NYC HEALTH+ HOSPITALS

50 Water Street ▪ New York, NY ▪ 10004

BOARD OF DIRECTORS MEETING
THURSDAY, JUNE 25, 2026
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** ➢ June 2026 **Facility Governing Body Report** ➢ NYC Health + Hospitals l Woodhull **2025 Performance Improvement Plan and Evaluation (Written Submission Only)** ➢ NYC Health + Hospitals | Morrisania - Gotham Center **Semi-Annual Governing Body Report (Written Submission Only)** ➢ NYC Health + Hospitals | Lincoln ➢ NYC Health + Hospitals | Susan Smith Mckinney Nursing and Rehabilitation Center	Mr. Pagán
2. **OPEN PUBLIC SESSION - 3:00 PM**	Mr. Pagán
3. **Adoption of the Board Meeting Minutes – May 28, 2026**	Mr. Pagán
4. **Chair's Report**	Dr. Katz
5. **President's Report**	
ACTION ITEMS	
6. **Electing Ines Delarosa, 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 her successor has been duly elected and qualified, or as otherwise provided in the MetroPlus Bylaws. (Presented Directly to the Board on: 06/25/2026) **Vendex: NA / EEO: NA**	Ms. Hernandez-Piñero
7. **AMENDING THE RESOLUTION TO REFLECT THE CORRECT NAME OF THE VENDOR**: Authorizing New York City Health and Hospitals Corporation (the "System**") to further increase the funding by $7,486,830 for its previously executed agreement with Array Architects PC, ~~Inc~~ ("Array") for architectural/engineering services** for the renovation of spaces at NYC Health + Hospitals/Bellevue Hospital ("Bellevue") and NYC Health + Hospitals/Woodhull Hospital ("Woodhull") that began in June 2020 in connection with the System's Correctional Health Services ("CHS") initiative to treat its patients who require higher levels of care in its Outposted Therapeutic Housing Units ("OTxHU"), **which follows the previous funding increases of $8,000,000 in November 2024 increasing the NTE To $30,325,000, such that the funding is increased $7,486,830 which includes a $3,000,000 contingency from $30,325,006 to a total not to exceed sum of $37,811,836 and to extend the contract term to June 2029 for additional architectural/engineering services at Woodhull.** (Presented to the Capital Committee on: 06/08/2026) **Vendex: Approved / EEO: Approved**	Mr. Pagán

8. Authorizing New York City Health and Hospitals Corporation (the "System") **to further increase the funding by $26,578,401 for its previously executed agreement with AECOM USA, Inc. ("AECOM"), to provide program management** at NYC Health + Hospitals/Bellevue Hospital ("Bellevue") and NYC Health + Hospitals/Woodhull Hospital ("Woodhull") that began in June 2020 in connection with the System's Correctional Health Services ("CHS") initiative to treat its patients who require higher levels of care in its Outposted Therapeutic Housing Units ("OTxHU"), **which follows the previous funding increases of $2,400,000 in September 2023 increasing the NTE to $19,036,107, such that the funding is increased by $26,578,401 which includes a $4,500,000 contingency from to a total not to exceed sum of $45,614,508 and to extend the contract term to June 2029 for program management and new construction management services at Woodhull.** (Presented to the Capital Committee: 06/08/2026) **Vendex: Approved / EEO: Approved**	Mr. Pagán
9. **AMENDING THE RESOLUTION TO REFLECT THE CORRECT NAME OF THE VENDOR:** Authorizing New York City Health and Hospitals Corporation (the "System") **to enter into a best interest renewal contract with Kone Inc. ~~Corporation~~ ("Kone") for one year until November 31, 2027, and to increase the not-to-exceed amount by $15,582,493**, **which includes a contingency of $1,000,000 and emergency repair and modernization amount of $7,000,000, from the original $59,200,000 to a new not-to-exceed amount of $74,782,493 for the provision of preventative maintenance services and repairs on 350+ elevators and escalators system wide** along, with critical modernization projects and 24/7 emergency service and repairs. (Presented to the Capital Committee: 06/08/2026) **Vendex: Pending / EEO: Approved**	Mr. Pagán
COMMITTEE, SUBSIDIARY AND ANNUAL PUBLIC MEETING REPORTS	
➢ Governance Committee	Mr. Pagán
➢ Audit Committee	Ms. Hernandez-Piñero
➢ Capital Committee	Mr. Pagán
➢ Strategic Planning Committee	Mr. Pagán
➢ Brooklyn Fiscal Year 2026 Annual Public Meeting Minutes	Dr. Marthone
➢ 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 **28th day of May, 2026** 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 Corporate Secretary. The following Board of Directors participated in person:

Mr. José A. Pagán
Dr. Mitchell Katz
Dr. Helen Arteaga-Landaverde – Left at 3:25
Mr. Jorge Fanjul – Joined at 3:25
Ms. Freda Wang
Ms. Erin Dalton – Left at 3:25p.m.
Mr. Jeremy Resnick– Joined at 3:25 p.m.
Dr. Vincent Calamia
Ms. Zahira McNatt
Ms. Anita Kawatra
Ms. Sally Hernandez-Piñero
Dr. Patricia Marthone
Ms. Jackie Rowe-Adams
Ms. Vanessa Rodriguez
Dr. Jorge Petit
Dr. Michael Espiritu
Ms. Tricia Taitt – Left at 3:25 p.m.
Mr. Joel Eisdorfer

José Pagán, Chair of the Board, called the meeting to order at 2:10 p.m. Mr. Pagán chaired the meeting and Colicia Hercules, Corporate Secretary, kept the minutes thereof.

Mr. Pagán noted for the record, that Ms. Zahira McNatt is representing Dr. Alister Martin in a voting capacity.

EXECUTIVE SESSION

Upon motion made and duly seconded, the members voted to convene in executive session because the matters to be discussed involved confidential and privileged information regarding patient medical information relating to a particular patient, matters relating to proposed or actual litigation, and the medical, financial or credit history of a particular person or corporation.

OPEN SESSION

The Board reconvened in public session at 3:25 p.m.

Mr. Pagán noted for the record, Jorge Fanjul is representing Deputy Mayor Helen Arteaga Landaverde, Jeremy Resnick is representing Erin Dalton, and Zahirah McNatt is representing Dr. Alister Martin – all in a voting capacity.

COMMITTEE ASSIGNMENTS

According to Article VI section (C) of the By-Laws – Committee Appointment. The Chair of the Board shall annually appoint, with the approval of a majority of the Board, members of the Board to the standing committees. Therefore, Mr. Pagán proposed a motion to appoint:

- Dr. Jorge Petit – as a member of the Quality Assurance/Performance Improvement Committee.

There being no questions or objections, the motion was unanimously approved.

ACTION ITEM 3 – ADOPTION OF THE MINUTES

The minutes of the Board of Directors meeting held on April 30, 2026 were presented to the Board. Then, on motion duly made and seconded, the Board unanimously adopted the minutes.

> **RESOLVED**, that the minutes of the **Board of Directors Meeting held on April 30, 2026** 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 May 2026.

The Board received and approved the governing body oral and written reports from NYC Health + Hospitals| Jacobi and North Central Bronx.

The Board received and approved the semi-annual written governing body report for NYC Health + Hospitals| South Brooklyn Health and Bellevue.

The Board also received and approved the 2025 performance improvement and evaluation plan- written submission from NYC Health + Hospital/Gouverneur – Gotham Center.

STAFF APPOINTMENT

During Executive Session, the Board discussed and unanimously approved the Governance Committee's recommendation to appoint Hillary Jalon as Senior Vice President and Chief Quality Officer.

The Board also approved the Governance Committee's recommendation to appoint Manuel Saez as Senior Vice President of Facilities Development and Capital & Design Management.

UPCOMING FY 2026 ANNUAL PUBLIC MEETINGS

Mr. Pagán provided a reminder regarding the Board of Directors' Annual Public Meetings for Fiscal Year 2026. The meetings will commence at 6:00 PM on

the following dates and at the respective locations:

- Staten Island: Tuesday, June 16, 2026 at Sea View

VENDEX APPROVALS

Mr. Pagán noted there were 5 items on the agenda requiring Vendex approval, one of which has that approval. There are 11 items from previous Board meetings pending Vendex approval.

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

ACTION ITEM 6:

Ms. Wang read the resolution

> Authorizing the New York City Health and Hospitals Corporation (the "System") **to increase the funding by $71,047,954, which includes a 30% contingency, to its previously negotiated and executed contracts with four supplemental security staffing firms Allied Universal Protection Services, Arrow Security (d.b.a Aron), Johnson Security Bureau, and Maxxi Building Security & Management, to support temporary staffing needs.** The cumulative not to exceed value for services provided by all such firms shall increase from $11,600,000 to $82,647,954 for the remainder of the contract term of two, one-year renewal options exercisable at the discretion of NYC Health + Hospitals.
> (Presented to Finance Committee on: 05/11/2026)

Juan Checo, Chief Security Officer, provided an overview of NYC Health + Hospitals' supplemental security staffing contract, noting that increased systemwide security needs have significantly exceeded original spending projections. He explained that the contract's NTE amount needed to be increased to reflect actual utilization and anticipated future needs. Mr. Checo also highlighted ongoing efforts to reduce reliance on supplemental staffing through enhanced hospital police recruitment, staffing reviews, and improved contract oversight. The vendor performance and vendor MWBE utilization plan was also discussed, noting a 30% MWBE goal with a 17% MWBE utilization to date.

Board members inquired about hospital police recruitment efforts, contingency calculations, MWBE utilization, and vendor selection. Mr. Checo described ongoing citywide recruitment initiatives, including outreach events and social media campaigns, and noted efforts to improve vendor performance and oversight.

After questions, Dr. Theodore Long, Senior Vice President, explained the methodology used to calculate projected spending and contingencies, emphasizing the need to account for both historical utilization and potential unforeseen security demands. He also highlighted enhanced central office oversight of future contract utilization and vendor selection.

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

ACTION ITEM 7:

Ms. Wang read the resolution

> Authorizing the New York City Health and Hospitals Corporation (the "System") **to increase the funding by $38,779,153, which includes a 10% contingency, to its previously negotiated and executed contract with DocGo dba Ambulnz NY LLC, to ensure reliable access to ambulance and ambulette transportation for inter-facility transfers and routine discharge transportation.**
> The cumulative not to exceed value for services provided by all such firms shall increase from $94,762,581 to $133,541,734 for the remainder of the contract term of two, one-year renewal options exercisable at the discretion of NYC Health + Hospitals.
> (Presented to the Finance Committee on: 05/11/2026)

Nina Rostanski, Assistant Vice President of Clinical Affairs and Business Strategy, provided an overview of the System's single-vendor transportation contract, which supports ambulance and ambulette services for interfacility transfers, routine discharges, and Transfer Center operations. Ms. Rostanski reviewed the history of the contract with Ambulnz, described the factors contributing to higher-than-anticipated costs, and highlighted improvements in transport timeliness, the overall optimization efforts including operational efficiency, and patient throughput achieved under the current model. She further explained that higher-than-anticipated spending resulted from the implementation of a leased-hour transportation model and a faster-than-expected Systemwide transition. Ms. Rostanski noted the MWBE goal is 10 percent with a utilization to date of 3 percent.

Dr. Katz discussed the evolution and performance of the transportation contract. Dr. Katz commended Ms. Rostanski's management of the program and noted that the single-vendor model has significantly improved transportation reliability and patient retention across the System. He also observed that determining appropriate contingency levels for volume-based service contracts remains challenging.

Following questions from the Board, Ms. Rostanski explained that the transportation contract supports broader System investments in care coordination and continuity of care. She described ongoing efforts to optimize resource utilization and noted that lessons learned from the current leased-hour model will inform future procurements, including consideration of a hybrid service model.

Ms. Wang emphasized the importance of balancing service needs, operational performance, and financial oversight when evaluating contract utilization and future planning.

After questions from the Board regarding the cost opportunity, Dr. Sewit Teckie, Senior Vice President, highlighted the value of the current vendor in supporting specialized transports that were previously unavailable, helping the System retain patients and improve access to care. The Board and Ms. Rostanski also discussed opportunities to further analyze patient retention benefits and maximize reimbursement credits through improved billing and authorization processes.

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

ACTION ITEM 8:

Mr. Pagán read the resolution

> **AMENDING PREVIOUSLY APPROVED RESOLUTION OF MARCH 26, 2026 TO REFLECT THE CORRECT NAME OF THE CORPORATION AS "H+H MAIMONIDES MIDWOOD CORPORATION" INSTEAD OF "H+H MIDWOOD CORPORATION" IN THE CORPORATION BY-LAWS – New York City Health and Hospitals Corporation ("NYC Health + Hospitals") as the sole member of H+H Maimonides Midwood Corporation ("H+H Midwood") adopts the bylaws attached as Exhibit A as the bylaws of H+H Midwood; and NYC Health + Hospitals as the sole member of H+H Midwood selects and nominates as the members of the Board Directors of H+H Midwood those individuals who currently serve as members of the NYC Health + Hospitals Board with each such individual to serve on the H+H Midwood Board in the same capacity and with the same board officer title as they serve on the NYC Health + Hospitals Board; and**
>
> **NYC Health + Hospitals as the sole member of H+H Midwood be deemed in the future to have selected and nominated as the members of the H+H Midwood Board** such individuals who may from time to time be added to the NYC Health + Hospitals Board and simultaneously be deemed to have withdrawn from selection and appointment to the H+H Midwood Board such individuals who are no longer members of the NYC Health + Hospitals Board, which actions by NYC Health + Hospitals shall be effective only upon the closure of the Affiliation and Asset Transfer Agreement dated December 18, 2025 (the "ATA") between NYC Health + Hospitals and Maimonides Health Resources, Inc. together with its subsidiaries and affiliates ("Maimonides").
> (Presented Directly to the Board: 05/28/2026)

Ms. Weiner presented a technical amendment to a resolution previously approved by the Board in March. She explained that the amendment corrects the legal corporate name from "H+H Midwood" to "H+H Maimonides Midwood" to ensure that the bylaws and corporate records accurately reflect the entity's full legal name. She noted that the change is purely administrative and does not alter any of the substantive provisions approved by the Board.

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

ACTION ITEM 9:

Mr. Pagán read the resolution

> New York City Health and Hospitals Corporation ("NYC Health + Hospitals") hereby amends the respective **certificates of incorporation of:**
> **(1) its wholly-owned subsidiary, H+H Maimonides Corporation, to include specific language regarding the licensing of the hospital under Article 28 of the New York State Public Health Law and the operation of programs licensed under Article 31 of the New York State Mental Hygiene Law; and**

(2) its wholly-owned subsidiary, H+H Maimonides Midwood Corporation, to include specific language regarding the licensing of the hospital under Article 28 of the New York State Public Health Law with the language set forth in Exhibit A attached hereto.
(Presented Directly to the Board: 05/28/2026)

Ms. Cohen presented a technical resolution to amend the Certificates of Incorporation for H+H Maimonides Hospital and H+H Maimonides Midwood. She explained that, following a court decision requiring review by the Public Health and Health Planning Council (PHHPC) of the transfer of operations, the amendments would add standard statutory language related to hospital licensure under the New York State Public Health Law and, where applicable, the Mental Hygiene Law. More specifically, the technical change is to include specific language about licensing of a hospital under Article 28 of the New York State Public Health Law into these Certificates of Incorporation. Ms. Cohen noted that the changes were being made out of an abundance of caution and were recommended by outside counsel to facilitate the regulatory review process.

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

ITEM 5 - PRESIDENT'S REPORT – FULL WRITTEN SUBMISSION INCLUDED IN THE MATERIALS

MATTHEW LEVY, CEO AT NYC HEALTH + HOSPITALS/SEA VIEW, MOVES ON

Dr. Katz acknowledged the departure of Matthew Levy after seven years as Executive Director of Sea View Hospital and Rehabilitation Center, commending his leadership and contributions to the facility. He noted that a strong succession plan is in place to ensure continuity of leadership.

NYC HEALTH + HOSPITALS MARKS 10 YEARS OF ROBOTIC SURGERY, COMPLETING OVER 20,000 PROCEDURES

Dr. Katz highlighted the 10-year anniversary of robotic surgery at Bellevue Hospital, recognizing the program's growth and success across the System.

NYC HEALTH + HOSPITALS/ELMHURST RENAMES INFECTIOUS DISEASE CENTER IN HONOR OF DR. JOSEPH MASCI

Dr. Katz noted the dedication of Elmhurst Hospital's Center for Infectious Disease in honor of Dr. Joseph Masci, recognizing his significant contributions as a physician, scientist, educator, and leader.

NYC CARE UPDATE

Dr. Katz recognized the one-year anniversary of expanding NYC Care benefits to include durable medical equipment, further enhancing services available to program members.

EXTERNAL AFFAIRS UPDATE

Dr. Katz referenced recent external affairs developments and noted the completion of the New York State budget process.

COMMITTEE AND THE BRONX ANNUAL PUBLIC MEETING REPORTS

Mr. Pagán noted that the Committee and the FY 2026 Bronx Annual Public Meeting 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 4:17 p.m.

Colicia Hercules
Corporate Secretary

COMMITTEE REPORTS

GOVERNANCE COMMITTEE - Meeting Date: Thursday, April 30, 2026
Attendees: José Pagán; Freda Wang; Vincent Calamia; Helen Arteaga Landaverde; Sally Hernandez-Piñero; Mitchell Katz
Staff – Colicia Hercules

The meeting was called to order at 12:30 p.m. pm by José Pagán.

Mr. Pagán called a motion to accept the minutes of the Governance Committee meeting held on February 26, 2026. The motion was seconded and the minutes were unanimously approved.

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

Open Session

During the Executive Session the Committee review and unanimously approved Dr. Sewit Teckie as Senior Vice President, Chief Medical Officer of Clinical Affairs and Clinical Business Strategy to be presented to the full Board for consideration.

There being no further business, the meeting adjourned at 1:02 p.m.

Community Relations Committee – May 5, 2026
As Reported by Ms. Jackie Rowe Adams
Committee Members Present: Dr. Mitchell Katz, Ms. Anita Kawatra, Dr. José Pagán, Mr. Joel Eisdorfer

Ms. Jackie Rowe-Adams called the meeting of the Community Relations Committee to order at 5:13 p.m.

Quorum was established. The minutes of the Community Relations Committee meeting held on March 3, 2026, were reviewed. Upon motion made and duly seconded, the minutes were unanimously approved.

Ms. Rowe-Adams established the order of the meeting and welcomed the presentation of the President's report.

Ms. Rowe-Adams informed the Committee that the Board of Director's Annual Public Meetings for Fiscal Year 2026 has been scheduled as follows:

- For Brooklyn: Tuesday, May 19, 2026 at Woodhull Hospital
- For Staten Island: Tuesday, June 16, 2026 at Sea View Hospital

Speakers are asked to register in advance by calling:
Ms. Colicia Hercules Secretary to the Corporation at 212-788-3359

Dr. Mitch Katz shared the President's report:

- Dr. Sewit Teckie and Dr. Ted Long were appointed as System Chief Medical Officers.
- Dr. Eric Wei was recognized by City & State 2026 as an Asian Trailblazer.
- Sea View and the Grace Foundation have partnered to open the Grace Café, which will be operated by Grace Foundation participants.
- NYC Health + Hospitals earned the ANCC Practice Transition Accreditation Program for Nursing Excellence.
- Twenty-six H+H physicians were recognized for outstanding patient care.
- NYC Health + Hospitals continues to conduct mystery patient programs to ensure preparedness for Avian Flu efforts.
- A new CT scanner was installed in the Emergency Department at Bellevue.
- NYC Health + Hospitals/Queens achieved continued recognition from the ADA for exceptional diabetes care and had a successful survey.
- NYC Health + Hospitals/Gotham Health, Sydenham received a new state-of-the-art 3D mammogram machine.
- NYC Health + Hospitals/Gotham Health received $3.85 million from Brooklyn Borough President Antonio Reynoso.
- NYC Health + Hospitals/Bellevue received five new orthopedic surgical tables and was recertified as a trauma center.
- NYC Health + Hospitals/Carter expanded its award-winning rehabilitation care.
- North Central Bronx Hospital's Workforce Wellness Champion won a systemwide honor.

Ms. Rowe-Adams noted the Community Advisory Board's annual verbal reports scheduled to be presented at this meeting:

1. NYC Health + Hospital/Bellevue
2. NYC Health + Hospital/Gotham Health, Cumberland
3. NYC Health + Hospitals/Elmhurst
4. NYC Health + Hospitals/Gouverneur
5. NYC Health + Hospitals/Lincoln

PRESENTERS:

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

NYC Health + Hospitals/Gotham Health, Bellevue

Ms. Karen Moore, Chair of the NYC Health + Hospitals/Bellevue CAB, presented the report to the CRC. Ms. Moore stated that Bellevue made significant investments this year in critical infrastructure and equipment upgrades, including a new surgical pathology room, a new CT scanner for the Emergency Department, the opening of an Outposted Therapeutic Unit at the Department of Correction, and five new orthopedic surgery tables.

Projects currently underway include a second CT scanner, expansion of the Electrophysiology Lab and Infusion Center, and renovations in the Interventional Radiology Department and the former auditorium. Funding has also been secured for expansion of the adult CPAP, a Pediatric ICU, and implementation of an Emergency Preparedness Virtual Training Program known as ECHO.

Bellevue received several recognitions, including the AHA Commitment to Quality Award, a Safety Global Award from the Association of OR Nurses, and recognition as a Best Hospital in six adult procedures and conditions for 2025-2026. Bellevue's global patient satisfaction scores remained above the NYC Health + Hospitals system median for eight consecutive quarters.

Bellevue also improved patient flow in the Emergency Department, closed the ED Overflow Unit in March 2025, absorbed the Mount Sinai Beth Israel closure without flow disruption, and achieved zero ED borders multiple times during the most recent flu season. Property-related issues remain a top patient complaint, and Bellevue has introduced standardized property bags and patient property attendants to better secure belongings.

Bellevue continues to serve as a Regional Emerging Special Pathogens Treatment Center and is preparing for the 2026 World Cup by training nearly 500 professionals for high-consequence infectious diseases. Bellevue also opened a 24/7 warming center during extreme cold weather and was recertified as a Level 1 Adult Trauma Center and Level 2 Pediatric Trauma Center by the American College of Surgeons.

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

Dr. José Pagán commended Bellevue's global health preparedness work, especially with the World Cup approaching.

Dr. Eric Wei stated that Bellevue had recently been on a call regarding Hantavirus and cruise ships, noting that if anyone became symptomatic, Bellevue would likely serve as the biocontainment unit.

Dr. Katz stated that Bellevue's role as a containment center will be even more important as New York prepares for an influx of international visitors.

NYC Health + Hospitals/Gotham Health, Cumberland

Mr. Derek Cradle, Vice Chair of the NYC Health + Hospitals/Gotham Health, Cumberland CAB, presented the report to the CRC. Mr. Cradle stated that Cumberland was recognized during Healthcare Quality Week as the most person-centered facility and received a Bronze Certificate for the highest pre-registration rate during Revenue Cycle Service and Patient Access Week. Cumberland was also awarded second place for Best Clinical Performance among all Gotham sites.

Cumberland received Gold Recognition from the American Heart Association for cholesterol and Type 2 diabetes, Gold Plus Recognition for blood pressure, and an Article 32 Addiction Services Operating Certificate for two years.

Cumberland continues to focus on safety and satisfaction by installing new dental chairs, updating vaccine management plans, conducting annual training for nursing staff, and implementing continuous AIDET training for care team members.

Patients have expressed concerns regarding access to appointments and difficulty scheduling and moving through visits. Cumberland is actively recruiting staff, improving communication and workflow, and ensuring clinical teams can book same-day and urgent visits.

Community challenges include homelessness, lack of affordable housing, food insecurity, and substance abuse. Cumberland assesses social determinants of health at every visit to better connect patients with support and resources.

Current infrastructure projects include replacing the elevator cab, replacing an X-ray machine, and adding a bone density machine in the Radiology Department. Cumberland also completed construction of the Behavioral Health and Integrated Medicine Unit, which was approved by the New York State Department of Health for operational use.

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

Dr. Pagán commended the infrastructure improvements and equipment upgrades.

Dr. Katz stated that the pictures of the renovated spaces looked beautiful and reflected a well-resourced environment for patients.

Ms. Anita Kawatra commended Cumberland’s focus on community issues and the challenges impacting patients.

NYC Health + Hospitals/Elmhurst

Mr. Raj Punjabi, Chairperson of the NYC Health + Hospitals/Elmhurst CAB, presented the report to the CRC. Mr. Punjabi stated that Elmhurst Hospital is a 545-bed Level 1 Trauma Center. Last year, Elmhurst had over 1 million outpatient and ambulatory care visits and close to 133,000 Emergency Department visits.

Elmhurst provides translation services in over 113 languages and used over 7 million minutes of translation services this year, fulfilling over 500,000 requests.

Elmhurst received recognition from the American Heart Association and U.S. News & World Report as a Best Regional Hospital and as a high-performing hospital in six categories, including heart attack, heart failure, kidney failure, orthopedics, maternity, and hip fracture. Elmhurst nurses were also recognized by the American Association of Critical Care Nurses and the Association of Pre-operative Nurses.

To improve patient satisfaction, Elmhurst has reimagined the Emergency Department arrival experience through Care Experience Ambassadors, redesigned the discharge process, and improved its Google rating to 3.4 stars. Elmhurst is also expanding access to faith-based and spiritual support services and is in the process of introducing a full-time Imam.

Elmhurst continues to strengthen language access as a safety priority, integrate social determinants screening into clinical workflows, use equity-focused data to identify disparities, and expand cultural competency training.

Recently completed projects include replacing over 350 medical beds, adding a new portable MRI for surgery, adding a new portable X-ray machine, continuing floor replacement, and upgrading staff and visitor bathrooms. Ongoing and upcoming projects include Labor and Delivery room renovations, Emergency Department renovations, the Complex Care Clinic, and elevator upgrades.

Frequent complaints include increased Emergency Department volume impacting admission time and communication between departments. Elmhurst is working to reduce wait-times, improve patient flow, and improve communication when multiple departments are involved. The facility also implemented the Helping Healers Heal Wellness Program to address staff burnout and stress.

Community concerns include the rising cost of food and housing, increased poverty, the need for senior services, and expanded mental health services. Elmhurst hosts a food pantry every Thursday, though the need remains high.

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

Dr. Pagán commended Elmhurst's approach to meeting community needs and noted his recent visit during the Joint Commission visit.

Dr. Katz welcomed Alina Moran back to Elmhurst and noted her previous leadership roles at Elmhurst and Metropolitan.

Ms. Kawatra asked about the community outreach efforts and whether they included screenings, awareness, or education.

Mr. Mike Milinic, COO stated that the outreach included all of those components and that Elmhurst partners with community-based organizations and local elected officials on weekly community events.

Mr. Joel Eisdorfer commended Elmhurst's outreach and community programs.

NYC Health + Hospitals/Gotham Health, Gouverneur

Ms. Pauline Lock, Chairperson of the NYC Health + Hospitals/Gouverneur CAB, presented the report to the CRC. Ms. Lock shared progress and initiatives at both the Gouverneur Skilled Nursing Facility and Gotham Health Center at Gouverneur.

At the ambulatory care site, the Local Law 11 assessment for the building exterior is underway. At the Skilled Nursing Facility, construction of the hemodialysis den and replacement of the full-house call bells are underway. Ms. Lock also thanked the Gouverneur Auxiliary for funding new beds for residents and noted that the commercial dishwashing machine is beyond the end of its useful life.

The ambulatory care site has seen progressive increases in patient satisfaction survey results, with an overall rating top box score over 89 percent. As of February 2026, Gouverneur was in the 91st percentile for NYC Health + Hospitals and the 66th percentile for New York State.

Gouverneur was also recognized by the American Heart Association and American Medical Association for outstanding clinical outcomes in blood pressure control, cholesterol, and diabetes management. Staff continue to receive iCARE training, and many have signed the Kindness Pledge.

At the Skilled Nursing Facility, safety and security concerns are addressed promptly, and staff are trained on safety and security with drills held semi-annually. Press Ganey survey results showed improvement, and Gouverneur was again listed by U.S. News & World Report as one of the Best Nursing Homes in both short-term rehabilitation and long-term care. Gouverneur also maintains a 5-star CMS quality rating.

Frequent complaints at the ambulatory care site related to communication and access, while complaints at the Skilled Nursing Facility most frequently related to promptness of staff response. Gouverneur addresses

complaints through staff training, improved workflows, enhanced signage, MyChart promotion, and patient experience sensitivity training.

Community challenges include financial barriers, transportation needs, education and career support, and access to care for an aging population. Gouverneur provides onsite resources, financial and legal support, MetroPlus and NYC Care enrollment assistance, weekly Legal Aid through NYLAG, ESL and career coaching through the New York Public Library, free tax preparation services, MetroCards, and support for the Mayor's Warming Center Initiative.

Ms. Lock stated that a significant challenge remains in capacity and that Gouverneur sees a pressing need for additional skilled nursing facility beds to continue supporting the aging population.

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

Dr. Pagán thanked Gouverneur for the report.

Dr. Katz commented on transportation challenges near Gouverneur due to reliance on the F train and noted the importance of the Gouverneur murals being reunited and displayed at the Museum of the City of New York.

Ms. Kawatra commended Gouverneur's work supporting the community.

NYC Health + Hospitals/Lincoln

Mr. Richard Izquierdo Arroyo, Chairperson of the NYC Health + Hospitals/Lincoln CAB, presented the report to the CRC. Mr. Izquierdo Arroyo stated that Lincoln has several projects in progress expected to be completed in 2026, including the Emergency Department observation unit, elevator modernization, parking garage renovation, and replacement of two emergency generators.

Completed projects include reopening the 149th Street entrance, reopening 30 Behavioral Health inpatient beds, renovating physician on-call rooms, the auditorium, conference rooms, and staff lounge, installing new ADA handicap ramps, resurfacing the driveway rotunda, and replacing 244 medical and surgical beds.

Frequent complaints at Lincoln include communication, care, and attitude. Departments receive complaint reports and work with Guest Relations to address concerns and improve the overall experience. Real-time service recovery has been implemented across inpatient and outpatient settings, and leadership rounding has increased.

Lincoln's Patient Safety Team is focused on meeting and surpassing national patient safety goals. In July, Lincoln will implement a TeamSTEPPS Master Train-the-Trainer Program. Lincoln's Good Catch

Program promotes reporting events that could have caused harm but were prevented, with over 280 events prevented in 2025.

Patient representatives conduct daily rounds in inpatient and ambulatory units to address concerns and escalate issues. Lincoln is also one of the top five facilities for compliance with the iCARE Kindness Pledge at 87 percent, with 65 percent of staff trained in iCARE with Kindness.

Community challenges include opioid dependence, diabetes and hypertension, maternal health issues, mental health, and gun violence. Lincoln received the Gold Plus Quality Achievement Award from the American Heart Association and was recognized by the American College of Surgeons for achieving meritorious outcomes for surgical patient care, one of only 76 hospitals nationwide to receive this recognition.

Mr. Izquierdo Arroyo emphasized the need for a capital campaign for the construction of an ambulatory pavilion and asked H+H leadership to prioritize this need in the next fiscal year, if possible.

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

Dr. Pagán stated that Lincoln's facility improvements were evident and impressive.

Dr. Katz commended Lincoln's low left-without-being-seen rate in the Emergency Department and stated that an ambulatory building for Lincoln is one of the System's top major capital priorities, along with a new Emergency Department for Elmhurst and a new Emergency Department for Metropolitan.

Mr. Eisdorfer stated that he recently visited Lincoln and that the facilities looked beautiful.

Ms. Rowe-Adams thanked all presenters, CAB members, facility leadership, and staff for their work and acknowledged the continued improvement in the reports each quarter.

ADJOURNMENT:
Hearing no other old or new business from members to bring before the committee the meeting was adjourned at 5:58 P.M

Equity, Diversity and Inclusion Committee Meeting – May 11, 2026
As Reported by: Patricia Marthone
Committee Members Present: Mitchell Katz, Jose Pagan, Patricia Marthone, Vanessa Rodriguez, Jackie Rowe-Adams

CALL TO ORDER

The meeting of the Equity, Diversity and Inclusion Committee of the NYC Health + Hospitals' Board was called to order at 12:30 p.m.

Dr. Patricia Marthone noted for the record that Karen St. Hilaire was not present.

Upon motion made and duly second the minutes of the January 12, 2026 meeting was unanimously approved.

DIVERSITY AND INCLUSION UPDATE

Ivelesse Mendez-Justiniano, Vice President, Chief Diversity, Equity, & Inclusion Officer, provided an overview of the System's 2026 diversity and inclusion achievements and activities.

Ms. Mendez-Justiniano started with an update on the System's education and capacity building and reported that year-to-date there have been almost 5K completions of the Sexual Harassment Prevention (SHP) training, putting the System at a 74% completion rate. She noted that the SHP training cycle ends in early September, giving the System some time to increase the completion rate. There were additional ad-hoc trainings, including Managing Unconscious Bias which saw over 28K completions YTD.

Ms. Mendez-Justiniano highlighted a Black History Month celebration session which was an interview with CEO Neil Moore that had record breaking participation, with over 800 attendees. She also provided an update on the Women Who Lead educational sessions, which is a virtual series highlighting women in leadership roles at NYC H+H. March featured CEO Sandra Sneed and May featured CEO Cristina Contreras.

Ms. Mendez-Justiniano then focused on a specially curated Women's History Month event, the inaugural Women's Leadership Summit which recognized over 100 emerging female leaders who demonstrate leadership in their everyday work and provided an opportunity for participants to hear from leaders across the system. Speakers included:

- Natifha Forde, Executive Director of NYC Her Future
- Alina Moran, CEO, NYC Health + Hospitals/Elmhurst
- Wendy Wilcox, Chief Women's Health Officer

Ms. Mendez-Justiniano reported that almost 13 million minutes of interpretation services were provided between 1/1/2026 –4/15/2026 with a 98.2% satisfaction rate. The top three languages were Spanish (10 million minutes), French (511K minutes), and Bangla (425K minutes). She also indicated that the written translation RFP is currently live, with the goal of new contracts to start in CY 2026.

Ms. Mendez-Justiniano then provided an update on interpretation usage and costs under the new contract, which went into effect November 2024. In Contract Year 1, the System provided over 46.6 million minutes of interpretation services at cost of $25.4 million. Overall Year 1 demonstrated an increase in systemwide Language Access services and usage. Year 2 is trending in the same direction and showing a greater demand for Language Access services. Given that the 5-year NTE for the contract is $126.4 million, the Language Access team will continue to monitor the usage and spend to ensure System is on track to meet the demand for services. Ms. Mendez-Justiniano highlighted contracting

efficiencies, the implementation of a centralized invoicing process, growth in services, and other factors impacting the growth.

Ms. Mendez-Justiniano shared that in April, in celebration of Language Access Month, The Office of Diversity, Equity & Inclusion hosted Language Access tabling sessions across each acute care facility to help raise awareness of every patient's right to receive care in a language they understand 24 hours a day, 7 days a week.

Continuing within the Community Engagement area, Ms. Mendez-Justiniano showcased a variety of diverse cultural celebrations that took place across different facilities including Eid-al-Fitr at Elmhurst, Dominican Republic Independence Day at Lincoln, and Lunar New Year at Gouverneur. She also shared the celebration of Transgender Day of Visibility, which was honored by hosting an event, Trans Joy Fest, which connected community members with vital resources, support and care including health care, legal resources and other essential services. Ms. Mendez-Justiniano also noted that she was one of the keynote speakers, alongside Afua Atta-Mensah, NYC Chief Equity Officer and Commissioner of the NYC Mayor's Office of Equity and Racial Justice, at the Gender Equity Interagency Partnership Conference.

From a Communications & Marketing perspective, Ms. Mendez-Justiniano shared that there have been several promotional materials distributed and Systemwide emails highlighting holidays and observances. She concluded the presentation by discussing what's to come in the future, including a Cultural Innovation E-Learning Hub, a Men's Health Symposium, and a Disabilities Inclusion training page.

Following the presentation there were accolades from the Board Members about the extensive work being done in the DEI space.

EQUAL EMPLOYMENT OPPORTUNITY (EEO) REPORT

Ivelesse Mendez-Justiniano continued on and initiated the EEO presentation on behalf of Yvette Villanueva, Senior Vice President, Human Resources, by sharing 2025 workforce demographics.

Ms. Mendez-Justiniano presented some of the key workforce statistics below:

- 66% of the workforce is female; 33% is male (1% is unknown)
- Approximately 80% of the workforce identifies as minority, which reflects a highly diverse employee population.
    - 39% is Black/African American
    - 22% is Asian
    - 15% is Hispanic/Latino
    - 5% is Multi Race
    - The race/ethnicity values are based on Federal EEO-4 reporting requirements
- Based on EEO-4 Job Groups and their respective gender breakouts, Skilled Craft, Service Maintenance, Protective Services are majority male workers. All other categories (Administrative Support, Professionals, Para-Professionals, etc.) are primarily female workers.
- Most of NYC H+H clinical positions (Nurses, Pharmacists, and Social Workers) are predominantly females, with the exception of the Physicians,

who have almost equal gender representation and is inclusive of Affiliate providers.

- Looking at the race/ethnicity breakout, three out of four clinical job groups reflect over 50% minority. The Physician group reflects 41% minority representation and is inclusive of Affiliate providers.
- Out of 585 employees that self-identified as a Veteran, 67% are male, 32% are female, and 82% are minority.
- Median age of the NYC H+H workforce is 40 (with an average age of 45) and half of the workforce is 30-49 years old, representing a significant concentration of mid-career professionals; the workforce spans 6 generations with majority falling under Millennials and Generation X.
- 48% of the workforce have 0-4 years of service.
- 77% of the System's workforce resides within the five boroughs of NYC.

Ms. Mendez-Justiniano also presented high level patient demographics which showed that 75% of the System's patients identify as minorities and there is a fairly even representation of females and males.

The EEO presentation was continued by Aliza Balog, Chief Employment Counsel, Legal Affairs / EEO and Nicole Phillips, Director, EEO. Ms. Phillips indicated that reasonable accommodations are modifications of job duties, work environment, or a policy that allow people with disabilities, pregnancy, childbirth, or related medical conditions, or victims of domestic violence, stalking or sex offenses to perform their essential job functions. In calendar year 2025, 3,175 reasonable accommodation requests were submitted, with majority of them from Nurses (33%) and Patient Care Associates (21%).

Ms. Phillips went on to discuss Internal Complaints in 2025. She explained that the office of EEO is responsible for investigating complaints made to the office that alleged discrimination, harassment, and or retaliation on the basis of one or more protected characteristics. A protected characteristic is a personal trait or status on the basis of which it is illegal to discriminate, harass or retaliate against someone. The protected characteristics that most people are familiar with are age, race, gender, religion, national origin, sexual orientation, and pregnancy, but there are several other ones as well. In 2025, 435 internal complaints were submitted, majority on the basis of sexual harassment, retaliation and race. The complaints are reviewed by an EEO Officer and a determination is made. If the staff member is unhappy with the determination made by the Office of EEO, they can file externally with a civil rights enforcement agency.

Ms. Phillips indicated that the Office of EEO has experienced significant staff turnover over the last three years. The department has made several changes recently to not only improve staff retention but also better manage the volume of work received.

Ms. Phillips concluded by addressing External Complaints, which are when individuals file complaints externally. In 2025, there were 83 external complaints submitted, majority on the basis of retaliation, race, and disability.

Board members inquired about how complaints are tracked and Ms. Phillips

explained there is a database system in place to track details regarding all complaints, which helps identify any trends.

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 1:05 p.m.

Finance Committee Meeting – May 11, 2026

As Reported By: Freda Wang

Committee Members Present: Mitchell Katz, MD, Freda Wang, José Pagán, Patricia Marthone, Tricia Taitt

NYC Health + Hospitals Employees in Attendance:

Michline Farag, Tasha Philogene, John Ulberg, David Guzman, Marji Karlin, Megan Meagher, James Cassidy, Linda DeHart, Clifford Chen, Juan Checo, Ted Long, MD, Sewit Teckie, MD, Nina Rostanski, Chris Miller, Lee Fiebert, Sonya Rubin, Madai Sauceda Aragon, David Leung, Colicia Hercules

CALL TO ORDER

Ms. Wang called the meeting of the New York City Health + Hospitals Board of Directors Finance Committee Meeting to order at 11:16 a.m.

Ms. Wang called for a motion to approve the March 9, 2026 minutes of the Finance Committee meeting.

Upon motion made and duly seconded the minutes of the Finance Committee meeting held on March 9, 2026 were adopted.

Executive Session

Ms. Wang called for a motion to enter into an executive session to discuss confidential and privileged matters that may be related to threatened and potential litigation.

Upon motion made and duly seconded the board convened an executive session.

The Board reconvened in public session at 11:38 a.m.

ACTION ITEM: Patient Transportation NTE Increase

Dr. Sewit Teckie – Vice President and System Chief Medical Officer – Clinical Affairs and Business Strategy, read the resolution into the record and proceeded with the presented:

Authorizing New York City Health and Hospitals Corporation (the "System") to increase the funding by $38,779,153, which includes a 10% contingency, to its previously negotiated and executed contract with DocGo dba Ambulnz, to ensure reliable access to ambulance and ambulette transportation for inter-facility transfers and routine discharge transportation. The cumulative not to exceed value for services provided by all such firms shall increase from $94,762,581 to $133,541,734 for the remainder of the contract term of two, one-year renewal options exercisable at the discretion of NYC Health + Hospitals.

Ms. Nina Rostanski began by providing the background and current state of NYC Health + Hospitals patient transportation services. The System requires a single vendor transportation contract to ensure reliable access to ambulance and ambulette transportation for inter-facility transfers and routine discharge transportation. The first, single vendor transportation contract was initiated in April 2019. A top priority for the system has been supporting inter-facility transfers within the System and a reliable ambulance service is necessary for achieving this goal. The ability to timely transfer patients between facilities helps to support better continuity of care, increased access to specialized services, and patient retention efforts. Additionally, systemwide investments in centralized transfer center services, an integrated electronic medical record (EMR), and coordinated planning of clinical services growth across sites have helped to further strengthen and support these efforts. The single vendor transportation contract also supports timely discharges, reducing length of stay and improving patient and staff satisfaction.

An overview and history of the contract was presented by Ms. Rostanski. This contract was procured through a competitive RFP process in August 2022 and DocGo dba Ambulnz was selected as the highest rated proposer. The procurement was approved by the CRC in December 2022 and the Board of Directors in January 2023 with an NTE of $94,762,581. A three-year contract with two one-year renewal options was executed in March 2023 and a one-year renewal option was exercised in March 2026. Since March 2023, Ambulnz NY LLC has provided the System with three distinct scopes of work as part of the Patient Transportation Services contract. The scope of work was also presented.

Ms. Rostanski continued the presentation by providing the current spend and elaborating on the NTE request. The current contract cost is approximately $25M annually, and spend since inception of the contract is approximately $80M. Based on current contract spend, the System projects that H+H will need an additional $38.8M to carry out the scope of work through the remaining contract years. The projected spend includes a 10% contingency which reflects the need to account for unknowns in potential resource utilization. A chart with the NTE request and examples of some of the unknowns were presented.

Further, unlike the previous systemwide vendor which had a fee-for-service model, Ambulnz operates under a leased hour model where NYC Health + Hospitals is billed at hourly rates based on modality and anticipated demand. NYC Health + Hospitals is invoiced at the contract hourly rate with credits applied for revenue Ambulnz receives from insurance for ambulance and ambulette transports. Under the leased hour model, the System pays for “leased” resources regardless of utilization, including for “idle time” between trips. Leased hours are reviewed on an ongoing basis to assess current and future demand requirements. The leased hour arrangement was a new model for the system and it was difficult to accurately project the expense required to meet the System’s needs. The initial projections anticipated a blended model of leased hour and on-demand or fee-for service resources, which led to an underestimation of costs associated with resource idle time. These projections also assumed a gradual six-month ramp-up; however, due to external circumstances the full transition was completed in six weeks, leading to higher spend in the initial contract period than anticipated.

Ms. Rostanski continued by presenting the contract spend. After the initial ramp-up period from March though June 2023, H+H spend was highest in the first full fiscal year due to the adjustment to the new leased hour model and allocation of resources across the System. Titration of resources, especially ambulette leased hours, led to reduced expenditure in FY-25. Although volume has trended upward year-over-year during the contract period, expenses have decreased and then remained steady through continued focus on resource optimization and efficiencies, including a 10-percentage point reduction in overall resource idle time across ambulance modalities. A contract spend chart with the yearly cost by modality and total invoiced expense to H+H was presented.

Over the life of this contract from March 2023 through March 2026, there have been a total of 155,266 ambulance transports and 28,826 ambulette transports. The total ambulance transports consist of three modalities: basic life support, advanced life support, and critical care transports. Annually Ambulnz completes approximately 10,500 inter-facility transfers and 42,500 routine transports. Under the current contract, average ambulance transports in the System are 20% higher annually compared to volume under the previous vendor with 10% higher for transfers. Since initiating the current contract, NYC Health + Hospitals has seen significantly improved timeliness for both inter-facility transfers and discharges under the leased hour model. Emergent inter-facility transfers and routine transports improvements over previous contract was presented.

The System’s optimization efforts were presented by Ms. Rostanski. Several key areas of continued focus for performance improvement in collaboration with facilities and the Ambulnz team include a leased hour model, billing improvements and optimizations to maximize insurance reimbursements and operational improvements.

The vendor performance evaluation for Ambulnz was also presented and deemed as good.

The MWBE analysis for the vendor was presented by Ms. Rostanski. The vendor diversity team recommended a 10% diverse vendor component percentage for this solicitation. To date, the utilization has been 3%. Based on the latest update from the vendor, M/WBE goals are expected to be met by the end of the contract period for the full contract value.

Ms. Wang polled the Committee for questions.

Ms. Taitt inquired on the next two years of the contract and if the team foresaw more efficiencies if we decided to renew them.

Ms. Rostanski responded that we are hopeful to continue to see efficiencies and bring down the overall expense. The team continues to work closely with our facilities teams on trying to find those efficiencies where possible. Over the next two years, our plan is to assess this model and figure out what is the right move for the System and ensuring we have the funding to continue while we do those other assessments.

Ms. Taitt asked on the appearance of the new ambulances as it differs from EMS, and how has the communication with patients been and the community.

Ms. Rostanski noted that the vendor has blue branded vehicles and communication with the facilities have been very good in terms of the crews and interfacing with our facilities teams. The vendor has liaisons who are stationed at each of our sites who really help with making sure there is clear communication between dispatch, the crews and our facility teams to help facilitate when an ambulance does arrive to pick up a patient and making sure that everyone is on the same page.

There being no further questions, Ms. Wang thanked the team for the great work, looks forward to the continued optimization, and is glad to see the performance improvements from the prior contract.

Upon motion made and duly seconded, the Committee unanimously approved the resolution for consideration by the Board.

ACTION ITEM: Supplemental Security Staffing Services NTE Increase

Dr. Ted Long – Senior Vice President – Ambulatory Care Operations, read the resolution into the record and proceeded with the presented:

Authorizing the New York City Health and Hospitals Corporation (the "System") to increase the funding by $71,047,954, which includes a 30% contingency, to its previously negotiated and executed contracts with four supplemental security staffing firms Allied Universal Protection Services, Arrow Security (d.b.a. Aron), Johnson Security Bureau, and Maxxi Building Security & Management, to support temporary staffing needs. The cumulative not to exceed value for services provided by all such firms shall increase from $11,600,000 to $82,647,954 for the remainder of the contract term of two, one-year renewal options exercisable at the discretion of NYC Health + Hospitals.

Mr. Juan Checo began by providing the background and current state of H+H's supplemental security staffing services. Historically, NYC Health + Hospitals has used supplemental security staffing services vendors at Acute, Post-Acute, Gotham, and Central Office facilities as a temporary means to address full-time security staffing shortages or short-term increases in security needs. Hospital Police (HP) and security services operate at all NYC H+H facilities and support several critical business and safety functions such as routine surveillance, incident response, property protection, and staff and patient support. Security staffing services have provided the following titles; security guard and security guard supervisor and fire watch personnel and fire safety officer.

In 2021, NYC Health + Hospitals conducted a Systemwide HP staffing assessment to identify base HP staffing needs at each facility. Simultaneously, strategies to address staffing gaps through recruitment and rehiring were revised. In October 2021, as part of this Systemwide staffing strategy, NYC Health + Hospitals issued an RFP for Systemwide supplemental security staffing services to support temporary staffing needs. The procurement was approved by CRC in February 2022, and by the Board of Directors in March 2022, with a combined five-year NTE of $11.6M. Four vendors were selected through the competitive RFP process and signed to three-year contracts with two optional one-year renewals: Allied Universal Protection Services, Arrow Security dba Aron, Johnson Security Bureau and Maxxi Building Security & Management.

Mr. Checo continued presenting on the background and current state of supplemental security staffing services. H+H's recent review suggests the original NTE of $11.6M underrepresented the actual spend for a five-year systemwide contract. Temporary security staff utilization for the 12 months prior to RFP from March 2020 through April 2021, indicates that vendor security spending for a subset of systemwide facilities (Central Office, three Acute facilities, one Post-Acute facility and two Gotham Sites) was calculated at $3,092,548 (excluding COVID-related spending). The original NTE was calculated based on a subset of facilities, while the contract was intended and approved for use by all facilities. In addition, the original NTE did not include any contingency, including for unanticipated increases to staffing need. Since the 2022 procurement, however, several trends for hospital security needs have developed that increase staffing need. Several areas of hospital security needs include expanded visitation policies and re-opening of access points post-COVID, short-term increases to security use during labor action responses, introduction of 24/7 weapon detection systems across all Acute facilities, and Mayoral/City initiatives during extreme weather events such as warming centers.

An overview of the current spending and NTE request was presented by Mr. Checo. During the first three years contract spend for all facilities is $47,623,349. This exceeds the five-year NTE by $36,023,349. The expected Systemwide spend for the final two contract years, based on recent annual utilization of supplemental security staffing vendors, will be approximately $13,776,000 per year. This calculation is consistent with pre-RFP historic spend per facility, though now accounts for all facilities. Additional contingency is needed to support unanticipated security staffing needs, including specifically in relation to major Summer 202 security events such as FIFA World Cup, Sail 250, Code Red/extreme weather events. As a result, the NTE will need to be increased to $82,647,954 through the end of the contract, if all optional renewal terms are exercised. A chart providing the NTE request calculation was presented.

The System's optimization efforts were presented by Mr. Checo. NYC H+H has numerous concurrent efforts underway to reduce the use of supplemental security staffing services across all facilities. Starting with recalibration of Hospital Police and Security staffing model currently under review with all facilities with a target completion date of end of CY-26. Identifying opportunities to improve efficiencies in HP/security posts by leveraging technology investments, narrowing timing of non-primary entry/exit points and conversion of two or more fixed posts to one patrolling post. Any reduction in posts will reduce need for supplemental vendor security staff without impacting recruitment or hiring of full-time staff. Additional efforts include improvements to Hospital Police recruitment and retention, and central visibility into Supplemental Security Staffing purchase orders. Lastly, a new RFP will be developed during the remaining contract term, which will incorporate many of these efforts.

Mr. Checo continued the presentation with the vendor performance. Four vendors were selected through the competitive RFP process for this pooled contract: Allied Universal Protection Services, Arrow Security dba Aron, Johnson Security Bureau, and Maxxi Building Security & Management. As a pooled contract, all vendors are available for use to fill needs. The selection of vendors and assignment of work at the facility level is at the discretion of each

facility's Hospital Police Chief. Several factors contribute to vendor selection. These factors include historical performance at any NYC Health + Hospitals facility, vendor's ability to meet time-sensitive and/or volume requirements, negotiated hourly rates for needed titles and communication/responsiveness of vendor. Maxxi Building Security & Management has not performed work on this contract. With the exception of Maxxi Building Security & Management, all vendor performance evaluations were presented.

The MWBE analysis for the vendors were presented by Mr. Checo. The vendor diversity team recommended a 30% diverse vendor component percentage for this solicitation. Johnson Security Bureau is a NYS/NYC certified M/WBE. Both Arrow Security and Allied Universal Protection Services provided a 30% M/WBE utilization plan. Maxxi Building Security is a NYC certified MBE. However, they had no spend on this contract. MWBE utilization to date has not yet met the set contract goal, but has improved over the three years of the contract.

Ms. Wang polled the Committee for questions.

Ms. Taitt inquired on the original NTE calculation. As the original NTE was based on the four facilities but was intended and approved for use of all facilities, how does the board make sure in the future what we are budgeting for is what we actually need.

Dr. Long responded that with the future RFP and with what we are currently bringing to the board is accounting for all of our facility needs with an appropriate 10% of the base and the additional contingency for other needs that we have learned along the way over the last several years from our work with COVID to our humanitarian centers and even with our code blue response. In response, this is bringing to bear the information and experience that we have to date so that we can give the most accurate representation to the Board.

Dr. Katz added that it is also true, as mentioned before, that it was for all facilities. It was for all facilities but we were just not doing that much at all the facilities. By all facilities we meant to say we do not have a separate contract. Historically, NYC Health and Hospitals had individual hospitals would have individual contracts, which the System seeks to avoid now. We understand that is not a very good business model as we do not get any volume discounts. Now, we are providing a much higher level of security at all of our facilities and will continue that as we are still expanding all the hospitals so that at some point they will all have emergency departments and front door weapon screening which we do not have at all hospitals, we have it in some.

Dr. Long added that we just went live at Bellevue with the front door weapon screening on Tuesday of last week. It shows that we know the plan that we need to do to keep our staff safe and we are implementing as fast as we can, and this accounts for the cost of it.

There being no further questions, Ms. Wang thanked the team.

Upon motion made and duly seconded, the Committee unanimously approved the resolution for consideration by the Board.

FINANCIAL UPDATE

Mr. Ulberg opened the presentation with the FY-2026 Quarter 3 Highlights. He conveyed that March closed with $1.09B (34 days cash-on-hand). The budget underperformed by less than 1% (-0.7%) and closed Year-to-Date February (Feb YTD) with a negative Net Budget Variance of -$96.2M.

Mr. Ulberg continued that direct patient care receipts increased by $59.7M compared to the same period in FY-25. Our IP discharges are 1.8% lower than the same time last year, while our OP visits are up by 1.3% for the same period. After adjusting for the IP discharge volume decline, we are still up by $162M in patient care revenue as patients we serve in our inpatient settings show higher acuity (higher CMI) and as we continue to implement our revenue cycle best practice initiatives, negotiate better contracts and focus on strategic initiatives. The year-to-year improvement in patient care revenue is offset by -$102M, resulting from the timing impact of FY-25 residual/secondary billing payments from CHC delays carried over from the previous ear, and timing of UPL conversion payments.

Our strategic financial initiatives are on track, with the FY-26 incremental target adjusted to reflect baselined initiatives, demonstrating consistent and reliable performance over time. Through February, we achieved $204.5M, compared to a financial plan target of $472M. Several areas of strong Feb YTD performance were noted. Additional areas of opportunity and focus include reducing the average length of stay for alternate level of care (ALC) patients, achieving revenue cycle best-practice performance metrics, and expanding behavioral health services.

Mr. Ulberg continued presenting the cash projections for FY-26. The System is estimated to close April with approximately $1.5 billion (47 days cash-on-hand) and expects to close May with approximately $1.2 billion (38 days cash-on-hand). We continue to work closely with the City on our remaining liabilities due to them as we continue to closely monitor our cash position.

Mr. Ulberg continued presenting the external risks. Several areas of focus are Essential Plan changes, Medicaid, Potential City/State Budget challenges presenting a financial challenge to NYC Health + Hospitals. Further, the Average Commercial Rate (ACR) State Directed Payment (SDP) benchmark presenting an opportunity to NYC Health + Hospitals.

Ms. Wang inquired on if the grandfathered provision for ACR covers year three. Mr. Ulberg agreed. Ms. Wang continued to inquire to confirm that the ACR ratchet down does not start until year four. Mr. Ulberg confirmed. Next, Ms. Wang inquired if the funds that started flowing from year one, came in on one bolus or was it over time.

Mr. Ulberg responded that the funds flow is such that it goes to the plans in the first instance and then we start negotiating with the plans about getting our share of that money. Some plans are very immediate to pay us lump sums, others may take a little bit more time, but in the end, we end up securing all the monies that are owed to us. The funds come based on the arrangement and the relationship we have with the plans. We have been trying to do a better job as we know how much the State gave to the plans, we get that scheduled and then we use that to communicate to each of the plans stating this is the amount that the State Health Department had loaded into the rates. We would like to be more

prospective where we get paid on the day that we provide the service rather than two years behind.

Ms. Wang commented that it was her hope that we might be able to catch up on year three.

Mr. Ulberg added that it is the goal. We hope to catch up in year three.

Ms. Philogene presented the financial performance highlights for FY-26 thru February Net Budget Variance. She noted that February ended with a net budget variance of -$96.2M (less than 1%). Receipts are less than budget by $26.8M (-$0.4%), primarily driven by direct patient care and Risk revenue; offset by appeals and settlements performing better than target. Disbursement exceeded budget by $69.4M, driven by NYC Health + Hospitals staffing, overtime and medical surgical supplies as we continue to work through establishing staffing models.

Ms. Philogene provided the FY-26 thru February performance drivers updates. Cash receipts are on track to meet budget. Cash disbursements are over budget by 1% primarily due to overtime needs and non-model staffing areas as we continue to right size our staffing models.

The revenue performance for FY-26 thru February was presented by Ms. Philogene. FY-26 direct patient care revenue (IP and OP) is $59.7M higher than FY-25 actuals. Year-over-year variance is due to higher prior year receipts from CHC recoupment and timing of UPL Conversion for that period offset by FY-26 Direct Patient Care Receipts (IP/OP) improvement compared to prior year attributable to revenue cycle, managed care and other strategic initiatives as well as higher CMI.

Ms. Karlin provided an update on NYC Health + Hospitals Patients Facing Increasing Challenges Obtaining and Maintaining Coverage. Due to the impacts of H.R.1. NYC Health + Hospitals anticipates a need for additional resources to help patients with increased barriers to obtain or maintain coverage as we help them navigate through these challenges. Financial counseling workflows and performance have improved over time but opportunity remains as changes in Federal law and policy are expected to create considerable headwinds. Some of the most notable changes impacting workflows include the 6-month redeterminations for Medicaid expansion adults, compliance work requirements, provisions effectively ending automatic renewals coverage, expiration of ACA subsidies, Essential Plan eligibility changes and uncertainty, reductions in retroactive Medicaid coverage, Medicaid data sharing with ICE and changes to Public Charge rule. NYC Health + Hospitals expects our patient population to have an additional 424 thousand annual redeterminations, and an additional 45 thousand financial counseling interactions for those potentially losing coverage. The net impact to NYC Health + Hospitals is an anticipated need for over 130 additional financial counselors costing about $11M.

An overview of the mitigation strategies to address these challenges was presented by Ms. Hartmann. Some of the System mitigation strategies include advocacy efforts as the System continues to seek delays and improvements at Federal and State level including streamlining and automating insurance enrollment process to assist patients in addressing some of these changes. Ensuring that H+H is raising staff and patient awareness about what is changing

that includes sharing plans and information with staff via awareness sessions, RCS Hot Topics and H+H insider as well as sharing information and resources with patients via MyChart/email and website.

Addressing the expiration of ACA subsidies and the changes in Essential Plan eligibility by assisting patients transitioning between coverages or into a financial assistance program and looking for opportunities to address reductions in retroactive Medicaid coverage by improving pre-service financial counseling rates and help our patients get enrolled prior to the receipt of services to avoid the need to apply for retroactive coverages. Supporting patients with 6-month recertification requirements by pursuing automation to supplement financial counseling workflows, enhancing patients' self-service workflows and coordinating strategies with payer partners to ensure success. Additionally, helping patients comply with Medicaid work requirements by tracking NYS implementation of work requirements, advocating for cross-program data sharing, supporting patients with documenting compliance or exemptions, and coordinating with other City agencies on processes to support patients. Lastly, ensuring we are supporting immigrant patients by educating staff, providing scripting to help address patient questions and concerns, and referring patients to Legal Health attorneys for personalized immigration legal assistance.

Ms. Wang polled the Committee for questions.

Mr. Pagán commented on the impressive activities that are ongoing to help out patients manage the multiple challenges around them when it comes to how do they get insurance and so on. With so many changes in technology, there is always an opportunity to continue to streamline processes to make it easier or improving them.

Ms. Karlin noted that there are additional things that the team is looking at, but due to limitations in the presentation we did not include. However, one of the larger projects that Allison is working on now is in fact automated agents to support our telephonic financial counseling unit. There are about 75 people or so in a centralized telephonic financial counseling unit and as noted previously in the presentation, if we keep doing the same thing the same way, we would need 130 additional financial counselors and we are looking to reduce that need by about half is the projection. By layering in an automated AI intake agent to start taking in some of the demographic information from patients calling in and we will then extend that out to outbound calling as well or might have gotten that reverse, which is going live first but we are actively working on an automated agent to reduce the number of new hires and support our patients in the financial counseling process to support our staff. We are also looking at more automated self-service tools for patients so that we can take our financial counselors' sort of out of the loop and we are just trying to understand how we can layer that into our technology stack. Lastly, those advocacy efforts which are the first thing we listed, part of that is advocating with the State to be able to pass them a file rather than having to have a facilitated conversation with the patient on the phone. Again, it would be using tools that already exist but creating that interface with the State so that we could do it in a more automated and less personnel heavy way.

Dr. Katz added that HIPPA is not H+H's friend in using technology as if we were only focused on how to help our patients the most, we would be able to electronically make a lot of people qualified for the exemption but can be done as long as the person approves. It is just then you would need to have the person in front of you as opposed to the ideal way to do it, which is you would take all these databases and based on the diagnoses that are electronically available both in our System and in the insurance company systems, you would transfer them all and say this is the list of people considered disabled and therefore, do not have to go through the work requirements. However, due to HIPPA, we cannot release that information to anybody without their permissions. If you had the person in front of you it could be done granted they provide permission, but the problem are all of the people who are out there not opening their mail and do not need anything at this moment or are overwhelmed by other issues at the time. In a financial world that is how it would be dealt with. Due to HIPPA as it involves providing information to someone else about health status, which can only be done with the persons consent, then if you have consent, if they are in front of you, it is not so much of an issue as we would just enroll them. We wish we could enroll all the other people who do not get around to getting to the office.

Ms. Wang added that on the margins, there are some things that we do.

Dr. Katz added that Marji and her team are doing great efforts.

Ms. Wang inquired on the estimates on the annual determinations and how it relates to EP5 or is this only Medicaid.

Ms. Hartmann responded that the team incorporated the changes to the Essential Plan in the increase in financial counseling interaction but it is still an estimate. They need to look to potentially fine tune based on the outcome of the State budget, but they did include an estimate for that.

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

ADJOURNMENT

There being no further business to bring before this committee, the meeting adjourned at 12:28 p.m.

Mitchell H. Katz, MD
NYC HEALTH + HOSPITALS – PRESIDENT AND CHIEF EXECUTIVE OFFICER
REPORT TO THE BOARD OF DIRECTORS
May 28, 2026

MATTHEW LEVY, CEO AT NYC HEALTH + HOSPITALS/SEA VIEW, MOVES ON

After seven years at the helm of NYC Health + Hospitals/Sea View, Chief Executive Officer Matthew Levy, LNHA, MHA, announced he will be stepping down and moving into a new phase of his distinguished career. His last day at the facility is today. Since he joined our health care System in 2019, Matthew has demonstrated exemplary leadership, compassion, and collaborative energy; qualities that have been instrumental in achieving the highest level of resident-centered care at NYC Health + Hospitals/Sea View's award-winning facility. Under his leadership, Sea View has ranked #1 in New York State for two consecutive years in 2022-2023, and remains in the top 3 in 2026 for Newsweek's Best Nursing Homes List in New York.

SEWIT TECKIE, MD, MBA, AND TED LONG, MD, MHS, APPOINTED SYSTEM CHIEF MEDICAL OFFICERS

NYC Health + Hospitals appointed two physician-leaders to the roles of System Chief Medical Officer. Sewit Teckie, MD, MBA, has been named System Chief Medical Officer for Clinical Affairs and Clinical Business Strategy, and Ted Long, MD, MHS, LHD (Hon), has been named System Chief Medical Officer for Clinical Services and Population Health. In these complementary leadership roles, Dr. Teckie and Dr. Long will partner to guide the clinical infrastructure, strategic growth, and population health initiatives of the nation's largest municipal health care system. Dr. Teckie and Dr. Long assumed their new roles on March 2, 2026.

Dr. Teckie is a practicing radiation oncologist at NYC Health + Hospitals/Kings County who joined the System in 2022 as System Chief of Radiation Oncology. She has been instrumental in upgrading technological and clinical oncology services throughout the system. She previously served as Interim Director of Radiation Oncology at NYC Health + Hospitals/Elmhurst and Vice President of Enterprise Clinical Operations.

Dr. Long is a practicing primary care physician in the Bronx who joined the system in 2018. He previously served as Senior Vice President of Ambulatory Care and Population Health. Notably, he served as Executive Director of the NYC Test & Trace Corps during the COVID-19 pandemic, designed the City's Arrival Center for asylum seekers, and transformed

primary care at NYC Health + Hospitals to expand primary care to more patients and achieve the best health outcomes in the history of the system.
Before joining the system, Dr. Long served as Senior Medical Officer at the Centers for Medicare and Medicaid Services (CMS) and Medical Director at the Rhode Island State Department of Health.

NYC HEALTH + HOSPITALS/JACOBI | NORTH CENTRAL BRONX APPOINTS CATHERINE LICITRA, DNP, RN, CPHQ, CPPS AS CHIEF QUALITY OFFICER

Catherine Licitra, DNP, RN, CPHQ, CPPS was appointed Chief of Quality for the Jacobi and North Central Bronx campuses. She brings over 25 years of nursing and patient care service to this role from her past experience at Memorial Sloan Kettering Cancer Center. In her past role as Patient Safety Director, Dr. Licitra oversaw patient safety operations across the organization, including incident management, root cause analyses, regulatory reporting and corrective action implementation. She then worked with leadership to create a comprehensive incident reporting system, coordinated quality safety initiatives, and developed staff training to create a high reliability culture and enhanced patient care outcomes. She also supported the patient and family advisory council for quality initiatives, integrating patient and family perspectives into safety and quality programs.

NYC HEALTH + HOSPITALS EMPLOYEE AND FACILITY RECOGNITIONS

NYC HEALTH + HOSPITALS/ELMHURST RECOGNIZED AS ANTIMICROBIAL STEWARDSHIP CENTER OF EXCELLENCE

NYC Health + Hospitals/Elmhurst has been designated as an Antimicrobial Stewardship Center of Excellence by the Infectious Diseases Society of America (IDSA), recognizing the hospital’s demonstrated commitment to advancing responsible antimicrobial use and improving patient care outcomes. The prestigious designation is awarded to healthcare institutions that demonstrate excellence in antimicrobial stewardship practices, strong institutional leadership support, and a sustained commitment to combating antimicrobial resistance. According to the organization, each year, more than 700,000 people die due to antimicrobial-resistant infections. Only about 200 hospitals worldwide have been recognized as an Antimicrobial Stewardship Center of Excellence.

Antimicrobial stewardship programs are designed to optimize the use of antibiotics and other antimicrobial medications, helping to reduce drug resistance, improve patient outcomes, decrease unnecessary medication exposure, and lower healthcare costs. The IDSA Antimicrobial Stewardship Center of Excellence program recognizes institutions that have created stewardship programs supported by hospital leadership and integrated throughout patient care operations.

NYC HEALTH + HOSPITALS/BELLEVUE CEO DR. ERIC WEI RECOGNIZED BY CITY & STATE NEW YORK 2026 "ASIAN TRAILBLAZERS"

NYC Health + Hospitals/Bellevue's Chief Executive Officer Eric Wei, MD, MBA was recognized as an "Asian Trailblazers" on City & State New York's annual list for 2026. The list, which coincides with Asian American and Pacific Islander Heritage Month celebrates outstanding contributions to healthcare, business, real estate, labor, social services, and advocacy. City & State New York is a media organization dedicated to covering New York's local and state politics and policy through in-depth, non-partisan coverage.

NYC HEALTH + HOSPITALS/QUEENS CLINICAL PHARMACIST HONORED AS 2026 TRIBUTE TO EXCELLENCE IN HEALTHCARE RECIPIENT

Olga Inoyatova, PharmD, AAHIVP, HIVPCPrx, Clinical Pharmacist at NYC Health + Hospitals/Queens was selected as a recipient of the United Hospital Fund's (UHF) 2026 Tribute to Excellence in Healthcare Award, recognizing her extraordinary personal leadership to improve quality of care, patient safety, and patient experience at NYC Health + Hospitals/Queens. She led a performance improvement project in the Adult Virology Clinic where she and the team were able to significantly reduce viral loads which keeps patients healthy and prevents transmissions.

UNITED HOSPITAL FUND SELECTS THREE NYC HEALTH + HOSPITALS PHYSICIANS FOR HEALTH EQUITY FELLOWSHIP

United Hospital Fund named three physicians from NYC Health + Hospitals for its new cohort of the Health Equity Fellowship, an 18-month leadership development program designed to support clinicians working to address health disparities and improve outcomes in underserved communities across New York. Fellows partner with community-based organizations to create innovative solutions that extend beyond traditional clinical care and address the social and structural factors that influence health outcomes. Their Action Learning Projects focus on a range of health equity priorities, including chronic disease prevention and education, adolescent wellness, legal advocacy in pediatric asthma care, expanded access to housing and food resources, and improved transitions of care for patients with complex medical and social needs, including people living with HIV/AIDS and members of LGBTQ+ communities.

- Michelle Glick, MD, MA, FAAP, a pediatrician from NYC Health + Hospitals/Lincoln, will partner with the New York Legal Assistance Group. Her project will bridge pediatric asthma care with legal advocacy for safe housing by training physicians, improving documentation, and formalizing referral pathways to address housing-related health disparities.

- Ofole Mgbako, MD, Section Chief of Infectious Diseases at NYC Health + Hospitals/Bellevue and Director of the hospital's HIV Equity Research Program, will partner with Alliance for Positive Change. His project will focus on improving hospital-to-community care transitions by integrating peer-led supports to reduce social isolation and strengthen outpatient engagement for patients with advanced HIV and substance-related infections.

- James Winston Grigg, MD, Associate Medical Director of the Primary Care Safety Net clinic at NYC Health + Hospitals/Bellevue, will partner with Coordinated Behavioral Care. His project will develop a "Housing as Health Care" learning collaborative to train staff, improve referrals, and expand equitable access to housing-related services.

HEALTH CARE SYSTEM AND FACILITY ANNOUNCEMENTS

FOR MENTAL HEALTH AWARENESS MONTH, NYC HEALTH + HOSPITALS AND PROJECT RENEWAL ANNOUNCE NEW $2 MILLION PROGRAM TO STRENGTHEN THE BEHAVIORAL HEALTH WORKFORCE

As part of Mental Health Awareness Month, NYC Health + Hospitals and Project Renewal announced Care Corps, a new program that trains New Yorkers who have faced significant barriers to employment to serve in entry-level positions in behavioral health. The $2 million program was created to help fill vacant positions at NYC Health + Hospitals and create a strong behavioral health workforce pipeline. Since the program launched last year, 45 people have graduated, and 78% of them (35 people) have been hired at NYC Health + Hospitals or another hospital system in New York City. It is slated to train additional participants through 2026 and may expand based on ongoing workforce needs.

Care Corps is a free program that offers three weeks of classroom training at Project Renewal followed by a three-week internship, where students practice scenarios with actors in a hospital setting at NYC Health + Hospitals' Institute for Medical Simulation and Advanced Learning. As part of the program model, NYC Health + Hospitals pays Care Corps participants based on the number of training hours they complete in their internship to simulate a true work experience and foster accountability. Graduates qualify for roles as Psychiatric Social Health Technicians, working in inpatient psychiatric units to support behavioral health nurses with patient activities of daily living, observation, wellness checks, hallway monitoring, and escorts. Salaries start at $50,000 a year, plus union and medical benefits.

NYC HEALTH + HOSPITALS MARKS 10 YEARS OF ROBOTIC SURGERY, COMPLETING OVER 20,000 PROCEDURES

NYC Health + Hospitals has completed over 20,000 robotic surgeries since 2016, marking a decade of expanding access to advanced surgical technology for the communities it serves. With the da Vinci surgical robot, surgeons operate through smaller incisions using a 3D HD camera and instrument controls from a nearby console, resulting in less pain and faster recovery times for patients compared to traditional open surgery.

NYC Health + Hospitals has rapidly expanded its robotic surgery program over the last four years and now performs over 5,000 robotic surgeries annually. The health System has 19 da Vinci robotic surgical systems across its hospitals, with more than 100 surgeons trained to operate them.

Access to robotic surgery has historically been concentrated at private health care systems, putting it out of reach for many patients. As the nation's largest public health system, NYC Health + Hospitals has made this technology available to all New Yorkers, regardless of their health insurance status.

NYC Health + Hospitals currently offers da Vinci robotic surgery in several areas, such as General Surgery, including Colorectal, Bariatric, Surgical Oncology, and Acute Care; Gynecology, including Urogynecology and Gynecologic Oncology; Thoracic; Urology; and Ear, Nose, and Throat.

ELEVATE YOU YOUTH MENTAL HEALTH CLINICS HIGHLIGHTED IN NEW EPISODE OF NYC HEALTH + HOSPITALS PODCAST THE REMEDY

NYC Health + Hospitals released a new episode of its podcast, The Remedy, featuring leaders and health care providers from the nation's largest municipal health care system. In Season 3 Episode 7: Inside Elevate You Mental Health Clinics Dr. Michael Shen is joined by Dr. Rajvee Vora, NYC Health + Hospitals/Woodhull's Chief of Behavioral Health, Dr. William Coe, Medical Director for Woodhull's Elevate You clinic, and Karen Lenard, Vice President of Behavioral Health at MetroPlusHealth to discuss how the public health care System is working to keep young people engaged in mental health services as they transition into adulthood — one of the most critical gaps in adolescent patients' care. The episode explores how Elevate You clinics in Brooklyn and Queens are connecting 16 - to 25-year-olds to mental health care, counseling, social services, and creative therapy, delivering comprehensive, youth-centered support that goes beyond traditional care models.

NYC HEALTH + HOSPITALS/COLER JOINS OPEN DOORS NYC TO SHOWCASE A RESIDENT-CENTERED FOOD STORIES EXHIBITION ON DIGNITY, CULTURE, AND CARE

As part of National Skilled Nursing Care Week, NYC Health + Hospitals/Coler and Open Doors NYC co-hosted the Food Stories exhibition featuring storytelling from nursing home residents accompanied by large-

scale visual works by artist and community organizer Kevin Nakagawa. The artwork collective portrays how food supports cultural continuity, care, and emotional wellbeing within long-term care environments. The event marks the first public presentation of an ongoing resident-focused initiative centered around food, dignity, memory, and community.

The exhibition shares stories gathered from dozens of Coler residents about meals, traditions, gardens, markets, and relationships that have shaped their lives, demonstrating how profoundly food connects us to our homes, communities, and cultures. The sampling menu included traditional Caribbean-inspired meals like Curry Chicken (Trinidad), Pepperpot (Guyana), Sancocho (Dominican), and Cou-Cou and Saltfish (Barbados).

NYC HEALTH + HOSPITALS/NORTH CENTRAL BRONX BOOSTS CHILDHOOD IMMUNIZATION RATES TO RECORD HIGHS, MATCHING NATIONAL BENCHMARKS

NYC Health + Hospitals/North Central Bronx has dramatically improved its immunization rates for children and adolescents, from 84% in 2018 to 91% in 2025, following a series of quality improvement initiatives. North Central Bronx Hospital's success stems from improvements across multiple areas. The hospital implemented dedicated clerical staff for patient contact, increasing follow-up calls from 3 to 6 per patient, and established digital tracking systems to replace paper-based processes.

In 2025, North Central Bronx Hospital administered 22,103 vaccine doses to pediatric patients aged 0 to 19. Across all age groups, the hospital administered 102,385 vaccine doses, underscoring its key role as a frontline immunization resource in the North Bronx.

NYC HEALTH + HOSPITALS/ELMHURST RENAMES INFECTIOUS DISEASE CENTER IN HONOR OF DR. JOSEPH MASCI

NYC Health + Hospitals/Elmhurst announced the renaming of its Infectious Diseases Center and Program in honor of Dr. Joseph R. Masci, a beloved physician, educator, and global health leader whose decades of service left an indelible mark on the hospital and the communities it serves. Dr. Masci died in 2022 following a 40-year career at Elmhurst Hospital and Mount Sinai.

Having served as Elmhurst Hospital's Director of Medicine for more than fifteen years, Dr. Masci was instrumental in shaping the hospital's Department of Medicine, Division of Infectious Diseases, and Global Health Program. His visionary leadership helped establish Elmhurst Hospital as a leader in infectious disease treatment and research.

Dr. Masci founded Elmhurst Hospital's HIV program in 1982, during the early years of the AIDS epidemic and at a time when the disease was not widely understood. Over the course of his career, he held numerous leadership roles at the hospital, including Chief of Infectious Diseases and Director of Internal Medicine. He also founded Elmhurst Hospital's

Global Health Department, expanding the hospital's impact far beyond New York City.

Throughout his distinguished career, Dr. Masci was widely respected for his deep compassion for patients, his mentorship of generations of clinicians, and his dedication to advancing care both locally and globally. His generosity, kindness, and commitment to underserved communities continue to define the culture of care at Elmhurst Hospital to this day.

NYC HEALTH + HOSPITALS/BELLEVUE RECEIVES AMERICAN CANCER SOCIETY GRANT TO SUPPORT TRANSPORTATION FOR CANCER PATIENTS

NYC Health + Hospitals/Bellevue received a $10,000 transportation grant from the American Cancer Society (ACS) to support patients undergoing cancer treatment. The funding will help provide rides to and from appointments, ensuring patients can access timely and consistent care. At Bellevue Hospital, the transportation program is coordinated by a multidisciplinary team that works closely with patients throughout their treatment journey, helping ease the burden on patients and families while supporting better clinical outcomes. This award marks the second consecutive year the hospital was selected for funding through the American Cancer Society's transportation grant program. In 2025, the hospital provided 115 rides through the grant.

THE GRACE FOUNDATION AND NYC HEALTH + HOSPITALS/SEA VIEW ANNOUNCE THE GRACE CAFÉ, AN EATERY ON CAMPUS TO BE OPERATED BY GRACE FOUNDATION PARTICIPANTS

On Thursday, April 30, as Autism Awareness Month ended, The GRACE Foundation, a Staten Island-based non-profit dedicated to empowering those with autism, and NYC Health + Hospitals/Sea View, a short-term rehabilitation and long-term care facility, announced a historic partnership with the launch of The GRACE Café, an eatery located on the campus of Seaview which will be operated by participants of The GRACE Foundation. The Café is located within the lobby of the Sea View Nursing Home in the Robitzek Building at 460 Brielle Avenue. It will undergo renovations and upgrades until it is ready to open doors for service in 6 to 8 weeks.

NYC HEALTH + HOSPITALS/QUEENS HOSTS SUCCESSFUL MAMMOGRAM EVENT IN HONOR OF MOTHER'S DAY

NYC Health + Hospitals/Queens held its annual Mother's Day Mammography Screening Event to promote regular breast cancer screenings. The event was co-sponsored by the Office of Assemblywoman Alicia Hyndman, which played a key role in promotion and outreach to highlight the importance of women taking preventive measures to receive timely care.

Assemblywoman Hyndman attended the event and received her own mammogram. The Assemblywoman had not had a mammogram for two years and expressed her commitment to encouraging other women to prioritize their health as well. Through the event 42 mammograms were completed, underscoring NYC Health + Hospitals/Queens' dedication to ensuring that women have access to vital preventive care.

RESPIRATORY THERAPIST'S VIGILANCE PROTECTS CRITICALLY ILL PREGNANT PATIENT DURING INTERFACILITY TRANSFER

Winnie Wong, a respiratory therapist at NYC Health + Hospitals/North Central Bronx (NCB), was honored for an act of clinical excellence that protected a critically ill pregnant patient during an interfacility transfer. During a routine transfer of a patient who was eight weeks pregnant with twins, diagnosed with a severe pulmonary embolism, and required supplemental oxygen, paramedics ran out of oxygen. Wong jumped into action with a replacement tank, restoring the patient's needed oxygen supply. Wong stayed with the team until the patient was safely loaded into the ambulance and connected to its onboard supply.

NYC HEALTH + HOSPITALS/BELLEVUE HOSTS ASIAN AMERICAN, NATIVE HAWAIIAN, AND PACIFIC ISLANDER HERITAGE MONTH CELEBRATION HIGHLIGHTING UNITY, CULTURE, AND COMMUNITY PARTNERSHIP

NYC Health + Hospitals/Bellevue hosted an Asian American, Native Hawaiian, and Pacific Islander Heritage Month celebration titled "Power in Unity," bringing together healthcare leaders, elected officials, frontline staff, and community partners to recognize the histories, cultures, and contributions of AANHPI communities across New York City and within healthcare. CEO Dr. Wei led a panel discussion featuring New York Council Member Linda Lee, Deputy Chief Nursing Officer Marie Estelle Lejarde, and Chief of Adult Psychiatry Dr. Bipin Subedi. New York City Council Member Virginia Maloney joined the event to offer welcoming remarks.

NYC HEALTH + HOSPITALS/JACOBI | NORTH CENTRAL BRONX STAND UP TO VIOLENCE (SUV) PROGRAM HOSTS FORDHAM LEADERSHIP ACADEMY STUDENTS

NYC Health + Hospitals/Jacobi | North Central Bronx Stand Up to Violence (SUV) program hosted students from Fordham Leadership Academy for a tour of its adult Level I and pediatric Level II Trauma Center. Students primarily learned about the care that goes into treating patients of violent trauma. The partnership between Fordham Leadership Academy and the SUV program, now in its second year, has included Career Day, Stand Up to Violence Week, and student hospital tours. Since the SUV program was established in 2014, it has engaged Bronx youth and connected them to supportive services, including educational, vocational, and employment resources. Encouraging young students to consider career goals while offering attainable employment opportunities increases the likelihood of upward mobility. Education and employment services are

essential components of SUV's violence intervention and prevention efforts.

NYC CARE UPDATE

NYC HEALTH + HOSPITALS' NYC CARE REACHES MILESTONE OF ONE YEAR OF PROVIDING LOW- AND NO-COST DURABLE MEDICAL EQUIPMENT BENEFIT

NYC Health + Hospitals' NYC Care program announced that its durable medical equipment (DME) benefit supported 2,652 patients in its first year. The benefit allows NYC Care members to access low- and no-cost DME, including CPAP machines and associated accessories, diabetes-related supplies, mobility devices, and urinary supplies. The provision of durable medical equipment is supported by NYC Care exclusive partner AdaptHealth, a network of full-service medical equipment companies. This year, access to the benefit will expand through the receipt of a $200,000 private foundation grant, allowing more members than ever to benefit from the increased autonomy, reduced risk of injury, improved quality of life, and better pain management afforded through DME.

ARTS IN MEDICINE UPDATE

MUSEUMS AS PARTNERS IN PUBLIC HEALTH

Arts in Medicine leadership together with Leonardo Bravo, Director of Public Engagement, MoMA, and Lilly Tuttle, Curator, MCNY delivered a presentation and roundtable that shared partnership outcomes, provided an adaptable framework for museum-healthcare partnerships, and invited participants to envision how museums can help shape healthier, more connected futures.

MUSIC FOR THE SOUL - NATIONAL NURSES MONTH

In celebration of National Nurses Month, the Music for the Soul program delivered several performances this month including concerts at NYC Health + Hospitals/Bellevue, NYC Health + Hospitals/Sea View, NYC Health + Hospitals/North Central Bronx, NYC Health + Hospitals/Woodhull, and NYC Health + Hospitals/McKinney. Live performances like these continue to help build community and offer meaningful moments of joy, comfort, and connection—supporting emotional well-being across our healthcare system.

POLICY ROUNDTABLE AT THE FEDERAL RESERVE BANK

On Wednesday, May 20, Arts in Medicine co-convened a senior leadership roundtable at the Federal Reserve Bank of New York with the Jameel Arts & Health Lab at NYU and the Laurie M. Tisch Illumination Fund. The session brought together roughly 42 leaders from health care, government, philanthropy, and culture, including Commissioner Ann Marie Sullivan from the State Office of Mental Health, Commissioner Diya Vij

from the City's Department of Cultural Affairs, Laurie Tisch, Professor Daisy Fancourt (WHO Collaborating Centre, UCL), and senior representation from Carnegie Hall, Lincoln Center, the Brooklyn Museum, MetroPlusHealth, Northwell, and Mount Sinai. The Office of the Deputy Mayor was represented by Anna Schierenbeck. The purpose of this round table was to consider how to build a policy framework for art and culture as part of a public health strategy for the city and state. The session produced the formation of a New York Arts and Health Task Force, with NYC Health + Hospitals Arts in Medicine positioned as the institutional anchor on the health care system side. Follow-up convenings include a debrief on June 5 and a summit during United Nations General Assembly Healing Arts Week on September 21.

CURATING FOR HEALTH: NEW SYSTEM INSTALLATIONS

- On Tuesday, May 19, Arts in Medicine and NYC Health + Hospitals/Jacobi held a ribbon cutting to unveil the 15 new artworks installed at the hospital's Behavioral Health Unit and Comprehensive Addiction Treatment Center. This installation was developed in collaboration with Dr. Maryann Popiel and the Arts Council. The curatorial approach focuses on works that create moments of stillness, offering both patients and staff opportunities for contemplation and connection.

- On May 28, Arts in Medicine and NYC Health + Hospitals/Bellevue held a ribbon cutting ceremony in the hospital's South Lobby to unveil the latest Community Mural, *Before There was Asphalt/Gardens are Cities* by artist Emma Kohlmann. The mural design features overgrown plants, insects, apartment buildings, symbols of time and changing seasons, inspired and made by the vision and ideas of Bellevue staff, families, and patients. This marks the 50th community mural in our inventory.

METROPLUSHEALTH UPDATE

FOOD IS MEDICINE PARTNERSHIP STRENGTHENS CARE DELIVERY AND HEALTH EQUITY

MetroPlusHealth continues to advance an integrated approach to care that addresses both clinical needs and the social drivers of health—particularly as federal policy changes may limit access to coverage and nutrition support for vulnerable populations. In this environment, MetroPlusHealth remains focused on strengthening essential services that directly improve member outcomes. Its partnership with God's Love We Deliver—the leading provider of medically tailored meals for New Yorkers living with chronic illness—demonstrates how embedding nutrition-based interventions into managed care can improve outcomes while strengthening New York City's health care safety net.

Since launching as a pilot in 2022, thousands of MetroPlusHealth Medicaid members have enrolled in the medically tailored meals program,

resulting in the delivery of over 1.5 million meals to members across all five boroughs. Referrals span value-based payment arrangements, in lieu of services, and hospital discharge support, reaching members with conditions such as diabetes, hypertension, cancer, HIV/AIDS, heart failure, and serious behavioral health needs. The majority of participants have diet related chronic conditions, underscoring the critical role of nutrition in disease management and care continuity.

The strength of this model has been validated through a recent study in Cleveland State University's Journal of Law & Health, Addressing Health Related Social Needs with Innovative Healthcare Spending. The study highlights how medically tailored meals—delivered through home delivery, medical nutrition therapy, education, and clinically tailored meal design—address key social determinants of health, including social and community context and neighborhood and built environment. The intervention targets high-risk Medicaid members with elevated utilization, aligning improved clinical outcomes with value-based care objectives.

Program utilization highlights both the depth and sustainability of engagement. Members enrolled through In Lieu of Services remain in the program for an average of 411 days, receiving approximately 326 meals per member, indicating sustained need and participation. Members referred through value-based payment programs average 80 meals per member, supporting shorter term, targeted clinical interventions. Together, these pathways illustrate a flexible, scalable Food Is Medicine (FIM) model embedded within Medicaid managed care.

Early outcomes and national evidence continue to demonstrate the value of this approach. Medically tailored meals are associated with improved disease control, including reductions in hospitalizations of 37%-52% and reductions in health care expenditures of 16%-31%, contributing to lower avoidable utilization and improved quality of life. Member feedback reinforces this success: 88% of participants report satisfaction, and 93% indicate that the program helps them better manage their medical conditions, including blood sugar control and nutrition stability.

This partnership reflects MetroPlusHealth's ability to align plan resources, community expertise, and health system priorities to deliver more holistic, person centered care. By integrating food is medicine into the continuum of care, MetroPlusHealth and NYC Health + Hospitals continue to advance health equity while supporting long term system performance and sustainability.

EXTERNAL AFFAIRS UPDATE

City
The City released the Executive Budget this month. The Executive Budget Hearing will take place at City Hall on June 5th, where Dr. Mitch Katz,

John Ulberg, and Dr. Patsy Yang will testify and participate in question and answer from the NYC City Council.

Additionally, NYC Health + Hospitals was able to advocate successfully for Participatory Budget Awards, resulting in $845,000 in awards for capital new needs for NYC Health + Hospitals/Gouverneur (PAC); Gotham, Roosevelt; and Kings County. Gouverneur will receive $350,000 to replace a commercial dishwasher; Roosevelt will receive $300,000 to replace ophthalmology equipment; and Kings County will receive $195,000 to replace an ultrasound machine.

State
The New York State budget is concluding, after nearly a two-month extended process.

Over the last several months, we have continued to advocate for our priorities, including new investments in Medicaid operating funding for hospitals, nursing homes, and federally qualified health centers, as well as partial restorations of a prior capital reimbursement cut for hospitals and nursing homes. The restoration of capital reimbursement has been a priority for NYC Health + Hospitals.

In addition to budget negotiations, there are two weeks left in the 2026 Legislative calendar and we will be reviewing all bills that pass both houses before the end of session. The session is scheduled to end on Thursday, June 4.

We are grateful to the Governor and the New York State legislature for including much needed new Medicaid investments for hospitals, nursing homes, and health centers. This new funding will help NYC Health + Hospitals as we deal with additional Medicaid changes as a result of HR1.

Federal
We continue to advocate on our longstanding priorities, including H.R. 1 fixes, eliminating the remaining Medicaid DSH cuts, permanently extending telehealth flexibilities, and preventing Medicare site neutral cuts.

Community Affairs
The CAB Chairs from NYC Health + Hospitals/Bellevue, Cumberland, Elmhurst, Gouverneur, and Lincoln presented reports to the Community Relations Committee of the Board of Directors on May 2, 2026.

Following the Board meeting, the Council of CABs met, and the current CAB Chairs collected nominations for their upcoming Executive Committee election in June. The Council of CABs committees also presented reports to the Council of CABs.

Almost 100 CAB members from across the health System attended the CAB Education Conference on May 15th. This year's conference was designed to further strengthen the CAB foundation, with the theme of Leading with Voice and Impact. The conference, facilitated by Community Resource Exchange, was designed to equip CAB members with the tools, knowledge, and connections they need to be powerful advocates both for their communities and within them.

NEWS FROM AROUND THE SYSTEM

- **New York Times:** 0-Minute Challenge: 'Cityscape' by Romare Bearden
- **NY1:** Skin Cancer Prevention and Screening Tips
- **Becker's Hospital Review:** NYC Health + Hospitals taps 2 system chief medical officers
- **Yahoo Health:** What Does a "High Alcohol Tolerance" Actually Mean When It Comes to Drinking? Doctors Weigh In
- **MedPage Today:** She Took a Supplement for Constipation. She Ended Up in the Cardiac ICU.
- **Martha Stewart:** The Most Effective Ways to Get Rid of Hiccups, According to Doctors
- **Becker's Hospital Review:** Behavioral healthcare's next challenge: Defining quality access
- **Gothamist:** Abortion meds still available through telehealth in NY after court restricts mifepristone
- **City & State New York:** The 2026 Asian Trailblazers
- **New York Times:** I'm a Doctor. Here's What A.I. Cannot Do.
- **Gothamist:** Mamdani taps behavioral health leader to head new Office of Community Safety
- **The New York Academy of Sciences:** Hantavirus on a Cruise Ship Is Unusual: Here's What to Know
- **Healthcare Industry Today:** Dr. Mason Blake Pimsler named 'Doctor of The Year' for Lincoln Medical Center, Bronx, New York
- **New York Post:** Why cruise ships create an 'ideal' environment for disease — and the worst-case scenarios
- **QNS:** Elmhurst Hospital hosts Mother's Day and National Nurses Week community celebration (NYC Health + Hospitals/Elmhurst mentioned)
- **NY1:** Preventing the spread of hantavirus: Inside the U.S. pathogen containment systems

- **PBS News Hour:** Bellevue Literary Review celebrates 25 years of stories on illness and recovery
- **Yahoo!News:** Is hantavirus like COVID-19? Five infectious disease experts answer some of the biggest questions about the outbreak.
- **Bronx Times:** Fordham Leadership Academy students given tour of NYC Health + Hospitals/Jacobi | North Central Bronx
- **Harlem World Magazine:** NYC Launches $2M Program To Boost Mental Health Workforce
- **Politico:** NYC Health + Hospitals announced the launch of a new program called Care Corps, which will train New Yorkers with a high school diploma to work in entry-level behavioral health jobs
- **Roosevelt Islander:** Food Stories Exhibition At Roosevelt Island Coler Hospital (NYC Health + Hospitals/Coler mentioned)
- **Bronx Times:** North Central Bronx Hospital reaches record highs in child immunization rates
- **Becker's Hospital Review:** NYC Health + Hospitals taps quality chief for 2 hospitals (NYC Health + Hospitals/Jacobi | North Central Bronx mentioned)
- **am New York:** Kick off summer with these 10 must-see NYC art exhibitions (Another Wonderland exhibit featuring NYC Health + Hospitals' art mentioned)
- **Harlem World Magazine:** NYC Health + Hospitals Celebrates 10 Years Of Robotic Surgery, Surpassing 20,000 Procedures
- **amNY:** Healthcare Heroes honored by Schneps Media
- **Becker's:** 508 hospitals with the lowest CAUTI rates (NYC Health + Hospitals/Metropolitan and South Brooklyn Health featured)
- **Think Global Health:** How NYC Practices for Ebola and Special Pathogen Outbreaks (NYC Health + Hospitals mentioned)

RESOLUTION 06

Electing Ines Delarosa, 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 her successor has been duly elected and qualified, or as otherwise provided in the MetroPlus Bylaws.

WHEREAS, a resolution approved by the Board of Directors of New York City Health and Hospitals Corporation ("**NYC Health + Hospitals**") on October 29, 1998, authorized the conversion of MetroPlus from an operating division to separately incorporated membership not-for-profit membership corporation with NYC Health + Hospitals as sole member making MetroPlus, in effect, a wholly owned subsidiary of NYC Health + Hospitals; and

WHEREAS, the Certificate of Incorporation of MetroPlus reserves to NYC Health + Hospitals the sole power with respect to appointing members of the Board of Directors of MetroPlus; and

WHEREAS, the Bylaws of MetroPlus, as amended on July 31, 2025, authorize (i) the NYC Health + Hospitals Board Chairperson to select four directors of the MetroPlus Board, one of whom shall serve as Chairperson; (ii) the NYC Health + Hospitals President to select three directors; and (iii) the MetroPlus President to select two MetroPlus consumers as directors, all subject to election by the NYC Health + Hospitals' Board of Directors; and

WHEREAS, the MetroPlus President has selected Ines Delarosa, to fill a vacancy for one of the positions to be held by a MetroPlus consumer; and

WHEREAS, the NYC Health + Hospitals' Board of Directors has considered the qualifications of Ines Delarosa and determined that she would be a good member of the MetroPlus Board of Directors.

NOW, THEREFORE, **be it**

RESOLVED, that the New York City Health and Hospitals Corporations' Board of Directors hereby elects Ines Delarosa as member of the Board of Directors of MetroPlus Health Plan, Inc., a public benefit corporation formed pursuant to Section 7385(20) of the Unconsolidated Laws of New York, to serve in such capacity for a five-year term or until her successor has been duly elected and qualified, or as otherwise provided in the MetroPlus Health Plan, Inc. Bylaws.

NYC HEALTH+ HOSPITALS

June 2026

EXECUTIVE SUMMARY
Election of Ines Delarosa as Director of MetroPlus Health Plan, Inc.

Pursuant to the Certificate of Incorporation of MetroPlus, NYC Health + Hospitals as sole member has the power to designate the members of the Board of Directors of MetroPlus.

The MetroPlus Bylaws assigns to the Chairperson of NYC Health + Hospitals the right to select four members of the MetroPlus Board, assigns to the NYC Health + Hospitals President the right to select three such members, and assigns to the MetroPlus President the right to select two consumer members. All members of the MetroPlus Board of Directors must be elected by vote of the NYC Health + Hospitals' Board of Directors. Talya Schwartz, M.D. as President and CEO of MetroPlus, has selected Ines Delarosa. The proposed resolution approves Ms. Delarosa to fill the seat newly created by the amendment of the MetroPlus By-Laws.

A vote approving the appointment of Ines Delarosa as Director to the MetroPlus Board of Directors is sought.

Ms. Delarosa, a MetroPlus member, is a people-focused professional with experience and a background in wellness, fitness, customer service, and community support. She is bilingual in English and Spanish and will bring strong communications skills and experience connecting with diverse populations and building trust to support healthy lifestyle changes.

MetroPlus Health Plan Inc- Board of Directors Appointment

Board of Directors Meeting

June 25, 2026

Steven Stein Cushman, Chief Counsel, MetroPlus Health

NYC HEALTH+ HOSPITALS

Board of Directors Approval Request

Electing Ines Delarosa, 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 her successor has been duly elected and qualified, or as otherwise provided in the MetroPlus Bylaws.

NYC HEALTH+ HOSPITALS

Bio

- Ines Delarosa, a resident of Brooklyn, is a mother of three sons and has experience with MetroPlusHealth products and services for people of differing ages. Ms. Delarosa is a dedicated and people-focused professional with a background in fitness, customer service, and community support. Bilingual in English and Spanish, Ms. Delarosa has strong communication skills and a demonstrated ability to connect with diverse populations. She is very involved in her community and is a trusted go-to person on many issues. She has work experience in customer service in both a bank setting and at a small construction company. With training in diet and fitness, she also acts as a trainer supporting clients achieve their own personal fitness and wellness goals. Ms. Delarosa is passionate about improving health, confidence, and overall well-being and looks forward to bringing that passion to her work as a member of the MetroPlusHealth Board of Directors.

NYC HEALTH+ HOSPITALS

June 2026

RESOLUTION – 07

AMENDING THE RESOLUTION TO REFLECT THE CORRECT NAME OF THE VENDOR: Authorizing New York City Health and Hospitals Corporation (the "System") **to further increase the funding by $7,486,830 for its previously executed agreement with Array Architects PC, ~~Inc~~ ("Array") for architectural/engineering services** for the renovation of spaces at NYC Health + Hospitals/Bellevue Hospital ("Bellevue") and NYC Health + Hospitals/Woodhull Hospital ("Woodhull") that began in June 2020 in connection with the System's Correctional Health Services ("CHS") initiative to treat its patients who require higher levels of care in its Outposted Therapeutic Housing Units ("OTxHU"), **which follows the previous funding increases of $8,000,000 in November 2024 increasing the NTE To $30,325,000, such that the funding is increased $7,486,830 which includes a $3,000,000 contingency from $30,325,006 to a total not to exceed sum of $37,811,836 and to extend the contract term to June 2029 for additional architectural/engineering services at Woodhull.**

WHEREAS, in June 2020 the System's Board of Directors authorized a five-year agreement with Array to provide architectural/engineering services for the renovation of space at Bellevue and Woodhull to serve as sites for the OTxHU initiative; and

WHEREAS, since the approval of the subject agreement, the scope and cost of the OTxHU initiative has increased to meet security operations, programmatic, and regulatory requirements, the requirement that the progress of the program be substantially accelerated, and inclusion of contingencies, at Bellevue and Woodhull; and

WHEREAS, since the budget was last increased in November 2024, additional design revisions at Woodhull have been initiated by New York City Department Of Correction (DOC) for increased security measures resulting in a redesign of interior spaces (including revised 9th and 10th floor interior layouts), exterior spaces, and secure perimeter, as well as ongoing reviews with New York State Commission of Correction, emergency power distribution, design phase acceleration, and early release packages for elevator and curtainwall projects, requiring an increased level of effort on the part of Array; and

WHEREAS, the increased level of effort requires an increase in Array's budget for the project by $7,486,830 (consisting of $4,486,830 for the redesign of existing spaces and new design of 9th and 10th floors, and a $3,000,000 contingency) and an extension of the contract duration to June 2029; and

WHEREAS, the overall responsibility for the administration of the proposed contract shall be with the Senior Vice President, Office of Facilities Development; and

NOW THEREFORE, BE IT RESOLVED, the New York City Health and Hospitals Corporation be and hereby is authorized to further increase the funding by $7,486,830 for its previously executed agreement with Array Architects, PC ~~Inc~~. ("Array") for architectural/engineering services for the renovation of spaces at NYC Health + Hospitals/Bellevue Hospital ("Bellevue") and NYC Health + Hospitals/Woodhull Hospital ("Woodhull") that began in June 2020 in connection with the System's Correctional Health Services ("CHS") initiative to treat its patients who require higher levels of care in its Outposted Therapeutic Housing Units ("OTxHU"), which follows the previous funding increases of $8,000,000 in November 2024 increasing the NTE To $30,325,000, such that the funding is increased $7,486,830 which includes a $3,000,000 contingency from $30,325,006 to a total not to exceed sum of $37,811,836 and to extend the contract term to June 2029 for additional architectural/engineering services at Woodhull.

NYC HEALTH + HOSPITALS

June 2026

EXECUTIVE SUMMARY

ARCHITECTURAL AND ENGINEERING SERVICES
FOR THE OTxHU PROGRAM
ARRAY ARCHITECTS PC ~~INC~~.

OVERVIEW: The System's CHS OTxHU initiative is to treat more clinically complex patients within secured units located at Bellevue and Woodhull hospitals. Considerable work has been, and will have to be done to complete these spaces. The System executed a contract with Array to design the OTxHU spaces and assist with the procurement of construction contractors and with construction administration. The contract with Array was approved by the Board of Directors in June 2020 with an NTE of $8,663,000. Subsequent increases were authorized in November 2021 ($1,814,880), November 2022 ($6,409,289), May 2023 ($1,960,238), November 2023 ($3,477,599), and November 2024 ($8,000,000), bringing the current contract NTE to $30,325,006.

NEED: Modifications to the OTxHU initiative have been identified at Woodhull due to New York City Department Of Correction-initiated security measures requiring a redesign of interior spaces, exterior spaces, and secure perimeter. New designs include revised 9th and 10th floor interior layouts to integrate security and layout changes for CHS and New York City Department Of Correction functionality. Ongoing New York City Department Of Correction revisions include a new elevator design replacing the Intake Pavilion/Driveway, Emergency Power Distribution, Design Phase Acceleration, Early Release Packages for Elevator and Curtainwall, Medical Equipment Planning, IT Infrastructure, and Security Services. Some requests remain under review with New York State Commission of Correction which may require additional design adjustments (e.g., wall/ceiling attack ratings, mechanical air pressure relationships, lighting controls).

PROPOSAL: The design changes and required contract extension at Woodhull will cost an additional $7,486,830, which includes $4,486,830 for the redesign of existing spaces and new design of the 9th and 10th floors, plus a $3,000,000 contingency to cover additional design or re-design efforts based on New York State Commission of Correction feedback and construction administration services. When added to the prior NTE of $30,325,006, the new requested NTE becomes $37,811,836.

FUNDING: The increase will be financed with City Capital Funds. A Certificate to Proceed (CP) for $4,486,830 is with OMB for approval. The project budget has funding to support the $3M contingency, and any use of contingency funds will require a CP to OMB once the scope and value are finalized.

TERM: Extended to June 2029.

MWBE: Array has achieved 39.51% MWBE utilization as of March 2026, exceeding its utilization plan target of 37.45% for subcontracted scopes of work (including MEP, Structural, Hazmat, Equipment, LEED, Landscape Architecture, and Cost Estimating).

PASSPORT APPROVAL: Approved

EEO APPROVAL: Approved

NYC HEALTH + HOSPITALS

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

From: Franco Esposito
Deputy Counsel
Office of Legal Affairs

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

Vendor: Array Architects, Inc.

Date: June 17, 2026

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	30%

NYC HEALTH+ HOSPITALS

June 2026

RESOLUTION - 08

Authorizing New York City Health and Hospitals Corporation (the "System") **to further increase the funding by $26,578,401 for its previously executed agreement with AECOM USA, Inc. ("AECOM"), to provide program management** at NYC Health + Hospitals/Bellevue Hospital ("Bellevue") and NYC Health + Hospitals/Woodhull Hospital ("Woodhull") that began in June 2020 in connection with the System's Correctional Health Services ("CHS") initiative to treat its patients who require higher levels of care in its Outposted Therapeutic Housing Units ("OTxHU"), **which follows the previous funding increases of $2,400,000 in September 2023 increasing the NTE to $19,036,107, such that the funding is increased by $26,578,401 which includes a $4,500,000 contingency from to a total not to exceed sum of $45,614,508 and to extend the contract term to June 2029 for program management and new construction management services at Woodhull.**

WHEREAS, in June 2020 the System's Board of Directors authorized a five-year agreement with AECOM to provide program management services at Bellevue and Woodhull to serve as sites for the OTxHU initiative with funding of $9,040,000 authorized; and

WHEREAS, the contract expired on November 12, 2025, and a one-year, time-only extension was executed extending the contract through November 21, 2026 per OP 100-5; and

WHEREAS, since the budget was last increased in September 2023, the scope and duration of the program management and preconstruction services have significantly expanded, requiring AECOM's services for an additional 4.5 years to manage redesign efforts, handle coordination between design consultants and New York City Department of Correction, manage concurrent multiple early construction packages, and provide additional commissioning support for enhanced security electronics and IT infrastructure; and

WHEREAS, the original contract utilized a GMP contract structure where the contractor provided construction management services, but a change to a traditional construction bid contract now requires a construction manager, adding a new Construction Management services scope to AECOM's contract that was not previously included; and

WHEREAS, the expanded scope and extended program duration through project closeout in June 2029 require an increase in AECOM's budget by $26,578,401 (consisting of $22,078,401 for extended program, design, and new construction management services, and a $4,500,000 project contingency); and

WHEREAS, the overall responsibility for the administration of the proposed contract shall be with the Senior Vice President, Office of Facilities Development; and

NOW THEREFORE, BE IT RESOLVED, the New York City Health and Hospitals Corporation be and hereby is authorized to further increase the funding by $26,578,401 for its previously executed agreement with AECOM USA, Inc. ("AECOM"), to provide program management at NYC Health + Hospitals/Bellevue Hospital ("Bellevue") and NYC Health + Hospitals/Woodhull Hospital ("Woodhull") that began in June 2020 in connection with the System's Correctional Health Services ("CHS") initiative to treat its patients who require higher levels of care in its Outposted Therapeutic Housing Units ("OTxHU"), which follows the previous funding increases of $2,400,000 in September 2023 increasing the NTE to $19,036,107, such that the funding is increased by $26,578,401 which includes a $4,500,000 contingency from to a total not to exceed sum of $45,614,508 and to extend the contract term to June 2029 for program management and new construction management services at Woodhull.

NYC HEALTH+ HOSPITALS

June 2026

EXECUTIVE SUMMARY

PROGRAM MANAGEMENT AND CONSTRUCTION MANAGEMENT SERVICES
FOR THE OTxHU PROGRAM
AECOM USA, INC.

OVERVIEW: In June 2020, the System's Board of Directors authorized a five-year agreement with AECOM to provide program management services at Bellevue and Woodhull to serve as sites for the OTxHU initiative with funding of $9,040,000 authorized. Subsequent funding increases were approved in November 2021 ($6,097,369), May 2023 ($1,498,738), and September 2023 ($2,400,000), bringing the contract NTE to $19,036,107. The contract expired on November 12, 2025, and was extended through November 21, 2026.

NEED: AECOM's services are now required for an additional 4.5 years to handle expanded scope and duration of program management and preconstruction services. This includes coordinating with New York City Department of Correction and the designer on revised conceptual floor plans, managing redesign efforts, New York City Department of Correction page turns, estimate updates, and concurrent early construction packages. Crucially, the Woodhull project has transitioned from a GMP contract model to a traditional construction bid contract, creating an immediate need for a traditional Construction Manager. Construction Management services were not previously included in AECOM's contract. Additional commissioning support is also required for enhanced security electronics and IT infrastructure.

PROPOSAL: To provide extended Program & Design Management and New Construction Management Services, an additional $26,578,401 is requested. This comprises $22,078,401 for the base extended services and a $4,500,000 project contingency to cover any additional services required through project closeout. This will bring the total contract NTE to $45,614,508, with involvement extended through program closeout in June 2029.

FUNDING: The proposed contract increase will be financed with City Capital Funds. A Certificate to Proceed (CP) for $6,727,600 was already approved by OMB, and a subsequent CP for $15,350,801 is currently with OMB for approval. The project budget has funding to support the $4.5M contingency, and any use of contingency funds will require a finalized scope and an authorized CP from OMB.

TERM: Extended to June 2029.

MWBE: AECOM has achieved an MWBE utilization rate of 39.55% as of April 2026. Its overall Utilization Plan target stands at 39.62% for subcontracted scopes including Cost Estimating, Program Management Services, Project Controls Services, Document Control Services, and Field Support Services.

PASSPORT APPROVAL: Approved

EEO APPROVAL: Approved

NYC HEALTH + HOSPITALS

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

From: Franco Esposito
Deputy Counsel
Office of Legal Affairs

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

Vendor: AECOM USA, Inc.

Date: June 17, 2026

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	30%

Woodhull & Outposted Therapeutic Housing Units (OTxHU)

Request for Contract Amendments for Design Services and Program Management Services with Array Architects, PC and AECOM USA, Inc

Board of Directors Meeting
June 25, 2026

Manny Saez, PhD., Senior Vice President, Office of Facilities Development
Mahendranath Indar, Assistant Vice President, Office of Facilities Development
Tim O'Leary, Senior Assistant Vice President, Correctional Health Services
Luis Mendes, Senior Director, Office of Facilities Development

For Board of Directors Consideration

- **AMENDING THE RESOLUTION TO REFLECT THE CORRECT NAME OF THE VENDOR:** Authorizing New York City Health and Hospitals Corporation (the "System") **to further increase the funding by $7,486,830 for its previously executed agreement with Array Architects PC, ~~Inc~~ ("Array") for architectural/engineering services** for the renovation of spaces at NYC Health + Hospitals/Bellevue Hospital ("Bellevue") and NYC Health + Hospitals/Woodhull Hospital ("Woodhull") that began in June 2020 in connection with the System's Correctional Health Services ("CHS") initiative to treat its patients who require higher levels of care in its Outposted Therapeutic Housing Units ("OTxHU"), **which follows the previous funding increases of $8,000,000 in November 2024 increasing the NTE To $30,325,000, such that the funding is increased $7,486,830 which includes a $3,000,000 contingency from $30,325,006 to a total not to exceed sum of $37,811,836 and to extend the contract term to June 2029 for additional architectural/engineering services at Woodhull**.

- Authorizing New York City Health and Hospitals Corporation (the "System") **to further increase the funding by $26,578,401 for its previously executed agreement with AECOM USA, Inc. ("AECOM"),** to provide program management at NYC Health + Hospitals/Bellevue Hospital ("Bellevue") and NYC Health + Hospitals/Woodhull Hospital ("Woodhull") that began in June 2020 in connection with the System's Correctional Health Services ("CHS") initiative to treat its patients who require higher levels of care in its Outposted Therapeutic Housing Units ("OTxHU"), **which follows the previous funding increases of $2,400,000 in September 2023 increasing the NTE to $19,036,107, such that the funding is increased by $26,578,401 which includes a $4,500,000 contingency from to a total not to exceed sum of $45,614,508 and to extend the contract term to June 2029 for program management and new construction management services at Woodhull.**

Program Background

- Outposted Therapeutic Housing Units (OTxHUs) are beds within NYC Health + Hospitals (H+H) acute care facilities that will be secured clinical units operated by CHS with New York City Department of Correction providing custody management.

- Bridges the gap between care provided in jail and acute hospitalization, with decisions regarding admission to and discharge from the OTxHUs made by CHS according to a patient's clinical needs.

- This pioneering approach will better meet the clinical needs of the most medically complex patients by increasing access to specialty / subspecialty services and delivering care in a more humane way to improve positioning for successful reentry.

- Improves continuity of care between CHS and NYC H+H hospital providers in inpatient, outpatient, and OTxHU services.

Current State OTxHU

- Woodhull Decanting work is underway
  - Anticipated substantial completion 3rd quarter 2026
- Woodhull Roof Replacement work is underway
  - Is substantially complete
- Woodhull Demolition (interiors) work is awarded
  - Anticipated start is June 2026
- Decision was made to separate the OTxHU project into three projects
  - OTxHU Early Works – Elevator
  - OTxHU Early Works – Curtainwall
  - OTxHU Main Project

Current State OTxHU

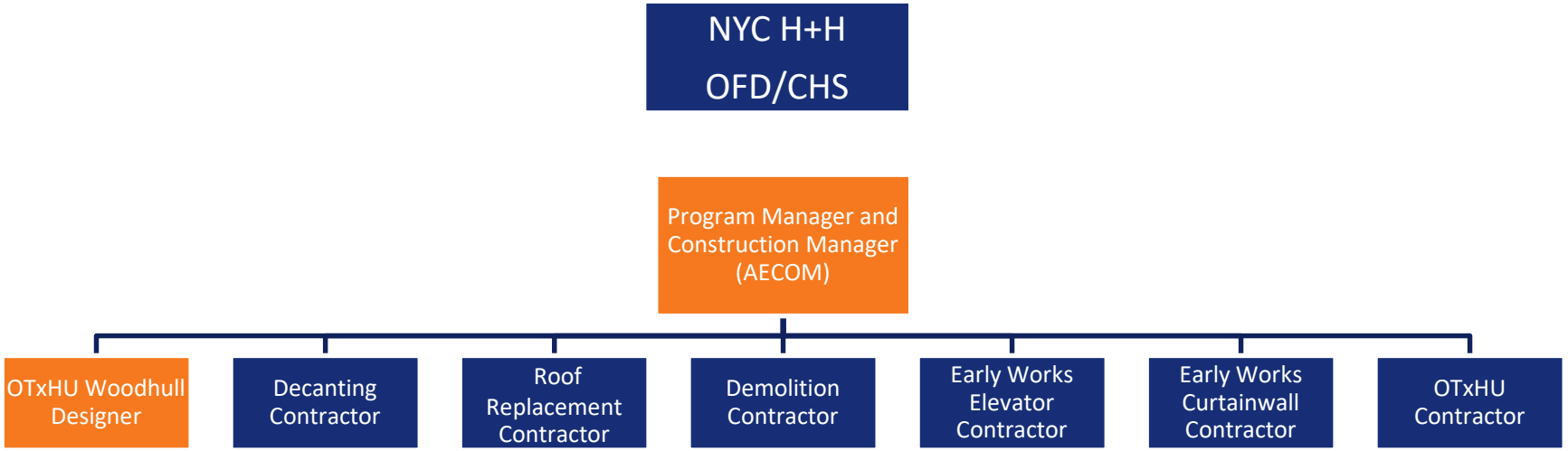
- Woodhull OTxHU Early Works – Elevator Project
  - Construction Development drawings completed February 2026
  - Construction start October 2026. Completion is scheduled for August 2028.
  - Early Works Construction Documents incorporated New York City Department of Correction security revisions for Elevator, Intake Area and Cooling Tower.
  - Regulatory Approvals for NYC DOB and FDNY are underway.
  - CHS has initiated New York State Commission of Correction approval of the Early Works scopes.

- Woodhull OTxHU Early Works – Curtain Wall Project
  - Construction Development drawings completed April 2026
  - Construction start October 2026. Completion is scheduled for March 2028.
  - Early Works Construction Documents incorporated New York City Department of Correction security revisions for Curtain Walls.
  - Regulatory Approvals for NYC DOB and FDNY are underway.
  - CHS received New York State Commission of Correction approval of the Early Works scopes for Curtain Walls in January 2026.

- The OTxHU project is providing Woodhull Hospital with renovations and MEP improvements to several spaces on the 3rd, 5th, 6th and 10th floors.
- Work completed in December 2024 included renovated admin offices/hemodialysis, occupational health, chief medical offices, pediatric inpatient unit, and chemical dependency program.
- Additional renovation and decanting space including OBGYN offices/respiratory therapy, resident on call suite are underway and substantial completion is expected in 3rd Quarter of 2026.

Current State Woodhull OTxHU

The Woodhull OTxHU Team



Extend Contract Duration and Increase Funding for Array Architects

Outposted Therapeutic Housing Units (OTxHU) Architectural / Engineering Design Services

Contract History

- NYC Health+Hospitals executed an agreement with Array Architects, PC for architectural and engineering services for the NYC Health+Hospitals/Correctional Health Services' Outposted Therapeutic Housing Units (OTxHU) at Bellevue Hospital and Woodhull Hospital.
- Contract term is for 5 years starting on December 1, 2020 plus additional 3 years ending on November 30, 2028.
- The Board previously approved contract amendments, all within the allocated Capital budget for the project. Vendor has been paid $19,613,877.77 to date.

Board Date	Description	Increase to NTE	NTE	Time Increase
June 2020	Design at Bellevue and Woodhull.		$8,663,000	5 years
November 2021	Increased funding for schedule acceleration.	$1,814,880	$10,477,880	
December 2022	New York State Commission of Correction approval of design changes required design adaption at Bellevue and Woodhull.	$6,409,289	$16,887,169	
May 2023	Increase funding for additional security revisions at Bellevue.	$1,960,238	$18,847,407	
November 2023	Increase funding for additional security revisions at Bellevue.	$3,477,599	$22,325,006	
November 2024	Increase funding for enhanced security requirements, two new dedicated elevator and elevator shaft, redesign of vehicular sallyport and intake, change in security grade MEP fixtures	$8,000,000	$30,325,006	3 years

Array NTE Increase - Scope of Work

Scope of Work	~ Value
Additional New York City Department of Correction changes related to: • Additional Elevator Hardening • Attack rated walls and ceilings • Bars on windows • Locker room changes • Intake and visitation redesign • Staff station changes • Emergency power changes to coordinate with Woodhull EES project • Fire Alarm changes to coordinate with Woodhull Fire Alarm upgrade	**$1,926,700**
Separation of early work packages: • Elevator Tower and Cooling Tower Demo • Curtainwall package • Additional time and design coordinating meetings for EES, Emergency Power, and Cooling Tower/Elevator Tower	**$2,560,130**
TOTAL	**$4,486,830**

NYC HEALTH+ HOSPITALS

Project Budget

Scope	Value
Current Contract NTE	$30,325,006
Redesign of existing spaces and new design of 9th and 10th floor	$4,486,830
Contingency	$3,000,000
TOTAL NTE	**$37,811,836**

- Certificate to Proceed (CP) for $4,486,830 is with OMB for approval.
- Contingency of $3,000,000 requested to cover any additional design or re-design efforts required based on New York State Commission of Correction feedback, and any additional design or construction administration services that may be required for the duration of the project.
- Project budget has funding to support the $3,000,000 contingency.
- Any additional scope requiring funds from the contingency will require a CP to OMB to authorize the funding once the scope and value have been finalized.

Vendor Performance

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

MWBE Utilization Plan

Array's Utilization Plan Subcontracted Scopes of Work	Utilization Plan %
MEP, Structural, Hazmat, Equipment, LEED, Landscape Architecture, Haz Mat, Cost estimating	37.45%

- Array has achieved 39.51% as of March 2026.
- Vendor performance is good to date.

Extend Contract Duration and Increase Funding for AECOM

Outposted Therapeutic Housing Units (OTxHU) Program Management Services

Contract History

- NYC Health+Hospitals executed an agreement with AECOM for Program Management services for the NYC Health+Hospitals/ Correctional Health Services' Outposted Therapeutic Housing Units (OTxHU) at Bellevue Hospital and Woodhull Hospital.
- **Contract expired on November 12, 2025 and a one year, time only extension was executed extending the contract through November 21, 2026 per OP 100-5.**
- The Board previously approved contract amendments, all within the allocated Capital budget for the project. Vendor has been paid $13,247,213.81 to date.

Board Date	Description	Increase to NTE	NTE	Time Increase
June 2020	Program Management Services for Bellevue and Woodhull.		$9,040,000	5 years
November 2021	Increase funding for Construction support as part of Program Management Services for Woodhull OTxHU.	$6,097,369	$ 15,137,369	
May 2023	Increase funding for additional 4 months of Program Management Services for Bellevue OTxHU.	$1,498,738	$ 16,636,107	
September 2023	Increase funding for additional 4 months of Program Management Services for Bellevue OTxHU.	$2,400,000	$ 19,036,107	

AECOM NTE Increase – Scope of Work

Scope	~Value
Additional Program Management Services related to increase in delivery time for the Woodhull OTxHU Projects	**$6,078,401**
New Scope for Construction Management (CM) Services since Woodhull OTxHU projects are being delivered via Design-Bid-Build vs Guaranteed Maximum Price (GMP) contract.	**$15,000,000**
TOTAL	**$22,078,401**

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Project Budget

Scope	Value
Current Scope and NTE	$19,036,107
Extended Program& Design Management, and New Construction Management Services	$22,078,401
Project Contingency	$4,500,000
TOTAL NTE	**$45,614,508**

- Certificate to Proceed (CP) for $6,727,600 was approved by OMB.
- Certificate to Proceed (CP) for $15,350,801 is with OMB for approval.
- $4,500,000 contingency for additional Program Management and Construction Management services required through the duration of the project.
- Project budget has funding to support the $4,500,000 contingency.
- Any additional scope requiring funds from the contingency will require a CP to OMB to authorize the funding once the scope and value have been finalized.

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Vendor Performance

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

MWBE Utilization Plan

AECOM's Utilization Plan Subcontracted Scopes of Work	Utilization Plan %
Cost estimating, Program Management Services, Project Controls Services, Document Control Services, Field Support Services	39.62%

- AECOM has achieved 39.55% April 2026
- Vendor performance is excellent to date

For Board of Directors Consideration

- **AMENDING THE RESOLUTION TO REFLECT THE CORRECT NAME OF THE VENDOR:** Authorizing New York City Health and Hospitals Corporation (the "System") **to further increase the funding by $7,486,830 for its previously executed agreement with Array Architects PC, ~~Inc~~ ("Array") for architectural/engineering services** for the renovation of spaces at NYC Health + Hospitals/Bellevue Hospital ("Bellevue") and NYC Health + Hospitals/Woodhull Hospital ("Woodhull") that began in June 2020 in connection with the System's Correctional Health Services ("CHS") initiative to treat its patients who require higher levels of care in its Outposted Therapeutic Housing Units ("OTxHU"), **which follows the previous funding increases of $8,000,000 in November 2024 increasing the NTE To $30,325,000, such that the funding is increased $7,486,830 which includes a $3,000,000 contingency from $30,325,006 to a total not to exceed sum of $37,811,836 and to extend the contract term to June 2029 for additional architectural/engineering services at Woodhull**.

- Authorizing New York City Health and Hospitals Corporation (the "System") **to further increase the funding by $26,578,401 for its previously executed agreement with AECOM USA, Inc. ("AECOM"),** to provide program management at NYC Health + Hospitals/Bellevue Hospital ("Bellevue") and NYC Health + Hospitals/Woodhull Hospital ("Woodhull") that began in June 2020 in connection with the System's Correctional Health Services ("CHS") initiative to treat its patients who require higher levels of care in its Outposted Therapeutic Housing Units ("OTxHU"), **which follows the previous funding increases of $2,400,000 in September 2023 increasing the NTE to $19,036,107, such that the funding is increased by $26,578,401 which includes a $4,500,000 contingency from to a total not to exceed sum of $45,614,508 and to extend the contract term to June 2029 for program management and new construction management services at Woodhull.**

NYC HEALTH+ HOSPITALS

June 2026

RESOLUTION - 09

AMENDING THE RESOLUTION TO REFLECT THE CORRECT NAME OF THE VENDOR: Authorizing New York City Health and Hospitals Corporation (the "System") **to enter into a best interest renewal contract with Kone Inc. ~~Corporation~~ ("Kone") for one year until November 31, 2027, and to increase the not-to-exceed amount by $15,582,493, which includes a contingency of $1,000,000 and emergency repair and modernization amount of $7,000,000, from the original $59,200,000 to a new not-to-exceed amount of $74,782,493 for the provision of preventative maintenance services** and repairs on 350+ elevators and escalators system wide along, with critical modernization projects and 24/7 emergency service and repairs.

WHEREAS, the System entered into a contract with Kone Inc. ~~Corporation~~ to provide preventative maintenance services and repairs on over 350 elevators and escalators across the System; and

WHEREAS, the contract includes 24/7 emergency service and repairs, and the provision of a dedicated diagnostics and testing team to ensure safe and reliable operation of the System's elevator and escalator fleet; and

WHEREAS, the current contract term is set to expire, and the System desires to renew the contract for an additional year until November 31, 2027, in order to ensure continuity of these critical services; and

WHEREAS, the System further seeks to increase the not-to-exceed amount by $15,582,492, which includes a contingency of $1,000,000, thereby increasing the total not-to-exceed contract value from $59,200,000 to $74,782,493; and

WHEREAS, Kone Inc. ~~Corporation~~ was granted an MWBE waiver since all elevator maintenance work is self-performed; and

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

NOW THEREFORE, BE IT RESOLVED, that New York City Health and Hospitals Inc. (the "System") is hereby authorized to enter into a best interest renewal contract with Kone Inc. ~~Corporation~~ ("Kone") for one year until November 31, 2027, and to increase the not-to-exceed amount by $15,582,493, which includes a contingency of $1,000,000 and emergency repair and modernization amount of $7,000,000, from the original $59,200,000 to a new not-to-exceed amount of $74,782,493, for the provision of preventative maintenance services and repairs on 350+ elevators and escalators system wide, along with critical modernization projects 24/7 emergency service and repairs.

NYC HEALTH+ HOSPITALS

June 2026

EXECUTIVE SUMMARY
CONTRACT BEST INTEREST RENEWAL WITH KONE Inc.

BACKGROUND: New York City Health and Hospitals Inc. ("System") entered into best interest contract with Kone Inc. ~~Corporation~~ ("Kone") to provide preventative maintenance services and repairs on over 350 elevators and escalators system wide. The contract also provides 24/7 emergency service and repairs, and a dedicated diagnostics and testing team. The amended not-to-exceed amount approved by the Board was $59,000,000.

The System now seeks to renew the contract for one year until November 31, 2027, to ensure uninterrupted continuation of these essential services. The System further seeks to increase the contract by $15,582,492, which includes a contingency of $1,000,000, from the original $59,200,000 to a new not-to-exceed amount of $74,782,492.

TERMS: The Contract approved by the Board in October 2018 was for five years with two one-year renewal options, which was extended for one year until November 2026. The amended not-to-exceed value was $59,000,000. The contract will be renewed for one year, through November 31, 2027 and there shall be an increase of contract value by $15,582,492, which includes a contingency of $1,000,000 and emergency repair and modernization amount of $7,000,000, from the original $59,200,000 to a new not-to-exceed amount of $74,782,492.

MWBE: Kone Inc. was granted an MWBE waiver since it self-performs all of the elevator maintenance work.

VENDEX: Pending

EEO: Approved

NYC HEALTH + HOSPITALS

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

From: Franco Esposito
Deputy Counsel
Office of Legal Affairs

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

Vendor: Kone, Inc.

Date: May 28, 2026

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**
Pending	Approved	Waiver

NYC HEALTH+ HOSPITALS

Elevator Maintenance Services Application to Enter into Contract Best Interest Renewal - Kone Inc.

Board of Directors Meeting
June 25, 2026

Manuel Saez, PhD, Senior Vice President, OFD
Mahendranath Indar, Assistant Vice President, OFD

NYC HEALTH+ HOSPITALS

For Board of Directors Consideration

- **AMENDING THE RESOLUTION TO REFLECT THE CORRECT VENDOR NAME:** Authorizing New York City Health and Hospitals Corporation (the "System") **to enter into a best interest renewal contract with Kone Inc. ~~Corporation~~ ("Kone") for one year until November 31, 2027, and to increase the not-to-exceed amount by $15,582,493, which includes a contingency of $1,000,000 and emergency repair and modernization amount of $7,000,000, from the original $59,200,000 to a new not-to-exceed amount of $74,782,493 for the provision of preventative maintenance services and repairs on 350+ elevators and escalators system wide along, with critical modernization projects and 24/7 emergency service and repairs.**

Background / Current State

- The Office of Facilities Development is requesting approval to renew the contract for our elevator maintenance services with our current vendor, KONE Inc. The scope of work incorporated into this contract currently includes:
  - Preventative maintenance services and repairs on 350+ elevators and escalators system wide
  - 24/7 emergency service and repairs
  - Dedicated diagnostics and testing team

- Elevator maintenance and repair services were procured through a competitive RFP process, and approved by the CRC in September 2018 and the Board of Directors in October 2018 with an NTE of $46,700,000.
  - The original contract term for elevator maintenance services includes a five year initial term with two one year options to renew.
  - We extended this contract in December 2025 for one year and increased the NTE to $59,200,000.

Renewal Request

- The Office of Facilities Development (OFD) is requesting approval to renew the elevator maintenance contract with the current vendor, KONE, for $15,582,493 with a contract expiration date of November 31, 2027.
  - OFD requires this renewal period to recruit a larger pool of vendors to propose for the new contract
- OFD is requesting approval to increase the NTE by $15,582,493 to allow for:
  - $7.6 million for annual preventative maintenance
  - $7 million for critical elevator modernization projects
  - $1 million for contingency for new equipment and emergency repairs

New NTE Increase	Amount
Projected Spend 12/1/26-11/31/27	$7,582,493
Maintenance Contingency	$1,000,000
Emergency Repair / Modernization	$7,000,000
Total NTE Increase Request	$15,582,493
Current NTE	$59,200,000
Total Contract NTE	**$74,782,493**

Best Interest Renewal

- Under OP 100-05, the System can renew a contract with appropriate vendor and pricing due diligence rather than re-procure when it is in the System's best interest to do so.
  - OFD partnered with Supply Chain for a new RFP in April 2026 and no new proposers could meet the SOW.
  - OFD requires this renewal period to recruit a larger pool of vendors to propose for the new contract.
  - Vendor remains appropriate within market for our use case
  - Vendor performance has been good.

Vendor Diversity

- KONE Inc. was granted a MWBE waiver since they self-perform all the elevator maintenance work

Vendor Performance

Department of Supply Chain
Vendor Performance Evaluation
KONE Inc

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	Good

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Board of Directors Approval Request

- **AMENDING THE RESOLUTION TO REFLECT THE CORRECT VENDOR NAME:** Authorizing New York City Health and Hospitals Corporation (the "System") **to enter into a best interest renewal contract with Kone Inc. ~~Corporation~~ ("Kone") for one year until November 31, 2027, and to increase the not-to-exceed amount by $15,582,493, which includes a contingency of $1,000,000 and emergency repair and modernization amount of $7,000,000, from the original $59,200,000 to a new not-to-exceed amount of $74,782,493 for the provision of preventative maintenance services and repairs on 350+ elevators and escalators system wide along, with critical modernization projects and 24/7 emergency service and repairs.**