("NYC Health + Hospitals") **to execute a contract with C.D.E. Air Conditioning Co Inc. (the "Contractor"), to undertake a boiler and Building Management System (BMS) upgrade project of NYC Health + Hospitals/North Central Bronx Hospital** for a contract amount of $8,781,032, with a 10% project contingency of $878,103, to bring the total cost not to exceed $9,659,135. (Presented Directly to the Board: 10/30/2025) **Vendex: Approved / EEO: Approved**	Mr. Pagán
10. **Amending previously adopted resolution by the Board of Directors of New York City Health and Hospitals Corporation (the "System") on November 18, 2021 authorizing the System to lease from an entity named as Coney Island Associates Retail 2 LLC ("Landlord")** in a to-be-constructed building at 1607 Surf Avenue, between W. 17th and 16th Streets approximately 2,500 sq. ft. at a yearly rent of $30/sq. ft to be escalated by 10% every 5 years plus a share of increases in Developer's operating costs to house the Ida G. Israel Community Health Clinic **with such amendment correcting an error in the name of the Landlord to correct such name in such resolution to be "Coney Island Associates 2 Retail LLC."** (Presented Directly to the Board of Director: 10/30/2025) **Vendex: NA / EEO: NA**	Mr. Pagán
11. **Amending previously adopted resolution by the Board of Directors of New York City Health and Hospitals Corporation (the "System") on March 28, 2024 authorizing the System to lease from an named as Coney Island Associates Retail 2 LLC ("Landlord")** in a to-be-constructed building at 2932 West 16th Street between W. 17th and 16th Streets approximately 6,250 square feet for a yearly rent of $25/sq. ft. to be escalated by 10% after 5 years plus the provision of 10 parking spaces charged at $150/month for each parking space; and provided further that the System shall hold two 5-year options to renew the lease with the rent during the first renewal term to be at the higher of 95% of fair market value or 10% over the prior rent and with the rent for the second renewal term to be at a 10% increase over the prior rent with the rent over the entire potential 20-year term totaling approximately $3,985,781 to house the Ida G. Israel Community Chemical Dependency Clinic **with such amendment correcting an error in the name of the Landlord to correct such name in such resolution to be "Coney Island Associates 2 Retail LLC."** (Presented Directly to the Board: 10/30/2025) **Vendex: NA / EEO: NA**	Mr. Pagán
12. **Amending the resolution adopted by the Board of Directors of New York City Health and Hospitals Corporation (the "System") on May 29, 2025** authorizing the execution of a contract with Johnson Controls, Inc., (the "Contractor"), to provide Building Management System preventative maintenance and repair services at various NYC Health + Hospitals facilities **with such amendment increasing the contract term from three years with two one-year options to five years with no renewal options at the previously approved not-to-exceed amount of $12,676916 including a 10% contingency of $548,793.41**. (Presented Directly to the Board: 10/30/2025) **Vendex: Pending / EEO: Approved**	Ms. Pagán
13. **Adopting in the name of the New York City Health and Hospitals Corporation ("NYC Health + Hospitals") Board of Directors an Implementation Strategy Plan (an "ISP") prepared for each of NYC Health + Hospitals' ten acute care hospitals over 11 campuses and for the NYC Health + Hospitals/Henry J. Carter Specialty Hospital ("HJC") as a supplement to the Community Health Needs Assessment (the "CHNA")** which was approved by the Board of Directors in June 2025. (Presented Directly to the Board: 10/30/2025) **Vendex: NA / EEO: NA**	Mr. Pagán
COMMITTEE AND SUBSIDIARY REPORTS	
➢ Governance Committee	Ms. Pagán
➢ Audit Committee	Ms. Hernandez-Piñero
➢ Finance Committee	Ms. Wang
➢ MetroPlus Health (Subsidiary)	Ms. Hernandez-Piñero
>>**Old Business**<< >>**New Business**<< >>**Adjournment**<<	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 **25th day of September, 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 –Left at 3:02 p.m.
Ms. Erin Kelly – Joined at 3:10 p.m.
Ms. Molly Wasow-Park - Left at 3: 20 p.m.
Ms. Freda Wang
Dr. Vincent Calamia
Dr. H Jean Wright
Ms. Zahira McNatt – Joined at 3:21 p.m.
Ms. Sally Hernandez-Piñero
Ms. Anita Kawatra – Left at 3:55 p.m.
Dr. Patricia Marthone
Dr. Michael Espiritu
Ms. Tricia Taitt – Left at 3:00 p.m.

José Pagán, Chair of the Board, called the meeting to order at 2:20 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 3:21 p.m.

Mr. Pagán noted for the record, Erin Kelly is representing Deputy Mayor Suzanne Miles-Gustave, and Zahira McNatt is representing Dr. Michelle Morse - both in a voting capacity.

ACKNOWLEGEMENTS

Mr. Pagán reported attending the Joint Commission Leadership Session at NYC Health + Hospitals | Metropolitan Hospital on August 22,2025, noting the survey went exceptionally well and commending the team's outstanding work and dedication.

He thanked Ms. Hernandez-Piñero, Ms. Wang, Dr. Wright, and Ms. Rodriguez for their site visit to Rikers Island and the Bellevue Outposted Therapeutic Housing Unit (OTxHU) on the same day. Dr. Wright and Ms. Wang noted the visit was impressive and expressed anticipation for Bellevue's OTxHU opening.

Mr. Pagán also recognized Ms. Rodriguez for her visits to the NYC Health + Hospitals | Jacobi and NCB campus and participation in the 9/11 Memorial event at Jacobi Hospital.

Lastly, he thanked Dr. Espiritu for attending the Joint Commission Leadership Session at NYC Health + Hospitals | Harlem Hospital on September 12,2025 which Dr. Espiritu reported went very well.

ACTION ITEM 3 – ADOPTION OF THE MINUTES

The minutes of the Board of Directors meeting held on July 31, 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 July 31, 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 NYC Health + Hospitals Medical Staff Credentialing Initial Appointments, Reappointments, and Changes of Privileges for the month of September 2025.

The Board received and approved the governing body oral and written report from NYC Health + Hospitals| Seaview Nursing and Rehabilitation Center.

The Board received and approved the written submission of the NYC Health + Hospitals| Cumberland Diagnostic & Treatment Center – Gotham Center governing body 2024 performance improvement and evaluation plan.

The Board also received and approved the written submission of the NYC Health + Hospitals| Coler Rehabilitation and Skilled Nursing Facility and NYC Health + Hospitals| Gouverneur Skilled Nursing Facility semi-annual governing body reports.

LEADERSHIP APPOINTMENT

During the Executive Session the Board received, reviewed and unanimously

approved the Governance Committee recommendation to appoint Dr. Sewit Teckie as Vice President of Clinical Operations. Pending her becoming an NYC Health + Hospitals employee.

VENDEX APPROVALS

Mr. Pagán noted there were seven items on the agenda requiring Vendex approval, two of which are pending approval. There are fifteen items from previous Board meetings pending Vendex approval.

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

ACTION ITEM 7:

Mr. Pagán read the resolution

> Adopting the attached Mission Statement, Performance Measures and additional information to be submitted on behalf of New York City Health and Hospitals Corporation ("NYC Health + Hospitals") for **Fiscal Year 2025 to Office of the State Comptroller's Authorities Budget Office (the "ABO")** as required by the Public Authorities Reform Act of 2009 (the "PARA"). (Presented Directly to the Board: 09/25/2025)

Mr. Siegler presented the annual report required by the State Comptroller's Authorities Budget Office as required by the Public Authorities Accountability Act, which includes the adoption of the organization's mission statement and key performance measures as well as responses to certain questions that illustrate that the Board read and understand the mission statement. He reviewed the Strategic Committee's progress across pillars such as quality and outcomes, care experience, financial sustainability, access to care, culture of safety, and racial and social equity.

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

ACTION ITEM 8:

Mr. Pagán read the resolution

> Authorizing New York City Health and Hospitals Corporation (the "System") to extend its contract with **Kone Corporation ("Kone") for one year until November 31, 2026, and to increase the not-to-exceed amount by $12,500,000 from the original $46,700,000 to a new not-to-exceed amount of $59,200,000, for the provision of preventative maintenance services and repairs on 350+ elevators and escalators system wide,** 24/7 emergency service and repairs, and a dedicated diagnostics and testing team. (Presented to the Capital Committee: 09/08/2025)

Manuel Saez, Vice President of Facilities Development, shared background information and explained current state. The extension of the existing contract will ensure continuity of maintenance across more than 350 elevators systemwide while a new RFP is conducted. The additional funds will support annual preventive maintenance ($7M), urgent modernizations at NYC Health + Hospitals | Bellevue and NYC Health + Hospitals | Lincoln ($2.5M), and contingency/emergency repairs ($3M). Mr. Saez noted that Kone, procured through a competitive RFP in 2018, continues to provide quality service, with performance rated as good.

The Board inquired why procurement was not initiated earlier in the contract period. Mr. Saez explained that ongoing deterioration of elevator cabs and mechanical systems required adjustments to ensure continued service for the next year while allowing time to conduct a proper procurement and market assessment.

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

ACTION ITEMS 9 AND 10:

Dr. Calamia read the resolutions

9. AMEMDED TO CHANGE AUTHORIZATION TO RENEWAL OPTIONS INSTEAD OF OPTIONS TO EXTEND: Authorizing New York City Health and Hospitals Corporation (the "System") to execute a clinical services agreement with **AK City Urology, PLLC (the "Provider Group") to provide urology services at New York City Health + Hospitals | South Brooklyn Health** for a contract amount of $19,954,000, with a 20% contingency of $3,990,800, to bring the total cost not to exceed of $23,944,800 for an initial term of three (3) years with two (2) one-year **renewal** options to ~~extend~~ .
(Presented to the Medical and Professional Affairs / Information Technology Committee: 09/08/2025)

10. AMEMDED TO CHANGE AUTHORIZATION TO RENEWAL OPTIONS INSTEAD OF OPTIONS TO EXTEND: Authorizing New York City Health and Hospitals Corporation (the "System") to execute a clinical services agreement with **CityOrthopedics, PLLC (the "Provider Group") to provide orthopedic services at New York City Health + Hospitals | South Brooklyn Health** for a contract amount of $18,700,000, with a 20% contingency of $3,740,000, to bring the total cost not to exceed of $22,440,000 for an initial term of three (3) years with two (2) one-year **renewal** options ~~to extend~~.
(Presented to the Medical and Professional Affairs / Information Technology Committee: 09/08/2025)

Svetlana Lipyanskaya, Chief Executive Officer of NYC Health + Hospitals |South Brooklyn Health requested approval to enter into direct contracts with two vendors to continue providing essential Urology and Orthopedic services

previously subcontracted through PAGNY. Ms. Lipyanskaya explained the benefits and rationale. The shift from PAGNY to the System will eliminate the 3% administrative fee, allow NYC Health + Hospitals | South Brooklyn Health to retain professional billing revenue, and introduce new contracts with built-in quality KPIs and performance management tools. The providers remain the same, are in good standing, and the new agreements will enhance service capacity, including expanded OR days and ambulatory sessions. The contracts will follow standard 5-year terms and maintain service stability and quality within the NYC Health + Hospitals | South Brooklyn Health provider group.

There being no questions, upon motion duly made and seconded, the Board unanimously approved the **amended** resolutions for Ak City urology, LLC and City Orthopedics, PLLC.

ACTION ITEM 11:

Dr. Calamia read the resolution

> Authorizing the New York City Health and Hospitals Corporation (the "System") **to execute contracts with Bioreference Health, LLC, Laboratory Holdings of America, and Quest Diagnostics for Referred Pathology Lab Testing Services** at a not to exceed amount of $38,650,651 for a contract term of FIVE years and TWO additional ONE-year renewal options exercisable at the discretion of the System.
> (Presented to the Medical and Professional Affairs / Information Technology Committee: 09/08/2025)

Juan Lugo, Assistant Vice President of Clinical Laboratory Services, presented a proposal for new contracts for pathology reference lab services. Since 2013, Bioreference Laboratories has been the primary vendor for technical preparation and oncology pathology testing not performed in-house. A new RFP was conducted to enhance efficiency, compliance, and integration across the System, with goals including standardized workflows, reduced use of non-contracted labs, and improved billing visibility. The RFP resulted in awards to Bioreference for technical preparation and to a pool of vendors—Bioreference, Laboratory Holdings of America, and Quest Diagnostics—for oncology pathology testing. The increase in contract value reflects the expanded scope of services. Correctional Health Services ("CHS") will remain under the existing Bioreference contract through June 2026. Vendor performance has been rated good, and Bioreference exceeded the vendor diversity goal at 8%.

Ms. Hernandez-Piñero asked about CHS accounting for approximately 25% of total contract spending. Mr. Lugo explained that CHS uses Bioreference primarily for routine clinical pathology tests, while the rest of the System uses Bioreference for specialized technical and oncology pathology services. Dr. Katz added that CHS sends all specimens to Bioreference since their work is not processed through the Northwell joint laboratory.

Ms. Wang sought clarification on contract timing and funding. Mr. Lugo confirmed that although the current Bioreference contract runs through June 2026, the new contract will begin sooner to address billing and interface needs. CHS will remain under the existing agreement for one more year. Mr. Lugo confirmed that an increase is being addressed. He added that the new contract's higher value reflects expanded services.

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

ACTION ITEM 12:

Dr. Calamia read the resolution

> Authorizing New York City Health and Hospitals Corporation (the "System") to execute an affiliation agreement (the "Affiliation Agreement") **with Physician Affiliate Group of New York, P.C. and New York Dental Affiliates (collectively, "PAGNY") for the provision of general health care and behavioral health services at: NYC Health + Hospitals | Harlem, NYC Health + Hospitals | Jacobi, NYC Health + Hospitals | Kings County, NYC Health + Hospitals | Lincoln, NYC Health + Hospitals | Metropolitan, NYC Health + Hospitals | North Central Bronx, NYC Health + Hospitals | South Brooklyn Health, and NYC Health + Hospitals | Gotham Health Belvis, Cumberland, East New York, Morrisania & Renaissance.** Such Affiliation Agreement will run through June 30, 2030 for an amount not to exceed $7,452,731,569, which includes a 10% contingency.
> (Presented to the Medical and Professional Affairs / Information Technology Committee: 09/08/2025)

Mr. Siegler provided an overview of the proposed renewal Physician Affiliate Group of New York ("PAGNY") agreement, covering over 2,900 employees across multiple System facilities. He highlighted PAGNY's vital role in providing care to over one million patients annually and outlined progress in governance, financial planning, and clinical operations. The new contract strengthens accountability, reduces reliance on temporary staff, aligns incentives with System goals, and supports recruitment and retention efforts. Costs are expected to remain within the Board-approved limits.

Ms. Wang noted that affiliation agreements are not just pass-through employment contracts but key drivers of System initiatives and revenue growth. She inquired about recruitment and retention programs, including loan forgiveness. Mr. Siegler explained that these efforts are incorporated into the contract's overall budget, with loan forgiveness still under development. Ms. Wang also asked about the timing of future collective bargaining agreements. Mr. Siegler confirmed another agreement is expected toward the end of the contract term, with PAGNY serving as the employer responsible for labor relations.

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

ACTION ITEMS 13 AND 14:

Ms. Hernandez-Piñero read the resolutions

13. **Re-Electing Hillary S. Jalon as a member of the Board of Directors of MetroPlus Health Plan, Inc., a public benefit corporation formed pursuant to Section 7385(20) of the Unconsolidated Laws of New York ("MetroPlus"), to serve in such capacity for a five-year term** or until their successor has been duly elected and qualified, or as otherwise provided in the MetroPlus By-Laws.
(Presented Directly to the Board: 09/25/2025)

14. **AMENDING THE JANUARY 30, 2025 RESOLUTION TO CORRECT APPOINTMENT TERM TO REFLECT THE BALANCE OF THE PREDECESSOR TERM INSTEAD OF A FULL FIVE-YEAR TERM – Re-electing Kathleen Shure as a member of the Board of Directors of MetroPlus Health Plan, Inc., a public benefit corporation formed pursuant to Section 7385(20) of the Unconsolidated Laws of New York ("MetroPlus"), to serve in such capacity for the remainder of the five-year term of their predecessor through April 27, 2028** or until their successor has been duly elected and qualified, or as otherwise provided in the MetroPlus By-Laws.
(Presented Directly to the Board: 09/25/2025)

Steven Stein Cushman, Chief Counsel, MetroPlus presented two resolutions regarding MetroPlus Health Board membership. He explained that, under MetroPlus bylaws, new appointees must first complete their predecessors' unexpired terms before beginning their own five-year terms. Accordingly, Hillary Jalon will be re-elected for a new five-year term beginning September 25, 2025, after completing her predecessor's term. Kathleen Shure's prior resolution is being corrected to reflect that she will serve the remainder of her predecessor's term, ending April 27, 2028.

There being no questions, upon motion duly made and seconded, the Board unanimously approved resolution 13 re-appointing Hillary Jalon for a new five-year-term and **amended** resolution 14 to appoint Kathleen Shure to serve the remainder of her predecessor's term.

ITEM 6: FISCAL YEAR 2025 ANNUAL PUBLIC MEETINGS RESPONSES

Deborah Brown, Senior Vice President and Chief External Affairs Officer, and Okenfe Lebarty, Assistant Vice President of Community Affairs, presented the Fiscal Year 2025 Annual Public Meeting responses. Ms. Brown reviewed the purpose of the meetings—required by the System's enabling act. She noted increased participation across most boroughs and summarized key themes raised by the public, including staff well-being and compensation, aging

infrastructure, inclusive care for patients with disabilities and chronic conditions, and access to care and Federal and State funding concerns. The full set of questions and responses is publicly available online.

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

U.S. NEWS & WORLD REPORT "BEST HOSPITALS 2025-2026" LIST INCLUDES ALL OF NYC HEALTH + HOSPITALS' ACUTE CARE FACILITIES

The System announced that its 11 hospitals have been named by U.S. News & World Report to its 2025-2026 'Best Hospitals' list. The ranking recognizes the hospitals for excellence in treating conditions including heart failure, heart attack, hip fracture, diabetes, kidney failure, diabetes, colon cancer surgery, pneumonia, stroke, and chronic obstructive pulmonary disease (COPD).

NYC HEALTH + HOSPITALS | CARTER RECEIVES TOP HONORS AS THE NATION'S FIRST AND ONLY LONG-TERM CARE FACILITY TO EARN PATHWAY TO EXCELLENCE WITH DISTINCTION DESIGNATION

NYC Health + Hospitals | Carter is the first and only long-term care facility in the nation, and one of two healthcare organizations in New York, to receive the Pathway to Excellence with Distinction designation by the American Nurses Credentialing Center.

MAYOR ADAMS AND NYC HEALTH + HOSPITALS CELEBRATE OPENING OF 'BRIDGE TO HOME' FACILITY

Mayor Eric Adams attended the opening of NYC Health + Hospitals' "Bridge to Home" facility, a new, innovative support model designed to help patients living with severe mental illness who are ready to be discharged from the hospital but do not have a place to go. Bridge to Home is funded as part of the Adams administration's $650 million plan to address homelessness and support New Yorkers experiencing serious mental illness.

MAYOR ADAMS ANNOUNCES NEW PROPOSAL TO FURTHER SUPPORT NEW YORKERS STRUGGLING WITH SUBSTANCE USE DISORDER, ADDRESS PUBLIC DRUG USE

Mayor Eric Adams announced a $27 million investment focused on improving access to substance use disorder treatment through outreach and enhanced treatment strategies. The Adams administration will launch a pilot program called 'Track to Treatment,' which utilizes contingency management, a treatment approach that provides existing patients with small rewards for positive behavior, including engagement in addiction care.

NYC HEALTH + HOSPITALS | WOODHULL AND BROOKLYN BOROUGH PRESIDENT ANTONIO REYNOSO BREAK GROUND ON $20 MILLION LABOR AND BIRTHING SUITE RENOVATION

NYC Health + Hospitals | Woodhull and Brooklyn Borough President Antonio Reynoso broke ground on a $20 million renovation to the hospital's Labor and Birthing Suite, supported by $11 million from the Borough President. Expected to be complete in the fall of 2027, the renovated unit will offer patients a new family comfort space to support the mother's partner and family, and for the first time, the hospital will offer birthing center rooms with birthing tubs for hydrotherapy during labor.

AS PART OF HOUSING FOR HEALTH INITIATIVE, NYC HEALTH + HOSPITALS ANNOUNCES MAJOR STEP FORWARD WITH MORRISANIA RIVER COMMONS HOUSING DEVELOPMENT

As part of its Housing for Health initiative, the proposed Morrisania River Commons project now requires a vote in the City Council and Mayoral approval in order to move forward with lease execution and construction. The project will bring 328 units of affordable and supportive housing and a new community clinic to the Bronx. The proposed project has been well received by the community.

NYC HEALTH + HOSPITALS RECEIVES $10.7 MILLION TO SUPPORT ABORTION ACCESS OVER THREE YEARS

The System received $10.7 million from the New York State Abortion Access Program grant to support abortion care at its 11 hospitals over the next three years. The funds support hiring abortion care providers and navigators, purchasing new equipment and supplies, access to abortion doulas, and financial support for patients.

FOR THE TWELFTH CONSECUTIVE YEAR, NYC HEALTH + HOSPITALS' ACCOUNTABLE CARE ORGANIZATION EARNS SIGNIFICANT MEDICARE SHARED SAVINGS

NYC Health + Hospitals announced that its Medicare Shared Savings Program Accountable Care Organization ("ACO") will earn $7.2 million from the Federal government for reducing avoidable costs and meeting high standards of quality care for patients.

NYC HEALTH + HOSPITALS' LIFESTYLE MEDICINE PROGRAM HELD OVER 10,000 GROUP VISITS AND SERVED MORE THAN 1,300 PATIENTS IN THE PAST YEAR

NYC Health + Hospitals' Lifestyle Medicine Program has provided over 10,000 group visits and served more than 1,300 patients in the past year.

NYC HEALTH + HOSPITALS' NYC CARE PROGRAM LAUNCHES CITY-WIDE PUBLIC AWARENESS CAMPAIGN FOCUSED ON HEALTH CARE ACCESS

NYC Care announced the launch of a citywide public awareness marketing campaign to encourage NYC Care-eligible New Yorkers to enroll in the program and encourage existing members to renew their membership. The campaign features vibrant artwork and video content matched with clear messaging asserting that all New Yorkers, regardless of their immigration status or ability to pay, have a right to health care through the NYC Care program. Information is available in many languages.

METROPLUSHEALTH RANKED #1 IN HIV SPECIAL NEEDS PLAN QUALITY INCENTIVE AWARDS FOR THREE YEARS RUNNING

MetroPlusHealth has been ranked #1 in the 2023 HIV Special Needs Plan (SNP) Quality Incentive Awards by the New York State Department of Health — marking the third consecutive year the health plan has earned this top distinction. MetroPlusHealth outperformed all other HIV SNP plans statewide.

EXTERNAL AFFAIRS

Dr. Katz noted for the Board that the New York City Council voted to pass the Just Home housing project at Jacobi Hospital campus.

DISCUSSION

A question was raised regarding the State's use of reserve funds to cover costs for the Essential Plan after Federal funding ceased for the uninsured.

Dr. Katz confirmed that the State will continue using its own funds to support the plan, noting that Dr. Schwartz considers this the best available option.

COMMITTEE AND SUBSIDIARY REPORTS

Mr. Pagán noted that the Committee and subsidiary 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 4:14 p.m.

Colicia Hercules
Corporate Secretary

NYC HEALTH+ HOSPITALS

COMMITTEE REPORTS

Medical and Professional Affairs / Information Technology Committee– September 8th, 2025
As Reported by Dr. Vincent Calamia
Committee Members Present- José Pagán, Dr. Mitchell Katz, Dr. Michael Espiritu, Dr. Vincent Calamia.

Dr. Vincent Calamia, Chair of the Committee, called the meeting to order at 9:01AM.

Adoption of the minutes of the July 16th, 2025 Medical and Professional Affairs/Information Technology Committee. Upon motion made, was seconded and approved by Dr. Calamia.

Action Item
Svetlana Lipyanskaya, Chief Executive Officer, South Brooklyn Health and Phillip Wadle, Associate Executive Director presented to the committee, two resolutions to enter into contracts with AK City Urology, PLLC and City Orthopedics, PLLC (the "Provider Group").

Authorizing New York City Health and Hospitals Corporation (the "System") to execute a clinical services agreement with AK City Urology, PLLC (the "Provider Group") to provide urology services at New York City Health + Hospitals / South Brooklyn for a contract amount of $19,954,000, with a 20% contingency of $3,990,800, to bring the total cost not to exceed of $23,944,800 for an initial term of three (3) years with two (2) one-year options to extend.

Authorizing New York City Health and Hospitals Corporation (the "System") to execute a clinical services agreement with City Orthopedics, PLLC (the "Provider Group") to provide orthopedic services at New York City Health + Hospitals / South Brooklyn for a contract amount of $18,700,000, with a 20% contingency of $3,740,000, to bring the total cost not to exceed of $22,440,000 for an initial term of three (3) years with two (2) one-year options to extend.

Urology and Orthopedic services are currently subcontracted through our affiliate, PAGNY. These are pass-through contracts where SBH is responsible for the entire cost and indemnifies the providers for their services performed at H+H. In addition to the base contract fee, PAGNY charges a 3% administration fee for holding the subcontract and collects the professional billing revenue for the services. The existing subcontract for both is expired, and do not have built-in

Quality KPIs, and currently have limited impact on the FPP. PAGNY is aware of this shift and had no push-back to the transition.

Shifting these contracts to H+H will gain several advantages. The system will retain the professional billing revenue associated with the services and enhance control over the service, including quality KPIs, and performance management. The system eliminates an administrative fee without additional administrative burden, and no additional regulatory or malpractice risk, as we already perform partial billing and indemnify the providers. The system ensures consistency and stability within SBH provider group by maintaining majority of the existing providers. All providers are physicians in good standing. The system increases the expected work product for each service through additional outpatient sessions and OR days. Contract cost increases due to expansion of service will be covered by new revenue generation associated with those services.

The contracts would be a direct system contracts, include quality KPIs (with an incentive for meeting them), and a standard 5-year (3-1-1) term.
Contract costs include comprehensive complements of specialty physicians and physician associates (PA) required to cover all services. The services are 24/7 services.

Comment made by the Board: *PGANY was created to support H+H, and if a contract is needed for us they will assist and provide it, this is not a negative impact on them.*

Board member raised a question: *will the Chairs of that department be within the contract? Ms. Lipyanskaya responded; the chiefs of service will be part of the contract, and will report to the chairs of surgery who are H+H employee.*

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

Kenra Ford, Sr. Vice President of Clinical Services Operation and Juan Lugo, Assistant Vice President presented to the committee, the resolution to enter into a contract with Bioreference Health, LLC, Laboratory Holdings of America, and Quest Diagnostics Incorporated.

> **Authorizing the New York City Health and Hospitals Corporation (the "System") to execute contracts with Bioreference Health, LLC, Laboratory Holdings of America and Quest Diagnostics for Referred Pathology Lab Testing Services at a not to exceed amount of $38,650,651, which includes a 20% contingency, for a contract term of FIVE years and TWO additional ONE year renewal options exercisable at the discretion of the System.**

New York City Health + Hospitals pathology labs refer specimens to multiple outside labs for technical preparation and/or oncology/pathology-related testing when not performed in-house. Technical work includes immunohistochemistry, special staining, and immunofluorescence. The primary referral lab is

Bioreference. They have been providing Pathology reference lab services pertaining to technical work since 2013. The Oncology/pathologist-related testing includes tumor genomics, chromosome analysis, molecular/PCR, and Next Generation Sequencing (NGS).

NYC Health + Hospitals utilizes multiple referenced labs for more specialized oncology/pathology related testing. Clinical Laboratory of New York (CLNY), the joint venture lab with Northwell, does not currently provide these specialized services and are not sure when these services will be provided.

The team continues to assess and improve the System's pathology testing services, and has identified key opportunities to enhance efficiency, regulatory compliance, and financial performance. The following optimizations will improve patient care and strengthen overall lab operations:

- Develop standardized interfaces will streamline smoother workflows and ensure seamless integration;
- Create an enterprise-wide strategy for the optimal use of reference labs to maximize value and efficiency;
- Minimize referrals to non-contracted labs to avoid surprise billing and ensure all tests are conducted with NYS Department of Health approval; Which means any lab that receive the specimens has to have a State Department of Health license.
- We aim to improve lab selection and decisions, based on close proximity, to deliver timely specimens and avoid degradation of the specimen's integrity;
- creating a billing and order tracking vendor interface will create visibility across System facilities and allow for utilization trends to be identified and shared to clinical teams for action as applicable.

Board member raised a question: *are there certain providers that are doing certain test, and most are going to that provider, or is it geographically and proximity becomes the issue? How is that broken down into which of the labs to send them to? Juan Lugo responded; the facility sends out the testing to the labs that are best for them, some are close proximity and some are far, this is why we are trying to standardize those services. This is what we are trying to change because this company has a broader amount of services for the scope of work that is needed, especially for turnaround time and billing purposes.*

Board member raised a question: *are we doing any pathology with Northwell currently and have we maxed out on unit pricing? Kenra Ford responded; we are not maxed out, we are looking strategically at the bucket of test to bring in.*

Comment by a board member; what the likelihood would have been if we would have sent the insurance a bill for pathology test sent for Hopkins. The service we are request would provide a pathway for getting the results.

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

Matthew Siegler, Senior Vice President, Chief Growth and Strategy Officer presented to the committee, a resolution to enter into an affiliation agreement with Physician Affiliate Group of New York, P.C. and New York Dental Affiliates (collectively, "PGANY")

> **Authorizing New York City Health and Hospitals Corporation (the "System") to execute an affiliation agreement (the "Affiliation Agreement") with Physician Affiliate Group of New York, P.C. and New York Dental Affiliates (collectively, "PAGNY") for the provision of general health care and behavioral health services at: NYC Health + Hospitals/Harlem, NYC Health + Hospitals/Jacobi, NYC Health + Hospitals/Kings County, NYC Health + Hospitals/Lincoln, NYC Health + Hospitals/Metropolitan, NYC Health + Hospitals/North Central Bronx, NYC Health + Hospitals/South Brooklyn Health, and NYC Health + Hospitals/Gotham Health Belvis, Cumberland, East New York, Morrisania & Renaissance. Such Affiliation Agreement will run through June 30, 2030 for an amount not to exceed $7,452,731,569, which includes a 10% contingency.**

Since 1970, NYC Health + Hospitals has maintained medical staffing Through Strategic Affiliation Agreements. Currently, Health + Hospitals has clinical Affiliate agreements with NYU, Mt. Sinai, SUNY, and the Physician Affiliate Group of New York, P.C. and New York Dental Affiliates (PAGNY) to staff H+H facilities. PAGNY) to staff H+H facilities. Affiliate agreements are generally organized by facility rather than specialty. The PGANY agreement has over ~3,310 physician through these agreement in FY25.

Since 2010 PGANY has been the provider at these facilities, the agreements are cost based agreements. The agreements are pass throughs to provide physician compensations. PAGNY is unique amongst H+H facilities because it is not associated with a medical school or another large hospital. PGANY has a major role in H+H teaching, the affiliated hospitals have a 189 GME programs, with 1,858 FTE trainees across various locations. PGANY also, provides healthcare services in the Correctional health Service, which is a separate contract.

There has been significant growth in patient volumes in H+H PGANY facilities. Total FTEs grew by 11 percent, and the inpatient discharges and outpatients grew by 16 and 22 percent. The total number of patients served at PGANY facilities are over a million, which is a 30% growth over the last four years over this contract.

There has been improved transparency and H+H management of affiliation agreements. Pre-2021 there were limited Central Office oversight of affiliate hiring, limited facility leadership involvement in budgeting and budget management authority. Central Office paid the budget, but it was handled opaquely with real time vacancy and spending information limited. Facility leadership had limited visibility on the overall budget and its impact on their operation.

The last four years with all the affiliates, an overarching governance and management structure has been created. There is a unified governance structure established through a standardized joint oversight committee and Central Office to support efficient and well communicated decision making. There is an increased budget management authority for the affiliates and the facilities CEOs. Since FY-24 PGANY has had consistent leadership.

Governance and management FY-26 and onward, there will be increasing active facility management of hiring, budgeting and contract terms. The goals are to maintain clear and enforceable contract terms that remain flexible to innovation and changing care needs; update language in the Affiliation agreements to reflect current practices, clarify roles and responsibilities between parties, and clarify key concepts; greater accountability for managing sessional, subcontract, and locums' costs; data sharing with chiefs/chairs; management expectations for chiefs/chairs; setting expectation for cross-facility partnership. Transition to flexible, multi-year budgets to support patient care investment and planning certainty. Deliver quarterly financial analyses to Chief Financial Officers, Chief Medical Officers, and Affiliates, and refine the use of national compensation and productivity benchmarks to guide recruitment and retention strategies.

Financial key accomplishment for FY-21-FY-25; transitioned to workforce plan-budgets which set up for the hires that each facility wants to focus on. These are viewed as revenue generated investments. The major structural change for PGANY is their faculty Practice Plans (FPPs) which are the separate entities that bill for physician services. Investment has been made on compensation to boost recruitment to compete in the market. Also, implemented significant cost-of-living adjustment to enhance compensation and benefits for all physicians through coordination with Doctor's Council.

The goal for continue partnership are to further align total compensation packages across facilities, base pay, bonuses, benefits, and sessional rates. To reduce reliance on fragmented provider services (per-diem, locum tenens, and subcontracts) through strategic recruitment and retention. A major change to the contract will be to align incentives of the Facility Practice Plans more directly with H+H. This contract has a significate change to incentivize the reduction of the number of sessional, locums, and subcontract and has the percentage of earnings that H+H carves out grow as overall FPPs grows and PGANY spend grows.

The Clinical Services and Operations with the joint effort to make centralizing decisions making while partnering with leadership at the facilities has a result of better data at the clinical level, implemented clinical staffing models to help the facilities base-line their workforce hiring plans, set up clinical time requirements for leadership, how much time the CMO, Chairs and others to be practicing.

Going forward, to continue invest in recruitment and make H+H the destination for mission driven physicians around the country is going to be a major focus. Health

+ Hospitals have loan repayment programs, and fellowships to attract early-career providers. Also, to continue to advance the shared services. This is a large contract and the revenue growth has exceeded the expense and growth of this contract costs for FY-21-FY-25. There had to be significant investment to keep up with the market to make H+H more marketable and attractive place work to recruit and retain staff. The growth has grown faster than the spend on this contract.

The board commended: *happy to see the growth and the collaboration.*

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

CHIEF INFORMATION OFFICER REPORT

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

Dr. Mendez presented the CIO report which includes updates regarding the PMO department which now includes AI pathways for new projects, progress on two major health IT projects, and a positive trend with regards to the UnPrint program. The main focus of the update was on the risk management and cybersecurity program, presented by the System Chief Information Security Officer (CISO) Soma Bhaduri. Ms. Bhaduri highlighted the increasing impact of cyber breaches in healthcare (e.g., Change Healthcare) and the critical need to protect all connected devices and data within the Health and Hospitals network, from user IDs to medical devices. She explained that a robust governance structure, established in 2015 and annually reviewed by the Information Security Policy Steering Committee, is crucial. This structure follows the NIST cybersecurity framework, which aligns with regulations like HIPAA and the upcoming New York State cyber regulations. The system is currently assessing against NIST 1.2 and will move to NIST 2.0 (which incorporates AI considerations) in 2025.

The cybersecurity framework is broken down into five pillars: Identify, Protect, Detect, Respond, and Recover. Examples given include governance documents and asset management (Identify), security awareness training and tools (Protect), 24/7 monitoring by the Security Operations Center (Detect), and annual table-top exercises for incident handling (Respond and Recover). Health and Hospitals reported meeting these criteria and often exceeding industry standards.

In response to a question about learning from external incidents, the CISO explained that Health and Hospitals participates in industry groups like Health ISAC to receive daily intelligence on threats. This information is used by their 24/7 operations center to identify and manually block malicious events, although complete prevention is impossible, hence the comprehensive framework. Regarding the sophistication of AI-powered phishing and attacks, the CISO acknowledged that AI helps both defenders (through automation, which is their goal) and attackers, emphasizing the need for continuous monitoring and adaptation. The updated NIST 2.0 framework and additional governance are expected to help address these evolving threats. The discussion concluded with an analogy

by Dr. Katz comparing cybersecurity to an arms race between improving locks and improving methods of breaking them. The committee unanimously approved the report.

CLINICAL SERVICES OPERATION REPORT

Kenra Ford, Sr. Vice President of Clinical Services Operation, Clinical Services Operations, and Kaushal Khambhati, MD Clinical Services highlighted the following:

Inpatient Flow & Capacity Management: inpatient flow is how a patient get from admission to discharge, and how the service is delivered such as imaging, labs, consults and that the right tools are in place for the most efficient and safe manner and improving overall experience for the patients, also improving access to inpatient beds reporting from the ED, and shave off some operational cost. The main drive of this project is providing tools that serves like a GPS helping clinicians as well as administrators to navigate and anticipate and overcome barriers to flow.

Over the last several years work was done on developing internal HR epic for routine discharge planning and managing flow. This allows the clinician to manual catalog things, like when a patient is going to be discharged and where they are going, this is a great opportunity for intelligent solutions for clinicians in terms of providing them insights for predicting and being accurate with these expected discharge dates or expected disposition and serves as well as for administrators for predicting barriers to discharge and for helping them to prioritize services from the aspect of the greatest impact they can have on operation burden.

As of recent, with AI advancement there are three domains of functions that AI can provide us support in the future of how we deliver on flow and capacity management. They can help boost efficiency and accuracy for routine discharge Planning, it can facilitate and anticipate capacity strain and enacting mitigation protocols to respond, and AI can really help to translate capacity prediction or forecast our capacity, so it can anticipatorily align our resources affectively.

At present the strategy with deploying tools in this space is two pronged. All the work has been done within Epic and that work is rapidly expanding throughout our system. We are exploring Al based solutions that will integrate and synergize the ethic-based work. This work has three potential benefits of reducing length of stay, ultimately approving the experience and safety of the care we deliver for our patients, and gives an alternate lens on how we actually deliver care, which we don’t do not currently have if we introduce AI into this realm.

SYSTEM CHIEF NURSE EXECUTIVE REPORT

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

The **CUNY DNP/PhD Virtual Info Session** was held on June 18, 2025.

This program is in partnership with **CUNY's Hunter College.**
Elsie Jolade, DNP, RN, FNP-BC, ACNS, CCRN, presented on the DNP program and **Elizabeth Capezuti, PhD, RN, FAAN,** presented on the PhD program. Both are from Hunter-Bellevue School of Nursing.

There were over 140 people who attended this virtual event.

Pathway to excellence: New York City Health + Hospitals Metropolitan, is the first healthcare organization worldwide to earn the pathway to excellence with distinction and that essentially means not only is Metropolitan fostering a positive practice environment for our nurses, but they are also exceeding national benchmarks. Pathway to excellence with distinction was also awarded to Carter, the first long term care facility, nationwide to receive this designation, both will be recognized next month, in October at the Pathway and Magnet conference.

Queens Hospital celebrated the Prism award. This national award signifies a premier recognition in the specialty of Med-Surge. Queens B4East unit is the first to receive it within NYC Health + Hospitals health System. A celebration was giving on July 16th with more than a hundred people in attendance, with most being front line staff.

A mention was given on the Professional Governance Council report to the SCNE. There are over 211 councils, which are led by frontline staff looking at their clinical outcome and are happy to have a voice and make a difference in setting the stage for sexual empowerment at H+H.

Lastly, the Nursing Clinical Ladder Program, continue to thrive, there are 200% applicants into this program which is key for professional development and retention of our nurses.

METROPLUS HEALTH PLAN, INC.
Dr. Sanjiv Shah, MD Chief Medical Officer, MetroPlus Health Plan, provided the following highlights.

MetroPlus is ranked number 1 for three consecutive years for HIV Snip on quality amongst the 3 special needs plans that exist in New York State. The award is based on 3 areas, 80% is based on clinical measures, and 20% is on satisfaction and then they deduct points based on your lack of compliance to various State initiatives.

On the quality side MetroPlus exceeded the other snips by several percentage points. For Quality 45% of the points are derived from viral load suppression, which is the single most important predictor for individual disease progression as well as community transmission, MetroPlus scored 45 out of the 45 points remaining. The remaining 55 points are based on a holistic approach to people living with HIV, including STI screening, mental health, substance use, and

social needs and screening intervention. In those areas MetroPlus did well, particularly in the mental health.

Another focus on a special population in Medicaid is the health and recovery plan population. These are people selected by New York State, a State base algorithm on who have severe mental health or substance use issue or both. The State designates these individuals based on utilization as being HARP eligible and the quality incentive. Award is based on withholding 2% of the HARP premium from each of the health and recovery plans. If they do well in quality parameters, then a portion of the premium is returned to the plan. Please to report for the first time MetroPlus was able to earn the full quality incentive award, a hundred percent back to the plan. There has been a pretty dramatic improvement in quality outcomes, a 28 % increase compared to 2022 in many of the quality parameters.

With this population, the majority of the points are derived from mental health and substance use derived measures, there is also measures that deal with screening, viral load suppression, and asthma medication ratios. There were increase in substance use measures in the mental health measures, particularly after discharge from an inpatient or ED setting. There was also, a 30% increase in the use of controller medication for asthma, emphasizing the holistic approach to people living in the health and recover plan.

The State has encouraged plans to push innovative ways to ensure people have good onboarding journey to each plan, as well as ensuring when they come up for redetermination, making sure they are still eligible for their line of business, and try to get as many people appropriately recertified. MetroPlus made a significant investment about three years ago in Salesforce as the CRM system. MetroPlus is now using Salesforce Marketing Cloud to personalize outbound messages with the redetermination and onboarding process. This assures MetroPlus have tailored messaging as well as the ability to look at outcomes as a result of any outbound messaging that is given.

Initially a pilot was set up for both recertification and onboarding. Current client and future clients were sent a message through Salesforce and compared the current state with the future states and the pilot was both in redetermining people for the essential plan in Medicaid, and the onboarding was for people with Medicaid. There were thirty thousand members in the control group, three thousand in the Salesforce marketing pilot for recertification, and it was noticed that the individuals in the Salesforce had nearly 3% higher redetermination that was statistically significant, and now approached is in full scale production across all lines of business where redetermination is required.

Onboarding Pilot was done to a comparison of current state, which was more decentralized to a more centralized approach with Salesforce Marketing Cloud. A higher retention was seen, and more engagement with primary care visits as the members onboard. One thing that was not seen, was more portal registration for Salesforce, hoping with ongoing messages that will increase. With improvements in retention, lower call rates to the call center as a result of the messaging

through Salesforce Marketing Cloud, and hopefully more portal registration, this is now in full production.

One of the big benefits of all this is, now all the messaging can be seen and visualized in one central CRM system. When a member calls about a message they received, the call center can see what was sent, and help the client without asking multiple questions.

The providers directory must be improved. It iss imperative, the State has a huge scrutiny on ghost providers. These are providers that are listed in the directory, and when the State calls, they are not able to access them, that reflects poorly on the plans. MetroPlus partnered with a vendor called "Better Doctors", to create a mechanism to send out information on demographic information and the providers return that information back, both in the primary care realms, specialists labs, freestanding radiology, behavioral health, and all of these sectors need improved addresses, hours of operation, and ability to see new telephone numbers. To date over 41,000 data updates have been made as a result of this. MetroPlus is also doing their own access and availability surveys based on State requirements. Providers who do well in these surveys can earn per member per month additional fees for meeting target compliance rate. Secret shoppers' calls are also being done in the medical, behavioral, and dental spaces in order to ensure that discrepancies are identified and rectified as much as possible in real time.

MetroPlus Gold new updates: This is exclusively for City employees. Effective July 1, they enhanced the benefits with a huge focus on wellness. They reimburse for class pass, which allows people to access various gyms across the city, cover gym membership up to $1400 dollars, free acupuncture visits up to ten years, you can earn wellness rewards for accustoming to primary care, specialty care appointments, dental access. There is a gold no rider, where you do not have to purchase a pharmacy rider, and still a hundred medications are available free of charge, were able to reduce the rider fee by $11 dollars.

Board member raised a question: are we expecting impact from the changes in Medicaid are we prepared and are we seeing any issues yet? Dr. Shah responded; I think Medicaid impact will come a little later, but the biggest impact we're now foreseeing is in the offense of the plan and we hope that the Governor create a funding stream for the essential plans to continue, but that the area to watch 1st.

There being no further business, the meeting was adjourned 9:59AM.

Capital Committee Meeting – September 8, 2025
As reported by: José Pagán
Committee Members Present: Dr. Mitchell Katz, Freda Wang, Karen St. Hilaire, Erin Kelly

José Pagán called the meeting to order at 10:10 a.m. and stated for the record that Erin Kelly would be representing Suzanne Miles-Gustave, and Karen St. Hilaire would be representing Molly Wasow Park, both in a voting capacity.
Mr. Pagán called for a motion to approve the minutes of the July 16, 2025 Capital Committee meeting.

Upon motion made and duly seconded the minutes of the Capital Committee meeting held on July 16, 2025, were unanimously approved.

VICE PRESIDENT REPORT

Mr. Saez highlighted accomplishments from Fiscal Year 2025.

He noted that we ended the year with $227 million capital dollars committed.

The capital budget and payments team facilitated 632 purchase orders and processed over 2,379 payment vouchers to authorize $399M.

The contracts team bid 12 capital projects totaling $82.952 million, and 10 Job Order Contracts totaling a not-to-exceed (NTE) amount of $66 million, for a total of $148.952 million.

The average number of bids received per project was five. 66% of capital project bids were below the engineer's estimate. Bids average 20% under engineers estimate. Of the 119 total bids received,
33% were Minority- and Women- Owned Businesses (MWBE), and
31% of the awarded contracts were MWBE.

148 work orders were issued for Requirement Contractors totaling $18.907 million, and 80 work orders were issued for JOCS totaling $14.465 million.

The capital budget and payments team facilitated 40 Certificate to Proceed Approvals in FY25 to authorize $225,059,640.

At NYC H+H/Woodhull, we recently had a groundbreaking with BP Reynoso to celebrate the generous contribution from him for our ongoing Labor and Delivery Suites renovation project.

ACTION ITEMS

Mr. Saez read the resolution into the record:

Authorizing New York City Health and Hospitals Corporation (the "System") to extend its contract with Kone Corporation ("Kone") for one year until November 31, 2026, and to increase the not-to-exceed amount by $12,500,000 from the original $46,700,000 to a new not-to-exceed amount of $59,200,000, for the provision of preventative maintenance services and

repairs on 350+ elevators and escalators system wide, 24/7 emergency service and repairs, and a dedicated diagnostics and testing team.

Mr. Saez, Assistant Vice President, Office of Facilities Development, presented the background and current state information, the of the rationale for the NTE increase in the best-interest of the Corporation and vendor performance.

- Ms. Wang asked noted that there were different elevators throughout the system and some more aged than others and asked if there were plans to update. Mr. Saez said yes, at Bellevue and Lincoln, where very aged cabs are, we will be updating. We have also done various modernization projects throughout the system.
- Ms. Wang asked if projects were for new equipment or upgrading existing equipment. Mr. Saez said at some locations yes new equipment is needed. At other locations upgraded systems requires updated infrastructure so it all dependent on current conditions at the site.
- Ms. Wang noted that the contingency was large and that was likely due to emergency repair needs for aged equipment. Mr. Saez said yes. There is a huge demand for vertical transportation in our facilities and we are upgrading and modernizing where and when we can.

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 10:20 a.m.

Equity, Diversity and Inclusion Committee Meeting – September 9, 2025
As Reported by: Patricia Marthone
Committee Members Present: Mitchell Katz, Patricia Marthone, Jackie Rowe-Adams, Vanessa Rodriguez

CALL TO ORDER

The meeting of the Equity, Diversity and Inclusion Committee of the NYC Health + Hospitals' Board was called to order at 4:04 p.m.

Upon motion made and duly second the minutes of the April 8, 2025 meeting was unanimously approved.

DIVERSITY AND INCLUSION UPDATE

Yvette Villanueva, Senior Vice President, Human Resources, provided an overview of the System's latest diversity and inclusion achievements and activities on behalf of Ivelesse Mendez-Justiniano, Vice President, Chief Diversity, Equity, & Inclusion Officer, who was unable to join the meeting.

Ms. Villanueva provided an update on the System's education and capacity

building and reported that year-to-date there have been over 52K training completions, with the top two trainings being Sexual Harassment Prevention and Identifying and Managing Unconscious Bias. She also shared that there has been an educational virtual series focusing on women in leadership roles throughout NYC Health + Hospitals. She discussed how the organization continues to diversify its future workforce with an internship and career ladder program that focuses on providing opportunities to high school and college students from diverse communities in New York City.

Ms. Villanueva indicated that over 25.6 million minutes of interpretation services were provided between 1/1/2025 – 8/12/2025 with a 96.3% satisfaction rate. The top three languages were Spanish (19.5 million minutes), French (1.2 million minutes), and Bangla/Bengali (795K minutes). She confirmed that a Translation RFP is live with new contracts slated to start in 2026.

Ms. Villanueva also highlighted that the Medical Interpreter Skills Training (MIST) program has started receiving applications in August for the new cohort, which will now expand to an additional 5 languages, for a total of 20 languages. The program has steadily expanded, with new languages being added every year since its inception in 2021.

Ms. Villanueva continued with an update on veterans supporting services. Veteran Pop-ups have been taking place throughout the year; half of the acute care facilities have already held a pop-up while the other half have dates scheduled in the remainder of 2025. There is also a Veteran Resource Expo scheduled to take place on October 22nd at Corporate Office which will honor Veterans and bring together a variety of veteran organizations, services, and information. Additionally, NYC H+H has earned the Military Friendly Pledge designation which means H+H fosters an inclusive workplace for military-affiliated individuals.

In the Disability Awareness area, Ms. Villanueva highlighted the ongoing Let’s Talk Disability virtual training sessions that have been taking place monthly, as well as the Caring for Deaf & Hard of Hearing Patients Panel which took place in August. 52 attendees attended the panel discussion and learned about some of the common challenges and best ways to help care for deaf and hard of hearings patients.

Ms. Villanueva then announced that in May, all five NYC Health + Hospitals Post-Acute Care facilities were recognized as LGBTQ+ Long-Term Care Equality Leaders by The Human Rights Campaign Foundation and SAGE. Across all participating nursing homes throughout the nation, only 11% earned the highest Leader designation, which all five of the H+H Post-Acute Care facilities received.

Ms. Villanueva shared that during Pride Month in June, over 165 staff from 17 H+H facilities took part in nine external Pride events across the five boroughs. Community engagement was great as staff connected with over

2,220 New Yorkers at Pride Festivals.

From a Communications & Marketing perspective, Ms. Villanueva indicated that there have been several promotional materials distributed and Systemwide emails highlighting holidays and observances. She concluded the presentation by sharing how the System celebrated and participated in the National Puerto Rican Day and the National Dominican Day Parades.

Following the presentation there were several accolades from the Board Members about the great work that is being done with the disabled, highlighting of women's leaders, and translations services improvement, especially in meeting the increased demand for Wolof that was mentioned at previous meetings.

EQUITY & ACCESS COUNCIL UPDATE

Nichola Davis, Chief Population Health Officer, and Co-Chair of the Equity and Access Council ("Council") initiated the presentation and introduced Caroline Cooke and Erin Lewis to present the latest work being done within the Monitoring and Evaluation Workgroup.

Ms. Cooke started off with explaining that the Institute for Healthcare Improvement (IHI) defines four dimensions for validating race and ethnicity and language data, which is referred to as REaL data. These dimensions are: Accuracy, Completeness, Timeliness, and Consistency.

Ms. Cooke then provided a recap of accomplishments: In 2021, the System made updates to the way race and ethnicity data is collected to improve consistency and completeness. This included standardizing the race and ethnicity categories, making the fields required to create more standardized reporting and also introducing some new data collection methods. She indicated that the goal is to evaluate if NYC H+H has complete and accurate real data across the System. The purpose of validating the data aside from reporting purposes, is to understand the demographics of the communities served and be able to identify, evaluate, and address health disparities.

The first step in validation was assessing completeness. The team looked at how complete the data is, if the changes that were implemented in 2021 improved collection rates, and determined the need to narrow down the population to those patients with a completed clinical encounter. The findings revealed that there was improvement - incomplete data halved from CY-20 to CY-23 and in CY-23, race/ethnicity data for all ages, service types and facilities were >97% complete.

The next dimension that was assessed was concordance. The concordance goal was to identify concordance between patient's race/ethnicity and ethnic background. Looking at ethnic background can provide construct validity for aggregate race/ethnicity and help improve cultural competency by

understanding the communities served. There were some strong relationships between certain aggregate race/ethnicity groups and ethnic backgrounds observed, such as 50% of 'Hispanic/Latinx' patients had Latin American ethnic backgrounds, or that 73% of 'Asian' patients had East & SE Asian, Central & South Asian, or West Asian & North African backgrounds. Patients with Middle East/North African (MENA) regional backgrounds were distributed across all race/ethnicity groups and there was a lot of diversity among backgrounds mapping to 'Something Else'.

Ms. Cooke then handed off to Dr. Lewis, who continued the presentation by discussing the next dimension, accuracy. In order to assess accuracy, the team developed a 10-question survey to collect race, ethnicity, and language data based on a validated survey from IHI. Over 1,500 patients were invited to participate across acute care and Gotham facilities, and 45% of patients accepted the invitation. Results showed that there were high levels of accuracy for race, Hispanic/Latinx ethnicity, and language.

Ms. Cooke concluded the presentation by highlighting the team's key takeaways. NYC H+H has improved the REaL data questions since those updates were made in 2021. 98% of data were complete and 75% of surveyed patients had accurate race and ethnicity data in Epic to what they self-reported. Ethnic background data is very heterogeneous and provides rich information for exploring backgrounds by region. There is also a plan to add a new category for MENA in the EPIC system to capture patient diversity and reduce "something else" responses. Lastly and most importantly, having valid REaL data allows NYC H+H to deliver more culturally sensitive and effective programming to the communities served.

Following the presentation there was discussion around how interesting it is to think of how patients identify themselves based on the options they are given, how they are asked, and how they feel in the moment they are asked. The team clarified for the Committee that the data gathering focused on patients 18 years and older.

A follow up item was to show in concordance the breakdown between other, unknown and something else in the race/ethnicity category.

The Board members expressed appreciation for the work done and the data shared by the team.

Dr. Marthone asked if there was any old business or new business.

Hearing no old or new business from the Committee members, the meeting was adjourned at 4:35 p.m.

SUBSIDIARY REPORTS

HHC Capital Corporation	**Meeting Date:** July 31, 2025
Semi-annual Public Meeting	**Location:** 50 Water Street 17th Floor Board Room

ATTENDEES

Members of the HHC Capital Corporation Board of Directors

Freda Wang, Chair
José A. Pagán, PhD
Dr. Mitchell Katz

Other members of the NYC Health and Hospitals Board of Directors

Sally Hernandez-Pinero
Jackie Rowe-Adams
Anita Kawatra
Karen St. Hilaire (representing Molly Wasow Park)
Tricia Taitt
Vanessa Rodrigues
Suzanne Miles-Gustave – join at 1:21

NYC Health + Hospitals Staff

Andrea Cohen, Senior Vice President and General Counsel and Secretary, HHC Capital Corporation
Linda DeHart, Vice President, Finance
Thomas Tran, Senior Director, Debt Finance
Claudia Chiuaru, Assistant Director, Debt Finance
Mahendranath Indar, AVP, Facilities Development Administration
Anniqua Brown, Senior Director, Facilities Development Administration
Colicia Hercules, Secretary to the Health and Hospitals Corporation, Chairman's Office

Ms. Freda Wang chaired the meeting of the HHC Capital Corporation Board of Directors (the "Board").

Call to Order:

The HHC Capital Corporation meeting was officially called to order at 1:11 p.m. by Ms. Wang. She noted for the record that Karen St. Hilaire is representing Molly Wasow Park in a voting capacity.

Adoption of Minutes:

Ms. Wang asked for a motion to adopt the minutes of the previous meeting that was held on February 27, 2025. The Board unanimously adopted the minutes.

Ms. Wang then turn the agenda over Ms. Linda DeHart to provide an update to the Board.

Ms. DeHart reminded the Board that the HHC Capital Corporation was created as part of the security structure for NYC Health + Hospitals' ("H+H") bonds. Ms. DeHart noted a new bond issuance process is underway and will seek Board approval later in the day.

HHC Outstanding Bond Portfolio (slide 1 of accompanying presentation):

Mr. Tran provided an overview of H+H's current outstanding tax-exempt bonds portfolio of approximately over $359 million, of which about $255 million is in fixed rate bonds and a little over $103 million is in variable rate bonds. The variable rate bonds are supported by letters of credit provided by TD Bank and JPMorgan Chase Bank. Series B and C are maturing in 2031 with the letter of credit supported by TD Bank expiring in 2027. Series D and E final maturities match with the letter of credit supported by JPMorgan Chase Bank expiring in 2026. The remarketing agents for these bonds are Morgan Stanley (Series BD) and TD Securities (Series CE). Mr. Tran noted interest rate performance for various data points in 2025.

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

Mr. Tran explained the weekly interest rate and spread to SIFMA for H+H's variable rate bonds performance since inception. He noted that SIFMA continued to be volatile and has been driven by market activities.

HHC Bonds – Outstanding Bonds Profile (slide 3):

Slide 3 of the presentation shows the current ratings of H+H's existing bonds, a summary table of the outstanding fixed and variable rate bonds, and the debt service schedule showing a drop of existing aggregate debt service in FY2031. Mr. Tran pointed out that H+H's outstanding debt level has significantly dropped and created capacity for the expected new bond issuance.

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

Mr. Tran reported the status of H+H's $100 million 2020 Series A construction fund. Mr. Tran reported that withdrawals through June 2025 from the 2020 bonds issuance totaled $91 million to reimburse H+H for project expenditures, with a remaining balance of $13 million.

2020 New Money Bonds – Project Activity Update (slides 5-7):

Mr. Tran described that the $100 million planned spending activity was allocated to various facilities and by equipment types. Mr. Tran also provided an update of total infrastructure project spending through June 2025 as well as an overview of the infrastructure project spending timeline. He noted that anticipated projects funds will be substantially spent down by December 2025 and twelve-month closeout period by June 2026.

Outstanding Equipment Loan (slide 8):

Mr. Tran explained that, separate from the bond program, the H+H Board has authorized short-term financing up to $120 million at any time. Mr. Tran

reported that as of June 2025, there are two series of short-term loans outstanding with JPMorgan Chase Bank totaling $33 million.

Discussion:

A question was asked about capital project prioritization for the upcoming financing. Ms. DeHart noted these projects are high priority and primarily critical end of life replacement. Another question related to the construction fund and equipment financing. Mr. Tran noted the construction fund was funded by the 2020 bonds and equipment financing is a separate borrowing program, not part of the bond program under the existing general resolution.

Adjournment:

There being no further business to bring before the Board, Ms. Wang adjourned the meeting at 1:27 p.m.

Mitchell H. Katz, MD
NYC HEALTH + HOSPITALS - PRESIDENT AND CHIEF EXECUTIVE OFFICER
REPORT TO THE BOARD OF DIRECTORS
September 25, 2025

NYC HEALTH + HOSPITALS FACILITIES PARTICIPATE IN BACK TO SCHOOL EVENTS, ENCOURAGE PARENTS TO SCHEDULE CHECK UPS FOR THEIR CHILDREN

New York City public schools officially started on Thursday, September 4, but NYC Health + Hospitals facilities had prepared all August for the start. Across the health care System, including Gotham Health, facilities partnered with MetroPlusHealth, community-based organizations, and elected officials to ensure that parents and their children were ready ahead of the school year. Facilities gave out backpacks, school supplies such as pens and pencils, and some even offered immunization clinics. NYC Health + Hospitals/Gotham Health, Gouverneur partnered with Congress Member Dan Goldman to offer school supplies and a vaccination clinic. NYC Health + Hospitals/Elmhurst held its back to school event on Friday, August 16, giving away supplies and educational materials.

NYC HEALTH + HOSPITALS EMPLOYEE AND FACILITY RECOGNITIONS

U.S. NEWS & WORLD REPORT "BEST HOSPITALS 2025-2026" LIST INCLUDES ALL OF NYC HEALTH + HOSPITALS' ACUTE CARE FACILITIES

NYC Health + Hospitals announced that its 11 hospitals have been named by U.S. News & World Report to its 2025-2026 'Best Hospitals' list. The ranking recognizes the hospitals for excellence in treating conditions including heart failure, heart attack, hip fracture, diabetes, kidney failure, diabetes, colon cancer surgery, pneumonia, stroke, and chronic obstructive pulmonary disease (COPD). The hospitals were selected out of nearly 5,000 hospitals across 15 specialties and 20 procedures and conditions. Hospitals awarded a "Best" designation excelled at factors such as clinical outcomes, level of nursing care, and patient experience. The U.S. News & World Report rankings build on NYC Health + Hospitals' commitment to providing high-quality, comprehensive health care to all New Yorkers.

ALL NYC HEALTH + HOSPITALS 11 HOSPITALS AGAIN RECOGNIZED BY THE AMERICAN HEART ASSOCIATION FOR QUALITY CARE

All 11 NYC Health + Hospital hospitals were once again recognized by the American Heart Association for their commitment to quality care in heart disease and stroke. In addition, for the first time, five of the health care System's hospitals received the American Heart Association's new Commitment

to Quality Award, given to only 158 hospitals nationwide. Heart disease and stroke are the No. 1 and No. 5 causes of death in the United States, respectively. Studies show patients can recover better when providers consistently follow treatment guidelines. The American Heart Association's Get with the Guidelines awards recognize hospitals nationwide that adhere to science-based practices and provide the highest quality care. NYC Health + Hospitals earned these recognitions by meeting specific quality achievement measures for the diagnosis and treatment of heart failure and stroke patients at a set level for a designated period. These measures include evaluation of the proper use of medications and aggressive risk-reduction therapies. Before discharge, patients also receive education on managing their heart failure and overall health, and receive other care transition interventions.

NYC HEALTH + HOSPITALS HONORS NURSING PROFESSIONALS ACROSS ITS FIVE SKILLED NURSING FACILITIES FOR THE DAISY AWARD & BEE AWARD CELEBRATION

NYC Health + Hospitals celebrated its 4th Annual Post-Acute Care Nursing Awards, honoring 10 nursing professionals who have a profound impact on the lives of patients and residents across its five long-term care facilities. With over 180 nominations across the post-acute care service line, five registered nurses were honored for the internationally recognized DAISY Award, and five ancillary nursing staff were honored for the in-house BEE (Being Exceptional Everyday) Award. The DAISY Award, sponsored by the DAISY Foundation, is the international leader in nurse recognition. This award recognizes nurses or nurse-led teams who are experts in person-centered care, demonstrate integrity and compassion, and work collaboratively with their peers to achieve the best health outcomes for patients and residents. The BEE Award was established to recognize exceptional caregivers in supportive nursing roles including Certified Nursing Assistants, Patient Care Technicians, Patient Care Associates, and Medical Surgical Technicians. These individuals play an integral role on resident care teams, providing care that includes feeding, bathing, grooming, and taking vital signs, such as blood pressure and temperature checks.

NYC HEALTH + HOSPITALS/CARTER RECEIVES TOP HONORS AS THE NATION'S FIRST AND ONLY LONG-TERM CARE FACILITY TO EARN PATHWAY TO EXCELLENCE WITH DISTINCTION DESIGNATION

NYC Health + Hospitals/Carter is the first and only long-term care facility in the nation, and one of two healthcare organizations in New York, to receive the Pathway to Excellence with Distinction designation by the American Nurses Credentialing Center (ANCC). This global designation recognizes the highest performing Pathway organizations around the world and is based on validation from the nursing workforce. In a survey of 350 nursing professionals at Carter, 96% of respondents confirmed that the organization promotes a culture of excellence in person-centered care and creates a positive practice environment.

CITY & STATE NEW YORK RECOGNIZES FOUR NYC HEALTH + HOSPITALS LEADERS ON ITS 2025 "MANHATTAN POWER 100" LIST

NYC Health + Hospitals Chief Nursing Officer Natalia Cineas, NYC Health + Hospitals/Metropolitan CEO Julian John, NYC Health + Hospitals/Harlem CEO Georges Leconte, and NYC Health + Hospitals/Bellevue CEO Dr. Eric Wei were recognized by City & State New York in its "Manhattan Power 100" list for 2025. From government appointees to business executives to advocates, the annual recognition list highlights leaders in Manhattan who affect the lives of New Yorkers. City & State is the premier media organization dedicated to covering New York's local and state politics and policy.

HEALTH CARE SYSTEM AND FACILITY ANNOUNCEMENTS

MAYOR ADAMS AND NYC HEALTH + HOSPITALS CELEBRATE OPENING OF 'BRIDGE TO HOME' FACILITY

Mayor Eric Adams and NYC Health + Hospitals CEO Dr. Mitchell Katz attended the opening of NYC Health + Hospitals' "Bridge to Home" facility, a new, innovative support model designed to help patients living with severe mental illness who are ready to be discharged from the hospital but do not have a place to go. Bridge to Home is funded as part of the Adams administration's $650 million plan to address homelessness and support New Yorkers experiencing serious mental illness. The Bridge to Home program aims to fill this critical gap between inpatient treatment and permanent housing placement, offering patients a stable, home-like environment with onsite clinical services and behavioral health care to ensure they can continue their recovery while transitioning to permanent housing. The Midtown West facility will provide single rooms to 46 guests when at full capacity, with dedicated on-site clinical, behavioral health, and administrative support. The first-of-its-kind model was first unveiled as part of Mayor Adams' 2025 State of the City address.

MAYOR ADAMS ANNOUNCES NEW PROPOSAL TO FURTHER SUPPORT NEW YORKERS STRUGGLING WITH SUBSTANCE USE DISORDER, ADDRESS PUBLIC DRUG USE

On Thursday, August 14, Mayor Eric Adams announced a $27 million investment focused on improving access to substance use disorder treatment through outreach and enhanced treatment strategies. The plan will add more teams on the ground dedicated to engaging people struggling with substance use, enhance back-end coordination of care across outreach teams, and launch new programs to keep people engaged in treatment once they start.

The Adams administration will launch a pilot program called 'Track to Treatment,' which utilizes contingency management, a treatment approach that provides existing patients with small rewards for positive behavior, including engagement in addiction care. This proven approach will effectively motivate patients with addiction challenges to continue with their treatment

plans after discharge from NYC Health + Hospitals emergency programs. Program participants will receive clinically supportive rewards which can be extended or deactivated based on their clinical need and for engagement in care. To date, the most effective large-scale contingency management implementation effort has been conducted through the U.S. Department of Veterans Affairs. Years after implementation, over 90 percent of the initial agencies continue to utilize contingency management.

Additionally, the plan will add staff across DOHMH, NYC Health + Hospitals, and the New York City Department of Social Services to oversee and focus specifically on coordinating care for patients with complex behavioral health needs that frequently cycle between systems with dedicated harm reduction staff to address those with substance use disorder. The expected investment will be $2 million.

NYC HEALTH + HOSPITALS/WOODHULL AND BROOKLYN BOROUGH PRESIDENT ANTONIO REYNOSO BREAK GROUND ON $20 MILLION LABOR AND BIRTHING SUITE RENOVATION

NYC Health + Hospitals/Woodhull and Brooklyn Borough President Antonio Reynoso broke ground on a $20 million renovation to the hospital's Labor and Birthing Suite, supported by $11 million from the Borough President. Expected to be complete in the fall of 2027, the renovated unit will offer patients a new family comfort space to support the mother's partner and family, and for the first time, the hospital will offer birthing center rooms with birthing tubs for hydrotherapy during labor. A renovated and reorganized recovery area, nurse station and medicine room will promote better collaboration across the Midwifery, Nursing, and Physician teams. The upgraded operating room suite will be larger to accommodate more equipment and a better workflow, and the space will include a new simulation lab for staff to practice scenarios they may encounter during delivery. The space will also include a renovated staff break room, locker rooms, staff bathroom and on-call rooms. Woodhull Hospital has a busy labor and delivery unit with nearly 1,000 births in 2024. Construction will take place in phases to ensure that patients can continue receiving care uninterrupted during the renovation.

AS PART OF HOUSING FOR HEALTH INITIATIVE, NYC HEALTH + HOSPITALS ANNOUNCES MAJOR STEP FORWARD WITH MORRISANIA RIVER COMMONS HOUSING DEVELOPMENT

As part of its Housing for Health initiative, NYC Health + Hospitals announced that its Board of Directors had approved the next step in advancing the proposed Morrisania River Commons project, which will bring 328 units of affordable and supportive housing and a new community clinic to the Bronx. The proposed apartment building would be located at 1225 Gerard Avenue in the Bronx, on the campus of NYC Health + Hospitals/Gotham Health, Morrisania. The project's footprint is currently the facility's parking lot and annex, and patient care at the Morrisania clinic would be uninterrupted during construction. The proposed project now requires a vote in the City Council and Mayoral approval in order to move forward with construction.

The Morrisania River Commons project is expected to create approximately 328 affordable units, including housing for patients of NYC Health + Hospitals experiencing homelessness and a unit for the building's superintendent. The building would include a mix of studios, 1-bedroom, 2-bedroom, and 3-bedroom apartments. Tenants would also have access to amenities including a fitness center, playroom, community room, 15th-floor community terrace, 24/7 security, and onsite offices for management and supportive services. In addition, the mixed-use project envisions 6,000 square feet for African Resource Center and Bronx Works Empowerment Center; 7,500 square feet of public green space; 43,000 square foot modern and expanded clinical space for NYC Health + Hospitals/Gotham Health Morrisania; and a 75-car parking facility. Once complete, the building's proximity to NYC Health + Hospitals/Gotham Health, Morrisania will give its residents easy access to health care.

NYC HEALTH + HOSPITALS RECEIVES $10.7 MILLION TO SUPPORT ABORTION ACCESS OVER THREE YEARS

NYC Health + Hospitals received $10.7 million from the New York State Abortion Access Program grant to support abortion care at its 11 hospitals over the next three years. The funds support hiring abortion care providers and navigators, purchasing new equipment and supplies, access to abortion doulas, and financial support for patients. In 2024, NYC Health + Hospitals provided over 6,000 abortions. NYC Health + Hospitals offers a full spectrum of medication and procedural abortion services at its hospital-based clinics. Patients wishing to make an in-person appointment can call 1-844-NYC-4NYC.

In addition, the health System offers telehealth abortion care through the health system's Virtual ExpressCare service. The service allows patients in New York seeking abortion care to speak to a New York State-licensed health care professional on demand by video or phone for an assessment, counseling and access to medication if eligible.

FOR THE TWELFTH CONSECUTIVE YEAR, NYC HEALTH + HOSPITALS' ACCOUNTABLE CARE ORGANIZATION EARNS SIGNIFICANT MEDICARE SHARED SAVINGS

NYC Health + Hospitals announced that its Medicare Shared Savings Program Accountable Care Organization (ACO) will earn $7.2 million from the Federal government for reducing avoidable costs and meeting high standards of quality care for patients. NYC Health + Hospitals is the only health system in New York State to achieve savings for twelve years in a row. The ACO saved Medicare $9.8 million for 2024, all while achieving impressive scores across a number of quality-of-care measures. The program achieves savings by supporting primary care providers and care coordination, which prevents unnecessary emergency department visits, avoidable hospitalizations, and other high-cost care for the more than 5,000 Medicare fee-for-service patients who are served through the program.

NYC HEALTH + HOSPITALS' LIFESTYLE MEDICINE PROGRAM HELD OVER 10,000 GROUP VISITS AND SERVED MORE THAN 1,300 PATIENTS IN THE PAST YEAR

NYC Health + Hospitals' Lifestyle Medicine Program has provided over 10,000 group visits and served more than 1,300 patients in the past year. Patients in the program participate in weekly group classes, where they learn skills for creating a nutritious plant-powered plate, reading nutrition labels, mindful eating, stress management, sleep health, and fitness fundamentals, and they have individual time to check-in with a nurse practitioner. The group facilitators encourage participation, and patients report that they learn from and develop a rapport with their classmates over the course of the program. Lifestyle Medicine Program patients are also offered weekly exercise classes led by a fitness instructor. Most of the classes are held through video visits, so patients can attend without traveling to the hospital or clinic, and they are offered either during the day or in the evening to accommodate patients' busy lives. The classes are offered in English and Spanish.

In addition, the Lifestyle Medicine Program has distributed over 5,000 boxes of free, fresh produce to its patients since the launch of the produce box program in February 2024. As part of the program, patients receive free produce boxes delivered to their home, with delicious and nutritious recipes adapted by the Lifestyle Medicine Program's dietitians. A recent produce box included tomatoes, broccoli, lettuce, potatoes, watermelon radishes, cremini mushrooms, and a mango. The majority of the produce is sourced from local or regional farms, and the boxes are packaged and delivered by Farm to People. In a new video, patient Delois Locus described how the produce boxes help her eat healthy.

NYC HEALTH + HOSPITALS/ELMHURST OPENS NEWLY RENOVATED NEUROLOGY CLINIC

NYC Health + Hospitals/Elmhurst officially opened of its newly renovated Neurology Clinic. Located in the hospital's Community Medical Center at 80-01 41st Avenue on the 2nd Floor (Rm. H2-19), the modernized space features a patient-friendly redesign that includes larger exam rooms and a more comfortable environment for both patients and caregivers. This expansion increased capacity for several specialty services that will allow more access in Elmhurst Hospital and the surrounding communities. The Neurology Clinic renovation is part of NYC Health + Hospitals/Elmhurst's overall strategic plan to enhance and improve specialty services and provide care in an environment that emphasizes both clinical excellence and patient comfort.

NYC HEALTH + HOSPITALS FACILITIES RANKED THE TOP PROVIDERS FOR NON-PROFIT HEALTH INSURER HEALTHFIRST

NYC Health + Hospitals' facilities were the top provider in 2024 by overall quality rankings issued by Healthfirst, one of New York's largest not-for-

profit health insurers with over 2 million members. In a network of over 80 hospitals, including the city's major for-profit health systems, 7 out of 10 of the Healthfirst's highest ranking Medicaid providers were NYC Health + Hospitals facilities, and 5 out of 10 of Healthfirst's highest ranking Medicare providers were NYC Health + Hospitals facilities. The two top performing facilities in Healthfirst's entire network for Medicare were NYC Health + Hospitals facilities: NYC Health + Hospitals/Woodhull and NYC Health + Hospitals/Gotham Health, Morrisania. Three of the health care System's sites made both lists: Woodhull Hospital, NYC Health + Hospitals/Metropolitan, and NYC Health + Hospitals/Gotham Health, Belvis. Key performance measures include screenings for breast cancer, colorectal cancer, and cervical cancer; medication adherence for statins, hypertension, and diabetes; well child visits; and patient satisfaction.

NYC HEALTH + HOSPITALS STREET HEALTH OUTREACH + WELLNESS PROGRAM ENHANCES POINT-OF-CARE MEDICAL SERVICES

The Street Health Outreach + Wellness (SHOW) mobile program has further enhanced its street-based primary care capacities with the addition of point-of-care lab testing, point-of-care ultrasound, and blood draw services onboard its five mobile health units. SHOW clinicians work across New York City to offer medical, social, and behavioral health services to New Yorkers historically disconnected from care and those experiencing homelessness. These new medical services will further improve SHOW teams' ability to evaluate and manage patient needs and reduce their barriers to critically needed care. Since the program launched in April 2021, SHOW teams have provided over 275,000 engagements with New Yorkers, forging relationships with thousands of patients and connecting them to specialty, harm reduction, social services, and primary care at the public hospital system's five Primary Care Safety Net clinics.

The program deploys a fleet of five mobile health units across New York City to meet unhoused and street homeless New Yorkers — individuals who are historically disconnected from the continuum of care — where they are, and build engagement and trust through care and services. Access is provided in real-time, with no appointments needed, no insurance requirements, and no cost to the patient. Patients are assessed for urgently needed care, including wound care and vaccinations, and offered physical and mental health screenings, harm reduction education, and social services. SHOW teams — which comprise a medical provider, social worker, addiction counselor, peer counselor, registered nurse, patient care associate, community health worker, and clerk — provide services from the SHOW unit and walk block-by-block to offer services to those living on the street, often in locations only accessible on foot like parks and subways.

NYC HEALTH + HOSPITALS/KINGS COUNTY RECEIVES REVERIFICATION AS A LEVEL 1 TRAUMA CENTER AND DESIGNATION AS CENTER OF EXCELLENCE IN LUNG CANCER SCREENING

NYC Health + Hospitals/Kings County has once again been verified as a Level 1 Trauma Center by the American College of Surgeons (ACS) following a comprehensive reverification site visit. This achievement reflects the hospital's ongoing commitment to providing the highest standard of care for trauma patients across Brooklyn and beyond.
Additionally, the hospital was been named a Center of Excellence in Lung Cancer Screening by GO2 for Lung Cancer (GO2) for its ongoing commitment to providing the Brooklyn community with patient-centered, evidence-based lung cancer screening.

NYC HEALTH + HOSPITALS/MCKINNEY COMPLETES ROOFTOP SOLAR INSTALLATION

NYC Health + Hospitals and the Department of Citywide Administrative Services (DCAS) announced the completion of a major rooftop solar panel installation at NYC Health + Hospitals/McKinney, the public health care System's post-acute long-term care facility in Brooklyn. The installation will supplement McKinney's daily energy use with cleaner, greener, renewable power. The new solar system comprises 234 540-watt solar panel modules that cover more than 6,400 square feet of rooftop space — the public health care System's largest solar installation to date. The photovoltaic (PV) system will generate over 150,000 kWh annually, offsetting approximately 11.5% of McKinney's annual conventional grid electric use.

FOR HISPANIC HERITAGE MONTH, QUEENS PUBLIC LIBRARY AND NYC HEALTH + HOSPITALS/ELMHURST HOST SPANISH-LANGUAGE HEALTH AND WELLNESS SERIES

In honor of Hispanic Heritage Month, NYC Health + Hospitals/Elmhurst and the Queens Public Library partnered to host a series of Spanish-language health and wellness educational events at the Elmhurst and Corona Library branches. The free series includes discussions led by NYC Health + Hospitals/Elmhurst providers on a range of topics, including healthy eating, nutrition, chronic disease prevention, and mental health awareness. The collaboration is part of Queens Public Library's Community Health Service program, which provides free health education classes, workshops, and activities to promote health awareness in the community.

NYC HEALTH + HOSPITALS/JACOBI | NORTH CENTRAL BRONX STAFF CELEBRATE PATIENT ROHMEARO MCFARLANE AND HIS LONG ROAD TO RECOVERY

Nearly four years since he first entered the doors of NYC Health + Hospitals/North Central Bronx, patient Rohmearo McFarlane has come far both medically and personally after slipping in his bathroom while recovering from a traumatic injury. McFarlane was initially injured in November 2020, back in his home country of Jamaica. He was en-route to paint a mural in another part of town in Kingston, Jamaica when he was caught in the crossfire of a gunfight. He sustained gunshot wounds to his face, abdomen, arms, and back, with shrapnel fragments hitting his eye, wrist, elbow, and other areas. He spent 21 days in the hospital receiving emergency surgery and inpatient care. As he was right-side dominant, the injuries, in addition to his impaired vision through his eye injury, left him unable to use his right arm and, thus, unable to resume his career as a painter.

After several surgeries, McFarlane regained his ability to paint with his right hand again and resumed all prior activities, including lifting weights and exercising. Amazingly and unexpectedly, during his recovery, he became proficient in painting with his left hand as well.

NYC HEALTH + HOSPITALS/GOTHAM HEALTH,
EAST NEW YORK CELEBRATES 50TH ANNIVERSARY

NYC Health + Hospitals/Gotham Health, East New York last week celebrated its 50th anniversary, marking five decades of offering high-quality and affordable care to the East New York Community. The milestone was commemorated with a community celebration at East New York located at 2094 Pitkin Avenue in Brooklyn. Local leaders, residents, patients, and families came together to reflect on the past, celebrate the present, and look toward the future of healthcare in East New York.

NYC HEALTH + HOSPITALS/BELLEVUE HOSTS NURSING EXPERIENCE VOLUNTEER PROGRAM FOR STUDENTS INTERESTED IN HEALTH CARE

This summer, ten students from around New York City participated in a new program at NYC Health + Hospitals/Bellevue. The Nursing Experience Volunteer Program placed college students who are interested in health care as part of clinical care teams on inpatient units. Most of the volunteers were recruited through Ladders for Leaders at Commonpoint Queens, a social services organization that offers a range of youth workforce programs and other services. At Bellevue Hospital, the program is administered by the Volunteer Department in collaboration with the Nursing Department. The volunteers' responsibilities include visiting patients to offer comfort and emotional support. They greet patients and families by conducting structured daily rounds throughout the unit, checking in with patients to see if they need anything. The volunteers conduct daily feedback surveys, hearing directly from patients and relaying the information to assigned unit nurses and nursing leadership.

NYC HEALTH + HOSPITALS/QUEENS CELEBRATES
SUCCESSFUL 2025 LEAD SUMMER PROGRAM FOR YOUTH

NYC Health + Hospitals/Queens proudly celebrated the successful conclusion of its 2025 LEAD Summer Program with a vibrant graduation ceremony attended by nearly 150 people, including young participants, their families, hospital staff, and guests. The event highlighted the accomplishments of 48 young campers, aged 6 to 18, who participated in this year's program, designed to provide a genuine camp experience for children facing social and emotional challenges. The LEAD program — Leadership, Empowerment, Alliance, and Discovery — once again proved to be a valuable resource for the community, thanks $50,000 in funding from Assemblywoman Alicia Hyndman. This support allowed the program to cover the costs of equipment, educational materials, meals, activities, and recreational field trips, ensuring access for families experiencing financial hardship.

NYC HEALTH + HOSPITALS/ELMHURST'S YOUTH SUICIDE PREVENTION PROGRAM HOSTS BLOCK PARTY FOR SUICIDE PREVENTION MONTH

NYC Health + Hospitals/Elmhurst recently recognized Suicide Prevention Month with its 3rd Annual Elmhurst Suicide Prevention in Youth Program Block Party, drawing hundreds of community members and families, and youth advocates to the hospital's 41st Avenue's entrance for a day of contemplation, hope, and action. The event engaged the community through a variety of fun wellness activities, arts and crafts, entertainment, mental health resources, and tabling by local non-profits and social service organizations. Hospital leadership and local elected officials also made remarks and urged young people and other people in attendance to pay attention to issues of mental health and be committed to practicing self-care. The event concluded with a Suicide Prevention Walk around the hospital grounds to honor lives lost and reaffirm the community's commitment to suicide prevention.

ROOSEVELT ISLAND OPERATING CORPORATION EXPANDS RUSH HOUR RED BUS SERVICE TO NYC HEALTH + HOSPITALS/COLER

The Roosevelt Island Operating Corporation (RIOC) and NYC Health + Hospitals/Coler announced a new pilot program that will extend free Red Bus service on Roosevelt Island directly to the front entrance of the skilled nursing & rehabilitation center located at 900 Main Street, during morning and afternoon rush hours, beginning Monday, August 18. The initiative aims to improve public transportation access for Coler residents, staff, and visitors. As part of the pilot, Coler will serve as the northernmost stop on the island from 6:00 a.m. to 10:00 a.m. and 3:00 p.m. to 8:00 p.m. on weekdays.

NYC HEALTH + HOSPITALS HONORS SEVEN LONG-TERM CARE RESIDENTS FOR NATIONAL CENTENARIAN DAY CELEBRATION

This past Monday, in celebration of National Centenarian Day on September 22, NYC Health + Hospitals honored seven remarkable residents who have reached the milestone of living 100 years or older. Six incredible centenarians were recognized at Gouverneur: Mei Dor Chew (100), Alfred Cruz (101), Sun L. Lum (101), Sooi Chee (103), Yung Lin Chou (103), and Kam Po Ma (103). NYC Health + Hospitals/Coler also celebrated their resident centenarian, Carmen Augustin (111), the oldest resident in the health care systems' long-term care. These individuals are testament to a lifetime of strength, resilience, and experiences spanning over the last 100 years.

NYC HEALTH + HOSPITALS/ELMHURST HOSTS "SHOW & ROLL" CHILDREN'S WELLNESS POP-UP WITH FOCUS ON BIKE SAFETY

NYC Health + Hospitals/Elmhurst recently kicked off the third season of "Show & Roll," a community health initiative created and led by the hospital's pediatric residents as part of their Advocacy rotation. The program, which is funded by a grant from the Committee of Interns and Residents/SEIU, serves as a unique way for young physicians to directly engage with local children and families regarding important health topics outside of traditional hospital and clinic settings. This year's kick-off event, which was co- sponsored by

NYC Council Member Shekar Krishnan, was held at Frank D. O'Connor Playground and focused on bike safety. Children attending also received a free bike helmet and an opportunity to win a free bicycle via a raffle.

The "Show and Roll" program is designed to strengthen connections between pediatric residents and children in the Elmhurst community, using engaging activities and topics, such as bike safety, swimming safety, and healthy eating habits, to teach the importance of preventive care. It also allows the pediatric residents to lead by example by role modeling the same healthy habits that they recommend to their patients.

NYC CARE UPDATE

NYC HEALTH + HOSPITALS' NYC CARE PROGRAM LAUNCHES CITY-WIDE PUBLIC AWARENESS CAMPAIGN FOCUSED ON HEALTH CARE ACCESS

Yesterday, NYC Care announced the launch of a citywide public awareness marketing campaign to encourage NYC Care-eligible New Yorkers to enroll in the program and encourage existing members to renew their membership. The campaign features vibrant artwork and video content matched with clear messaging asserting that all New Yorkers, regardless of their immigration status or ability to pay, have a right to health care through the NYC Care program. The campaign highlights the diversity of NYC Care's members, new benefits including low- and no-cost durable medical equipment, and the level of access to high-quality primary, specialty, and preventive care one can attain by using the NYC Care membership card. Information is available in Spanish, Simplified Chinese, Traditional Chinese, Russian, Bengali, Haitian Creole, Korean, Arabic, Urdu, French, and Polish. Ad placements will be citywide across the five boroughs, including in print and digital newspapers, out-of-home (transit, billboards, posters in local businesses), TV, radio, and social media. The launch of the campaign continues NYC Care's commitment to ensuring all New Yorkers understand the range of health care options they are entitled to.

ARTS IN MEDICINE UPDATE

NYC HEALTH + HOSPITALS/BELLEVUE UNVEILS NEW COMMUNITY MURAL

In August, NYC Health + Hospitals unveiled a new mural as part of the Community Mural Project run by the health System's Arts in Medicine department. The mural, Light and Compassion at NYC Health + Hospitals/Bellevue, was developed by artist Josh Sarantitis through a series of focus groups with community members, staff and patients and brought to life at a workshop where the community created cyanotypes together. Light and Compassion is one of 3 new murals being created this year, for a total of 45 murals created at NYC Health + Hospitals since 2019. The first wave of the Community Mural Project is featured in a book, Healing Walls: New York City Health + Hospitals Community Mural Project 2019-2021. This and other murals at NYC Health + Hospitals can be viewed on Bloomberg Connects. The Community

Mural Project is made possible through the support of the Laurie M. Tisch Illumination Fund.

METROPLUSHEALTH UPDATE

METROPLUSHEALTH RANKED #1 IN HIV SPECIAL NEEDS PLAN QUALITY INCENTIVE AWARDS FOR THREE YEARS RUNNING

MetroPlusHealth has been ranked #1 in the 2023 HIV Special Needs Plan (SNP) Quality Incentive Awards by the New York State Department of Health — marking the third consecutive year the health plan has earned this top distinction. MetroPlusHealth outperformed all other HIV SNP plans statewide. This recognition reflects a sustained commitment to delivering high-quality, person-centered care to New Yorkers living with HIV.

The award evaluates performance across three domains: clinical quality, member satisfaction, and regulatory compliance.

Launched in 2001, MetroPlusHealth's HIV SNP program now serves 4,856 members across New York City. The program is designed to deliver comprehensive, person-centered care to individuals living with HIV, with a strong emphasis on supporting the health and well-being of our most vulnerable communities.

The model of care is rooted in interdisciplinary collaboration. Dedicated care management teams work closely with primary care providers to ensure integrated, holistic support. The health plan partners extensively with NYC Health + Hospitals and select external facilities through care management agreements to coordinate services and close gaps.

Key aspects include:

- Individualized coaching for members struggling with adherence
- Community outreach, including home and hospital visits
- Personalized text reminders to support medication management
- Behavioral health integration for co-occurring conditions
- Data-driven interventions using hospital, lab, and claims data

MetroPlusHealth's top ranking was driven by strong performance in key HIV care benchmarks and the holistic care of people living with HIV, including:

- Viral load suppression
- Influenza immunization
- Colorectal cancer screening
- Medication adherence for Schizophrenia

This three-year streak underscores MetroPlusHealth's leadership in advancing health equity and improving outcomes for people living with HIV. It remains

committed to supporting NYC Health + Hospitals in closing care gaps and driving quality improvement across shared populations.

CORRECTIONAL HEALTH SERVICES (CHS) UPDATE

On Friday, August 22, Board Members Freda Wang, Sally Hernandez-Pinero, Vanessa Rodriguez, and Dr. H Jean Wright II joined Dr. Yang on Rikers Island to visit some of the clinical and therapeutic spaces in the jails. Board members visited the men's new admissions facility, including the intake clinic, the follow-up clinic, and dormitory and single-cell mental health housing units. They also visited the male infirmary, and the women's main clinic, infirmary, and nursery. The group stopped at the CHS Reentry Trailer as they were leaving Rikers and then traveled to NYC Health + Hospitals/Bellevue, where they toured the Outposted Therapeutic Housing Unit on the second floor of the facility. Bellevue Hospital is the home of the first of three Outposted units that will provide a more therapeutic environment with better access to specialty care for CHS patients who have serious health conditions.

EXTERNAL AFFAIRS UPDATE

State
The NYS Department of Health's (DOH) submitted a request to the Federal government to terminate its approved federal Section 1332 Waiver related to the Essential Plan and to reactivate the Basic Health Plan Section 1331 Waiver by July 1, 2026. This request will avert the loss of health care coverage for approximately 1.3 million New Yorkers who are currently enrolled in the Essential Plan. Their coverage is otherwise at risk as a result of harmful cuts to Affordable Care Act Premium Tax Credit Eligibility, and in turn, the funding of New York's Essential Plan. We appreciate the Governor's actions and support additional steps to help those who may still lose their coverage due to relevant changes.

The Governor issued a 30-day Executive Order 52 related to access to vaccinations in order to support clinicians as they continue to provide safe vaccines to New Yorkers. We thank her for these actions.

On the legislative front, of the 854 bills that passed both houses of the NYS Legislature, 413 have been acted upon by the Governor. The Governor has not vetoed any bills and has until the end of the calendar year to consider remaining bills. In collaboration with our subject matter experts, External Affairs has submitted various memos to the Governor related to bills impacting the system. Most health care bills External Affairs is tracking have not yet been delivered to the Governor.

Federal
Negotiations are ongoing in Congress to agree on FY26 Appropriations, prior to the expiration of federal funding on September 30. Absent Congressional

action, Medicaid DSH cuts are also slated to go into effect on October 1. We continue to advocate against this, along with partners across the country.

We are continuing to advocate to our Congressional delegation in support of the System's priorities. Advocacy is also ongoing in support of delays of the changes to Premium Tax Credit / Essential Plan eligibility and the sundown of the MCO tax as enacted in the "One Big Beautiful Bill" this summer.

Community Affairs
On Wednesday, September 4th, the Central Council of Auxiliaries held its quarterly meeting, discussing updates, upcoming events, and questions regarding Auxiliary duties and functions. The Community Affairs team continues to manage relationships with the various auxiliaries to ensure positive outcomes with their respective facilities.

The Council of CABs met on September 9th for their first meeting of the new term. They welcomed seven new CAB Chairs to the Council and received a presentation from MetroPlusHealth on health insurance in NYC. They also elected a new Secretary for the Council of CABs. The Community Relations Committee of the Board of Directors also met on September 9th. 4 CABs, Coler, Jacobi, McKinney, and North Central Bronx shared presentations about their facilities' achievements and patient concerns.

NEWS FROM AROUND THE SYSTEM

•**Bronx Voice:** Remembering September 11 at Jacobi Hospital
•**NY1:** Metropolitan Hospital marks 150 years
•**Everyday Health:** How to Get Better Sleep When You Have Fibromyalgia
•**El Diario:** Why did the nation's largest plan against youth suicide emerge in Queens?
•**Becker's Hospital Review:** New York system saves nearly $250M from RN recruitment, retention
•**Brooklyn News12:** NYC Health + Hospitals and Mayor Adams Announce Opening of 'Bridge to Home' Facility for patients with severe mental illness
•**Univision:** NYC Health + Hospitals/Bellevue physician Dr. Veronica Ades talks about Gynecological Cancer
•**Bronx Times:** NYC Health + Hospitals / Jacobi | North Central Bronx Staff Celebrate Patient Rohmearo McFarlane's Long Road To Recovery
•**Primera Linea:** NYC Health + Hospitals/Bellevue Hosts Nursing Experience Volunteer Program for Students
•**Primera Linea:** NYC Health + Hospitals/Kings County Receives Center of Excellence Designation in Lung Cancer Screening
•**Bronx News12:** NYC Health + Hospitals/Jacobi honors lives lost on 9/11
•**Everyday Health:** Common Nasal Spray May Help Prevent COVID, Study
•**Bronx Times:** NYC Health + Hospitals hosts blood drive in honor of late chief nursing officer
•**Amsterdam News:** What is NYC's Housing for Health Initiative and whom does it serve? New approaches to homelessness gain ground

•**CBS NY:** Painter who survived shooting honors trauma surgeons who gave him a second chance
•**Primera Linea:** New York City Updates Food Standards at All Its Agencies
•**Neoyorkinos.com:** Lincoln Hospital in the Bronx Holds Back-to-School Fair; Hundreds of children attend
•**Caribbean Life:** Edwards, Joseph 'thrilled,' 'honored' to serve as 2025 Caribbean Carnival Parade grand marshals
•**Becker's Hospital Review:** Maternal care crisis gives way to new health system executive roles
•**Becker's Hospital Review:** Podcast: Dr. Dan Schatz, Medical Director of Addiction Services at NYC Health + Hospitals
•**Silive:** 'An answer to our prayers': Staten Island addiction experts back mayor's involuntary drug treatment plan
•**Brooklyn Paper:** NYC Health + Hospitals/Woodhull birthing suite renovation begins
•**World News:** NYC Health + Hospitals/Kings County Awarded Designation as Center of Excellence in Lung Cancer Screening (New York City Health and Hospitals Corporation)
•**Queen's Chronicle:** Elmhurst Hospital fights youth suicide
•**Primera Linea:** Completion of NYC Health + Hospitals/McKinney rooftop solar installation celebrated

October 2025

RESOLUTION - 06

Authorizing the Executive Director of MetroPlus Health Plan, Inc. ("MetroPlus or "the Plan") **to execute contract(s) with HealthPlan Services Inc., ("HPS or "Wipro") a Business Process as a Service (BPaaS) solution, for the Medicare and Exchange (QHP) lines of business**, for a total not to exceed amount of $30,000,000, including a 20% contingency, for a 5-year term.

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

WHEREAS, MetroPlus requires a vendor to provide outsourced operational and technical services for Medicare and Exchange (QHP) lines of business; and

WHEREAS, due to the specific requirements only a limited pool of vendors were available to provide these services; and

WHEREAS, a Negotiated Acquisition was issued March 7, 2025 in compliance with MetroPlus' procurement policies and procedures; and

WHEREAS, Wipro was the vendor selected to provide these services.

WHEREAS, on September 25th, 2025, the MetroPlus Finance Committee considered and approved the submission of the resolution for approval by the MetroPlusHealth Board of Directors, for the proposed contract(s) between MetroPlus and Wipro.

WHEREAS, on September 26th, 2025, the MetroPlus Board of Directors approved the resolution, for the proposed contract(s) between MetroPlus and Wipro.

NOW THEREFORE, be it

RESOLVED, that the Executive Director of MetroPlus Health Plan, Inc. ("MetroPlus or "the Plan") is authorized to execute contract(s) with HealthPlan Services Inc., ("HPS or "Wipro") a Business Process as a Service (BPaaS) solution, for the Medicare and Exchange (QHP) lines of business, for a total not to exceed amount of $30,000,000, including a 20% contingency, for a 5-year term.

NYC HEALTH+ HOSPITALS

October 2025

EXECUTIVE SUMMARY

OVERVIEW: MetroPlus seeks a vendor to provide a Business Process as a Service (BPaaS) solution for the Medicare and Exchange (QHP) lines of business. Operational and technical services will include, but are not limited to, enrollment and eligibility, claims processing, premium billing / reconciliation, benefit administration and configuration, coordination of benefits (COB), regulatory and compliance (including NYS, CMS and internal audits), technology, integration of vendor partner solutions, hosting and software.

PROCUREMENT: MetroPlus issued a Negotiated Acquisition to a limited pool of vendors on March 7, 2025. 3 proposals were received, all 3 were deemed responsive and they were evaluated, and scored by an Evaluation Committee based on quality of proposed approach and adherence to the scope of work, relevance and quality of experience, compliance with technical and regulatory requirements, cost and MWBE utilization plan or MWBE status.

Wipro was selected on these criteria.

TERM: The contracting terms will include an initial implementation term (Year 1) followed by a 4-year operational term (Years 2-5).

MWBE: 30% MWBE utilization plan has been submitted.

MetroPlusHealth

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: HealthPlan Services Inc.

Date: Tuesday, September 30, 2025

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

Vendor Responsibility	**EEO**	**MWBE**
Pending	Pending	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.

MetroPlus Health - Business Process as a Service (BPaaS) – Medicare and Exchange (QHP) Application to Enter into Contract with HealthPlan Services Inc., ("HPS or "Wipro")

Board of Directors Meeting

October 30th, 2025

For Board of Directors Consideration

- Authorizing the Executive Director of MetroPlus Health Plan, Inc. (“MetroPlus or “the Plan”) to execute contract(s) with HealthPlan Services Inc., (“HPS or “Wipro”) a Business Process as a Service (BPaaS) solution, for the Medicare and Exchange (QHP) lines of business, for a total not to exceed amount of $30,000,000, including a 20% contingency, for a 5-year term.

Background

- MetroPlus is seeking a vendor to provide a Business Process as a Service (BPaaS) solution for our Medicare and Exchange (QHP) line of business. Operational and technical services will include, but are not limited to, the following:
  - Enrollment and Eligibility
  - Claims Processing
  - Premium Billing / Payment Reconciliation
  - Benefit Administration and Configuration
  - Coordination of Benefits (COB)
  - Regulatory and Compliance (including CMS and internal audits)
  - Technology, EDI Connectivity, integration of vendor partner solutions, hosting and software
- MetroPlus has outsourced BPO services since 2008, beginning with the Medicare line of business and later adding the Exchange (QHP) line of business.
- MetroPlus requires a new vendor because the current vendor is no longer able to deliver the services or meet the requirements, as we migrate to a new core operating system. The current BPO contract expires on 12/31/2026.
- Due to the specific nature of the requirements, only a limited pool of vendors were available to provide these services. MetroPlus procured this contract through a Negotiated Acquisition.
- MetroPlus is seeking authority to execute a 5-year agreement, with Wipro in the amount of $30,000,000, including a 20% contingency, for BPaaS services.
- The MetroPlusHealth Board of Directors approved this resolution on Friday, September 26th, 2025.

Scope of Services

- Wipro will provide a service solution that will allow MetroPlus to outsource key operational and technological processes for our Medicare and Exchange (QHP) lines of business.
- As of mid October, MetroPlus has 13,319 Medicare members and 10,418 QHP members.
- MetroPlus' annual claims processing volumes for these lines of business are:
  - Medicare - 379,431 claims
  - QHP - 105,180
- The key services that WIPRO will provide the services outlined in the previous slide.
- Wipro will integrate with MetroPlus' HealthEdge platform, which will be the new core operating system.
- The contracting terms will include an initial implementation term (Year 1) followed by a 4-year operational term (Years 2-5).
- Transitioning to a new vendor will require a one-year implementation before the transition. To avoid any disruption in services, Wipro will need to begin implementation before the existing vendor ends. Therefore, MetroPlus does not intend to terminate the current vendor early. They will continue providing their services thru December 2026.

Negotiated Acquisition Criteria

Minimum Criteria

- MWBE Utilization Plan, Waiver, or MWBE Certification.
- Experience implementing Medicare (MA, Duals, IB Duals) products using the Health Edge platform (HRP and Guiding Care).
- Experience offering BPaaS products for Medicare LOBs (> 100k MA lives and > 3 existing MA clients).
- Experience supporting highly successful and highly rated MA plans (4+ STARS in operational domains)
- U.S. based. Must operate within the United States, meet all CMS HIPAA privacy and security requirements and keep all data onshore.

Additional Preferences

- Experience offering BPaaS services for Exchange (QHP) line of business.
- Experience with the NYS Marketplace.
- Experience implementing and operating managed care products in NY.

Evaluation Criteria

- Quality of proposed approach and adherence to SOW- 15%
- Relevance of quality of experience- 15%
- Compliance with technical and regulatory requirements – 20%
- Cost - 15%
- MWBE 10%

Overview of Procurement

- **3/7/2025** | Negotiated Acquisition sent to 6 vendors.
- **4/11/2025** | Proposals due. 3 proposals received. 3 vendors met the minimum qualifications to proceed.
- **5/1/2025-5/8/2025** | Reference checks.
- **5/13/2025** | Final scoring concluded. Wipro, was selected by the Evaluation Committee.

Vendor Diversity

- WIPRO has submitted a 30% MWBE Utilization Plan. They will be utilizing IT Resource Solution.Net Inc. a NYS/ NYC MWBE company for implementation and configuration staffing.

MWBE Vendor	Subcontracted Scope of Work	Certification	Goal %
IT Resource Solutions.Net Inc.	Staffing for implementation and configuration services.	NYS WBE NYC WBE	30%

NYC HEALTH+ HOSPITALS

Board of Directors Approval Request

- Authorizing the Executive Director of MetroPlus Health Plan, Inc. ("MetroPlus or "the Plan") to execute contract(s) with HealthPlan Services Inc., ("HPS or "Wipro") a Business Process as a Service (BPaaS) solution, for the Medicare and Exchange (QHP) lines of business, for a total not to exceed amount of $30,000,000, including a 20% contingency, for a 5-year term.

NYC HEALTH+ HOSPITALS

October 2025

RESOLUTION – 07

Authorizing the New York City Health and Hospitals Corporation (the "**System**") to execute contracts with **Third Party Reimbursement Solutions, LLC, Forvis Mazars, LLP, Baker Tilly Advisory Group, LP (formerly Moss Adams), and Manatt Health Strategies, LLC for Medicare and Medicaid Reimbursement Consulting services** at a not to exceed amount of $10,800,000, which includes a 20% contingency, for a contract term of three years and two one-year renewal options exercisable at the discretion of the System.

WHEREAS, the System utilizes reimbursement consultants to assist in optimizing available reimbursement rates and settlements; and provide advice and assistance regarding supplemental funding streams available to the System; and

WHEREAS, the System has identified a need for Medicaid and Medicare Reimbursement Consulting Services to ensure compliance with complex and often changing regulations regarding Medicare and Medicaid reimbursement and reporting. Timely and accurate reporting submissions are required to avoid penalties and secure proper reimbursement for the System; and

WHEREAS, the System conducted an open and competitive RFP process under the supervision, and with the assistance, of Supply Chain Services to select vendors to provide Medicare and Medicaid Reimbursement Consulting services, in which 15 firms attended a pre-proposal conference; and

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

WHEREAS, the Vice President of Finance will be responsible for the management of the proposed contract(s).

NOW THEREFORE, be it

RESOLVED, that New York City Health and Hospitals Corporation be and hereby is authorized to execute contracts with Third Party Reimbursement Solutions, LLC, Forvis Mazars, LLP, Baker Tilly Advisory Group, LP (formerly Moss Adams), and Manatt Health Strategies, LLC for Medicare and Medicaid Reimbursement Consulting services at a not to exceed amount of $10,800,000, which includes a 20% contingency, for a contract term of three years and two one-year renewal options exercisable at the discretion of the System.

NYC HEALTH+ HOSPITALS

October 2025

EXECUTIVE SUMMARY
MEDICARE AND MEDICAID REIMBURSEMENT CONSULTING SERVICES AGREEMENTS WITH
THIRD PARTY REIMBURSEMENT SOLUTIONS, LLC, FORVIS MAZARS, LLP, BAKER TILLY ADVISORY GROUP, LP (FORMERLY MOSS ADAMS), AND MANATT HEALTH STRATEGIES, LLC.

OVERVIEW: The purpose of this agreement is to provide Medicare and Medicaid Reimbursement Consulting services to assist in optimizing available reimbursement rates and settlements; and provide advice and assistance regarding supplemental funding streams available to the System.

PROCUREMENT: The System conducted an open and competitive Request for Proposals ("RFP") to establish a pool of vendors to provide Medicare and Medicaid Reimbursement Consulting services to the System on an as-needed basis. The RFP was sent directly to 15 prospective vendors, and 15 prospective vendors attended a pre-proposal conference. A total of eight firms submitted proposals and, of the proposals submitted, the Evaluation Committee selected the top four rated proposers to provide Medicare and Medicaid Reimbursement Consulting services to the System.

COSTS: The total not-to-exceed cost for the proposed contract over its full, potential five-year term is not to exceed $10,800,000, which includes a 20% contingency.

MWBE: The Vendor Diversity team recommended a 10% diverse vendor component percentage for this solicitation and was accepted by Forvis Mazars LLP. Manatt Health Strategies, LLC, Third Party Reimbursement Solutions and Baker Tilly Advisory Group, LP were granted waivers based on self-performance of the scope of work.

AWARDEES:

1. Third Party Reimbursement Solutions
2. Forvis Mazars, LLP
3. Baker Tilly Advisory Group, LP
4. Manatt Health Strategies, LLC

NYC HEALTH+ HOSPITALS

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

From: Kaylan Kerr
Associate Council
Office of Legal Affairs

Re: Vendor Responsibility, EEO and MWBE status for Board review of contracts for Medicare and Medicaid Reimbursement Consulting

Date: September 24, 2025

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

Vendor Legal Name	**Vendor Responsibility**	**EEO**	**MWBE**
Third Party Reimbursement Solutions, LLC	Approved	Approved	Waiver
Manatt Health Strategies, LLC	Pending	Pending	Waiver
Forvis Mazars, LLP	Approved	Pending	10%
Baker Tilly Advisory Group, LP	Pending	Approved	Waiver

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

Kerr, Kaylan Digitally signed by Kerr, Kaylan
Date: 2025.09.26 11:31:21 -04'00'

Medicare and Medicaid Reimbursement Consulting Services Application to Enter into Contract with Third Party Reimbursement Solutions, LLC, Forvis Mazars, LLP, Baker Tilly Advisory Group, LP (formerly Moss Adams), and Manatt Health Strategies, LLC

Board of Directors Meeting
October 30, 2025

Linda DeHart, Vice President Finance
Corporate Reimbursement Services

For Board of Directors Consideration

- Authorizing the New York City Health and Hospitals Corporation (the "System") **to execute contracts with Third Party Reimbursement Solutions, LLC, Forvis Mazars, LLP, Baker Tilly Advisory Group, LP (formerly Moss Adams), and Manatt Health Strategies, LLC for Medicare and Medicaid Reimbursement Consulting services** at a not to exceed amount of $10,800,000, which includes a 20% contingency, for a contract term of three years and two one-year renewal options exercisable at the discretion of the System.

Background & Current State

- Medicaid and Medicare Reimbursement Consulting Services are essential services used by healthcare systems to ensure compliance with complex and often changing regulations regarding Medicare and Medicaid reimbursement and reporting. Timely and accurate reporting submissions are required to avoid penalties and secure proper reimbursement for the System.

- Consultants in this space assist NYC Health + Hospitals in optimizing available reimbursement rates and settlements; and provide advice and assistance regarding supplemental funding streams available to the System.

Background & Current State

- The RFP consolidated several previously separately solicited reimbursement scopes of work incorporating services directly contracted by the Reimbursement Department, as well as additional services related to Supplemental Medicaid and Consolidated Fiscal Report (CFR) submissions that were obtained through other departments.
- Consulting services procured through this RFP include the following scopes and sub-scopes of work:
  - Medicare Reimbursement and Reporting Consulting
    - General Medicare reimbursement analysis and cost reporting support
    - Medicare appeal support
    - Medicare DSH and Uncompensated Care reporting and policy
  - Medicaid Reimbursement and State Reporting Consulting
    - General NYS Medicaid reimbursement, rate analysis and appeals
    - Long Term Care reimbursement issues
    - Supplemental Medicaid funding and innovative payment/policy models
    - Consolidated Fiscal Reporting system submissions

Current State

- The Reimbursement Department previously entered into two agreements for Medicare related consulting services:
  - Third Party Reimbursement, LLC for Medicare general reimbursement and cost reporting. Initially awarded via RFP for a term of 11/11/2019 to 11/10/2024 and an NTE of $2,000,000. Subsequent amendments expanded the scope to include additional resources, and extended the contract expiration date to December 31, 2025 with a total contract value of $4,074,917.
  - Moss Adams (now Baker Tilly) for Medicare DSH and Uncompensated Care consulting services. Initially awarded via RFP for a term of 11/18/2019 to 11/18/2024 and an NTE of $2,200,000. Subsequent amendments extended the contract expiration date to December 31, 2025 with a total value of $2,712,500.
  - The combined final NTE for these two agreements is $6,787,417 and spend to date is $6,056,726.
- Additionally, since FY21, $2,791,590 has been spent on the Medicaid supplemental payment and CFR consulting services scopes of work, which were obtained through other departments' vendor agreements with Manatt Health Strategies, LLC and Forvis Mazars LLP.

RFP Criteria

- Minimum Criteria
  - At least five years in business with experience working with hospitals on healthcare financing and reimbursement-related issues and policies
  - More than 10 employees
  - Annual revenue of $2 million in each of the last three years

- Evaluation Committee
  - Vice President, Finance
  - Senior Director, Reimbursement
  - Director, Reimbursement
  - Director, Reimbursement
  - Ast. Director, Reimbursement
  - AVP, Revenue Cycle Services
  - CFO, Post Acute Care
  - CFO, Woodhull

- Substantive Criteria
  - 25% - Vendor Experience
  - 25% - Technical Qualifications
  - 25% - Ability and Feasibility of meeting the SOW
  - 15% - Cost
  - 10% - MWBE

Overview of Procurement

- 1/14/25: Application to issue a request for proposals approved by CRC
- 2/13/25: RFP posted on City Record, sent directly to 15 vendors
- 2/20/25: Pre-proposal conference held, 15 vendors attended
- 3/20/25: Proposals due, 10 proposals received
- 5/19/25 - 5/28/25: Vendor presentations held, four vendors were invited to participate
- 6/9/25: Evaluation committee submitted final scores.

Vendor Selection

- The System will negotiate contracts with the four top scoring proposers across all sub-scopes
- Subject to negotiation, contracts will specify primary scopes of work for each vendor, but also provide flexibility for the System to assign vendors work in other scopes within their expertise as needed

Vendor	Primary Scope(s)
Third Party Reimbursement Solutions, LLC	Medicare general reimbursement & cost reporting; Medicare appeal support
Moss Adams LLP (now Baker Tilly Advisory Group, LP)	Medicare DSH & Uncompensated Care; Medicare DSH appeal support
Forvis Mazars, LLP	Medicaid general reimbursement; Long Term Care; CFR
Manatt Health Strategies, LLC	Medicaid supplemental funding & innovative payment/policy models

NYC HEALTH+ HOSPITALS

Vendor Performance

Department of Supply Chain Vendor Performance Evaluation Third Party Reimbursement Solutions, LLC	
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 MWBE participation goals and/or Local Business enterprise requirements, to the extend applicable?	*N/A*
Did the vendor and any/all subcontractors comply with applicable Prevailing Wage requirements?	YES
Did the vendor maintain adequate records and logs, and did it submit accurate, complete and timely payment requisitions, fiscal reports and invoices, change order proposals, timesheets and other required daily and periodic record submissions (as applicable)?	YES
Did the vendor submit its proposed subcontractors for approval in advance of all work by such subcontractors?	YES
Did the vendor pay its suppliers and subcontractors, if any, promptly?	YES
Did the vendor and its subcontractors perform the contract with the requisite technical skill and expertise?	YES
Did the vendor adequately supervise the contract and its personnel, and did its supervisors demonstrate the requisite technical skill and expertise to advance the work	YES
Did the vendor adequately staff the contract?	YES
Did the vendor fully comply with all applicable safety standards and maintain the site in an appropriate and safe condition?	YES
Did the vendor fully cooperate with the agency, e.g., by participating in necessary meetings, responding to agency orders and assisting the agency in addressing complaints from the community during the construction as applicable?	YES
Did the vendor adequately identify and promptly notify the agency of any issues or conditions that could affect the quality of work or result in delays, and did it adequately and promptly assist the agency in resolving problems?	YES
Performance and Overall Quality Rating	EXCELLENT

Vendor Performance

Department of Supply Chain Vendor Performance Evaluation Moss Adams LLP	
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 MWBE participation goals and/or Local Business enterprise requirements, to the extend applicable?	*N/A*
Did the vendor and any/all subcontractors comply with applicable Prevailing Wage requirements?	YES
Did the vendor maintain adequate records and logs, and did it submit accurate, complete and timely payment requisitions, fiscal reports and invoices, change order proposals, timesheets and other required daily and periodic record submissions (as applicable)?	YES
Did the vendor submit its proposed subcontractors for approval in advance of all work by such subcontractors?	YES
Did the vendor pay its suppliers and subcontractors, if any, promptly?	YES
Did the vendor and its subcontractors perform the contract with the requisite technical skill and expertise?	YES
Did the vendor adequately supervise the contract and its personnel, and did its supervisors demonstrate the requisite technical skill and expertise to advance the work	YES
Did the vendor adequately staff the contract?	YES
Did the vendor fully comply with all applicable safety standards and maintain the site in an appropriate and safe condition?	YES
Did the vendor fully cooperate with the agency, e.g., by participating in necessary meetings, responding to agency orders and assisting the agency in addressing complaints from the community during the construction as applicable?	YES
Did the vendor adequately identify and promptly notify the agency of any issues or conditions that could affect the quality of work or result in delays, and did it adequately and promptly assist the agency in resolving problems?	YES
Performance and Overall Quality Rating	EXCELLENT

Vendor Performance

Department of Supply Chain
Vendor Performance Evaluation
Forvis Mazars, LLP

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 MWBE participation goals and/or Local Business enterprise requirements, to the extent applicable?	*N/A*
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?	N/A
Did the vendor pay its suppliers and subcontractors, if any, promptly?	N/A
Did the vendor and its subcontractors perform the contract with the requisite technical skill and expertise?	YES
Did the vendor adequately supervise the contract and its personnel, and did its supervisors demonstrate the requisite technical skill and expertise to advance the work	YES
Did the vendor adequately staff the contract?	YES
Did the vendor fully comply with all applicable safety standards and maintain the site in an appropriate and safe condition?	YES
Did the vendor fully cooperate with the agency, e.g., by participating in necessary meetings, responding to agency orders and assisting the agency in addressing complaints from the community during the construction as applicable?	YES
Did the vendor adequately identify and promptly notify the agency of any issues or conditions that could affect the quality of work or result in delays, and did it adequately and promptly assist the agency in resolving problems?	YES
Performance and Overall Quality Rating	EXCELLENT

Vendor Performance

Department of Supply Chain

Vendor Performance Evaluation

Manatt Health Strategies, LLC

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 MWBE participation goals and/or Local Business enterprise requirements, to the extent applicable?	N/A
Did the vendor and any/all subcontractors comply with applicable Prevailing Wage requirements?	N/A
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?	N/A
Did the vendor fully cooperate with the agency, e.g., by participating in necessary meetings, responding to agency orders and assisting the agency in addressing complaints from the community during the construction as applicable?	YES
Did the vendor adequately identify and promptly notify the agency of any issues or conditions that could affect the quality of work or result in delays, and did it adequately and promptly assist the agency in resolving problems?	YES
Performance and Overall Quality Rating	EXCELLENT

Vendor Diversity

- Utilization Plan Summary

Vendor	MWBE Subcontractor	Subcontracted Scope of Work	Certification	Goal %
Forvis Mazars LLP	Healthcare Management Solutions LLC	Medicare/Medicaid Reimbursement Consulting	NYS/WBE	10%

- The Vendor Diversity team recommended a 10% diverse vendor component percentage for this solicitation, while noting that most scopes of work under the RFP were likely to be self-performed by the proposing vendors.
- Manatt Health Strategies, Third Party Reimbursements and Moss Adams were granted waivers based on self-performance of the scope of work.

For Board of Directors Consideration

- Authorizing the New York City Health and Hospitals Corporation (the "System") **to execute contracts with Third Party Reimbursement Solutions, LLC, Forvis Mazars, LLP, Baker Tilly Advisory Group, LP (formerly Moss Adams), and Manatt Health Strategies, LLC for Medicare and Medicaid Reimbursement Consulting services** at a not to exceed amount of $10,800,000, which includes a 20% contingency, for a contract term of three years and two one-year renewal options exercisable at the discretion of the System.

NYC HEALTH+ HOSPITALS

October 2025

RESOLUTION - 08

Authorizing New York City Health and Hospitals Corporation (the "**System**") to **increase the funding by $10,896,459 for its previously executed agreements with each of Institute for Community Living, Inc. ("ICL") and Comunilife, Inc. ("Comunilife") for the provision of medical respite beds and services such that the funding is increased from $17,960,500 to $28,856,959 thereby funding the increasing capacity of the program from 51 beds to 75 beds**.

WHEREAS, in October 2022, pursuant to the System's Board of Directors authorization, copy attached, the System executed agreements with each of ICL and Comunilife with a combined spending limit of $17,960,500 for a term of three years with two option years for short term housing for 51 medical respite beds and services for System patients who no longer require hospitalization but who need more time to recover, sufficient to be able to move to shelter or to permanent housing; and

WHEREAS, in 2024, the System often experienced waits of over four weeks for medical respite beds and services and so the System contracted to add 24 respite beds to the program increasing System capacity to 75 respite beds, thereby reducing patient hospital length of stay and increasing the opportunity to backfill such hospital beds with other patients; and

WHEREAS, the medical respite program serves approximately 400 patients annually and 1600 to date, in an interim housing environment where case managers, peer specialists and social workers provide care coordination, home care services, support with transport to medical appointments, and linkage with primary care, behavioral health and substance use services; and

WHEREAS, the medical respite program has been financially successful because it enables earlier discharge of patients, which in turn frees up inpatient med-surg capacity, and improved access to beds allows the System to generate new revenue; and

WHEREAS, the medical respite program has been clinically successful because access to respite care enabled discharged patients to complete their recovery in the community and because, while in respite care, many such patients were placed in permanent housing, connected to longitudinal care and reduced their acute care utilization; and

WHEREAS; the System has been satisfied with the work of both ICL and Comunilife, both of which are not-for-profit organizations with good reputations and established programs and both of which combine competence in the delivery of respite services with the real estate to be able to furnish both beds and services; and

WHEREAS, the proposed agreements will be managed by the Senior Assistant Vice President of Housing and Real Estate and the Housing for Health business unit.

NOW THEREFORE BE IT RESOLVED, that the New York City Health and Hospitals Corporation (the "**System**") be and hereby is authorized to increase the funding by $10,896,459 for its previously executed agreements with each of Institute for Community Living, Inc. ("**ICL**") and Comunilife, Inc. ("**Comunilife**") for the provision of medical respite beds such that the funding is increased from $17,960,500 to $28,856,959 thereby funding the increasing capacity of the program from 51 beds to 75 beds.

NYC HEALTH+ HOSPITALS

October 2025

EXECUTIVE SUMMARY
INCREASE OF AUTHORIZED FUNDING OF AGREEMENTS WITH INSTITUTE FOR COMMUNITY LIVING, INC. AND COMUNILIFE, INC. FOR RESPITE BEDS AND SERVICES

PROGRAM OVERVIEW:

Patients experiencing homelessness have greater medical acuity and longer hospital stays. When medically cleared for discharge, they often cannot return to a shelter or street due to their post-surgical, medical and/or behavioral health needs. A medical respite program provides a solution. Medical respite is interim housing where case managers, peer specialists and social workers provide care coordination, support with transport to medical appointments, and linkage to primary care, behavioral health and substance use services. The System sees the respite program as both financially and clinically successful having served approximately 1600 patients to date, and approximately 400 patients annually. The cost of respite is substantially lower than the cost of an inpatient acute care bed, and frees up such inpatient capacity for use by other patients, resulting in System revenue. More importantly, the program has been clinically successful in both providing a healing environment, getting patients connected to housing and reducing acute care utilization. By increasing funding as requested, the System will be able to increase its respite capacity with additional beds.

VENDOR OVERVIEW:

The System has contracted with ICL and with Comunilife for respite beds and services since 2019 on separate contracts that were each extended on a best interest basis in 2021 to expire November 30, 2022. New three-year agreements with two-year options were executed on December 1, 2022. Both ICL and Comunilife are not-for-profit organizations with good reputations and established programs. Both combine competence in the delivery of respite services with the real estate to be able to furnish both beds and services.

NYC HEALTH + HOSPITALS

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

From: Jeremy Berman
Deputy General Counsel
Office of Legal Affairs

Re: Vendor Responsibility, EEO and MWBE status for Board review of contracts for Medical Respite Operations and Services

Date: October 15, 2025

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

Vendor Legal Name	**Vendor Responsibility**	**EEO**	**MWBE**
Comunilife, Inc.	Approved	Pending	NA
Institute for Community Living, Inc.	Approved	Pending	NA

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

Medical Respite Operations and Services NTE Amendment - with Community Living, Inc. (“ICL”) and Comunilife, Inc. (“Comunilife”)

Board of Directors Meeting
October 30, 2025

Leora Jontef, Senior AVP, Housing + Real Estate
Dr. Jonathan Meldrum, Medical Director, Housing for Health

For Board of Directors Consideration

Authorizing New York City Health and Hospitals Corporation (the "**System**") **to increase the funding by $10,896,459 for its previously executed agreements with each of Institute for Community Living, Inc. ("ICL") and Comunilife, Inc. ("Comunilife") for the provision of medical respite beds and services such that the funding is increased from $17,960,500 to $28,856,959 thereby funding the increasing capacity of the program from 51 to 75 beds.**

Background: Housing for Health

Relationship between Housing and Health at H+H

- **In 2024, ~80,000 H+H patients (62,000 adults)** are homeless or marginally housed and over 50% are also DHS clients
- On average, patients experiencing homelessness visited the **ED 3x more often** than other patients
- Patients experiencing homelessness were more likely to have an inpatient visit and **stayed 4x longer** across their admissions

Expediting this population into stable housing saves lives, improves health outcomes, and reduces expensive emergency health care and inpatient resources

H+H's Approach: Housing for Health

Connecting patients experiencing homelessness with housing supports and opportunities

- **Operate Medical Respite Beds**
- Provide Housing Navigation Services
- Fund Case Management Services in Affordable Housing
- Dedicate NYC H+H Land for Affordable and Supportive Housing

Through FY 2025, over 3000 patients and their families have benefited from Housing for Health's navigation and medical respite programming, and nearly 1,500 patient households have been stably housed.

Background: Medical Respite

The Need

- Patients experiencing homelessness have greater medical acuity and longer hospital stays
- When medically cleared for discharge, they often cannot return to shelter because of their post-surgical, medical and behavioral health needs
- Nationally, there are 240 medical respite programs delivering a range of services with the largest program in California
- Almost 40% of H+H medical respite patients had the “very high risk” flag (e.g. in the top 1% of acute care utilization in our system)

The Solution: Medical Respite

- An interim housing option with 24/7 staffing that allows patients to access additional services in the community to aide in their recuperation
  - Onsite RN who conducts clinical assessments, monitors care plan
  - Home based services – PT/OT, visiting nurse, medication support
  - Connections to longitudinal care, intensive housing case management and medication support and education
- H+H contracts with two vendors for both real estate and service delivery of combined 75 beds
  - Alongside other continuum of care services to tackle Length of Stay, including SNF placements, complex discharge escalation team and Bridge to Home
- ~ 400 patients served annually and approximately 1,600 patients served through Sept. 2025
  - Average length of stay at respite is 73 days

Medical Respite System and Patient Benefits

- **Reduces inpatient length of stay for patients who no longer require hospitalization but could otherwise not safely discharge**
  - Patients who are transferred to medical respite have an average inpatient LOS of 4 weeks
  - Medical respite cost per bed day is many times lower than the cost of an inpatient acute bed and provides a more appropriate setting for patient's recovery
  - Medical respite facilitates earlier discharge of patients who would otherwise have no alternative option

- **Frees up hospital beds for new patient admissions**
  - Based on a conservative estimate of avoided hospital days (average of 14 days per respite enrollment), medical respite helps to increase inpatient med-surg throughput
  - The resulting backfill capacity is valued at approximately $6 million in annual net patient care revenue, which supports the program's operating costs

Medical Respite System and Patient Benefits

- **Based on EMR analysis, patients show reductions in acute care utilization and increase in connections to outpatient care one year after respite**
  - 40% reduction in Emergency Department visits
  - Reduction in med/surg days (75%) and psych inpatient days (nearly 90%)
  - Almost 3x increase in outpatient visits with H+H primary and specialty care
- **High rate of housing placement from respite**
  - Nearly 70% of patients who complete the program and are eligible for housing subsidies are placed into permanent housing
- **Further evaluation of impact ongoing**
  - Reducing acute care utilization for risk-attributed patients, medical respite can lower total medical expense, contributing to improved margins and potential shared-savings opportunities
  - Ongoing collaborations with Metroplus and actuarial services to evaluate impact of respite and housing on patient outcomes utilizing claims data for our risk-attributed patients

Meeting Program Demand

- **In 2024, the System experienced 4 week long waitlists for medical respite beds**
  - Critical that respite capacity meets system demand to minimize waitlists, avoidable bed days, worsening of capacity strain and missed revenue
- **To better address system demand, program capacity was increased from 51 to 75 beds with appropriate services to meet patient needs**
  - We are closely monitoring impact of expansion to meet system demand to determine right-sizing of medical respite services for H+H
- **In order to meet system demand for remaining two years of the current 5-year contracts, additional funding is needed**
  - Vendor performance has been excellent

Vendor Diversity

This procurement was only open to non-profit/community based organizations. Such entities are not eligible to be M/WBE certified, so no goal was set on this solicitation or award.

Vendor Performance

Department of Supply Chain

Vendor Performance Evaluation

2656/2623A Medical Respite Services and Operations

Institute for Community Living (ICL)

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

Vendor Performance

Department of Supply Chain
Vendor Performance Evaluation
2656/2623A Medical Respite Services and Operations

Comunilife

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

Board of Directors Approval Request

Authorizing New York City Health and Hospitals Corporation (the "**System**") **to increase the funding by $10,896,459 for its previously executed agreements with each of Institute for Community Living, Inc. ("ICL") and Comunilife, Inc. ("Comunilife") for the provision of medical respite beds and services such that the funding is increased from $17,960,500 to $28,856,959 thereby funding the increasing capacity of the program from 51 to 75 beds.**

NYC HEALTH+ HOSPITALS

October 2025

RESOLUTION 09

Authorizing the New York City Health and Hospitals Corporation ("NYC Health + Hospitals") **to execute a contract with C.D.E. Air Conditioning Co Inc. (the "Contractor"), to undertake a boiler and Building Management System (BMS) upgrade project of NYC Health + Hospitals/North Central Bronx Hospital** for a contract amount of $8,781,032, with a 10% project contingency of $878,103, to bring the total cost not to exceed $9,659,135.

WHEREAS, NYC Health +Hospitals/North Central Bronx Hospital has five boilers, one of which is completely out of service and four that have reached the end of their useful life; and

WHEREAS, NYC Health + Hospitals/North Central Bronx Hospital currently has minimal means for Heating, Ventilation and Air Conditioning (HVAC) system control and needs a centralized monitoring/ building management system (BMS) in order to operate and maintain its critical MEP systems; and

WHEREAS, due to the state of the boilers and lack of system monitoring capability, it has been determined that a project should be undertaken to completely refurbish the boiler that is out of service, undertake significant repairs and upgrades to the four that have achieved the end of their useful life, and install a new building wide BMS; and

WHEREAS, in accordance with Operating Procedure 100-5 a solicitation was issued, pursuant to which four bids were received and publicly opened on August 20, 2025, and NYC Health + Hospitals determined that the Contractor submitted the lowest responsible bid; and

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

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

NOW, THEREFORE, be it

RESOLVED that the New York City Health and Hospitals Corporation ("NYC Health + Hospitals") to execute a contract with C.D.E. Air Conditioning Co Inc. (the "Contractor"), to undertake a boiler and Building Management System (BMS) upgrade project of NYC Health + Hospitals/North Central Bronx Hospital for a contract amount of $8,781,032, with a 10% project contingency of $878,103, to bring the total cost not to exceed $9,659,135.

NYC HEALTH+ HOSPITALS

October 2025

EXECUTIVE SUMMARY
NORTH CENTRAL BRONX HOSPITAL
BOILER AND BUILDING MANAGEMENT SYSTEM PROJECT
C.D.E. AIR CONDITIONING CO INC.

CONTRACT SCOPE: Boiler upgrade and BMS installation

NEED: NYC Health + Hospitals facilities needs general construction services to undertake the boiler upgrade and BMS installation project at NYC H+H/North Central Bronx Hospital.

CONTRACT DURATION: 18 months, slated to commence Fall of 2025 with anticipated completion in Spring 2027.

PROCUREMENT: A competitive sealed bid was issued on 4/14/2025; seventeen contractors attended the pre-bid on site visits on 4/22/2025 and 4/23/2025, four contractors submitted bids with the lowest responsible and responsive bidder being C.D.E. Air Conditioning Co Inc. for a contract not to exceed total of $9,659,135.

PRIOR EXPERIENCE: C.D.E. Air Conditioning Co Inc. has previously worked on fifteen government projects and received four ratings of excellent, seven ratings of good, and four satisfactory ratings.

CONTRACT AMOUNT: $8,781,032

PASSPORT APPROVAL: Approved

EEO APPROVAL: Approved

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

NYC HEALTH + HOSPITALS

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

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

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

Vendor: C.D.E. Air Conditioning Co Inc.

Date: June 13, 2024

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

Vendor Responsibility	**EEO**	**MWBE**
Approved	Approved	35%

Request to Award Contract to C.D.E. Air Conditioning Co Inc. for Boiler Upgrade & BMS Project at North Central Bronx Hospital

Board of Directors
October 30, 2025

Christopher Mastromano, Chief Executive Officer, NYC H+H/Jacobi/ NCB
Manuel Saez, PhD, Vice President, OFD
Menji Indar, Assistant Vice President, OFD

For Board of Directors Consideration

- Authorizing the New York City Health and Hospitals Corporation ("NYC Health + Hospitals") **to execute a contract with C.D.E. Air Conditioning Co, Inc. (the "Contractor"), to undertake a boiler and Building Management System (BMS) upgrade project at NYC Health + Hospitals/North Central Bronx Hospital** for a contract amount of $8,781,032, with a 10% project contingency of $878,103, to bring the total cost not to exceed $9,659,135.

Program Background / History

- North Central Bronx Hospital currently has 5 boilers that serve the facility with steam for heating & sterilization, and heats hot water.
- One of the boilers previously was completely taken out of service and needs full refurbishment.
- Burners and controls for 4 of the 5 boilers are beyond their useful life and need upgrade.
- The existing facility needs a centralized monitoring / Building Management System (BMS) to efficiently operate and maintain the critical MEP systems throughout the building.

Construction Scope and Schedule

- Boiler/BMS Upgrade Scope of Work:
  - New burners & controls for Boilers #1, 3, 4 & 5
  - Refurbishment of Boiler #4
  - New boiler burner management (SCADA) system
  - New building-wide Building Management System (BMS) for existing and future mechanical equipment (AHUs, chillers, pumps, fans, VAVs, etc.)
  - Boiler work will be phased to ensure minimal impacts to existing steam supply, and there will be no impact to patient care.
  - Expected to begin Fall 2025 with completion expected by Spring 2027 (18 months)
  - One boiler will be out of service during heating season, but there is sufficient capacity from the other four boilers to service the facility

Overview of Procurement

- *04/14/2025 : Posted to City Record
- 04/22/2025 & 04/23/2025 : Site tour conducted, 17 contractors attended
- 08/20/2025 : Bid Due Date, with 4 bids received
- 09/03/2025 : Determination of low bid finalized, and C.D.E. Air Conditioning Co Inc. was selected as the lowest responsive and responsible bidder.

*C.D.E. Air Conditioning Co, Inc. was approved as the low bidder by the Board in July 2024, however, they subsequently withdrew their bid and the project was re-bid. The same vendor was selected as the lowest responsible and responsive bidder

Construction Contract

- Procurement is sourced via Public Bid
- Contract Amount is $8,781,032
- C.D.E. Air Conditioning Co Inc. is mechanical HVAC contractor. The ratings listed in MOCs included 4 Excellent, 7 Good, and 4 Satisfactory.
- Construction is Expected to begin Fall 2025 with completion expected by Spring 2027 (18 months)
- C.D.E. Air Conditioning Co Inc. has committed to a 30% MWBE Goal:

Subcontractor	Certification	Supplies/Services	Utilization Plan	Utilization $
Alkem Electric	MBE	Electrical Work	10.82%	$ 950,000.00
S&M Mechanical	MBE	Steamfitting Work	10.82%	$ 950,000.00
TBD	MBE/WBE	Control Wiring	3.42%	$ 300,000.00
TBD	MBE/WBE	Boiler Wiring	3.70%	$ 325,000.00
BTG Contracting	WBE	Demolition	0.40%	$ 35,000.00
BTG Contracting	WBE	GC Work	1.14%	$ 100,000.00
Total			**30.30%**	**$ 2,660,000**

Project Budget

Construction		$8,781,032
Project Contingency (10%)		**$878,103**
Total		**$9,659,135**

- The CP has been approved by OMB

Board of Directors Request for Approval

- Authorizing the New York City Health and Hospitals Corporation ("NYC Health + Hospitals") **to execute a contract with C.D.E. Air Conditioning Co Inc. (the "Contractor"), to undertake a boiler and Building Management System (BMS) upgrade project of NYC Health + Hospitals/North Central Bronx Hospital** for a contract amount of $8,781,032, with a 10% project contingency of $878,103, to bring the total cost not to exceed $9,659,135.

NYC HEALTH+ HOSPITALS

October 2025

AMENDMENT NOVEMBER 18, 2021 RESOLUTION - 10

Amending previously adopted resolution by the Board of Directors of New York City Health and Hospitals Corporation (the "System") on November 18, 2021 authorizing the System to lease from an entity named as Coney Island Associates Retail 2 LLC ("**Landlord**") in a to-be-constructed building at 1607 Surf Avenue, between W. 17th and 16th Streets approximately 2,500 sq. ft. at a yearly rent of $30/sq. ft to be escalated by 10% every 5 years plus a share of increases in Developer's operating costs to house the Ida G. Israel Community Health Clinic **with such amendment correcting an error in the name of the Landlord to correct such name in such resolution to be "Coney Island Associates 2 Retail LLC."**

WHEREAS, the System's Board of Directors approved the resolution described above, a copy of which is attached; and

WHEREAS, the prior resolution repeated the Landlord's mistake in the name of the special purpose entity formed to be the landlord in the subject transaction; and

WHEREAS, the Landlord and its lender desire the System to amend the lease signed pursuant to the original resolution; and

WHEREAS, subsequent to the adoption of the original resolution, the subject building has been constructed and the Ida G. Israel primary care clinic has moved into the building and has commenced operations.

NOW THEREFORE BE IT RESOLVED an amendment of the adopted resolution by the Board of Directors of New York City Health and Hospitals Corporation (the "**System**") on November 18, 2021 authorizing the System to lease to lease from an entity named as Coney Island Associates Retail 2 LLC ("**Landlord**") in a to-be-constructed building at 1607 Surf Avenue, between W. 17th and 16th Streets approximately 2,500 sq. ft. at a yearly rent of $30/sq. ft to be escalated by 10% every 5 years plus a share of increases in Developer's operating costs to house the Ida G. Israel Community Health Clinic be and the same hereby is amended to correct an error in the name of the Landlord to correct such name in such resolution to "Coney Island Associates 2 Retail LLC."

NYC HEALTH+ HOSPITALS

October 2025

EXECUTIVE SUMMARY
CORRECTIVE AMENDMENT OF
NOVEMBER 2021 RESOLUTION
AUTHORIZING LEASE FOR IDA G. ISRAEL HEALTH CLINIC

Background	The Ida G. Israel was forced to relocate from the HPD licensed lot it has occupied since Super Storm Sandy because of its long- established plan to develop the site for low income housing. On November 18, 2021, the System Board approved a lease for the System to rent about 2,500 square feet from "Coney Island Associates Retail 2 LLC," the name the landlord gave for its special purpose landlord entity. That turns out to have contained a clerical mistake because the correct name of the landlord entity is "Coney Island Associates 2 Retail LLC."
Status Update	Since the original resolution was adopted in November 2021, the building to house the clinic has been constructed, the clinic fit-out has been completed, the clinic has moved into its new space and the clinic has commenced operations in its new location.
Authority Requested	Authority to revise the original resolution to correct the clerical error in the name.

NYC HEALTH+ HOSPITALS

October 2025

AMENDMENT OF MARCH 28 2024 RESOLUTION - 11

Amending the previously adopted resolution by the Board of Directors of New York City Health and Hospitals Corporation (the "System") on March 28, 2024 authorizing the System to lease from an named as Coney Island Associates Retail 2 LLC ("Landlord") in a to-be-constructed building at 2932 West 16th Street between W. 17th and 16th Streets approximately 6,250 square feet for a yearly rent of $25/sq. ft. to be escalated by 10% after 5 years plus the provision of 10 parking spaces charged at $150/month for each parking space; and provided further that the System shall hold two 5-year options to renew the lease with the rent during the first renewal term to be at the higher of 95% of fair market value or 10% over the prior rent and with the rent for the second renewal term to be at a 10% increase over the prior rent with the rent over the entire potential 20-year term totaling approximately $3,985,781 to house the Ida G. Israel Community Chemical Dependency Clinic **with such amendment correcting an error in the name of the Landlord to correct such name in such resolution to be "Coney Island Associates 2 Retail LLC."**

WHEREAS, the System's Board of Directors approved the resolution described above, a copy of which is attached; and

WHEREAS, the prior resolution repeated the Landlord's mistake in the name of the special purpose entity formed to be the landlord in the subject transaction; and

WHEREAS, the Landlord and its lender desire the System to amend the lease signed pursuant to the original resolution; and

WHEREAS, subsequent to the adoption of the original resolution, the subject building has been constructed and the Ida G. Israel Chemical Dependency clinic has moved into the building and has commenced operations.

NOW THEREFORE BE IT RESOLVED the amendment of resolution adopted by the Board of Directors of New York City Health and Hospitals Corporation (the "**System**") on March 28, 2024 authorizing the System to lease from an entity named as Coney Island Associates Retail 2 LLC ("**Landlord**") in a to-be-constructed building at 2932 West 16th Street between W. 17th and 16th Streets approximately 6,250 square feet for a yearly rent of $25/sq. ft. to be escalated by 10% after 5 years plus the provision of 10 parking spaces charged at $150/month for each parking space; and provided further that the System shall hold two 5-year options to renew the lease with the rent during the first renewal term to be at the higher of 95% of fair market value or 10% over the prior rent and with the rent for the second renewal term to be at a 10% increase over the prior rent with the rent over the entire potential 20-year term totaling approximately $3,985,781 to house the Ida G. Israel Community Chemical Dependency Clinic be and the same hereby is amended to correct an error in the name of the Landlord to correct such name in such resolution to "Coney Island Associates 2 Retail LLC."

NYC HEALTH+ HOSPITALS

October 2025

EXECUTIVE SUMMARY
CORRECTIVE AMENDMENT OF
NOVEMBER 2021 RESOLUTION
AUTHORIZING LEASE FOR IDA G. ISRAEL CHEMICAL DEPENDENCY CLINIC

Background	The Ida G. Israel Chemical Dependency clinic was forced to relocate from the HPD licensed lot it has occupied since Super Storm Sandy because of HPD's long- established plan to develop the site for low income housing. On March 28, 2024, the System Board approved a lease for the System to rent about 6,250 square feet from "Coney Island Associates Retail 2 LLC," the name the landlord gave for its special purpose landlord entity. That turns out to have contained a clerical mistake because the correct name of the landlord entity is "Coney Island Associates 2 Retail LLC."
Status Update	Since the original resolution was adopted in March 2024, the building to house the clinic has been constructed, the clinic fit-out has been completed, the clinic has moved into its new space and the clinic has commenced operations in its new location.
Authority Requested	Authority to revise the original resolution to correct the clerical error in the name.

NYC HEALTH+ HOSPITALS

Amendment to Resolutions Authorizing Leases of Ida G. Primary Care Clinic and Ida G Chemical Dependency with Coney Island Associates Retail 2 LLC

Board of Directors
October 30, 2025

Leora Jontef, AVP, Real Estate & Housing
Deborah Morris, AICP, Senior Director, Real Estate & Housing
Jeremy Berman, Deputy General Counsel

NYC HEALTH+ HOSPITALS

November 18, 2021 Resolution Amendment
For Board Consideration

- **Amending the previously adopted resolution by the Board of Directors of New York City Health and Hospitals Corporation (the "System") on November 18, 2021** authorizing the System to lease from an entity named as Coney Island Associates Retail 2 LLC ("Landlord") in a to-be-constructed building at 1607 Surf Avenue, between W. 17th and 16th Streets approximately 2,500 sq. ft. at a yearly rent of $30/sq. ft to be escalated by 10% every 5 years plus a share of increases in Developer's operating costs to house the Ida G. Israel Community Health Clinic with **such amendment correcting an error in the name of the Landlord to correct such name in such resolution to be "Coney Island Associates 2 Retail LLC."**

March 28, 2024 Resolution Amendment for Board Consideration

- **Amending the previously adopted resolution by the Board of Directors of New York City Health and Hospitals Corporation (the "System") on March 28, 2024 authorizing the System to lease from an named as Coney Island Associates Retail 2 LLC ("Landlord")** in a to-be-constructed building at 2932 West 16th Street between W. 17th and 16th Streets approximately 6,250 square feet for a yearly rent of $25/sq. ft. to be escalated by 10% after 5 years plus the provision of 10 parking spaces charged at $150/month for each parking space; and provided further that the System shall hold two 5-year options to renew the lease with the rent during the first renewal term to be at the higher of 95% of fair market value or 10% over the prior rent and with the rent for the second renewal term to be at a 10% increase over the prior rent with the rent over the entire potential 20-year term totaling approximately $3,985,781 to house the Ida G. Israel Community Chemical Dependency Clinic **with such amendment correcting an error in the name of the Landlord to correct such name in such resolution to be "Coney Island Associates 2 Retail LLC."**

Requested Changes

- Amend two previously approved resolutions to change the Landlord name
  - **Ida G. Community Health Clinic -** Action Item No. 3 adopted by the Board of Directors of New York City Health and Hospitals Corporation (the "System") on November 18, 2021
  - **Ida G. Chemical Dependency Clinic -** Action Item No. 9 adopted by the Board of Directors of New York City Health and Hospitals Corporation (the "System") on March 28, 2024
- The Landlord entity name will change from Coney Island Associates Retail 2 LLC to Coney Island Associates 2 Retail LLC
- All other terms remain the same.

NYC HEALTH+ HOSPITALS

Board of Directors Approval Request
November 18, 2021 Resolution Amendment

- **Amending the previously adopted resolution by the Board of Directors of New York City Health and Hospitals Corporation (the "System") on November 18, 2021** authorizing the System to lease from an entity named as Coney Island Associates Retail 2 LLC ("Landlord") in a to-be-constructed building at 1607 Surf Avenue, between W. 17th and 16th Streets approximately 2,500 sq. ft. at a yearly rent of $30/sq. ft to be escalated by 10% every 5 years plus a share of increases in Developer's operating costs to house the Ida G. Israel Community Health Clinic with **such amendment correcting an error in the name of the Landlord to correct such name in such resolution to be "Coney Island Associates 2 Retail LLC."**

NYC HEALTH+ HOSPITALS

Board of Directors Approval Request
March 28, 2024 Resolution Amendment

- **Amending the previously adopted resolution by the Board of Directors of New York City Health and Hospitals Corporation (the "System") on March 28, 2024 authorizing the System to lease from an named as Coney Island Associates Retail 2 LLC ("Landlord")** in a to-be-constructed building at 2932 West 16th Street between W. 17th and 16th Streets approximately 6,250 square feet for a yearly rent of $25/sq. ft. to be escalated by 10% after 5 years plus the provision of 10 parking spaces charged at $150/month for each parking space; and provided further that the System shall hold two 5-year options to renew the lease with the rent during the first renewal term to be at the higher of 95% of fair market value or 10% over the prior rent and with the rent for the second renewal term to be at a 10% increase over the prior rent with the rent over the entire potential 20-year term totaling approximately $3,985,781 to house the Ida G. Israel Community Chemical Dependency Clinic **with such amendment correcting an error in the name of the Landlord to correct such name in such resolution to be "Coney Island Associates 2 Retail LLC**."

NYC HEALTH + HOSPITALS

October 2025

RESOLUTION - 12

Amending the resolution adopted by the Board of Directors of New York City Health and Hospitals Corporation (the "System") on May 29, 2025 authorizing the execution of a contract with Johnson Controls, Inc., (the "Contractor"), to provide Building Management System preventative maintenance and repair services at various NYC Health + Hospitals **facilities with such amendment increasing the contract term from three years with two one-year options to five years with no renewal options at the previously approved not-to-exceed amount of $12,676916 including a 10% contingency of $548,793.41.**

WHEREAS, Building Management Systems (BMS) are vital to the operation of NYC Health + Hospitals facilities, enabling real-time control and monitoring of heating, ventilation, air conditioning (HVAC), lighting, fire and security systems; and

WHEREAS, NYC Health + Hospitals Board of Directions approved the execution of a contract with Johnson Controls, Inc. in May 2025.

WHEREAS, the pursuant to a contract, Contractor will provide preventative maintenance services, ensure ongoing operability of proprietary BMS systems, and support optimization of energy use and system performance; and

WHEREAS, Contractor been granted a waiver from the MWBE subcontracting participation goals due to the fact that they will self-perform all work under the contract; and

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

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

NOW, THEREFORE, be it

RESOLVED the resolution adopted by the Board of Directors of New York City Health and Hospitals Corporation (the "System") on May 29, 2025 authorizing the execution of a contract with Johnson Controls, Inc., (the "Contractor"), to provide Building Management System preventative maintenance and repair services at various NYC Health + Hospitals facilities with such amendment increasing the contract term from three years with two one-year options to extend to five years with no renewal options at the previously approved not-to-exceed amount of $12,676916 including a 10% contingency of $548,793.41.

NYC HEALTH + HOSPITALS

October 2025

EXECUTIVE SUMMARY
BUILDING MANAGEMENT SYSTEM PREVENTATIVE MAINTENANCE AND REPAIR SERVICES
JOHNSON CONTROLS, INC.

CONTRACT SCOPE: Building Management System preventative maintenance and repair services

NEED: Building Management Systems are critical to facility operations and patient safety, providing real-time control and monitoring of building mechanical and electrical systems. Contractor currently maintains these systems under a contract that expires June 30, 2025. A new agreement is needed to continue these services without disruption. Contractor's proprietary systems are installed at the majority of NYC Health + Hospitals sites, making them uniquely positioned to provide these services.

CONTRACT DURATION: 5 years

PROCUREMENT: A request for proposals (RFP) was issued following approval by the CRC on May 21, 2024, and posted publicly on February 12, 2025. A pre-proposal conference was held with three attendees, and only Contractor submitted a proposal by the March 13, 2025 deadline. The proposal was evaluated and scored by an eight-member panel composed of engineering and finance professionals from multiple facilities. Contractor was determined to be responsive and responsible, with the highest evaluation score.

PRIOR EXPERIENCE: Johnson Controls, Inc. is our current BMS vendor with a good rating.

PASSPORT APPROVAL: Approved

EEO APPROVAL: Approved

MWBE STATUS: Johnson Controls Inc requested and has been approved a waiver due to self-performance of all scopes of work on the contract.

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Request for Amendment Contract with Johnson Controls Inc. for Building Management System (BMS) Preventative Maintenance

Board of Directors
October 30, 2025

Manuel Saez, PhD, VP, Office of Facilities Development
Mahendranath Indar, AVP Office of Facilities Development

For Board of Directors Consideration

- Amending the resolution adopted by the Board of Directors of New York City Health and Hospitals Corporation (the "System") on May 29, 2025 authorizing the execution of a contract with Johnson Controls, Inc., (the "Contractor"), to provide Building Management System preventative maintenance and repair services at various NYC Health + Hospitals facilities with such amendment changing the contract term from three years with two one-year options to five years with no renewal options at the previously approved not-to-exceed amount of $12,676916 including a 10% contingency of $548,793.41.

Background / Current State

- In April 2025, the Board of Directors approved our procurement of Johnson Controls for Building Management Systems maintenance and repair throughout the system.

- The Board originally approved the contract for 3 years with two 1-year options to renew, we are requesting to amend to a contract term of 5 years as a result of pricing due diligence.

Board of Directors Approval Request

- Amending the resolution adopted by the Board of Directors of New York City Health and Hospitals Corporation (the "System") on May 29, 2025 authorizing the execution of a contract with Johnson Controls, Inc., (the "Contractor"), to provide Building Management System preventative maintenance and repair services at various NYC Health + Hospitals facilities with such amendment changing the contract term from three years with two one-year options to five years with no renewal options at the previously approved not-to-exceed amount of $12,676916 including a 10% contingency of $548,793.41.

NYC HEALTH + HOSPITALS

October 2025

RESOLUTION - 13

Adopting in the name of the New York City Health and Hospitals Corporation ("NYC Health + Hospitals") Board of Directors an Implementation Strategy Plan (an "ISP") prepared for each of NYC Health + Hospitals' ten acute care hospitals over 11 campuses and for the NYC Health + Hospitals/Henry J. Carter Specialty Hospital ("HJC") as a supplement to the Community Health Needs Assessment (the "CHNA") which was approved by the Board of Directors in June 2025.

WHEREAS, NYC Health + Hospitals operates ten acute care hospitals over 11 campuses and HJC, a long-term acute care hospital; and

WHEREAS, NYC Health + Hospitals has tax exempt status under Section 501(c)(3) of the Internal Revenue Code (the "IRC"); 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, Internal Revenue Code Section 501(r)(3) requires that hospitals engage community stakeholders to identify and prioritize their communities' health needs; and

WHEREAS, on June 26, 2025 the Board of Directors approved the CHNA conducted for the ten acute care hospitals over 11 campuses and the long-term acute care hospital portion of HJC; and

WHEREAS, IRC regulations further require that hospital organizations prepare and Implementation Strategy Plan (an "ISP") that lists and describes the hospital's programs intended to meet the priority health needs identified in the CHNA; and

WHEREAS, IRC regulations require the ISP to be adopted and made publicly available within five months and 15 days of the end of the taxable year in which the CHNA is conducted; and

WHEREAS, NYC Health + Hospitals Office of External and Regulatory Affairs prepared an ISP, a copy of which is 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 ISP and any subsequent material changes; and

WHEREAS, the CHNA ISP will be made widely available to the public through the NYC Health + Hospitals' website and at NYC Health + Hospitals' ten acute care hospitals over 11 campuses and at HJC before November 15; and

NOW, THEREFORE, BE IT

RESOLVED, that the New York City Health and Hospitals Corporation's Board of Directors hereby adopts the New York City Health and Hospitals Corporation Community Health Needs Assessments Implementation Strategy Plan prepared for each of NYC Health + Hospitals' ten acute care hospitals over 11 campuses and for the Henry J. Carter Specialty Hospital as a supplement to the Community Health Needs Assessment approved by the Board of Directors in June 2025

October 2025

EXECUTIVE SUMMARY
ADOPTION OF
2025 NYC HEALTH + HOSPITALS
COMMUNITY HEALTH NEEDS ASSESSMENT
IMPLEMENTATION STRATEGY PLAN

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. Regulations further specify that the hospital organization prepare an Implementation Strategy (an "ISP") that lists and describes each hospital's programs and initiatives intended to meet the priority health needs identified in the CHNA.

PROPOSAL:

NYC Health + Hospitals' Strategic Planning Committee has collaborated with the Office of External and Regulatory Affairs to prepare the current CHNA ISP. To prepare the proposed CHNA ISP, the team made extensive efforts to review and evaluate the feedback of stakeholders and community partners during the CHNA, and determined ways to address the health needs through cross-disciplinary coordination and collaboration. A copy of the full CHNA ISP titled, 2025 NYC Health + Hospitals Implementation Strategy Plan 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 ISP will be posted on the NYC Health + Hospitals' public website as required by IRC Section 501(r).

2025 Implementation Strategy Plan

Community Health Needs Assessment

Board of Directors Meeting – October 30, 2025

For Board of Directors Consideration

Adopting in the name of New York City Health and Hospitals Corporation ("**NYC Health + Hospitals**") Board of Directors an Implementation Strategy Plan (an "**ISP**") for each of NYC Health + Hospitals' ten acute care hospitals over 11 campuses and for the NYC Health + Hospitals/Henry J. Carter Specialty Hospital ("**HJC**") as a supplement to the Community Health Needs Assessment (the "**CHNA**") which was approved by the Board in June 2025.

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
- 2025 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 30

FY25 – FY2028 IMPLEMENTATION STRATEGY

- 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 15, 2025. Presented to Board October 30, 2025

NYC HEALTH+ HOSPITALS

2025 CHNA

NYC HEALTH+ HOSPITALS

2025 CHNA FINDINGS: PRIORITY HEALTH NEEDS

Advancing inclusive care services and strategies

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

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
- Violence prevention

2025 IMPLEMENTATION STRATEGY PLAN SUMMARY

NYC HEALTH+ HOSPITALS

ADVANCING INCLUSIVE CARE SERVICES AND STRATEGIES

Goal:

Improve diabetes and hypertension control for patients experiencing homelessness

WHY IS THIS IMPORTANT?

- Patients experiencing homelessness have higher rates of uncontrolled diabetes and hypertension, which can be treated.
- They also have higher rates of emergency room visits and inpatient stays.

SPOTLIGHT

Integrating Housing and Chronic Disease Care at Harlem Hospital

Launched in April 2025, the program links a Community Health Worker (CHW) supervisor with clinical pharmacists to re-engage PEH with uncontrolled diabetes or hypertension who have lost contact with their care teams.

The CHW conducts proactive outreach, helping patients schedule follow-up visits and reconnect with pharmacist-led and primary care services.

- 62% of identified patients have been connected to care since the initiative's launch.
- One patient has achieved permanent housing after being connected to the Housing for Health program.

SUCCESS MEASURE

- ✓ We will monitor metrics of Diabetes and Hypertension control in our patients experiencing homelessness that are seen in primary care.
- ✓ We will also monitor the number of emergency room visits and inpatient stays for our patients experiencing homelessness.

NYC HEALTH+ HOSPITALS

ADVANCING INCLUSIVE CARE SERVICES AND STRATEGIES

Goal:

Introduce more New Yorkers to lifestyle medicine

WHY IS THIS IMPORTANT?	SPOTLIGHT	SUCCESS MEASURE
▪ Lifestyle habits such as healthy eating, being physically active, and getting adequate sleep go a long way to help prevent and treat type 2 diabetes, heart disease, and high blood pressure. ▪ Lifestyle medicine programs support patients in making behavior changes while also addressing their needs, such as access to healthy foods.	**Lifestyle Medicine Program** Available to patients in all five boroughs, the program, originally launched at NYC Health + Hospitals/Bellevue in 2019, provides comprehensive support to patients living with chronic conditions like type 2 diabetes, high blood pressure, and obesity. Participants receive support from a team of health care professionals who provide personalized care plans, one-on-one counseling, group classes, exercise programs, stress management resources, and fresh produce deliveries to support their holistic health goals. ▪ Provided over 10,000 group visits and served over 1,300 patients in the past year. ▪ Distributed over 5,000 boxes of free, fresh produce since launch in February 2024.	✓ We plan to have at least 5,000 lifestyle medicine visits per year, serving diverse communities throughout NYC. ✓ We also offer two healthy eating jumpstart programs each year for staff, along with regular livestreamed cooking demonstrations using affordable, accessible ingredients to make delicious plant-based meals!

ADVANCING INCLUSIVE CARE SERVICES AND STRATEGIES

Goal:

Make NYC Health + Hospitals a friendlier place to get care

WHY IS THIS IMPORTANT?	SPOTLIGHT	SUCCESS MEASURE
▪ Providing the best possible health care to all New Yorkers also means offering the friendliest and warmest environment, making our communities feel welcome, heard and respected.	**Language Assistance** NYC Health + Hospitals offers free interpreters in more than 300 languages, along with translated versions of essential documents in the most commonly spoken languages. Patients with disabilities also receive free communication support, including American Sign Language (ASL) interpreters and key documents in Braille. "We Speak Your Language" signs are displayed throughout our facilities so patients can easily point to their language and receive immediate assistance. These services ensure that every patient feels respected, understood, and cared for with compassion.	✓ Success means that every single person who walks into a NYC Health + Hospitals facility will be greeted by a smiling staff member who says, "How can I help you?", with the goal of meeting each individual's needs and preferences by actively listening and communicating with empathy to ensure a positive experience with our health system. ✓ We will also monitor success through patient satisfaction surveys and reviews on Yelp and Google.

NYC HEALTH+ HOSPITALS

ADVANCING INCLUSIVE CARE SERVICES AND STRATEGIES

Goal:

Improve MetroPlusHealth and NYC Health + Hospitals' patient satisfaction scores to make it the best health insurance plan/provider partnership

WHY IS THIS IMPORTANT?

- MetroPlusHealth provides affordable, quality health care to over 700,000 members.
- Our patients who are insured by MetroPlusHealth have less paperwork, and get better wrap-around social services.

SPOTLIGHT

MyChart
MyChart is a free and secure online tool that gives patients convenient, 24/7 access to their health information. Available in the top 11 languages spoken across our facilities, it helps ensure care is accessible and inclusive.

The platform enhances transparency and streamlines communication, enabling patients to feel informed, supported, and in control of their care. This ease of access reduces stress, builds trust, and strengthens satisfaction with the overall care experience.

SUCCESS MEASURE

- ✓ Everything from of the ease of using the contact center, to the number of MetroPlus Virtual ExpressCare visits, to how much paperwork patients and members need to do all plays a role in customer satisfaction.
- ✓ Ultimately, all that work will show up in our customer loyalty scores, our number of MetroplusHealth members, and our state quality rankings.

NYC HEALTH+ HOSPITALS

ADVANCING INCLUSIVE CARE SERVICES AND STRATEGIES

Goal:

Increase full-time permanent job opportunities for nurses

WHY IS THIS IMPORTANT?	SPOTLIGHT	SUCCESS MEASURE
▪ Our staff nurses, and the care they give our patients and communities every single day, are a defining feature of who we are. ▪ The hiring of additional permanent staff nurses is an investment in the health system's workforce, as it ensures patients are served by permanent employees who are committed to the mission, come from the community, and build institutional knowledge.	**Nurse Residency Program** The Nurse Residency Program at NYC Health + Hospitals offers newly-graduated nurses a comprehensive, 12-month training experience designed to ensure a smooth transition from student to professional. This program provides specialized education, mentorship, and real-world training in essential areas such as ethics, clinical leadership, communication, patient safety, and evidence-based practices. ✓ The program has already enrolled over 1,486 participants ✓ The program has been expanded across the health system, including post-acute care facilities, Gotham Health sites, and Correctional Health Services.	✓ By 2028 our goal is to hire at least 1000 new full time staff nurses to be employed throughout our entire health system.

NYC HEALTH+ HOSPITALS

BRIDGING HEALTH GAPS

Goal:

Upgrade aging infrastructure and medical equipment to make our health system more resilient, secure, and sustainable

WHY IS THIS IMPORTANT?

- NYC Health + Hospitals facilities are among the oldest in the city and nation.
- Upgraded facilities will improve patient outcomes and protect us from nature's challenges such as pandemics and extreme weather events related to climate change.

SPOTLIGHT

Kings County Hospital Capital Upgrades
NYC Health + Hospitals/Kings County is investing in upgrades to strengthen emergency and primary care for Central Brooklyn residents.

With $8 million in FY26 capital funding awarded by City Council Speaker Adrienne Adams and Council Member Rita Joseph, the hospital will add two trauma bays to its Level I Trauma Center and upgrade its primary care clinic.

Last year:

- ✓ the hospital's Emergency Department saw over 125,000 visits as a designated Level I Trauma Center,
- ✓ its primary care services anchor community health with an average of one million visits annually.

SUCCESS MEASURE

- ✓ Upgrading our facilities will be a long and expensive process.
- ✓ The best measure of success will be the health of the communities we serve. We will collect real-time data about the volume of patients that enter our doors and how quickly they return to their regular lives.

NYC HEALTH+ HOSPITALS

BRIDGING HEALTH GAPS

Goal:

Meet the Federal Government's 2030 carbon goal by reducing waste and improving energy efficiency

WHY IS THIS IMPORTANT?

- The health care sector has historically been a major polluter, churning out more than 4.4% of global and 8.5% of U.S. carbon emissions that contribute to climate change.
- We also need to strengthen our facilities to improve their climate resilience, particularly from sea level rise, heavy rainstorm events, heat waves and power outages.

SPOTLIGHT

Climate Resilience Plan
NYC Health + Hospitals has surveyed its facilities — which have a total footprint of approximately 20 million square feet across over 75 buildings — and studied the impact climate hazards such as stormwater flooding, coastal flooding, extreme heat, and wind can have on key facility operations.

The plan identifies a series of infrastructure projects, such as installation of additional emergency generators linked to critical HVAC equipment, improving the drainage capacity of roofs and windows, building additional flood barriers, and installing green infrastructure.

SUCCESS MEASURE

- ✓ Our success will be defined by how well we are progressing toward meeting the specific metrics identified in the Federal Government's Climate Pledge (H+H joined in 2022), such as reducing operational carbon emissions by 50% by 2030.

NYC HEALTH+ HOSPITALS

BRIDGING HEALTH GAPS

Goal:

House 3,000 patients

WHY IS THIS IMPORTANT?

- We can't provide the best care to New Yorkers if they don't have a roof over their heads.
- Stable, safe housing is fundamental to overall good health.

SPOTLIGHT

Bridge to Home
NYC Health + Hospitals, in partnership with Mayor Adams' administration, launched the "Bridge to Home" facility to provide transitional housing and comprehensive behavioral health care for patients with severe mental illness who are ready to be discharged but lack stable housing.

The Midtown West site accommodates 46 guests in private rooms and offers on-site clinical care, psychiatric services, therapy, substance use treatment, and wraparound support including case management and housing navigation.

SUCCESS MEASURE

- ✓ We will work closely with facilities and providers to identify and refer patients who will benefit from our Housing and Location Placement Services program.
- ✓ We will leverage our land to assure the creation of 650 new affordable and supportive homes.

NYC HEALTH+ HOSPITALS

BRIDGING HEALTH GAPS

Goal:

Build pathways to careers in medicine for students who reflect the communities and cultures of our patients to enhance care

WHY IS THIS IMPORTANT?

- The strength of our health system and the care we give relies on our diverse staff and the linguistic, ethnic and cultural connections we have with our communities.
- But historically, the path to medical school has been unavailable, or hard to find, for young people from certain racial and ethnic groups.

SPOTLIGHT

Medical Opportunities for Students and Aspiring Inclusive Clinicians (MOSAIC)
We established MOSAIC, a suite of pathway programs to (1) encourage young people of color to go into careers in medicine and (2) help recruit people from groups under represented in medicine who are currently in medical school or residency to NYC Health + Hospitals.

The Visiting Scholars Program places over 30 medical students from schools such as CUNY School of Medicine and Morehouse School of Medicine into elective clinical rotations across our system, supporting their medical career development and potential future employment with our health system.

SUCCESS MEASURE

- ✓ We will measure our success by tracking the number of participants in each of our programs, and specifically what percent choose NYC Health + Hospitals for residency and/or an attending-level job opportunity.

NYC HEALTH+ HOSPITALS

RESOURCE COMMITMENT

- NYC Health + Hospitals will continue its financial and in-kind resource commitment through FY2025-2028.
- Resources include clinical and nonclinical services, evaluation efforts, community partnerships, and innovative approaches, as well as staff time that supports collaboration, advocacy, and community engagement.
- The system will continue to evaluate new, innovative solutions to community health needs.

EVALUATION

- Evaluation will be based on quantitative metrics and through qualitative feedback from our community partners and staff.
- Information-sharing and evaluation will remain ongoing as we strive to implement this ISP.
- We will share periodic updates to NYC Health + Hospitals Board of Directors on program metrics and feedback.

NYC HEALTH + HOSPITALS

NYC HEALTH + HOSPITALS SINCE THE 2022 ISP

IMPROVING HEALTH EQUITY

Virtual ExpressCare

Care is available by phone or video in more than 200 languages, including American Sign Language, without requiring a smartphone or high-speed internet. Virtual ExpressCare connects patients to in-person services such as lab testing, radiology, and follow-up care, avoiding unnecessary Emergency Department visits.

- 268,000+ patients to date
- 70,000+ annual number of visits
- 90% average patient satisfaction rate
- 5-minute average wait time to be connected to care
- 9 in 10 patients avoided going to the hospital within 7 days after using the service
- 31% of patients completed the transition to longitudinal Primary Care

Street Health Outreach & Wellness Mobile Units (SHOW)

Street Health Outreach & Wellness Mobile Units (SHOW) SHOW units are deployed in specific zip codes across the Bronx, Brooklyn, Manhattan, and Queens, targeting areas with high concentrations of homeless individuals.

Originally launched in 2021, SHOW has conducted

- 269,000 street engagements
- 32,000 medical consults.

The program has distributed

- 82,000 hygiene kits
- 5,000 Narcan kits
- 3,000 fentanyl test strips

More than half of the people visited have come for repeat engagements, indicating the program's effectiveness in building trust and providing consistent care.

NYC HEALTH + HOSPITALS SINCE THE 2022 ISP

IMPROVING HEALTH EQUITY

Health Screenings

A lung cancer screening program was launched at ten NYC Health + Hospitals sites.

- Since September 2022, over 10,000 scans for lung cancer have been performed.

Colorectal cancer screening using the at-home fecal immunochemical test (FIT).

- NYC Health + Hospitals screened over 50,000 patients for colorectal cancer in 2023 using FIT.

Helped patients monitor their blood pressure at home in between doctors' visits.

- Distributed 10,000 free blood pressure cuffs.

New Services and Spaces

Maternal Health

- A new $1.2 million Cardio-Obstetrics program at Kings County Hospital aims to reduce maternal mortality and morbidity among women of color by focusing on heart disease during and after pregnancy, the cause of more than 1 in 4 maternal deaths nationwide.

Behavioral Health Services

- The health system launched a comprehensive three-year plan to strengthen and expand its behavioral health services, funded in part with $41 million from the state.

NYC HEALTH + HOSPITALS SINCE THE 2022 ISP

FIGHTING CHRONIC DISEASE

Plant-based Medicine

NYC Health + Hospitals celebrated over 1.2 million plant-based meals served in the program's first two years. Plant-based meals are now the default choice at lunch and dinner, and bring a host of health benefits, reductions in carbon emissions, and cost savings.

NYC Care

NYC Care celebrated its five-year anniversary and released two studies showing its members had chronic disease management comparable to Medicaid enrollees.

NYC Health + Hospitals' NYC Care Releases Studies Highlighting Program as National Model for Promoting Health Equity Among Uninsured - NYC Health + Hospitals

Since its launch:

- 125,000 members enrolled
- + 1 million primary care appointments
- + 500,000 calls received to call center

NYC HEALTH + HOSPITALS SINCE THE 2022 ISP

FACILITATING ACCESS TO RESOURCES

Housing for Health

In 2024, NYC Health + Hospitals' Housing for Health stably housed 375 patients in affordable, supportive, and market rate housing.

Through the medical respite program patients experiencing homelessness discharged from our facilities are able to receive medically tailored meals, coordination of and transportation to medical appointments, intensive housing case management, as well as home-based clinical services such as home physical therapy, wound care, and infusion during their respite.

There are over 500 patients benefiting from housing navigation services. Since its launch, the initiative has now housed nearly 1,200 patients formerly experiencing homelessness.

Housing for Health's medical respite program provided short-term housing and access to medical care to nearly 290 patients in 2024, and over 1400 since its inception.

Expanded free health related legal services for patients in partnership with LegalHealth, a division of the New York Legal Assistance Group (NYLAG).

Nearly 5,000 patients accessed legal services in 2023.

NYC HEALTH + HOSPITALS SINCE THE 2022 ISP

FACILITATING ACCESS TO RESOURCES

Community Health Workers

The health system led a team of community health workers who assisted 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.

- 35,000 patients assisted

Financial Counselors

Financial counselors connect individuals and families to free or low-cost health insurance plans, including Medicaid, the Essential Plan, and Qualified Health Plans available through the NY State of Health Marketplace. Counselors also assist patients who are not eligible for public insurance by helping them apply for NYC Health + Hospitals' financial assistance programs.

- Last year, more than 400,000 patients had a financial counseling interaction and 85% enrolled in either health insurance or a financial assistance program.

Board of Directors Approval Request

Adopting in the name of New York City Health and Hospitals Corporation ("**NYC Health + Hospitals**") Board of Directors an Implementation Strategy Plan (an "**ISP**") for each of NYC Health + Hospitals' ten acute care hospitals over 11 campuses and for the NYC Health + Hospitals/Henry J. Carter Specialty Hospital ("**HJC**") as a supplement to the Community Health Needs Assessment (the "**CHNA**") which was approved by the Board in June 2025.

Implementation Strategy Plan 2025

Community Health Needs Assessment

NYC HEALTH+ HOSPITALS

ABOUT THE IMPLEMENTATION STRATEGY PLAN

This Implementation Strategy Plan (ISP) describes how NYC Health + Hospitals plans to address the priority health needs identified in our recently completed Community Health Needs Assessment (CHNA). This ISP was submitted on October 30, 2025 to comply with federal tax law requirements set forth in IRS Code Section 501(r)(3) and IRS Notice 2011-52. The CHNA was submitted in fiscal year ending June 30, 2025.

The following NYC Health + Hospitals acute care facilities, organized by county, serve the communities addressed in this ISP:

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

A digital copy of the ISP is publicly available at nychealthandhospitals.org/isp2025.

Adopted by NYC Health + Hospitals Board of Directors on October 30, 2025.

Made publicly available October 31, 2025.

The CHNA was adopted by NYC Health + Hospitals Board of Directors on June 26, 2025. The report was made publicly available June 30, 2025.

A digital copy of the CHNA is publicly available at nychealthandhospitals.org/publications-reports/2025-community-health-needs-assessment.

Community input is encouraged. Please address CHNA feedback to chna@nychhc.org.

TABLE OF CONTENTS

Dear New Yorkers:

On behalf of the entire NYC Health + Hospitals system, we are honored to share our 2025 Implementation Strategy Plan (ISP) with you. The ISP is a companion report to the Community Health Needs Assessment (CHNA), a tri-annual Federal legal requirement published in June 2025 and available here.

NYC Health + Hospitals is the largest municipal health care system in the country, serving over one million New Yorkers annually in over 45 locations. Our integrated system includes 11 acute care hospital sites, five post-acute facilities, the Gotham Health network of community health centers across the five boroughs, Correctional Health Services, and MetroPlusHealth, our subsidiary health plan. Every day, our over 70,000 workforce members live our mission of providing high quality health care services with compassion, dignity, and respect to all, regardless of income, gender identity, or insurance status. At NYC Health + Hospitals we care for New York City. No exceptions.

The 2025 CHNA offered a valuable window into the health priorities and experiences of New Yorkers across the city. Using these insights, NYC Health + Hospitals is assessing how our programs and services can respond even more effectively to community needs over the next three years. We are aiming to strengthen access to care and health outcomes and to build deeper, more meaningful partnerships with the communities we serve.

We are grateful to everyone who contributed their voice to the CHNA and are pleased to share the planned impact of this work through the ISP. While community health needs extend beyond our walls, understanding them equips us to provide better care, foster trust, and plan for a healthier, stronger future together.

Thank you.

Mitchell Katz, MD
President and CEO
NYC Health + Hospitals

Deborah Brown, JD, MSW
Senior Vice President, Chief External Affairs Officer
NYC Health + Hospitals

ABOUT NYC HEALTH + HOSPITALS

As the largest municipal health care system in the United States, NYC Health + Hospitals provides high-quality health care services to all New Yorkers with compassion, dignity, and respect. Our mission is to serve everyone without exception, regardless of their ability to pay, gender identity, or insurance status.

The system acts as an anchor institution for the dynamic communities we serve. Through our primary and trauma care, neighborhood health centers, skilled nursing facilities, and community care, we support the health of patients throughout their lives and beyond our facilities. NYC Health + Hospitals also serves as a premier teaching system and a designated treatment center for the U.S. President.

Over **1 million** New Yorkers served annually

11
Acute Care Hospital Sites

5
Level I Trauma Centers

1
Level II Trauma Center

2
Level II Pediatric Trauma Centers

29
Community Health Centers

1
Long-Term Acute Care Hospital

5
Post-Acute Care Facilities

70K
Workforce Members

70% of our discharges are patients covered by Medicaid or the Essential Plan

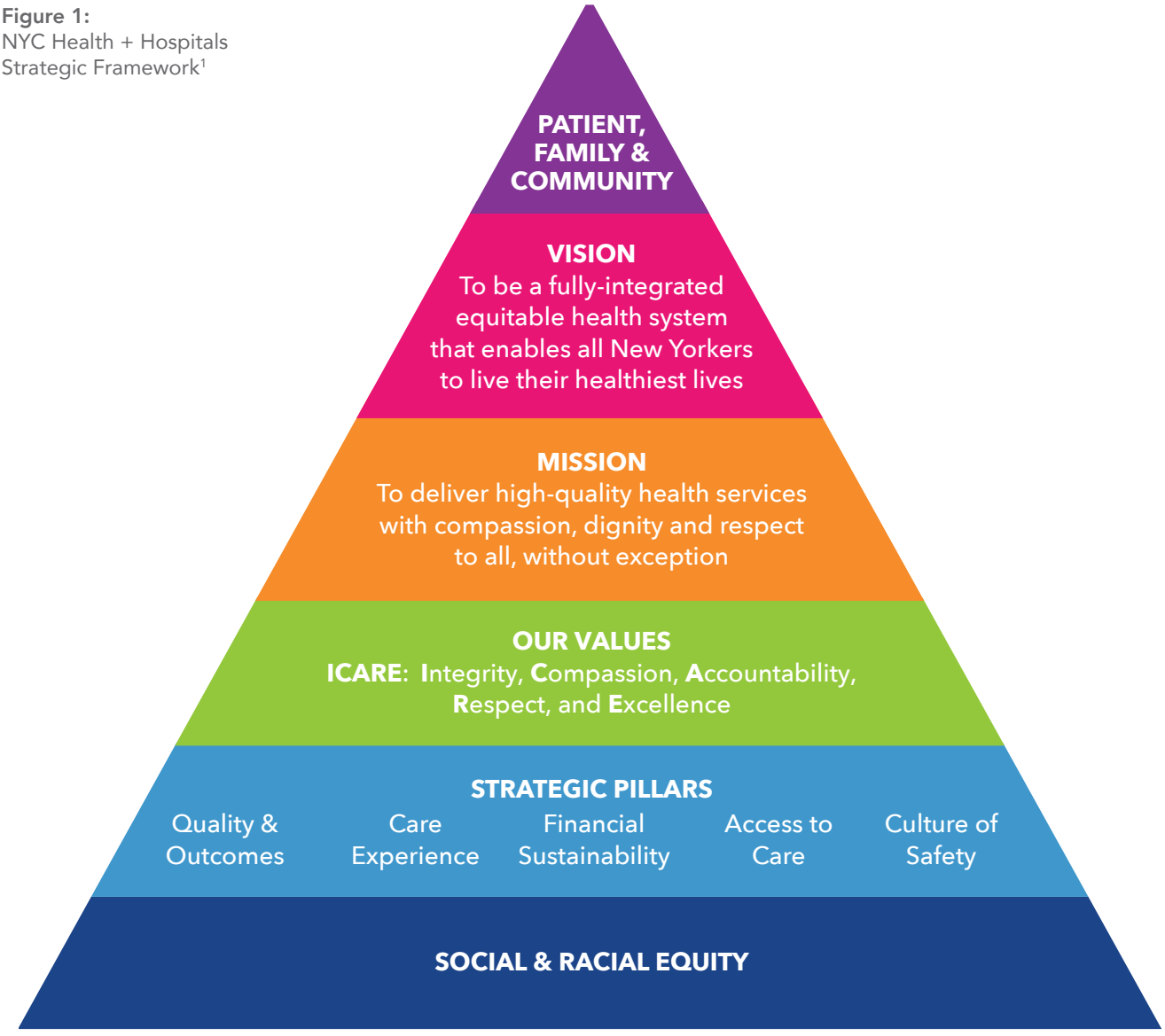
STRATEGIC FRAMEWORK

The NYC Health + Hospitals Strategic Framework reflects the system's commitment to its mission, vision, and values, and guides efforts to support patients, families, and communities (Figure 1). Grounded in our ICARE values—Integrity, Compassion, Accountability, Respect, and Excellence—the framework helps ensure that every interaction is rooted in dignity.

It will help us offer our patients a better experience when under our care and will increase staff awareness to become better engaged with the mission and vision of the organization. It shapes how we respond to the broader factors that influence health, connecting individuals to the care and social supports they need. The ICARE standards also foster a shared sense of purpose among staff and strengthen alignment with our mission to serve all New Yorkers, regardless of circumstance.

The pyramid guides NYC Health + Hospitals strategic discussions and serves as a touchstone for its programming. The process and findings of this ISP are well aligned with the values, mission and vision of the organization.

Figure 1:
NYC Health + Hospitals Strategic Framework[1]



THE ENTITIES WITHIN NYC HEALTH + HOSPITALS

METROPLUSHEALTH

metroplus.org

Since 1985, MetroPlusHealth has provided quality, affordable health plans to over 700,000 New Yorkers. As part of NYC Health + Hospitals, MetroPlusHealth supports the nation's largest municipal health system with a diverse staff of local New Yorkers who speak more than 40 languages.

NYC Health + Hospitals/ Gotham Health

nychealthandhospitals.org/gotham-health

NYC Health + Hospitals/Gotham Health (Gotham Health) is a network of Federally Qualified Health Centers (FQHC) formed in 2012 to help individuals and families address their health care needs in their own neighborhoods. Gotham Health provides easy-to-access, high-quality, affordable health care services with a focus on primary and preventive care. In addition, Gotham Health care teams are trained to help patients manage ongoing conditions, such as hypertension, diabetes, asthma, and heart disease.

29 Community Health Centers

120,000+ New Yorkers served annually

HHC ACO

nychealthandhospitals.org/hhc-aco-inc-an-accountable-care-organization

The HHC Accountable Care Organization (HHC ACO) is a collaborative venture including physician affiliate organizations, NYC Health + Hospitals acute care, outpatient, and post-acute care facilities, as well as teaching administration, quality assurance, and supervisory services.

Value-based care connects two key strategic pillars: Quality & Outcomes and Financial Sustainability.

It drives our health system to provide the highest quality care, prevent disease, and help patients avoid worsening illness whenever possible. The success of value-based payment at NYC Health + Hospitals has spurred innovation and positive change, leading to improved processes for delivering preventive health screenings and supporting patients in managing chronic diseases.

Value-based care and risk contracting arrangements between NYC Health + Hospitals and various key payors have been integral to the system's financial turnaround and stabilization over the past eight years. The largest value-based payment arrangements are between NYC Health + Hospitals and MetroPlusHealth, Healthfirst, Fidelis, and Medicare (through the Medicare Shared Savings Program, via the HHC ACO).

5,000+ Medicare lives covered

4 ACO partners

NYC Health + Hospitals Community Care

nychealthandhospitals.org/services/community-care

NYC Health + Hospitals/Community Care (Community Care) carries on the health system's long-standing tradition of providing health, wellness, and support services directly to patients in their homes and communities. As a Centers for Medicare & Medicaid Services (CMS) and New York State-certified Home Health Agency, this division oversees community-based care management programs, including the state-designated Medicaid Health Home program.

Working across the health system and with contracted community-based agencies, Community Care strengthens access to primary and behavioral health care, reduces avoidable hospital visits, and addresses gaps that contribute to health disparities. This approach helps individuals stay healthy within their communities, preventing the need for more intensive or costly care while ensuring equitable, high-quality services.

13 contracted community-based Health Home Care Management Agencies

17,000+ unique high-risk and high-need patients served

NYC Health + Hospitals/ Correctional Health Services

nychealthandhospitals.org/correctionalhealthservices/

NYC Health + Hospitals/Correctional Health Services (CHS) is a national leader in carceral health care, providing high-quality, innovative services from pre-arraignment through community reentry. Since 2016, CHS has served as the direct health care provider in New York City jails, fulfilling court-ordered forensic and psychiatric evaluations while supporting broader criminal-legal reform efforts. As part of the nation's largest municipal health care system, CHS leverages extensive resources to improve care for individuals in custody.

Systemic inequities disproportionately affect incarcerated populations, including communities of color, individuals with mental illness or substance use disorders, and those facing poverty and homelessness. CHS addresses these challenges with comprehensive in-jail services, including medical, nursing, mental health, social work, substance use treatment, dental and vision care, pharmacy, and discharge planning. Robust bridge and reentry programs help mitigate barriers such as housing instability, insurance disruptions, employment discrimination, and difficulty reconnecting with support networks, ensuring continuity of care and better long-term health outcomes.

29,900 patients served

In 2024, CHS conducted more than **735,000** clinical encounters and completed more than **37,400** medical intakes

Virtual ExpressCare

expresscare.nyc

Since its launch in March 2020, Virtual ExpressCare has offered 24/7/365 access to urgent care to all New Yorkers to take care of their physical, mental, emotional, or other health needs. The service helps close health equity gaps and reduces barriers to telehealth for vulnerable populations.

Care is available by phone or video in more than 200 languages, including American Sign Language, without requiring a smartphone or high-speed internet. Virtual ExpressCare connects patients to in-person services such as lab testing, radiology, and follow-up care, avoiding unnecessary Emergency Department visits. Patients are also transitioned into ongoing primary and behavioral health care, supporting long-term wellness.

268,000+ patients to date

70,000+ annual number of visits

90% average patient satisfaction rate

5-minute average **wait time** to be connected to care

9 in **10** patients avoided going to the hospital within **7** days after using the service

31% of patients completed the transition to longitudinal Primary Care

INTRODUCTION

NYC Health + Hospitals plays a unique role in the lives of New Yorkers, caring for more than one million people each year without exception. Our facilities deliver expert medical care while serving as trusted anchor institutions, connecting individuals to essential health services, community resources, and support systems that foster stronger, healthier neighborhoods. The 2025 Community Health Needs Assessment (CHNA), published in June 2025 and available here, identified two overarching areas of need: (1) to advance inclusive care services and strategies, and (2) to bridge persistent health gaps across our communities. These priority health needs reflect the growing burden of chronic and behavioral health conditions, and the social and structural factors that shape health outcomes.

This Implementation Strategy Plan (ISP) translates those findings into action. Guided by the CHNA, NYC Health + Hospitals responds to the identified community needs with primary, preventive, and behavioral health services, strengthening care coordination across the system, and using data to focus resources on communities with the greatest need. We recognize that these cannot be solved by our health system alone. Complex social and economic factors, resource limitations, and gaps in community-based support create barriers that require coordinated efforts across sectors to truly address. Working with community-based and faith-based organizations, public health agencies, and other stakeholders, we remain committed to finding innovative approaches that remove barriers and improve health outcomes for New Yorkers citywide.

NYC HEALTH + HOSPITALS SINCE THE 2022 IMPLEMENTATION STRATEGY PLAN

The tri-annual CHNA and ISP reinforce our commitment to hearing and responding to the voice of the community we serve. The priority health needs identified by NYC Health + Hospitals leadership and communities in the 2022 CHNA were improving health equity, fighting chronic disease, and facilitating access to resources.

In the years since, we have continued to focus our efforts on addressing these critical needs through targeted initiatives that improved access to care and expanded services in our communities. As outlined in the 2025 CHNA, we have seen encouraging steps in reducing health disparities and improving access to care across New York City. These efforts help lay the groundwork for continued progress toward a more equitable health care system.

Continuing this work, NYC Health + Hospitals is advancing an ambitious agenda that reflects the needs of our communities and workforce. In doing so, this ISP provides a roadmap for continued growth, system enhancement, and stronger connections between clinical care and the neighborhoods we serve.

NYC Health + Hospitals, the largest municipal health care system in the United States, serves more than one million people annually, providing comprehensive, accessible, and affordable care to all, without exception. The system includes 11 acute care hospital sites, a dedicated long-term acute care hospital, five post-acute care facilities, health care for patients on Riker's Island, and a network of NYC Health + Hospitals/Gotham Health Federally Qualified Health Centers. Across all of our system, patients receive top-ranked trauma care, a wide range of inpatient specialties, mental health services, and essential primary and preventive care to keep communities healthy. NYC Health + Hospitals facilities have earned numerous special designations for quality and culturally responsive care and have received top ranks by U.S. News and World Report in the 2024-2025 ratings.[2]

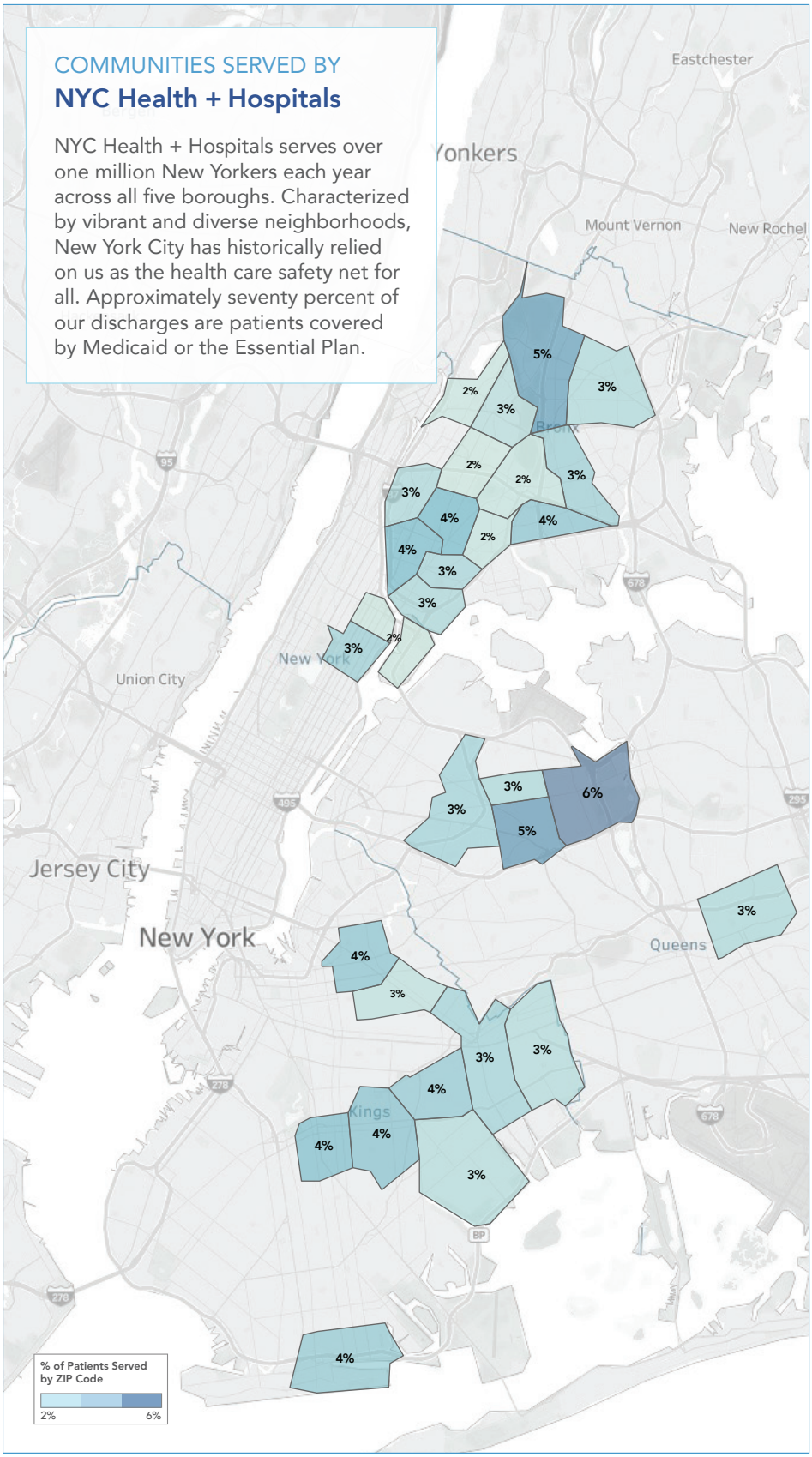
PRIORITY AREAS OF NEED IN 2025

The 2025 CHNA was shaped by broad community input and robust analysis, including 6,589 surveys, 56 stakeholder interviews and focus groups, and systemwide data review. Together, these insights highlighted the clinical and social challenges most pressing for New Yorkers, and reinforced the need for coordinated health and social service supports.

Two priorities emerged from this process: advancing inclusive care services and strategies, and bridging health gaps. Within these categories, community members and stakeholders identified a range of concerns, including chronic disease prevention and management (with a particular focus on hypertension and diabetes), maternal health, respiratory health, mental health, holistic care for substance use disorder, cancer prevention and treatment, and overall patient experience. These findings point to the importance of prevention, early intervention, and more seamless coordination of care across the system.

The CHNA also underscored how social and economic conditions continue to shape health outcomes. Across forums, focus groups, and surveys, communities raised consistent concerns about housing stability, access to affordable and nutritious food, economic opportunity, safe outdoor spaces, violence prevention, and navigation of the health system itself. Addressing these challenges will require ongoing collaboration with partners across sectors, as many of these barriers extend beyond the reach of health care alone.

Through this ISP, NYC Health + Hospitals is turning the priority health needs identified in the CHNA into tangible goals that improve care for New Yorkers. It is not a coincidence that these needs and goals align with our system's underlying strategic priorities. We will remain focused on specific steps to better meet our community's needs and advance our system.



IMPLEMENTATION STRATEGY PLAN

This ISP describes how NYC Health + Hospitals will address the priority health needs identified in the 2025 CHNA at both the system and local level. It sets forth our strategic agenda, the underlying goals guiding implementation, and the corresponding framework for future growth.

APPROACH

This ISP was developed through an approach grounded in NYC Health + Hospitals' long-term vision and aligned with the health system's strategic pillars:

1. We have defined the goals that will guide our efforts to address the priority health needs highlighted by the community. These are based on our strategic framework, which supports our vision to be a fully integrated health system and strengthens collaboration with community partners to improve health outcomes.
2. We highlighted select programs as spotlights to demonstrate how this strategy is implemented in practice. While these examples illustrate important efforts, they are not exhaustive. A wide range of additional initiatives and activities are underway across the system, reflecting the depth and breadth of our ongoing work to address priority health needs.
3. We committed to continually assessing and investing in programs, services, and partnerships that address priority health needs and support the long-term well-being of New Yorkers.

STRATEGIC PILLARS

NYC Health + Hospitals is guided by a framework rooted in social and racial equity. The following section describes the five strategic pillars that guide NYC Health + Hospitals' work and shape the goals outlined in this ISP.

Pillar	Focus
QUALITY & OUTCOMES	• Delivering care that improves health outcomes and promotes long-term wellness.
CARE EXPERIENCE	• Ensuring every patient receives compassionate, respectful, and responsive care.
ACCESS TO CARE	• Reducing barriers so all New Yorkers can reach the services they need.
FINANCIAL SUSTAINABILITY	• Strengthening the health system's fiscal foundation to preserve and grow essential services.
CULTURE OF SAFETY	• Embedding safe practices in every aspect of care for both patients and staff.

ADDRESSING PRIORITY HEALTH NEEDS

ADVANCING INCLUSIVE CARE SERVICES AND STRATEGIES

The CHNA identified the need to expand inclusive services that emphasize prevention, patient-centered care, and the reduction of systemic inequities. NYC Health + Hospitals has committed to several goals aligned with this priority area and will continue taking programmatic steps to meet them.

Goal: Improve diabetes and hypertension control for patients experiencing homelessness

Targeting chronic disease management for patients experiencing homelessness addresses critical gaps in care and ensures that all patients have the opportunity to maintain their health.

Quality & Outcomes

SPOTLIGHT

Integrating Housing and Chronic Disease Care at Harlem Hospital

At NYC Health + Hospitals/Harlem, care teams are addressing both medical and social barriers to health for people experiencing homelessness (PEH). In April 2025, the adult primary care clinic launched a multidisciplinary initiative to improve chronic disease control for unhoused patients. The program links a Community Health Worker (CHW) supervisor with clinical pharmacists to re-engage PEH with uncontrolled diabetes or hypertension who have lost contact with their care teams. The CHW conducts proactive outreach, helping patients schedule follow-up visits and reconnect with pharmacist-led and primary care services. They also provide targeted social support, including transportation assistance, benefits enrollment, and medication adherence support. Regular case conferences across disciplines ensure coordinated outreach, shared problem-solving, and individualized care planning. Through this collaboration, 62% of identified patients have been reconnected to care since the initiative's launch. One patient – referred by the CHW to NYC Health + Hospitals' Housing for Health program – was connected with a housing navigator and ultimately achieved permanent housing through Housing for Health's Location and Placement Services.

Goal: Introduce more New Yorkers to lifestyle medicine

Many New York City neighborhoods are considered food deserts, which can contribute to higher rates of chronic disease like diabetes and hypertension. Lifestyle Medicine programs help address these challenges by providing patients with nutritious food, along with education, coaching, and practical tools that support healthier daily routines and long-term well-being.

Access to Care

SPOTLIGHT

Lifestyle Medicine Program

NYC Health + Hospitals has expanded its nationally recognized Lifestyle Medicine Program citywide. Available to patients in all five boroughs, the program, originally launched at NYC Health + Hospitals/Bellevue in 2019, provides comprehensive support to patients living with chronic conditions like type 2 diabetes, high blood pressure, and obesity. Participants receive support from a team of health care professionals who provide personalized care plans, one-on-one counseling, group classes, exercise programs, stress management resources, and fresh produce deliveries to support their holistic health goals. With a $5 million annual investment, NYC Health + Hospitals aims to serve nearly 4,000 patients annually across all sites, offering tailored lifestyle interventions that reflect the cultural and socio-economic needs of the patients we serve. As of 2025, the program has provided over 10,000 group visits and served more than 1,300 patients in the past year. In addition, the Lifestyle Medicine Program has distributed over 5,000 boxes of free, fresh produce to its patients since the launch of the produce box program in February 2024.

Goal: Make NYC Health + Hospitals a friendlier place to get care

Creating a welcoming and supportive environment strengthens patient-centered care. NYC Health + Hospitals is strengthening our ICARE values—of Integrity, Compassion, Accountability, Respect, and Excellence—by embedding kindness across every patient and staff interaction. Efforts extend beyond staff behavior to include patient-facing improvements such as accessible signage, culturally responsive services, and systems that minimize barriers to care. Training programs and staff recognition initiatives reinforce these values, helping to create an environment where patients feel heard, understood, and supported, and where health care is delivered equitably to all communities.

Care Experience

SPOTLIGHT

Language Assistance

Language Assistance reflects our commitment to providing safe, high-quality, and culturally responsive care delivered with kindness at every step. NYC Health + Hospitals offers free interpreters in more than 300 languages, along with translated versions of essential documents in the most commonly spoken languages. Patients with disabilities also receive free communication support, including American Sign Language (ASL) interpreters and key documents in Braille. "We Speak Your Language" signs are displayed throughout our facilities so patients can easily point to their language and receive immediate assistance. These services ensure that every patient feels respected, understood, and cared for with compassion. The health system also offers a Medical Interpreter Skills Training (MIST) Program where participants learn essential skills to interpret effectively in medical settings. This year, we are proud to offer the training in a record-breaking 20 languages, reflecting the rich diversity of our community and our staff.

Goal: Improve MetroPlusHealth's and NYC Health + Hospitals' patient satisfaction scores to make it the best health insurance plan/ provider partnership

Enhancing the ease with which MetroPlusHealth members and NYC Health + Hospitals' patients access their care and use their benefits will improve patient satisfaction, particularly for low-income and underserved New Yorkers. Efforts such as streamlining appointment scheduling, reducing administrative burden, and improving communication across clinical and insurance services allows patients to navigate their care more efficiently and get the support they need.

Care Experience

SPOTLIGHT

MyChart

MyChart is a free and secure online tool that gives patients convenient, 24/7 access to their health information. Available in the top 11 languages spoken across our facilities, it helps ensure care is accessible and inclusive. Through MyChart, patients can review test results as soon as they are released, read doctors' notes and visit summaries, manage appointments, request prescription refills, pay bills securely, and communicate directly with their providers, with responses prioritized within 48 hours. The platform enhances transparency and streamlines communication, enabling patients to feel informed, supported, and in control of their care. This ease of access reduces stress, builds trust, and strengthens satisfaction with the overall care experience.

Goal: Increase full-time permanent job opportunities for nurses

A stable, well-supported workforce is essential to delivering consistent, high-quality care for all communities. Expanding residency programs and career pathways helps retain permanent nursing staff, which strengthens patient relationships and ensures high-quality care for all communities. In addition to the cost savings, the hiring of additional permanent staff nurses is an investment in the health system's workforce, as it ensures patients are served by permanent employees who are committed to the mission, come from the community, and build institutional knowledge.

Culture of Safety

SPOTLIGHT

Nurse Residency Program

The Nurse Residency Program at NYC Health + Hospitals offers newly-graduated nurses a comprehensive, 12-month training experience designed to ensure a smooth transition from student to professional. This program provides specialized education, mentorship, and real-world training in essential areas such as ethics, clinical leadership, communication, patient safety, and evidence-based practices. Aimed at increasing job retention and expanding opportunities for skilled professionals, the program has already enrolled over 1,486 participants and has been expanded across the health system, including post-acute care facilities, Gotham Health sites, and Correctional Health Services.

BRIDGING HEALTH GAPS

The CHNA underscored that health is shaped by more than medical care, with social and economic factors playing a critical role. NYC Health + Hospitals is advancing goals to close these gaps, bolster community supports, and provide patients with the resources they need to thrive in and beyond our facilities.

Goal: Upgrade aging infrastructure and medical equipment to make our health system more resilient, secure, and sustainable

Investments in modern facilities and updated medical equipment create safer, more reliable care environments across neighborhoods. In these settings, staff are equipped to provide high-quality services with the latest technology, while patients benefit from spaces that are welcoming, accessible, and capable of supporting innovative care delivery. These upgrades to our infrastructure and medical equipment directly support communities that rely on our health system for safe and consistent care.

Quality & Outcomes

SPOTLIGHT

Kings County Hospital Capital Upgrades

NYC Health + Hospitals/Kings County is investing in upgrades to strengthen emergency and primary care for Central Brooklyn residents. With $8 million in FY26 capital funding awarded by City Council Speaker Adrienne Adams and Council Member Rita Joseph, the hospital will add two trauma bays to its Level I Trauma Center and upgrade its primary care clinic. Last year, the hospital's Emergency Department saw over 125,000 visits as a designated Level I Trauma Center, while its primary care services anchor community health with an average of one million visits annually.

These improvements will enhance the hospital's capacity to manage complex trauma cases, provide timely, coordinated care, and improve patient experience. These investments reinforce Kings County Hospital's role as a lifeline for the community and strengthen its ability to deliver equitable, lifesaving care.

Goal: Meet the Federal Government's 2030 carbon goal by reducing waste and improving energy efficiency

Creating healthier environments protects communities from environmental risks that disproportionately affect vulnerable populations. Efforts to reduce waste, improve energy efficiency, and protect our facilities from environmental damage support long-term health and resilience, and bolsters our system's ability to continue providing care in the future.

Quality & Outcomes

SPOTLIGHT

Climate Resilience Plan

On Earth Day 2024, NYC Health + Hospitals released its Climate Resilience Plan, a key commitment of the U.S. Department of Health and Human Services' Health Sector Climate Pledge, which the public health system signed in May 2022.

To develop the plan, NYC Health + Hospitals surveyed its facilities — which have a total footprint of approximately 20 million square feet across over 75 buildings — and studied the impact climate hazards such as stormwater flooding, coastal flooding, extreme heat, and wind can have on key facility operations.

The plan identified a series of infrastructure projects, such as installation of additional emergency generators linked to critical HVAC equipment, improving the drainage capacity of roofs and windows, building additional flood barriers, and installing green infrastructure.

Goal: House 3,000 patients

Stable housing is foundational to health. Ensuring individuals have secure living conditions allows them to engage consistently with health care services and reduces the impact of social and economic instability on health outcomes.

Access to Care

SPOTLIGHT

Bridge to Home

NYC Health + Hospitals, in partnership with Mayor Adams' administration, launched the "Bridge to Home" facility to provide transitional housing and comprehensive behavioral health care for patients with severe mental illness who are ready to be discharged but lack stable housing. The Midtown West site accommodates 46 guests in private rooms and offers on-site clinical care, psychiatric services, therapy, substance use treatment, and wraparound support including case management and housing navigation. Integrating housing with medical and behavioral health services fills a critical gap between inpatient care and permanent housing, reduces hospital readmissions, lessens reliance on shelters, and limits interactions with the criminal justice system, while promoting long-term stability and recovery for vulnerable New Yorkers.

Goal: Build pathways to careers in medicine for students who reflect the communities and cultures of our patients to enhance care

Expanding access to career opportunities in medicine strengthens our workforce in many ways. A more inclusive workforce supports culturally responsive care and creates long-term pathways for economic mobility in the communities we serve. It also helps patients connect to the care they need as research has shown that patient and provider racial concordance may be linked to increased visits for preventative care, greater treatment adherence, and lower emergency department use.[3]

Care Experience

SPOTLIGHT

Medical Opportunities for Students and Aspiring Inclusive Clinicians (MOSAIC)

NYC Health + Hospitals established MOSAIC, a suite of pathway programs designed to encourage young people to pursue careers in medicine and to recruit medical students and residents from groups underrepresented in medicine. The Visiting Scholars Program places over 30 students from institutions like CUNY School of Medicine and Morehouse School of Medicine into elective clinical rotations, supporting their career development and potential future employment with our health system. In partnership with Bronx-based Mentoring in Medicine, MOSAIC also provides mentoring and medical pathway support to middle, high school, and college students from underrepresented groups.

LOOKING AHEAD

COMMITMENT TO THE COMMUNITY

NYC Health + Hospitals is focused on strengthening its connection with the communities we serve through expanded outreach and education. During the CHNA process, participants highlighted that many community members are not fully aware of the range of services available to them or how to access these resources, creating barriers to care and support. Ensuring that all New Yorkers understand what services exist and how to use them is critical to improving community health and well-being. The health system works closely with community- and faith-based organizations to engage residents, provide clear guidance, and support navigation of both health and social services. Through regular community events, informational campaigns, and culturally tailored communications, NYC Health + Hospitals aims to make services more visible, accessible, and responsive to the needs of diverse populations, fostering stronger trust and a more equitable health care system.

Resource Commitment

Building on the initiatives and programs that address the priority health needs identified in the CHNA, NYC Health + Hospitals will continue to dedicate financial and in-kind resources through FY2025–2028. These include clinical and nonclinical services, evaluation efforts, community partnerships, and innovative approaches, as well as staff time that supports collaboration, advocacy, and community engagement.

Advocacy for community needs is also central to this work. NYC Health + Hospitals elevates priorities with government partners at all levels and with philanthropic organizations. These efforts inform policies, funding decisions, and programs that reduce barriers to care and promote healthier outcomes citywide.

SPOTLIGHT

Social Needs Navigation

To better support patients facing social challenges, NYC Health + Hospitals has integrated a new findhelp tool into its electronic medical record system, Epic. The platform connects patients to more than 7,000 community-based programs across New York City, including food assistance, transportation, and shelter, and is regularly updated to ensure accuracy. Building on the health system's social needs screening program, which screened over 250,000 primary care patients in 2023, the tool enables staff to generate tailored resource recommendations, share referrals in patients' preferred language, and track follow-up with community partners. Patients can also access findhelp through MyChart or the NYC Health + Hospitals website to locate local services that support their health and well-being. Integrating this resource into the care experience helps bridge clinical and social care, ensuring patients have access to the support they need to thrive.

Building a Healthier Future

This ISP reflects NYC Health + Hospitals' ongoing commitment to reducing disparities, reinforcing supports, and advancing the overall health of New Yorkers. Strategic engagement, partnerships, and advocacy ensure that resources and opportunities reach those who need them most, fostering a healthier, more resilient city.

SPOTLIGHT

Care Coordination for Individuals Experiencing Homelessness

A dedicated working group of NYC Health + Hospitals staff, community based partners, and generous donors are collaboratingto enhance care coordination for individuals experiencing homelessness who face acute health risks. Through pre-hospital notifications, proactive discharge planning, and enhanced communication between hospital staff and street outreach CBOs, the initiative ensures patients receive consistent, high-quality care and support across care settings. These efforts aim to improve quality of care, reduce unnecessary emergency visits, increase stable housing or safe haven placements, and prevent patients from being discharged without comprehensive care planning. The program is supported by the Care Coordination Fund at The New York Community Trust.

ACKNOWLEDGMENTS

THANK YOU TO THE NYC HEALTH + HOSPITALS, NYC DOHMH LEADERS AND COMMUNITY MEMBERS WHO CONTRIBUTED TO THIS REPORT

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Svetlana Lipyanskaya, MPA

WOODHULL
Sandra Sneed, MBA, FACHE

NYC Health + Hospitals Facility Leaders and Subject Matter Experts

Alfredo Jones, Chief Operating Officer, NYC Health + Hospitals/ North Central Bronx

Jeremy Segall, Assistant Vice President Quality and Safety, System Chief Wellness Officer

Komal Lodaria, Senior Director, Care Experience

Laurie-Beth Koeller, Associate Director, Care Experience | Patient Experience

Leora Jontef, Senior Assistant Vice President, Housing and Real Estate

Marjorie Momplasir-Ellis, Senior Director, Housing Placement and Services

Wendy Wilcox, MD, MPH, MBA, FACOG, System Chief Women's Health Service Officer

Advisory Group

NYC Health + Hospitals Facility Leaders

Andrew Wallach, MD

Cleon Edwards

Lisa Scott McKenzie, DHA, CEM, FABC, FACHE

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2025 IMPLEMENTATION STRATEGY PLAN TEAM LEADS

Executive Sponsor

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Project Director

Okenfe Lebarty, Assistant Vice President, External Affairs

Senior Advisor

Jenifer Clapp, Senior Assistant Vice President, Population Health

Nina Rostanski, Senior Director, Patient Growth

Project Manager/Editor

Emaan Moosani, Director, Community Affairs

Project Manager/Writer

Rachel Larkin, Director, Philanthropy

Assistant Writer

Elizana-Marie Joseph, Assistant Director of Digital Communication

Project Team Members

Emmanuella Chevalier, Assistant Director, Community Affairs

Noor Jamal, Clinical Business Analyst, Patient Growth

Corporate Data Analytics Lead

Jenny Kupershtokh, Product Manager, Quality & Safety and Regulatory Reporting, Office of Data and Analytics

Designer

Karen Psolka, Karen Houser Design

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