## NEW YORK STATE DEPARTMENT OF HEALTH PUBLIC HEALTH AND HEALTH PLANNING COUNCIL COMMITTEE DAY NOVEMBER 18, 2021 TRANSCRIPT CONCOURSE MEETING ROOM 6, ALBANY AND ZOOM

**Jeffrey Kraut** Peter Robinson, who's Chairing the Establishment and Project Review Committee meeting.

Jeffrey Kraut Mr. Robinson.

Peter Robinson Thank you, Mr Kraut.

**Peter Robinson** All of the precautions and guidelines that Mr. Kraut and Dr. Gutierrez outlined at the start of their meetings apply to the Establishment and Project Review Committee as well.

**Peter Robinson** And so, without further ado, let's get to work.

**Peter Robinson** Application, 2 0 1 2 7 3 B, CFR Advanced Services LLC doing business as Village Med and Rehabilitation in Queens County. This is to establish and construct a new diagnostic and treatment center to be located at 61 33 Woodhaven Boulevard in Rego Park Queens. The department is recommending approval with conditions and contingencies.

Peter Robinson May I have a motion?

Peter Robinson Thank you, Dr. Gutierrez.

**Peter Robinson** Second by Mr. Holt.

Peter Robinson Ms. Glock, you're on.

**Shelly Glock** Thank you.

Shelly Glock This is Shelly Glock with the Department. CFR Advanced Services, an existing New York LLC, whose sole members, Frederick Giovagnoli, request approval to establish and construct an Article 28 Diagnostic and treatment center to be located in Rego Park, Queens County. Upon approval by the Public Health and Planning Council, the Center will do business as Village Med and Rehabilitation. The proposed service area will be Queens County with specific emphasis on Rego Park, as well as the adjoining areas of Forest Hills and Woodhaven. The applicant is requesting certification for primary medical care, outpatient services and other medical specialties, including cardiology, pain management or orthopedics, and will also offer physical therapy services. Eric Berger, MD, will serve as the Medical Director, and they are currently in discussion with Long Island Jewish Forest Hills Hospital for Transfer and Affiliation Agreement. The applicant is projecting Medicaid utilization at 36 percent with charity care of 2 percent, while the projected budget shows net income for both years 1 and 3. Therefore, based upon review of public need, character and competence and financial feasibility, the department is recommending approval with conditions and contingencies.

Peter Robinson Thank you.

**Peter Robinson** Questions from the committee or members of the council?

**Peter Robinson** Hearing none, anything from the applicant? Questions only.

Peter Robinson Thank you.

**Peter Robinson** Is there anyone from the public that wishes to speak on this application?

**Peter Robinson** Hearing none, we'll call the question.

**Peter Robinson** All in favor?

Peter Robinson Any opposed?

Peter Robinson Motion carries.

Peter Robinson Thank you.

**Peter Robinson** I'm sorry, I didn't ask for that abstentions.

**Peter Robinson** Any abstentions?

Peter Robinson None.

Peter Robinson Thank you.

**Peter Robinson** Application 2 1 1 1 3 2 B, Arena Care LLC in Suffolk County to establish and construct the Diagnostic and Treatment Center to be located at 8 Maple Avenue in Bayshore to provide primary and specialty medical care, behavioral health, occupational therapy, physical therapy and speech and language pathology services. The department is recommending approval with conditions and contingencies.

**Peter Robinson** A motion, please.

Peter Robinson Mr. Holt.

Peter Robinson A second by Dr. Berliner.

Peter Robinson Ms. Glock.

**Shelly Glock** Thank you.

**Shelly Glock** This project request approval to establish and construction an Article 28 FT&C in Suffolk County. The applicant is requesting certification for both primary and specialty medical care, as outlined by Mr. Robinson. The proposed ownership of Arena Care is made up of four members that you can see and the exhibit. Gary Di Canio, who specializes in internal medicine will serve as the Medical Director. They have negotiated a transfer agreement with Good Samaritan Hospital, located just about 3 miles away. The applicant is projecting Medicaid at 73.6 percent, and charity care at 2. Projected income

shows net income for both year 1 and 3. Therefore, based upon public need, character and competence and financial feasibility review, the department is recommending approval with conditions and contingencies.

Peter Robinson Thank you.

**Peter Robinson** Questions from the committee or members of the council?

Peter Robinson Seeing none, does the applicant wish to speak?

Peter Robinson Questions only.

Peter Robinson Anybody else from the public wishing to speak?

**Peter Robinson** Hearing none, I will call the question.

**Peter Robinson** All in favor?

All Aye.

**Peter Robinson** Any opposed?

**Peter Robinson** Any abstentions?

**Peter Robinson** The motion carries.

Peter Robinson Thank you.

**Peter Robinson** Application 2 1 1 2 6 2 E, Montefiore Westchester Community Corp. TBKA. I don't know. To be known as maybe. Montefiore Einstein Advanced Care in Westchester County. I want to note here a conflict in recusal by Ms. Soto, who I believe has left the screen, so she is recused. This is to establish Montefiore Westchester Community Corp. as the operator of the facility, located at 555 Taxter Road in Elmsford New York, that is currently operating as an extension clinic of Burke Rehabilitation Hospital and also to certify other medical services. The department is recommending approval with conditions and contingencies.

Peter Robinson Motion by Mr. Holt.

**Peter Robinson** Second by...I need a second up there. Somebody raise your hand.

Peter Robinson Thank you, Dr. Berliner.

Peter Robinson Ms. Glock.

**Shelly Glock** Thank you.

**Shelly Glock** Montefiore of Westchester Community Core is a not for profit corporation. It's requesting approval to be established as the Article 28 diagnostic and treatment operator and to certify that the site located at 555 Taxter Road in Westchester County. This site, as previously stated currently, is an extension clinic of Winifred Masterson Burke Rehab Hospital, who is a member hospital of the Montefiore health system. MWCC is

affiliated with Montefiore Health System, who will be the sole member and the passive parent of the new entity. The clinic will continue to provide the outpatient therapy services currently provided by Burke, as well as adding physician services for Sports Medicine, Orthopedics and Allergy. Upon approval, the applicant intends to change the corporate name to Monteifore Einstein Advanced Care. Montefiore's Health Systems Regional Integrated Delivery System offers patients clinical expertise for primary, specialty and tertiary care. The establishment of this D&TC is part of Westchester and Hudson Valley Regional Strategy to collaborate with our ambulatory network to provide specialty and subspecialty care. This new entity will be able to serve patients from various entities within the Montefiore Health System, so the strategy here is not to have this entity associated exclusively with any one hospital in the Montefiore system. Dr. Goldberg will be the Medical Director and they will have an executed transfer and affiliation agreement with White Plains Hospital. They are projecting about 27,500 visits in year 1, and 32,000 approximately in year 3, with 7.5 percent Medicaid utilization and 2 percent charity care. Based upon review of the public need, character and confidence and financial feasibility, the department is recommending approval with a condition and contingencies.

Peter Robinson Thank you.

Peter Robinson Questions from the committee or other council members?

Peter Robinson Questions only.

**Peter Robinson** Anybody else from the public wishing to speak?

**Peter Robinson** Hearing none, call the question.

Peter Robinson All in favor?

Peter Robinson Thank you.

**Peter Robinson** Any opposed?

**Peter Robinson** Any abstentions?

Peter Robinson That motion carries.

Peter Robinson Thank you.

**Peter Robinson** Application 2 1 1 2 7 0 B, Samaritan Daytime Health Inc and Bronx County establish and construct a diagnostic and treatment center to be located at 362 East 148th Street in the Bronx and certify medical services, especially primary care. The department is recommending approval with conditions and contingencies.

**Peter Robinson** Motion by Mr. Holt.

Peter Robinson Second by Dr. Kalkut.

Peter Robinson Ms. Glock.

**Shelly Glock** Thank you.

**Shelly Glock** Samaritan Daytime Health is a to be formed, not for profit corporation. They're requesting approval to establish and construct this Article 28 Diagnostic and Treatment Center in Bronx County. The applicant has indicated they intend to apply for designation as a federally qualified health center after becoming a D&TC. The proposed D&TC will be certified for medical services primary care with a focus on delivering primary care and basic mental health counseling. Samaritan Daytime Health seeks to launch a unique primary care model responsive to the needs of homeless individuals and those with mental illness, including severe mental illness and or substance use disorder, and those who have co-occurring physical health needs as well. In addition to this primary focus, the D&TC will also serve the surrounding community of low income, medically underserved residents of the South Bronx. This site will provide primary care closely coordinated with substance abuse and mental health disorder to ensure that there is a treatment to ensure there's no wrong door model in its place and all patients seeking primary care will be able to receive appropriate warm handoff for substance abuse and mental health services. The new D&NC is going to be built in the space of a newly constructed building. The building will house an assortment of programs from other organizations that together will provide a wide array of services, including care, coordination and outreach. Samaritan Daytime Health will also, as you can see, proposed, have three board members. All of the board members are highly knowledgeable of the needs of the homeless population, addiction and substance use disorders. Gary Bunt will be the Medical Director, and he is the current Medical Director at Samaritan Daytime Village, one of the city's largest substance use disorder treatment providers. It will enter into a transfer and affiliation agreement with Lincoln Hospital. As part of their efforts FQHC requirements, they'll utilize an after hours call service in the event that patients have emerging health care concerns. The applicant projecting 10,500 visits in the first year with Medicaid utilization at 95 percent. Based upon review of public need, character and competence and financial feasibility, the department is recommending approval with conditions and contingencies.

Peter Robinson Thank you.

**Peter Robinson** Questions from the committee or the council members?

Peter Robinson Oh, Ms. Monroe.

**Ann Monroe** I'm not used to being here in person.

Peter Robinson I know.

Ann Monroe When the department looks at that, do you look at what FQHC's or other Article 28's might already be serving people in that area and whether there is a need for another brand new organization? I'm not suggesting that this isn't a good idea. I'm just asking what your review consists of in terms of need. I understand the people have many needs, but do you look at whether there's a need for another brand new organization that serves that particular community?

**Shelly Glock** When we look at the need for primary care Ann, I think the policy of the department has been to encourage access to primary care and other services. We do look at what other providers are in that area and look at how does this project either improve access to those services or perhaps serve special population or unique factors in that area.

**Ann Monroe** You're saying you do do that?

**Shelly Glock** Part of the application process, yes, that the applicant does provide that information.

**Ann Monroe** That was that there is a need for this particular new primary care operation in the Bronx.

**Shelly Glock** I think the unique part of this project is the integration of the primary care with the behavioral health. And yes, there's definitely a need for that in the South Bronx area.

**Ann Monroe** Thank you.

**Peter Robinson** Other questions?

Peter Robinson Anything from the applicant?

Peter Robinson Anybody from the public wishing to speak?

**Peter Robinson** Hearing none, we'll call the question.

**Peter Robinson** All in favor?

**Peter Robinson** Any opposed?

**Peter Robinson** Any abstention?

Peter Robinson The motion carries.

Peter Robinson Thank you.

**Peter Robinson** Continuing on with D&TC's, 2 1 2 0 1 5 B, River Spring Project Corp. TBKA River Spring DTC Corp. in Kings County. This is to establish and construct a diagnostic and treatment center to be located at 673 Livonia Avenue in Brooklyn and an extension clinic to be located at 63 Marcus Garvey Boulevard in Brooklyn to serve the Pace program of Elders Serve Health Inc. The department is recommending approval with conditions and contingencies.

**Peter Robinson** Motion by Mr. Holt.

**Peter Robinson** Second by Dr. Kalkut.

Peter Robinson Ms. Glock.

**Shelly Glock** Thank you.

**Shelly Glock** River Spring Project Corps is an existing New York state not for profit entity, and they are seeking approval to establish and construct this diagnostic and treatment center and the Diagnostic and Treatment Center Extension Clinic to serve the programs of all inclusive care for the elderly, otherwise known as the Pace of the Elder Serve Health Inc. The Article 28 DTC will be co-located with the Pace program with the main site in Brooklyn Kings County and the extension site also in Brooklyn Kings County, but located

on Marcus Garvey Boulevard. The application requires certification for medical services. primary care for both sites. Elder Serve Health Inc is the sole member and the passive parent of River Spring Project Core, and they will change their name to River Spring DTC Corp. upon approval. This Certificate of Need application is only for the Article Diagnostic and Treatment Center. The managed long term care portion of the Pace program is regulated under Article 44 of New York State Public health Law and Elder Care of Health Inc is concurrently preparing an application to be certified as a Pace program under the Article 44 Public Health Law. The proposed D&NTC, including its main site and its extension clinic, which is one component of the overall Pace program, will provide not only primary care, but they'll also be doing blood draws and they'll solely serve the participants of the Pace program, who frequent the Pace center on a daily basis. The three individuals on the board of trustees are listed in the exhibit. Jonathan Gold, MD, will serve as the Medical Director. They are projecting that the program will grow during the first 3 years of operation. The main site is expected to begin in March of 2023. The extension site will open somewhere around March 2025 to coincide with the diagnostic and treatment centres of third year of operation. Based upon review of the public need, character and competence and financial feasibility, the department is recommending approval with conditions and contingencies.

Peter Robinson Thank you.

**Peter Robinson** Questions from the committee or the council?

**Peter Robinson** Glad to see a revival of the Pace program, just generally. That's a remarkably effective program that seemed to have been dropping out of favor, but to see it being revitalized in this way is actually very encouraging. Very pleased to see this application coming forward.

**Peter Robinson** Is there anything from the applicant?

**Peter Robinson** Anything from the public on this one?

**Peter Robinson** Hearing none, I'll call the question.

**Peter Robinson** All in favor?

All Aye.

**Peter Robinson** Any opposed?

**Peter Robinson** The motion carries.

Peter Robinson Thank you.

**Peter Robinson** And finishing up our D&TC projects, 2 1 2 0 3 2 B, EMES Vision Center LLC in Kings County. This is to establishing and construct the diagnostic and treatment center to be located at 5202-5204 16th Avenue in Brooklyn to provide ophthalmology and optometry services. The Department is recommending approval with conditions and contingencies.

Peter Robinson Motion by Mr. Holt.

Peter Robinson Second by Dr. Gutierrez.

Peter Robinson Thank you.

Peter Robinson Ms. Glock.

**Shelly Glock** EMES Vision Center LLC, whose sole member is Benzie and Herbst, request approval to establish and construct Article 28 D&TC to be located in Brooklyn Kings County. The applicant required certification for medical services, other medical specialties and optometry services. The scope of these services will be ophthalmology and optometry services. The Borough Park neighborhood in Brooklyn will be the primary service area and is designated by the US Health Resource as the medically underserved area. There are only five private group practices providing ophthalmology services in that area. Dr. Jacobson, a board certified ophthalmologist, will be the Medical Director. The DTC has a transfer and affiliation agreement with Maimonides Medical Center. The total project cost will be met with accumulated funds. Based upon a review of public need, character and competence and financial feasibility, the department is recommending approval with conditions and contingencies.

Peter Robinson Thank you.

**Peter Robinson** Questions from the committee or the council?

Peter Robinson Ms. Monroe.

**Ann Monroe** I'm just curious when he lists the scope of services, and maybe this is for the applicant. Do I understand correctly that this will be primarily evaluation and if surgery or something else is needed, it will not be provided by the vision center. Maybe that is for the applicant.

**Shelly Glock** That is for the applicant again, but the services provided have to be appropriate for a diagnostic and treatment center under our regulations, but I'll defer to the applicant to answer the question.

**Peter Robinson** You would need a separate designation to do ambulatory surgery for ophthalmology, but we'll let the applicant respond.

**Peter Robinson** Could you please introduce yourselves?

**Peter Robinson** Push the button until it turns red.

**Peter Robinson** It's not going for you. Hold on. Somebody is helping you.

**Peter Robinson** There you go.

**Peter Robinson** You're just as quiet with the mic on as you are with the mic off. You need to speak up.

**Consultant for the Applicant** Consultant for the applicant.

**Consultant for the Applicant** To answer the question, this diagnosis diagnostic center will not be providing any surgery, the ambulatory surgery. This is just for evaluation and just general ophthalmology services.

**Peter Robinson** Thank you.

Peter Robinson Does that answer your question?

**Ann Monroe** Yes, I think so.

**Ann Monroe** Does EMES Vision Center provide that service at another location or is your relationship with the hospital, how you would manage those surgeries if necessary?

**Consultant for the Applicant** It'll be managed in the hospital. The doctor, the Medical Director has privileges there.

**Ann Monroe** Thank you.

**Peter Robinson** Other questions for the applicant?

Peter Robinson You guys are excused.

Consultant for the Applicant Thank you.

**Peter Robinson** Is there anyone else from the public that wishes to speak on this application?

**Peter Robinson** Hearing none, I'm going to call the question.

**Peter Robinson** All in favor?

**Peter Robinson** Any opposed?

**Peter Robinson** Any abstentions?

Peter Robinson Motion carries.

Peter Robinson Just a comment now, and this doesn't really relate to any specific application that we've heard in this grouping. We are seeing now, a start of a trend, I think of more diagnostic and treatment center applications that represent the conversion of private practices to Article 28 facilities. I'm not talking about the Daytops and the Pace program ones, but more the others. This is sort of like the if you'll recall, back when GI started to sort of make its way into the ambulatory surgery setting and almost every GI practice now converted to an single specialty ambulatory surgery program. Primarily, this is done to I don't mean to cast aspersions here, but primarily because of the financial incentives of collecting a facility fee under Article 28 versus what you're able to bill for in a private practice setting. I'm not necessarily saying that there's a right or a wrong here, but I do believe that we are sort of almost responding to these applications now on a one off basis. And individually, they're certainly a provable, but I think we need to sort of develop a set of either guidelines or policies, and we think the department really needs to give some thought to this about how we should be approaching this because I think we are right now doing this very transactionally. And you know, that's why you really got very little pushback

on any of these applications. It's now coming to the point where I think we need to sort of proactively decide on how we're going to handle these kinds of applications going forward.

Peter Robinson Dr. Gutierrez, I think you was speaking.

**Jeffrey Kraut** Mr. Lawrence was speaking first, then Dr. Gutierrez.

Peter Robinson I apologize.

Peter Robinson Mr. Lawrence.

**Harvey Lawrence** Harvey Lawrence, a member of thecouncil. Is this a trend away from the institutions, from the hospitals rolling up these practices? Is that something that should be included as well in their review that you're suggesting?

**Peter Robinson** I think it's a different dimension. We could certainly include that in what we look at. I'm really talking about people that are in private practice right now that are directly converting without necessarily a change of ownership of the practice.

Peter Robinson Dr. Gutierrez.

**Dr. Gutierrrez** In the news this morning, one of the big pharmaceutical companies is closing 10 percent of their pharmacies and then emphasizing on enhancing their ambulatory care. How is that under our umbrella, and what should we expect and should we prepare ourselves for this?

**Peter Robinson** You know, I think we've had conversations in the past that have covered these various designations of centers, whether they're minute clinics that were established in pharmacies previously and urgent care centers. I do think that is an important issue to look at as well. I think the whole approach to using the Article 28 designation as a way of essentially approving financial performance by collecting facility fees is really underneath all of these things. We just need to look at how we should be responding to that and whether that's an approach that we want to encourage or what it is that we want to do. But I think, like I said, we're doing this on a ad hoc transactional basis without a general philosophical approach to how we want to proceed going forward.

**Peter Robinson** Did somebody from the department staff want to say anything on this?

**Shelly Glock** I think we could take that up as you suggested as a topic at a later date.

**Peter Robinson** Thank you. I'm off my soapbox now, and back on to the agenda.

**Peter Robinson** This next application has a conflict in recusal by Mr. Thomas, who is going to step away from his Zoom. Application 2 1 1 1 0 7 E, Northern Lights Home Health Care in St. Lawrence County. This is a transfer of 25 percent interest from one withdrawing member to the remaining member or members evenly. The department is recommending approval with a condition.

**Peter Robinson** A motion by Mr. Holt.

**Peter Robinson** And a second by Dr. Gutierrez.

Peter Robinson Very good.

Peter Robinson Ms. Glock.

Shelly Glock Thank you.

Shelly Glock Northern Lights Health Care Partnership Inc. doing business as Northern Lights Home Health Care, located in St. Lawrence County, is requesting approval to transfer a 25 percent interest in the Article 36 from one withdrawing member to the remaining members equally. Is certified to provide services, as I mentioned to the St. Lawrence County residents. And the current membership, which you can see in the exhibit, is Canton Potsdam Hospital, a 25 percent interest, Claxton Hepburn Medical Center with 25, United Helpers Management Company, 25, and also Hospice of Hudson Valley, 25. The application seeks to permit the withdrawal of Hospice of St. Lawrence Valley and the equal redistribution of that membership interest to the three remaining members. There will be no change in services or the county served as a result of this application. This application is really brought to the committee because of Article 36 statute that requires us to bring this to the council for a vote. Based upon review of public need, character and competence and financial feasibility, the department is recommending approval with a condition.

Shelly Glock Thank you.

**Peter Robinson** Questions from the committee or the council?

Peter Robinson Yes.

**Ann Monroe** I don't know if it's in the materials you develop or if it's a question for the applicant, but I'm interested with the withdrawal of hospice. What does that mean about hospice services? Will Northern Lights Home Health Care not have an affiliation with hospice? What does this change in ownership due to the service continual around home health care in the county?

**Shelly Glock** My understanding of the transaction Ann, and I certainly can defer to the applicant, but my understanding is this is a simple withdrawal of the membership entity. But the referral patterns and the services that are provided in the county, including hospice will not change. There will be no change in access to those services as this is already an established within that county.

**Ann Monroe** And that was part of what the application said, it is asserting that these relationships will be the same?

Shelly Glock That is correct.

**Ann Monroe** Thank you.

**Peter Robinson** I believe this applicant and the reason Mr. Thomas withdrew is because this entity is part of the larger Rochester regional health system.

Peter Robinson Any other questions from the committee or the council first?

Peter Robinson The applicant.

**Peter Robinson** No one here, so that takes care of that.

**Peter Robinson** Anybody from the public on this application?

Peter Robinson Call the question.

**Peter Robinson** All in favor?

Peter Robinson Any opposed?

**Peter Robinson** Any abstentions?

**Peter Robinson** That motion carries.

Peter Robinson Thank you.

**Peter Robinson** We are going into certificates.

**Peter Robinson** The first is a certificate of amendment of the Certificate of Incorporation for Hudson River Health Care, which is a name change, and I'll also at the same time, call for the Certificate of Dissolution for which the department is recommending an approval.

**Peter Robinson** Can I have a motion for those?

Peter Robinson Thank you, Mr. Holt.

Peter Robinson I need a second.

Peter Robinson Thank you, Dr. Gutierrez.

Peter Robinson Ms. Glock.

Shelly Glock Questions only.

**Peter Robinson** Questions only.

Peter Robinson Anybody from the public wishing to speak on these?

**Peter Robinson** Hearing none, I'll call the question.

**Peter Robinson** All in favor?

**Peter Robinson** Any opposed?

**Peter Robinson** Any abstentions?

**Peter Robinson** That carries for both the certificate of amendment and the Certificate of dissolution.

**Peter Robinson** This next application identifies a conflict and calls for the recusal of Dr. Kalkut, who is departing his Zoom. This is an application 2 1 2 0 0 9 E, Long Island

Community Hospital and Hospice in Suffolk County. This is to establish NYU Langone Health System as the act of parent and cooperator of Long Island Community Hospital and Long Island Community Hospital Hospice, and change the corporate name of the operator. The department here is recommending approval with a condition and contingencies.

Peter Robinson Motion by Mr. Holt.

Peter Robinson Second by Dr. Gutierrez.

Peter Robinson Ms. Glock.

Shelly Glock Thank you.

Shelly Glock NYU Langone is an integrated health care delivery system that includes NYU Langone Health, NYU Grossman School of Medicine, NYU Long Island School of Medicine and its affiliated hospitals and other health care facilities. NYU Langone currently operates 1,350 licensed beds and 6 inpatient facilities and over 350 ambulatory facilities throughout New York City, and holds an Article 36 license to operate a certified home health agency and an Article 31 license to provide inpatient mental health services. In addition, NYU Langone Health System is the co operator of an FQHC, 7 full service primary care clinics and over 45 school based health centers. As part of this application, NYU Langone is seeking approval to establish NYU Langone Health System as the active parent and the co operator of Long Island Community Hospital Article 28 Hospital, which is Brookhaven Memorial, which doing business as Long Island Community Hospital and the parent of the Article 40 hospice. As part of the application, they're seeking approval from OMH and Oasis to establish the health system as sponsor of the Article 31 Inpatient mental health services and the Article 32 Outpatient Chemical Dependency Services. Approval from OMH and Oasis are contingencies on this CON. Upon approval, Brookhaven will change its corporate name to Long Island Community Hospital at NYU Langone Health. Brookhaven and NYU Langone intend to submit a separate CON at a future date to seek establishment approval. An affiliation agreement was executed in July of 2021, which is intended to enable NYU Langone and Long Island Community Hospital to streamline the provision in coordination of the quality of patient care and improve their financial stability. Long Island Community Hospital has served the communities of South and Central Suffolk for 65 years, but with a break even operating margin. Long Island Community Hospital lacks the adequate cash flow to make significant investments in its campus and ambulatory programs. The proposed affiliation will provide Long Island Community Hospital with access to additional capital and NYU Langone for operational efficiencies and strategies to afford patients seamless entry to tertiary care. NYU intend to jointly develop and refine a master facilities and capital plan for which is primary and secondary areas that will include consideration of new service lines and health related acquisitions that will enhance the needed health services throughout the service area. NYU has committed 100 million to transfer Ilitch and to implement NYU Langone enterprisewide systems, including epic and infrastructure improvements, as I mentioned to both the inpatient and ambulatory facilities, which are intended to enhance the quality metrics and patient outcomes. NYU Langone Health System Board, which consists of 55 members that you can see in the exhibit, were subject to a character and competence review. Through this affiliation, NYU Langone will provide needed resources, as I mentioned, to help Long Island Community Hospital improve and expand health services and improve care to residents in their service areas, as well as improve their financial stability. This affiliation will also afford Long Island Community Hospital access to NYU Langone Health, Clinical Integrated Network and their infrastructure and for population

health and Long Island Community Health is implementing interventions to support several of the priority areas of the New York State Prevention Agenda. Based upon review of the public need, character and competence and financial feasibility, the department is recommending approval with a condition and contingencies on this project.

Peter Robinson Thank you.

**Peter Robinson** Questions from the committee or the council?

Peter Robinson Dr. Berliner.

**Dr. Berliner** Hi. This actually is not about the application, but about your introduction to the application. I think it was I misheard, you talked about NYU Langone Long Island Medical School. I never heard of that before. I wonder if you could just. What is that? Did they take over something else? Is it a brand new school?

**Jeffrey Kraut** It's a brand new school. They started it as a division focusing on primary care and its affiliated, you know, through NYU Long Island.

**Dr. Berliner** I just never heard of it before, so thank you.

**Shelly Glock** It's primary care, and if I remember correctly, it is now a 3 year.

Jeffrey Kraut I think you're right.

**Peter Robinson** Is that enough, or do you need more clarification from the applicant on that?

**Dr. Berliner** No, that's fine.

Dr. Berliner Thank you.

**Peter Robinson** Other questions from the committee or the council?

**Peter Robinson** Hearing none, anything from the applicant?

**Peter Robinson** Questions only.

**Peter Robinson** Thank you.

**Peter Robinson** Anybody else from the public wishing to speak on this?

**Peter Robinson** Hearing none, I'm going to call the question.

**Peter Robinson** All in favor?

Peter Robinson Thank you.

**Peter Robinson** Any opposed?

**Peter Robinson** Any abstentions?

Peter Robinson That motion carries.

Peter Robinson Dr. Kalkut can return.

**Peter Robinson** And this was the one you've been waiting for, Ann Monroe. Here it comes.

**Peter Robinson** Application 2 1 1 1 6 9 E, OGL Holdings LLC doing business as Mount Sinai at Home in Nassau County here. I want to note a conflict in recusal by Dr Lim, who is departing from her Zoom. There she goes. This is to establish OGL Holdings LLC as the new operator of an existing certified home health agency located at 1000 South Oyster Bay Road in Hicksville, Long Island. The department is recommending approval with a condition and contingencies.

Peter Robinson Mr. Holt, thank you.

Peter Robinson Dr. Gutierrez, thank you.

Peter Robinson Ms. Glock.

Shelly Glock OGL Holdings to Be Formed LLC is requesting approval to become the new operator of an existing South Nassau Communities Hospital located in Nassau County. Upon approval, will operate under the assumed name Mount Sinai at Home. South Nassau Community Hospital is the current operator. On April 7th, 2021, they entered into an asset contribution agreement where OGL Holdings will purchase certain assets. This transaction will keep in the Mount Sinai Health System. OGL Holdings will develop an expanded business model with an enhanced community outreach and connected connections to new health care entities to create a stronger referral system. In addition, the applicant will enter into an administrative service agreement with Mt. Sinai South Nassau for the provision of administrative services. South Nassau Community Hospital is certified to provide services in Nassau, Suffolk and Queens County. This change of ownership will not result in any changes to the county being served or the service is being provided. I believe there's an organizational chart in the exhibit. The proposed ownership structure is you have OGL Holdings is made up of, who then is comprised of Care Continuum Ventures Inc at 49 percent and the other 51 percent is with Contessa Health Holdings LLC, and there is an org chart in the exhibit to help you see what the proposed structure will be. Care Continuum Ventures is the New York State Not For Profit Corporation that is the affiliate of Mount Sinai Health System. As I mentioned and demonstrated in the org chart, the sole member of Contessa Health Holdings LLC is Contessa Health, and on June 27th 2021, Contessa Health Inc and Medicine's Holding LLC entered into an agreement and plan of merger, where Medicines Holdings LLC became the 100 percent shareholder of Contessa Health Inc. Medicines, which is a publicly traded business corporation in Delaware, so they are the sole member of holding. So again, the proposed org chart is attached. The individual background review did include character and competence review all the way up to a Medicine Inc board. You also see in the exhibit the star ratings. The subject is a 2.5 quality rating star and the applicant affiliated are all 4.5 out of 5 stars. The purchase price is met via equity, and the budget shows net income. Therefore, in both years, 1 and 3. Based upon a review of our public need, character and confidence and financial feasibility, the department is recommending approval with a condition and contingencies.

Peter Robinson Thank you.

**Peter Robinson** Questions from the committee?

Peter Robinson Dr. Gutierrez.

Peter Robinson Oh, sorry.

Peter Robinson Anything from the applicant?

Peter Robinson Nothing.

Peter Robinson Anybody from the public wishing to speak on this application?

**Peter Robinson** Hearing none, we'll call the question.

**Peter Robinson** All in favor?

Peter Robinson Thank you.

**Peter Robinson** Any opposed?

**Peter Robinson** Any abstentions?

**Peter Robinson** Seeing none, that motion carries.

**Peter Robinson** A couple of things to close with. First, just a note of thanks to Shelly and the department. The transition from your predecessor has been seamless and things are going very well. I appreciate all the great work you and your colleagues in the department are doing to keep us going. A word of warning. There's a lot of work coming through. Over the next couple of meetings, I think we're going to be around for a lot longer than we are today. So, you know, kind of plan on your seatbelts and get ready to ride.

**Peter Robinson** But with that, as a nation, I'll turn it over to Mr. Kraut to close out Committee Day.

**Jeffrey Kraut** Thank you, Mr. Robinson, thank you, Dr. Gutierrez, thank you, members of the council for participating and giving us the time. As I said, we'll see you on December 9th. Thank you everybody and wish everybody a happy Thanksgiving and be thankful for all the blessings we should be thankful for and how we've kind of hopefully seen the worst of COVID, although it seems to be with us for a bit more longer. We thank everybody for all their work. Thanks so much. Take care.

Jeffrey Kraut We are adjourned.