

CAPITAL COMMITTEE

January 9, 2014

MEETING AGENDA

11:00 a.m.

125 Worth Street,
Room 532
5th Floor Board Room

CALL TO ORDER

Emily A. Youssouf

- ADOPTION OF MINUTES December 12, 2013 Emily A. Youssouf
- SENIOR ASSISTANT VICE PRESIDENT'S REPORT Roslyn Weinstein

ACTION ITEMS

- **Resolution** Dean Moskos
Authorizing the President of the New York City Health and Hospitals Corporation (the "Corporation") to procure and outfit seventy (70) ambulances in Fiscal Year 2014 on behalf of the Fire Department of the City of New York ("FDNY"), through City-wide Requirements Contracts for a total amount not-to-exceed \$20.5 million.

INFORMATION ITEMS

- **Project Status Reports**
 - Central/North Brooklyn Health Network* Daniel Gadioma/Lisa Scott-McKenzie
 - Kings County Hospital: Elevator Upgrade "ABC" Buildings – Delayed
 - Kings County Hospital: Elevator Upgrade "T" Building – Delayed
 - Woodhull Medical Center: Obstetric Unit Expansion – Delayed
 - Generations+/Northern Manhattan Health Network* Louis Iglhaut
 - Harlem Hospital: Kountz Pavilion Renovation – Complete
 - Lincoln Medical and Mental Health Center: Emergency Room Renovation - Delayed
 - Queens Health Network* Dean Mihaltzes
 - Elmhurst Hospital: Women's Health Pavilion – Delayed
- Major Modernization Status Report – Gouverneur Healthcare Services Lynda Curtis

OLD BUSINESS

NEW BUSINESS

ADJOURNMENT

CAPITAL COMMITTEE MEETING MINUTES

DECEMBER 12, 2013

MINUTES

Capital Committee

Meeting Date: December 12, 2013

Time: 8:30 A.M.

Location: Board Room

Board of Directors:

Members of the Capital Committee

Emily A. Youssouf, Chair

Josephine Bolus, RN

Alan D. Aviles, President

HHC Staff:

Jeremy Berman – Deputy General Counsel, Office of Legal Affairs

Richard Bernstock – Associate Executive Director, North Bronx Health Network

Michael Buchholz – Senior Associate Executive Director, Coler-Henry J. Carter Specialty Hospital and Nursing Facility

Jean Burg – Chair of the Department of Family Medicine, North Bronx Network

Tammy Carlisle – Associate Executive Director, Corporate Planning

Diane Carr – Deputy Executive Director, North Bronx Health Network

Deborah Cates – Chief of Staff, Office of the Chairman

Daniel Collins – Director, Coney Island Hospital

Jonathan Goldstein – Senior Consultant, Corporate Planning

Anthony Gounaris – Senior Project Manager, Office of Facilities Development

Chris Gowrie – Associate Executive Director, North Bronx Health Network

Robert Hughes – Executive Director, Coler-Henry J. Carter Specialty Hospital and Nursing Facility

Nelson Laverde – Assistant Director, Bellevue Hospital Center

Liny Liu – Senior Associate Director, Lincoln Medical and Mental Health Center

Patricia Lockhart – Secretary to the Corporation, Office of the Chairman

Floyd Long – Chief Operating Officer, Coler-Henry J. Carter Specialty Hospital and Nursing Facility

Peter Lynch – Senior Director, Office of Facilities Development

John Maher – Associate Director, South Manhattan Healthcare Network

Antonio Martin – Executive Vice President

Dean Mihaltses – Associate Executive Director, Elmhurst Hospital Center

Dean Moskos – Director, Office of Facilities Development

Marsha Powell – Director, Office of Facilities Development

Michael Rawlings – Associate Director, Bellevue Hospital Center

Beau Scelza – Associate Director, North Bronx Health Network

Cyril Toussaint – Director, Office of Facilities Development

Roslyn Weinstein – Senior Assistant Vice President, President's Office

Dion Wilson – Assistant Director, Office of Facilities Development

Elizabeth Youngbar – Assistant Director, Office of Facilities Development

Frank Zanghi – Internal Audits

Other Attendees:

John Pasicznyk – Managing Director, Construction and Metro New York Operations, Dormitory Authority of the State of New York

CALL TO ORDER

The meeting was called to order by Emily A. Youssouf, Chair of the Capital Committee, at 8:36 A.M.

On motion, the Committee voted to adopt the minutes of the November 7, 2013, Capital Committee meeting.

Ms. Youssouf advised that prior to addressing action items, a presentation regarding the new Henry J. Carter facility would be provided.

Robert Hughes, Executive Director, Coler-Henry J. Carter Specialty Hospital and Nursing Facility, narrated a presentation which showed photos of the relocation that took place on November 24th and November 25th, and discussed the tracking process utilized to monitor the movement of patients from one site to the other. Mr. Hughes was joined by Floyd Long, Chief Operating Officer, and Michael Buchholz, Associate Executive Director, Coler-Henry J. Carter Specialty Hospital and Nursing Facility.

Mr. Hughes advised that on Sunday, November 24, 2013, day one of the move, 114 hospital patients, 98 of which were on ventilators, were moved from the old Goldwater facility into the Long Term Acute Care Hospital (LTACH) at Henry J. Carter. The command center opened at 2:00 am, the first patient was moved at 4:00 am, and the relocation was complete just prior to 2:00 pm, approximately 20 minutes ahead of schedule. On day two of the move, 114 Skilled Nursing Facility (SNF) residents were relocated; the process began at 8:00 am, and was complete by 5:00 pm, several hours ahead of schedule. Patients were prepared for the move by unit staff, all patients had waffle cushions to help prevent pressure ulcers during transport, and successfully, as there were no incidents as a result.

Mr. Hughes explained that tracking of patients was done utilizing bracelets that were scanned at four different points throughout the process; 1) as patients left their original units; 2) as patients exited the facility; 3) as patients entered the new Henry J. Carter facility; and, 4) as they entered their new units, marking the end of their journey. The tracking was being viewed on an Electronic Patient Dashboard visible to persons in the command center, and it allowed real time monitoring of the process and each individual patient. The device was especially useful because, if it was detected that things were moving slowly on one end, it permitted for adjustments to be made accordingly.

Photos showed the main lobby, common areas, and patient rooms in both the LTACH and the SNF. Mr. Hughes noted that the new site features a library, a music and movement room, a culinary arts room, and a computer lab outfitted by donations from the facility's namesake Henry J. Carter.

Ms. Youssouf expressed gratitude that this project was coordinated and executed so well. She acknowledged the great leadership and team work that was needed, and expressed hope that the patients would be as pleased with the new site.

Mr. Hughes thanked Ms. Youssouf as well as the entire Board and Committee for their oversight and support over the course of the project.

Josephine Bolus, RN, said that documentation of this immense undertaking could and should be shared, so that it can be referenced if other facilities need to undergo a similar task. Ms. Youssouf, Antonio Martin, Executive Vice President, and Roslyn Weinstein Senior Assistant Vice President, agreed.

SENIOR ASSISTANT VICE PRESIDENT'S REPORT

Roslyn Weinstein, Senior Assistant Vice President, Office of the President, noted that the tracking system utilized in the relocation effort is part of a system used in response to a State mandate that was initiated post Hurricane Sandy, called e-finds. She explained that the system, which was tested on a small number of patients at Bellevue Hospital Center, is to be used to track patients in case of emergency, evacuation or any other patient movement. She added that publication of the relocation efforts, as previously discussed, would be investigated.

Ms. Weinstein provided an overview of the meeting agenda. She advised that there would be two action items, and a few brief status reports. Action items would include; 1) a lease agreement extension for space housing the Gun Hill Health Center, operated by Jacobi Medical Center; and 2) a license agreement for the Corporation's lobbyist to occupy space in Washington, D.C. Information items would include status updates on projects at Bellevue and Coney Island Hospitals.

That concluded her report.

ACTION ITEMS

- **Authorizing the President of the New York City Health and Hospitals Corporation (the "Corporation") to execute a five year lease extension agreement with Franciosa Owners, LLC (the "Landlord") for 5,300 square feet of space at 1012 East Gun Hill Road, Borough of the Bronx, to house the Gun Hill Health Center, operated by Jacobi Medical Center (the "Facility") at an initial rent of \$29.78 per square foot to increase at 2.5% per year with the Corporation responsible for the payment of real estate taxes, water and sewer rents, and separately metered electricity provided that the Landlord shall perform renovation work which includes exterior storefront replacement, painting, and the installation of two new rooftop HVAC units and installation of a new water heater.**

Diane Carr, Deputy Executive Director, North Bronx Health Network, read the resolution into the record on behalf of William Walsh, Senior Vice President, North Bronx Health Network. Ms. Carr was joined by Christopher Gowrie, Associate Executive Director, Richard Bernstock, Associate Executive Director, Beau Scelza, Associate Director, and Jean Burg, Chairman of the Department of Family Medicine, North Bronx Network.

Ms. Youssouf asked if the work to be completed on site was requested by Jacobi Medical Center. Mr. Scelza said yes.

Ms. Youssouf asked for an explanation of the anticipated increase in utilization. Mr. Bernstock explained evening and weekend hours may be extended, and added that services may be expanded to include specialty as well as general services, as the facility determines.

Ms. Youssouf asked if the site was easily accessible by public transportation. Ms. Burg said yes, there are multiple bus routes that stop right in front of the building and two subways that stop nearby.

Mrs. Bolus asked how many handicapped bathrooms are on site. Mr. Bernstock said there were two, and a handicap ramp provides access directly from the street into the lobby area.

There being no questions or comments, the Committee Chair offered the matter for a Committee vote.

On motion by the Chair, the Committee approved the resolution for the full Board's consideration.

- **Authorizing the President of the New York City Health and Hospitals Corporation (the "Corporation" or "Licensee") to execute a three year revocable license agreement with Simon and Company (the "Licensor") for its continued use and occupancy of approximately 144 square feet of space including use of the reception area, conference room, library, storage area, kitchen, high-speed internet service and digital cable television at an occupancy fee rate of \$1,494 per month or approximately \$17,926 per year at 1660 L Street, N.W., Washington, D.C., for use by the Corporation's federal lobbyist.**

Dion Wilson, Assistant Director, Office of Facilities Development, read the resolution into the record on behalf of LaRay Brown, Senior Vice President, Corporate Planning and Community Health.

Ms. Youssouf asked who the Corporate lobbyist was, at present. Mr. Wilson said her name was Judy Chesser. Alan Aviles, President, said she was previously the lobbyist for the City of New York.

Mrs. Bolus noted that the rate seemed fair. Mr. Wilson explained that cable television, access to a library area, and a staffed reception area were all included in the fee.

Ms. Youssouf asked if there were other lobbyists in the same building. Mr. Wilson said yes, he believed so. Jeremy Berman, Deputy Counsel explained that some of the other tenants in the buildings were in fact lobbyists for other municipalities.

There being no further questions or comments, the Committee Chair offered the matter for a Committee vote.

INFORMATION ITEMS

- **Project Status Reports**

South Manhattan Health Network

Michael Rawlings, Associate Executive Director, Bellevue Hospital Center, provided a report on the expansion of the Inpatient Adolescent Psychiatric Unit at the facility. Mr. Rawlings advised that the project had been completed and the unit was occupied and in use. He noted that patients had been admitted and nine (9) of the fifteen (15) beds were already occupied. He advised that the project was on budget, was delayed only as a result of Hurricane Sandy, and was completed using Healthcare Efficiency Affordability Law (HEAL) 19 funds.

South Brooklyn/Staten Island Health Network

Daniel Collins, Director, Coney Island Hospital, provided reports for two projects at the facility.

- Boiler Plant Replacement – Mr. Collins said the project would be completed in May, 2014, additional work was ongoing, and the new slab would be poured in the coming weeks.

Ms. Youssouf asked how high the platforms would be raised. Mr. Collins said they would be raised thirteen (13) feet above sea level, which would fall between the 100 and 500 year flood plans. Alan Aviles, President, explained that building constraints were the reason the boilers would not be raised all the way to meet the 500 year flood plan.

- Conversion of 6-bedded Rooms to 4-bedded Rooms – Project completed in mid-October and occupancy is expected in December 2013.

That concluded the status reports.

There being no further business, the meeting was adjourned at 9:03 A.M.

AMBULANCE PROCUREMENT & OUTFITTING
FIRE DEPARTMENT OF THE CITY OF NEW YORK

RESOLUTION

Authorizing the President of the New York City Health and Hospitals Corporation (the "Corporation") to procure and outfit seventy (70) ambulances in Fiscal Year 2014 on behalf of the Fire Department of the City of New York ("FDNY"), through City-wide Requirements Contracts for a total amount not-to-exceed \$20.5 million.

WHEREAS, on January 19, 1996, the Corporation and the City of New York (the "City") executed a Memorandum of Understanding ("MOU") allowing the transfer of the Corporation's Emergency Medical Service ("EMS") ambulance and pre-hospital emergency medical service functions to the Fire Department of the City of New York ("FDNY") to be performed by FDNY for the benefit of the City; and

WHEREAS, the MOU requires that the FDNY have access to and use of the Corporation's property to the same extent that EMS had prior to the transfer; and

WHEREAS, a major portion of the Corporation's property used and maintained by the FDNY is the ambulance fleet formerly managed and operated by EMS; and

WHEREAS, to maintain an appropriate ambulance and pre-hospital emergency medical service, vehicles in the ambulance fleet must be periodically replaced when such vehicles have exceeded their useful life, requiring more than routine repairs and maintenance; and

WHEREAS, 70 vehicles out of the FDNY's active fleet of 460 ambulances have reached the end of their useful life and must be replaced at a cost of \$20,408,000; and

WHEREAS, the City provides the funding for ambulance replacement to the Corporation for allocation to the FDNY; and

WHEREAS, the City has allocated \$58,033,000, on behalf of the FDNY, in the Corporation's Capital Commitment Plan in Fiscal Year 2014 for the purpose of purchasing and outfitting ambulances; and

WHEREAS, sufficient uncommitted funds are available in the Corporation's Fiscal Year 2014 Capital Commitment Plan for this purpose.

NOW, THEREFORE, be it

RESOLVED, that the President of the New York City Health and Hospitals Corporation (the "Corporation") be and is hereby authorized to procure and outfit seventy (70) ambulances in FY 2014 on behalf of the Fire Department of the City of New York ("FDNY"), through City-wide Requirements Contracts for a total amount not-to-exceed \$20.5 million.

EXECUTIVE SUMMARY
EMS AMBULANCES & INITIAL OUTFITTING EQUIPMENT
FISCAL YEAR 2014
FIRE DEPARTMENT OF THE CITY OF NEW YORK

- OVERVIEW:** The Fire Department of the City of New York (“FDNY”) operates the Corporation’s Emergency Medical Service (“EMS”) program on behalf of HHC under a 1996 Memorandum of Understanding (“MOU”). The MOU requires the FDNY to operate and maintain the City’s active fleet of 460 ambulances as part of the EMS program.
- As part of the MOU between the Health and Hospitals Corporation and the City of New York, the Corporation collects Medicaid funds for each fee-for-service patient that is admitted to one of its facilities including transports through EMS based on a longstanding agreement between HHC and the New York State Department of Health. Included in the Medicaid funding arrangement with the State DOH is the depreciated value of the ambulances. The Corporation, in turn, reimburses FDNY through payments on a quarterly basis for the provision of ambulance services. The reimbursement represents EMS’s pro rata share of Medicaid revenues of which depreciation on the ambulances is included.
- NEED:** Ambulances have an expected useful life of five (5) years and must be replaced after reaching the five-year period in order to maintain a high-performance fleet. The FDNY has advised the Corporation seventy (70) ambulances have reached the end of their useful life and need to be replaced. In addition, initial equipment must be purchased to outfit the vehicles for a total acquisition cost of \$20,408,000, which includes a ten percent acquisition contingency.
- SCOPE:** Procurement of seventy (70) ambulances and initial outfitting equipment.
- COST:** \$20.5 million (Non-HHC funds)
- FINANCING:** New York City General Obligation Bonds (No debt service impact to HHC)
- SCHEDULE:** FDNY is expected to obtain the ambulances and complete outfitting within 12 months.



FIRE DEPARTMENT

9 METROTECH CENTER

BROOKLYN, NY 11201-3857

Robert L. Scott
Director
Bureau of Fiscal Services

Room 5W-4

November 25, 2013

Roslyn Weinstein
Senior Assistant Vice President
HHC, Office of Facilities Development
346 Broadway, 12 West
New York, NY 10013

Re: Request for HHC Board Resolution

Dear Ms. Weinstein:

This letter represents a formal submission, to be presented to HHC's Board of Directors at their next meeting. The FDNY hereby requests approval to purchase seventy (70) ambulances of the below descriptions and quantities, plus initial equipment. Detailed initial equipment lists are attached.

<u>Description</u>	<u># of Units</u>	<u>Unit Price</u>	<u>Total \$ Amount</u>
Ambulance F-450 4x2:	35	211,624	7,406,851
Ambulance F-450 4x4:	35	212,824	7,448,851
Inspection fee			25,000
BLS Initial Equipment	49	40,272	1,973,328
ALS Initial Equipment	21	81,005	<u>1,701,105</u>
			18,555,135
		10% contingency:	<u>1,855,514</u>
		Total:	20,410,649

Please be advised that the procurement process is performed in accordance with HHC's operating procedures and Procurement Policy Board rules.

If you require additional information in order to secure HHC board approval, please contact me at 718/999-1221.

Thank you for your cooperation

Sincerely,

Robert L. Scott

atth.

c: Stephen G. Rush, FDNY
Mark Aronberg, FDNY
Robin Mundy-Sutton, FDNY
Patricia Mims, FDNY
Terry Fiorentino, FDNY
Dean Moskos, HHC
Jawwad Ahmad, HHC

INITIAL EQUIPMENT FOR ONE (1) FDNY AMBULANCE

MEU BLS READY

EQUIPMENT DESCRIPTION	QTY	COST	EXT
BP UNIT - INFANT	1	\$17.35	\$17.35
BP UNIT - PEDS	1	\$17.35	\$17.35
BP UNIT - ADULT	1	\$17.35	\$17.35
BP UNIT - OBESE	1	\$20.90	\$20.90
CAN, GARBAGE	1	\$12.00	\$12.00
CHAIR, STAIR	1	\$2,500.00	\$2,500.00
CHAIR, STAIR CUSTOM SILK SCREEN	1	\$30.00	\$30.00
COT, FOLDING W/3 SETS-2PC STRAPS	1	\$320.00	\$320.00
COT, FOLDING CUSTOM SILK SCREEN	1	\$30.00	\$30.00
DEFIBRILLATOR KIT, BLS	1	\$4,490.10	\$4,490.10
MATTRESS, AMB STRETCHER	1	\$200.00	\$200.00
MATTRESS, CUSTOM SILK SCREEN	1	\$30.00	\$30.00
OXIMETER KIT, CARBON MONOXIDE	1	\$4,390.00	\$4,390.00
OXYGEN "D" CYL BRACKET	2	\$110.00	\$220.00
OXYGEN FLOWMETER	3	\$125.00	\$375.00
OXYGEN PRESSURE REDUCER	1	\$150.00	\$150.00
OXYGEN REGULATOR	4	\$200.00	\$800.00
OXYGEN MONITOR W/2' HARNESS & PLUGS	1	\$144.00	\$144.00
OXYGEN TRANSDUCER W/2 HARNESS & PLUGS	1	\$250.00	\$250.00
OXYGEN HARNESS ASSEMBLY 17' W/ PLUGS	1	\$37.00	\$37.00
SPLINT, TRACTION COMBO	1	\$1,000.00	\$1,000.00
SPLINT, TRACTION CUSTOM SILK SCREEN	1	\$30.00	\$30.00
STOOL, STEP	1	\$25.00	\$25.00
STRETCHER - RAIL	1	\$300.00	\$300.00
STRETCHER - ROLLING W/3 SETS-2PC STRAPS	1	\$4,900.00	\$4,900.00
STRETCHER - SCOOP W/3 SETS-2 PC STRAPS	1	\$575.23	\$575.23
SUCTION UNIT, CHARGING BRACKET	1	\$300.00	\$300.00
SUCTION UNIT KIT, PORTABLE	1	\$815.50	\$815.50
SUCTION UNIT, ON-BOARD	1	\$322.50	\$322.50
MEU TOTAL			\$22,319.28

MSU BLS READY

BACKBOARD, LONG	2	\$119.84	\$239.68
BACKBOARD, SHORT	1	\$38.84	\$38.84
BAG, BLS DEFIBRILLATOR	1	\$73.97	\$73.97
BAG, OXYGEN	2	\$74.47	\$148.94
BAG, TECHNICIAN	2	\$146.09	\$292.18
BAG, COMPLETE WMD ANTIDOTE	1	\$312.98	\$312.98
CYLINDER, OXYGEN "D" SIZE	4	\$42.00	\$168.00
CYLINDER, OXYGEN "M" SIZE	1	\$150.00	\$150.00
EXTRICATION DEVICE	2	\$131.95	\$263.90
EXTINGUISHER, 5LB ABC FIRE	2	\$38.45	\$76.90
LANTERN, 6 VOLT BATTERY	1	\$9.77	\$9.77
MAP, 5 BOROUGH	1	\$35.97	\$35.97
POUCH, EPI-PEN	1	\$22.79	\$22.79
SHOVEL, PLASTIC SNOW	1	\$12.01	\$12.01
SHOVEL, METAL FOLDING	1	\$15.00	\$15.00
STRAPS, 9' 1 PC	2	\$3.72	\$7.43
MSU TOTAL			\$1,868.36

BLS READY TOTAL \$24,187.64

RADIOS

RADIOS	2	\$4,150.00	\$8,300.00
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HAZMAT

PD31 METER	2	\$350.00	\$700.00
CO METERS	2	\$300.25	\$600.50
RAD57	1	\$4,583.00	\$4,583.00
DOSIMETERS	2	\$950.00	\$1,900.00
TOTAL HAZMAT			\$7,783.50

MEU BLS READY \$22,319.28
MSU BLS READY \$1,868.36
RADIOS \$8,300.00
HAZMAT \$7,783.50
BLS AMB TOTAL \$40,271.14

FDNY/EMS MEDICAID REIMBURSEMENT

As part of the Memorandum of Understanding (“MOU”) between the Health and Hospitals Corporation (the “Corporation”) and the City of New York in regard to the transfer of the ambulance and pre-hospital emergency medical service functions performed by the Emergency Medical Service (“EMS”) to the Fire Department of New York (the “FDNY”), the Corporation collects medicaid funds for each medicaid fee-for-service patient that is admitted to one of its facilities as an add-on on the patient’s bill to cover the cost of EMS services.

The Corporation calculates the value of the add-ons by multiplying it with the number of patients admitted. A payment is then issued to the FDNY on a quarterly basis. At the last quarter of the fiscal year, the Corporation does a reconciliation exercise and if there is a positive variance, the amount of HHC’s fourth payment to the FDNY will be increased by the variance. In the event that the opposite occurs, the fourth payment to the FDNY will be reduced by the difference.

□

NEW AUTHORIZATION FY 2014

	Unit Price	# of Units	Total	Contingency	Total	Per Unit	\$/Equipped Unit
<u>Ambulances (Excluding Initial Equipment):</u>							
Ambulance F-450 4 x 2	211,624	35	7,406,840	\$740,684	\$8,147,524	\$232,786	
Ambulance F-450 4 x 4:	212,824	35	7,448,840	\$744,884	\$8,193,724	\$234,106	
Total Ambulances:		70	14,855,680	1,485,568	16,341,248		
							<u>Type I Ambulances</u>
							\$277,746 BLS
<u>Initial Equipment for 119 Ambulances:</u>							
BLS Initial Equipment	40,272	49	1,973,328	\$197,333	\$2,170,661	\$44,299	\$322,552 ALS
ALS Initial Equipment	81,005	21	1,701,105	\$170,111	\$1,871,216	\$89,106	
Total Initial Equipment:		70	3,674,433	\$367,443	\$4,041,876		
Inspection Fee					\$25,000		
Total			18,530,113	\$1,853,011	\$20,408,124		
Total (Rounded)					\$20,408,000		
BLS: Basic Life Support							
ALS: Advance Life Support							

Past Authorizations FYs 2013, 2012 and FY 2010

FY 2013 Ambulances *
(Revised 7.5.13)

	Unit Price	# of Units	Total	Contingency	Total	Per Unit	\$/Equipped Unit
<u>Ambulances (Excluding Initial Equipment):</u>							
Ambulance F-450 4 x 2	198,879	99	19,689,021	\$1,968,902	\$21,657,923	\$218,767	
Ambulance F-450 4 x 4:	200,079	20	4,001,580	\$400,158	\$4,401,738	\$220,087	
Total Ambulances:		119	23,690,601	2,369,060	26,059,661		
							<u>Type I Ambulances</u>
							\$262,466 BLS
<u>Initial Equipment for 119 Ambulances:</u>							
BLS Initial Equipment	38,526	79	3,043,554	\$304,355	\$3,347,909	\$42,379	\$307,068 ALS
ALS Initial Equipment	79,074	40	3,162,960	\$316,296	\$3,479,256	\$86,981	
Total Initial Equipment:		119	6,206,514	\$620,651	\$6,827,165		
<u>Initial Equipment for 77 Ambulances:</u>							
BLS Initial Equipment	38,526	52	2,003,352	\$200,335	\$2,203,687	\$42,379	\$84,757 BLS
ALS Initial Equipment	79,074	25	1,976,850	\$197,685	\$2,174,535	\$86,981	\$129,360 ALS
Total Initial Equipment:		77	3,980,202	\$398,020	\$4,378,222		
Total			33,877,317	\$3,387,732	\$37,265,049		
Total (Rounded)					\$37,266,000		

* Fiscal FY13 funding rolled into FY 2014

FY 2012 Ambulances

<u>Ambulances (Excluding Initial Equipment):</u>							
Type I Ambulances:	160,656	80	12,852,480	\$1,285,248	\$14,137,728	\$176,722	
Total Ambulances:		80	12,852,480	\$1,285,248	\$14,137,728		
							<u>Type I Ambulances</u>
							\$200,922 BLS
<u>Initial Equipment:</u>							
BLS Initial Equipment	22,000	60	1,320,000	\$132,000	\$1,452,000	\$24,200	\$227,322 ALS
ALS Initial Equipment	46,000	20	920,000	\$92,000	\$1,012,000	\$50,600	
Total Initial Equipment:		80	2,240,000	\$224,000	\$2,464,000		
Total			15,092,480	\$1,509,248	\$16,601,728		
Total (Rounded)					\$16,600,000		

FY 2010 Ambulances

	Unit Price	# of Units	Total	Contingency	Total	Per Unit	\$/Equipped Unit
<u>Ambulances (Excluding Initial Equipment):</u>							
Type I Ambulances:	155,900	56	8,730,400	\$702,833	\$9,433,233	\$168,451	
Total Ambulances:		56	8,730,400	\$702,833	\$9,433,233		
							<u>Type I Ambulances</u>
							\$192,654 BLS
<u>Initial Equipment:</u>							
BLS Initial Equipment	22,400	37	828,800	\$66,722	\$895,522	\$24,203	\$232,200 ALS
ALS Initial Equipment	59,000	19	1,121,000	\$90,245	\$1,211,245	\$63,750	
Total Initial Equipment:		56	1,949,800	\$156,967	\$2,106,767		
Total			10,680,200	\$859,800	\$11,540,000		

MEDICAID FUNDS TRANSFERRED TO THE FDNY

FY	(In millions)
2000	\$58.8
2001	\$66.2
2002	\$63.9
2003	\$61.8
2004	\$61.9
2005	\$55.5
2006	\$58.1
2007	\$56.7
2008	\$56.7
2009	\$60.2
2010	\$56.9
2011	\$59.9
2012	\$54.8
2013	\$39.5

Source: Martin Genee
Deputy Corporate Comptroller
12/13/13

MEMORANDUM OF UNDERSTANDING
BETWEEN
THE NEW YORK CITY HEALTH AND HOSPITALS CORPORATION
AND
THE CITY OF NEW YORK
ON THE PROVISION OF AMBULANCE AND
PRE-HOSPITAL EMERGENCY MEDICAL SERVICES
BY
THE FIRE DEPARTMENT OF THE CITY OF NEW YORK
FOR THE BENEFIT OF HHC

This Memorandum of Understanding ("MOU"), is made and entered into between the New York City Health and Hospitals Corporation ("HHC") and the City of New York (the "City"), in order to effectuate the transfer of the ambulance and pre-hospital emergency medical service functions performed by the Emergency Medical Service ("EMS") of HHC to the Fire Department of the City of New York (the "FDNY") to be performed by FDNY for the benefit of HHC.

WHEREAS, the parties to this MOU recognize that the availability of high-quality ambulance and pre-hospital emergency medical services is essential to HHC, as the City's public hospital system, and to the health and welfare of all persons in the City of New York; and

WHEREAS, HHC has, until now, operated EMS, which provides ambulance, pre-hospital emergency medical and ancillary services within the City; and

WHEREAS, the personnel and staff of EMS work with great skill, dedication and commitment under difficult circumstances to provide high quality ambulance and pre-hospital emergency medical services; and

WHEREAS, FDNY has completed an operational plan for the performance by FDNY of ambulance, pre-hospital emergency medical and ancillary services now performed by EMS for HHC ; and

WHEREAS, FDNY's operational plan reflects, and the parties believe, that combining EMS's personnel with FDNY's extensive experience operating a highly successful emergency fire response system will result in more effective delivery of ambulance and pre-hospital emergency medical services within the City, benefitting both HHC and the public; and

WHEREAS, the City intends to establish a Bureau of EMS within FDNY to provide ambulance and pre-hospital emergency medical services for HHC and the public; and

WHEREAS, in light of the foregoing, the parties believe that the transfer of EMS functions to FDNY, and the provision of ambulance and emergency services by FDNY to HHC pursuant to agreement, would serve the best interests of the City, the public and HHC; and

WHEREAS, HHC, by resolution of its Board of Directors adopted October 26, 1995, authorized the transfer of functions and the execution of an MOU between the City and HHC setting forth the terms of such transfer; and

WHEREAS, the parties desire by this transfer to enhance the quality, performance and coordination of ambulance and pre-hospital emergency medical services provided within the City;

NOW, THEREFOR, HHC and the City agree as follows:

I. TRANSFER OF FUNCTIONS TO FDNY

1. The parties shall take such steps as are appropriate and necessary in accordance with § 70(2) of the Civil Service Law and this MOU, including obtaining all necessary approvals, to effectuate the transfer to FDNY of ambulance, pre-hospital emergency medical and ancillary functions performed by EMS as set forth in paragraph 6 below ("EMS services").

2. For purposes of this MOU, "transfer date" shall mean the date of the transfer of employees of HHC to FDNY pursuant to paragraph 4 of this MOU.

3. FDNY will establish a Bureau of EMS within FDNY to oversee, direct and command EMS services. The Bureau will be managed by a senior Fire Department staff chief,

the "Chief in Charge, Bureau of EMS" ("EMS Chief"). The EMS Chief or his or her designee will serve as a liaison with HHC.

II. PERSONNEL

4. As soon as practicable after the expiration of the 20-day notice period provided by § 70(2) of the Civil Service Law, the parties shall transfer from HHC to FDNY necessary permanent officers and employees currently assigned to EMS who are substantially engaged in the provision of EMS services ("HHC/EMS employees"), subject to the following:

(a). Such HHC/EMS employees will be transferred to FDNY without change in permanent civil service status, without loss of civil service seniority and with corresponding civil service titles;

(b). Such HHC/EMS employees will be appropriately oriented in relevant FDNY procedures and policies;

(c). The transfer of such HHC/EMS employees will not affect their membership in or rights with respect to the New York City Employees Retirement System.

5. Notwithstanding any other provision of this MOU, Special Officers employed by HHC who are currently assigned to EMS are not necessary officers or employees substantially engaged in the performance of the functions to be transferred, and shall not be transferred, but shall continue to be subject to the jurisdiction of HHC.

III. SERVICES BY CITY AND COMPENSATION BY HHC

6. The City agrees that, effective on the transfer date, FDNY will provide EMS services for the benefit of HHC, including but not limited to:

(a). The performance of ambulance services, directly or through other providers of ambulance services, consistent with the ambulance services provided by EMS prior to the transfer, subject to the limitation set forth in paragraph 7 below;

(b). Emergency inter-facility ambulance transportation for HHC patients to the extent provided immediately prior to the transfer date by personnel of EMS;

(c). The delivery of pre-hospital emergency medical care by qualified personnel;

(d). A central dispatching system to direct and coordinate responses to requests for emergency ambulance and medical services, which shall incorporate all ambulances operated by FDNY, as well as such voluntary and proprietary ambulances as shall choose to participate and be accepted for participation by FDNY;

(e). Any other services necessary to the performance of terms and conditions of federal or state grants, subsidies or other funding;

(f). Support, administrative and personnel services previously provided by personnel of EMS that are necessary to the provision of the services described in subparagraphs (a)-(e) above.

7. After the transfer date, HHC will continue to be responsible for non-emergency inter-facility transports consistent with current practice.

8. In consideration for the provision of EMS services by the City for the benefit of HHC, as set forth in this MOU, HHC will fund the costs of such services, as follows:

(a) HHC will fund the costs of EMS services for the balance of the City's fiscal year 1996 by means of a payment to the City in the amount of \$62 million,¹ payable in two equal installments due on April 30, 1996 and June 30, 1996.

(b) Unless the funding arrangements set forth in this subparagraph are modified pursuant to paragraphs 10 or 22 below, HHC will fund the costs of EMS services for each fiscal year after fiscal year 1996 as follows:

(i) The City shall apply \$63 million of the HHC subsidy from the City under the New York City Health and Hospitals Corporation Act (Chapter 1016 of the Laws of 1969, as amended) (the "HHC Act") to FDNY as partial payment for the EMS services to be provided by FDNY as set forth in this MOU; and

(ii) HHC, subject to paragraph 9 of this MOU, shall continue to bill for and receive directly all amounts arising from the provision of EMS services by FDNY to patients delivered to HHC hospitals, and prior to the commencement of each fiscal year, the City Budget Director and the President of HHC jointly shall project the amount of collections anticipated by HHC for that fiscal year (the "HHC Projected Collections");

(iii) The amount of the HHC Projected Collections for each fiscal year shall be paid by HHC to the City in four equal payments, subject to adjustment as provided in (iv) and (v) below, with the first three payments to be made on the last day of each of the

¹ This number assumes that the transfer date is March 1, 1996. In the event that the transfer occurs on a different date, the President of HHC and the City Budget Director jointly shall determine the appropriate amount.

first three quarters of the fiscal year, and the last payment to be made within 60 days of the end of the fiscal year;

(iv) Within 60 days of the end of each fiscal year, the City Budget Director and the President of HHC jointly shall determine the amount actually collected by HHC for that fiscal year as a result of the operations of EMS (the "HHC Actual Collections"). In the event that the HHC Actual Collections are less than the HHC Projected Collections, the amount of HHC's fourth payment to the City under (iii) above shall be reduced by such difference, provided that HHC exercised diligent efforts, as determined jointly by the City Budget Director and the President of HHC, to maximize the amount of the HHC Actual Collections. In the event that the HHC Actual Collections are in excess of the HHC Projected Collections, the amount of HHC's fourth payment to the City under (iii) above shall be increased by such excess.

(v) Notwithstanding the foregoing, in the event that the President of HHC and the City Budget Director jointly determine that as of the conclusion of the second quarter the HHC projected collections are likely to be materially in excess of the HHC Actual Collections, then the President of HHC and the City Budget Director shall agree to revise appropriately the amount of HHC's third quarter payment to the City under (iii) above.

9. As of the transfer date, the City shall be responsible for the billing and collection of all revenues arising from the provision of EMS services to non-Medicaid patients delivered to hospitals other than those operated by HHC. The revenues collected by the City during fiscal year 1996 shall be remitted to HHC; the revenues collected by the City during subsequent fiscal years shall be retained by the City. Commencing October 1, 1996, the City shall pay HHC a reasonable rate, as determined jointly by the City Budget Director and the

President of HHC, for the billing and collecting of non-Medicaid revenues for EMS services provided to patients delivered to HHC hospitals, or shall assume the responsibility for the billing and collecting of such non-Medicaid revenues. *

10. The Mayor, after consultation with HHC, may modify the funding arrangements set forth in paragraphs 8 and 9 above provided that any such modification does not result in adverse financial consequences for HHC.

11. The parties agree to cooperate with respect to grants and subsidies for EMS services from sources other than the City of New York, as follows:

(a). The parties agree to cooperate in applying for grants and subsidies currently available or which may become available from any source for EMS services, to make best efforts to obtain such funding at a level greater than or equal to the amounts now received and to employ such grants and subsidies as are awarded in a manner consistent with applicable funding conditions;

(b). As soon as practicable, HHC will identify all grants and subsidies authorized by any source for EMS services or for the benefit of EMS; HHC agrees to remit promptly to the City all monies it receives (whether before, on, or after the transfer date) on account of such grants and subsidies to the extent consistent with applicable funding conditions.

12. The City shall provide the following reports to HHC:

(a). Within ninety days after each annual anniversary of the transfer date, FDNY and the City shall report to HHC in writing concerning the services the City has provided pursuant to this MOU. Such report shall include an assessment of the effectiveness of such services, plans for appropriate improvements in such services and quantitative and descriptive information analyzing the level and nature of services.

(b). FDNY and the City will provide such additional reports as HHC reasonably requests in connection with grants, funding, billing or the implementation of this MOU.

13. HHC shall provide the following reports to the City :

(a). Cash receipt reports for EMS services, listing all revenues by source.

(b). Ambulance "drop-off" numbers to HHC hospitals and charges by HHC for:

(i). Medicare patients;

(ii). Self-pay patients;

(iii). Patients covered by third-party insurance.

(c). HHC will provide such additional reports as the City or FDNY reasonably requests in connection with grants, funding, billing or the implementation of this MOU.

IV. PROPERTY AND CONTRACTS OF HHC AND RELATED MATTERS

14. For the purpose of providing EMS services as described in this MOU, as of the transfer date FDNY shall have access to and use of HHC real property to the same extent that EMS had prior to the transfer, including but not limited to EMS stations, outposts and other facilities. In addition, as soon as practicable, HHC shall identify all real property currently used primarily by EMS and all leases or other arrangements relating to such property; the City will review such leases and arrangements and determine, in consultation with HHC, the appropriate treatment of each. Except as otherwise provided for by the parties to this MOU or in leases or other arrangements between HHC and third parties, utilities, maintenance and repairs for the EMS facilities will be provided as follows:

(a). Routine non-structural custodial maintenance of such facilities shall be performed by the City;

(b). Utilities (water, heat, electricity), as well as repairs to structures or fixtures, in facilities also used by HHC for non-EMS purposes (for example, EMS stations located in HHC hospitals) shall be the responsibility of HHC, unless the City elects to undertake the responsibility; and

(c). The City shall be responsible for utilities and repairs to structures or fixtures in other EMS facilities.

15. For the purpose of providing EMS services, as of the transfer date FDNY shall, in its discretion, have access to and use of HHC personal property to the same extent that EMS had prior to the transfer. In addition, as soon as practicable, HHC shall identify all personal property, including but not limited to vehicles and equipment, currently used primarily

by or for the benefit of EMS. In consideration for the services to be provided for the benefit of HHC by the City pursuant to this MOU, HHC shall promptly transfer its interests in such property to the City, to the extent that the City so elects. Such personal property shall, during its useful life, be used to the extent practicable for the purpose of providing ambulance and pre-hospital emergency medical services.

16. As of the transfer date, HHC shall provide to the City, to the extent that the City so elects, all goods or services to be provided under contracts, agreements and other arrangements entered into by HHC for the benefit of EMS, including but not limited to, arrangements with private ambulance services. As soon as practicable, HHC will identify all such contracts, agreements and other arrangements, and the City will review them to determine, in consultation with HHC, the appropriate treatment of each such contract, agreement and arrangement.

V. GENERAL

17. This MOU is not intended, nor shall it be construed, to create any rights or benefits in any third parties.

18. HHC and the City agree that this MOU shall be read consistently with the HHC Act, the New York City Charter and all other applicable federal, State and local laws and regulations.

19. Within a reasonable time after the transfer date, the City shall publish in the *New York Law Journal* an appropriate notice to members of the bar regarding the transfer of EMS functions from HHC to FDNY.

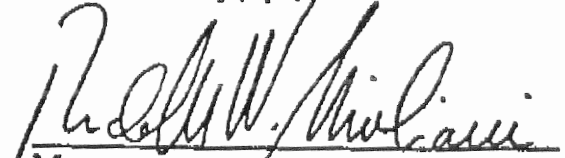
20. The parties shall cooperate: (i) in taking all actions necessary or desirable to implement this MOU, (ii) in exchanging non-privileged information and documentation

relating to EMS services, and (iii) in avoiding adverse financial consequences to either party as a result of the implementation of this MOU.

21. Any disputes between the City and HHC regarding the implementation of this MOU, including but not limited to any disputes between the City Budget Director and the President of HHC regarding payments for services, shall be finally resolved and determined by the City's First Deputy Mayor or such other Deputy Mayor who is designated to sit on HHC's Board of Directors.

22. This MOU may be amended from time to time or terminated by written agreement between the Mayor and the President of HHC.

Agreed to
As of January 19, 1996

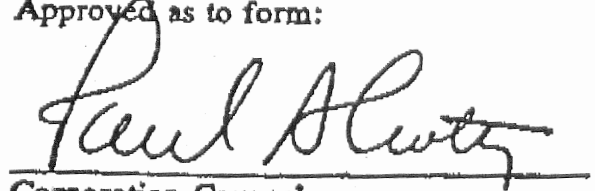


Mayor



President, New York City Health and
Hospitals Corporation

Approved as to form:



Corporation Counsel

STATUS REPORT

GOUVERNEUR HEALTHCARE SERVICES

MAJOR MODERNIZATION

**GOUVERNEUR HEALTHCARE SERVICES
MAJOR MODERNIZATION PROJECT
PROJECT FACT SHEET**

Location: 227 Madison Street
New York, New York 10002

Description: Provide the planning, pre-construction, architectural and engineering design, construction, construction management, and project management services necessary to expand the complement of nursing facility beds, renovate and fit out the existing nursing facility, including major mechanical infrastructure upgrades, and construct and fit out a new expanded ambulatory care center.

Budget: Total Major Modernization \$251.7 million

**Approved DASNY
Work Orders to Date:** \$247.4 million

**Approved DASNY
Funding to Date:** \$235.4 million

Managing Agent: DASNY

Architect: Perkins Eastman Architects, PC (Previously RMJM/Hillier Architects)

**Construction
Manager:** Hunter Roberts Construction Group

CON Status: Approved October 2008

Schedule: Completion Expected - February 2014

MWBE/EEO: DASNY will ensure compliance with MWBE and EEO requirements as they relate to New York State Executive Law, Article 15-A.

**GOUVERNEUR HEALTHCARE SERVICES
MAJOR MODERNIZATION PROJECT**

PROJECT STATUS REPORT – November 2013

The following are key project activities the Corporation has completed to date:

Design: RMJM (formerly Hillier Architects) completed design of the building extension and renovation of the existing building and all construction packages have been awarded. Perkins Eastman Architects, PC has assumed responsibility as architect for remaining construction and closeout.

Construction: The building addition and renovation of the 2nd, 3rd, 4th (clinic space), 5th (half clinical and half residential space), and residential floors 6, 7, 8 and 13 are complete and occupied. Residential floors 9 and 10 are complete and ready for occupancy. The 12th floor was renovated prior to the project and remains as administrative space. Floors 11 and 1 are presently under construction.

Construction Management: Hunter-Roberts is the construction manager (CM). The CM is managing construction work and closeout as required.

Finance: New York City General Obligation Bonds, Grant funds and donations.

Original Budget: The original project budget was \$101.0 million, excluding the costs of financing, DOH fees, and contractor claims.

Adjusted Budget: The adjusted DASNY managed project budget is \$247.4 million, excluding CON fees and the costs of financing and contractor claims. Since January 2005, the project's capital commitment plan forecast, excluding IT, Kitchen Renovation, Soil Decontamination, Medical Gas, and Auditorium Work, has been amended as follows:

January 2005:	\$101,000,000
January 2008:	\$154,494,000
September 2009:	\$178,000,000
April 2010:	\$166,930,000
September 2011:	\$186,452,000
January 2011:	\$198,452,000
September 2011:	\$198,594,000
January 2012:	\$203,845,000
September 2012:	\$205,639,000
January 2013:	\$238,639,000

Page Two – Project Status Report

Additional list of funding sources added to the project is as follows:

\$1,500,000 – Lower Manhattan Development Corporation (LMDC)

550,000 – Homeland Security grant funds

100,000 – Gouverneur Auxiliary

4,399,596 – HHC Bond, Series 2010, proceeds

2,680,000 – City G.O. (Soil Decontamination)

600,000 – City G.O. (Kitchen Renovation)

500,000 – City G.O./City Council (Renovate Auditorium)

\$10,329,596 – Total other City G.O. and Non-City G.O. funding sources

\$248,968,596 – Total available budget. OMB will provide any contingency that may be required to complete the project not to exceed \$5 million.

Total Project Forecast:

The DASNY project budget forecast is \$247.4 million, which excludes CON fees, some planning fees, Value Engineering Services, and all costs related to IT Network Infrastructure managed by HHC, financing costs and contractor claims; and includes DASNY-managed IT Network Infrastructure work and the renovation of the Auditorium.

NEW YORK CITY HEALTH AND HOSPITALS CORPORATION
 GENERATIONS+/NORTHERN MANHATTAN NETWORK
 GOUVERNEUR HOSPITAL CENTER
 MAJOR MODERNIZATION PROJECT
 Project NO. 12200570

BUDGET STATUS REPORT

As of
 December 23, 2013
 (IN THOUSANDS OF DOLLARS)

COST CATEGORY	PROJECT CAPITAL BUDGET	DASNY MANAGED:		HHC MANAGED:		Overall Project Invoiced	TOTAL PROJECT FORECAST	VARIANCE (Surplus/Shortfall)
		INVOICED TO DATE	FORECAST	INVOICED TO DATE	FORECAST			
	(a)	(b)	(c)	(d)	(e)	(f) (b) + (d)	(g) (c) + (e)	(h) (a) - (g)
Major Modernization Project								
Construction	174,207	166,595	183,275	0	0	166,595	183,275	(9,068)
Design fees	15,963	14,961	16,459	0	0	14,961	16,459	(496)
Construction management fees	14,594	12,706	14,594	0	0	12,706	14,594	0
Planning & other fees	4,066	3,260	4,393	0	0	3,260	4,393	(327)
Moveable equipment, furniture & telecom (see Note 1)	9,422	7,525	11,008	0	0	7,525	11,008	(1,586)
DASNY fees	8,316	7,326	8,316	0	0	7,326	8,316	0
Construction Contingency (See Note 1)	3,750	0	3,696	0	0	0	3,696	54
SUBTOTAL	230,318	212,373	241,741	0	0	212,373	241,741	(11,423)
NYS DOH FEES	949	0	0	949	949	949	949	0
Planning & Other Fees	68	0	0	68	68	68	68	0
Value Engineering Services	666	0	0	666	666	666	666	0
IT Work (12-2011-21)	4,400	1,779	1,779	2,342	2,621	4,121	4,400	0
Renovation Kitchen (12-2008-02)	600	28	600	0	0	28	600	0
Soil Remediation (12-2008-70)	2,680	2,680	2,680	0	0	2,680	2,680	0
Medical Gas	100	100	100	0	0	100	100	0
Auditorium	0	-	500	0	0	0	500	(500)
SUBTOTAL (see Note 2)	9,463	4,587	5,659	4,025	4,304	8,612	9,963	(11,923)
Total Modernization (See Note 3)	239,781	216,960	247,400	4,025	4,304	220,985	251,704	(11,923)

Notes:

Total Gouverneur DASNY Project Budget approved by HHC Capital Committee is \$247.400

1.) FF&E forecast decreased by \$1.7M - Construction Contingency forecast increased by this amount.

2.)

Cost Category	Renovation Kitchen/ Elevator 12-2008-02	IT Work 12-2011-21	Soil Remediation 12-2008-70	Medical Gas	Auditorium	Total Projected
Construction	\$ 296	\$ 1,743	\$ 2,480	\$ 100	\$ 150	\$ 4,769
Design fees	\$ 69	\$ 36	\$ 150		\$ 60	\$ 315
Construction management fees	\$ -					\$ -
Planning & other fees	\$ 210		\$ 30			\$ 240
Moveable equipment, furniture & telecom					\$ 290	\$ 290
DASNY fees	\$ 25		\$ 20			\$ 45
Contingency						\$ -
Total Projected	\$ 600	\$ 1,779	\$ 2,680	\$ 100	\$ 500	\$ 5,659

3.) OMB has yet to approve \$11.923 M of Major Mod funding - Unfunded Contingency, FF&E and Auditorium.

PROJECT STATUS REPORTS

Central/North Brooklyn Health Network
Generations+/Northern Manhattan Health Network
Queens Health Network

Network: CENTRAL / NORTH BROOKLYN HEALTH NETWORK

Facility: KINGS COUNTY HOSPITAL CENTER

Project Number	PROJECT TITLE	Project Budget (\$000s)	Paid to Date (\$ 000s)	% Paid to Date	Construction Start	Projected Completion	Forecast/ Actual Completion	Delay (if any)	Comments
29201101	Upgrade Ten (10) Elevators "ABC" Buildings	5,148	3,276	64.00%	Mar-12	May-13	May-14	(11)	Construction in progress. Project divided into three phases. Phase 1: Freight elevators completed. Phase 2: Upgrade one passenger elevator in each building plus the hydraulic elevator in Central receiving. Work compled. Awaiting DOB inspection. Phase 3: Upgrade remaining passenger elevators in each building. Completion scheduled May 2014.
29201102	Upgrade Four (4) Elevators "T" Building	1,998	1,486	78.00%	Mar-12	Dec-12	Dec-13	(12)	Phase I: Two (2) North elevators completed. Phase II: Two (2) South elevators completed. DOB inspection being scheduled.

Facility: WOODHULL MEDICAL AND MENTAL HEALTH CENTER

Project Number	PROJECT TITLE	Project Budget (\$000s)	Paid to Date (\$ 000s)	% Paid to Date	Construction Start	Projected Completion	Forecast/ Actual Completion	Delay (if any)	Comments
48201204	Renovate two (2) School Based Health Clinics	500	291	58.00%	Aug-13	Dec-13	Dec-13		Construction and outfitting are completed. Clinics are in use.
48200803	Obstetric Unit Expansion	3,251	239	0.07%	Jun-13	Feb-14	Oct-14	(8)	Start of construction was delayed because of the need to relocate the Overflow Postpartum Nursing Unit and several offices from the site to other areas throughout the building. Demolition is being scheduled for the end of January 2014.
48201301	Expansion of Dental & Ophthalmology Practices	2,125	2,112	99.00%	Dec-12	Dec-13	Dec-13		Expended 99.4% of the HEAL funds. Construction completed on Dental Administrative offices, Training Center and four new exam rooms in Ophthalmology. Construction and outfitting are substantially completed on the new Pediatric Dental practice. Other spaces in Ophthalmology practice being remodelled.

Facility: HARLEM HOSPITAL CENTER

Project Number	PROJECT TITLE	Project Budget (\$000s)	Paid to Date (\$ 000s)	% Paid to Date	Construction Start	Projected Completion	Forecast/ Actual Completion	Delay (if any)	Comments
13200702/03	Kountz Pavilion Renovation	13,545	11,229	83.00%	Mar-08	Apr-12	Oct-13	(18)	Complete. The project will be removed after this reporting cycle.
13201240	Construct and Outfit Dental Clinic - Kountz Pavilion	5,659	5,115	90.00%	May-13	Dec-13	Dec-13		DOH inspection scheduled for January, 2014.

Facility: LINCOLN MEDICAL AND MENTAL HEALTH CENTER

Project Number	PROJECT TITLE	Project Budget (\$000s)	Paid to Date (\$ 000s)	% Paid to Date	Construction Start	Projected Completion	Forecast/ Actual Completion	Delay (if any)	Comments
25200301	Emergency Room Renovation	28,275	25,666	91.00%	Apr-07	Jun-10	Dec-13	(42)	DOH inspection scheduled for Dec. 30, 2013.
25201101	Expansion of Psychiatric Inpatient Unit	5,500	4,440	81.00%	Jan-13	Sep-13	Nov-13	(2)	Complete. The project will be removed after this reporting cycle.
25201302	Sub-Specialty 2D2 Clinic Expansion	1,416	1,113	78.00%	Jun-13	Oct-13	Nov-13	(1)	Complete. The project will be removed after this reporting cycle.

Facility: ELMHURST HOSPITAL CENTER

Project Number	PROJECT TITLE	Project Budget (\$000s)	Paid to Date (\$ 000s)	% Paid to Date	Construction Start	Projected Completion	Forecast/ Actual Completion	Delay (if any)	Comments
33200801	Women's Health Center	13,352	8,537	64.00%	Sep-11	Dec-12	Mar-14	(15)	Installing framing for exterior pannels. All pannels have been delivered.
33201313	Comprehensive Energy Efficiency Upgrade	23,130							Lighting fixtures are being installed.
33201202	Structural Remediation of Parking Garage	1,333	410	31.00%					Installed protective scaffolding.

Facility: QUEENS HOSPITAL CENTER

Project Number	PROJECT TITLE	Project Budget (\$000s)	Paid to Date (\$ 000s)	% Paid to Date	Construction Start	Projected Completion	Forecast/ Actual Completion	Delay (if any)	Comments
34201201	"T" Building Relocation	8,400	537	6.00%					In design.