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ESTABLISHMENT AND PROJECT REVIEW COMMITTEE MEETING
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TRANSCRIPT

Mr. Robinson Welcome to today's meeting of the Establishment and Project Review Committee. My name is Peter Robinson. I'm happy to welcome all of you here; members, staff, the public, applicants and those online. Now, let me quickly run through the rules of the road here. First, I am asked to remind council members and everybody else that the meeting is subject to the Open Meeting Law and is broadcast over the internet. Just a few ground rules on this. We are using synchronized captioning. I guess you knew that already. The first time you speak, please state your name and briefly identify yourself as a council member or staff member, so that we get that properly on the record. Mics are hot. They pick up every sound, so that will catch up to the recording. Also please speak into the mics and get close to them so that we can hear you all. I see most of you have complied because I got a big stack of papers here, but this form about registering your attendance is important. It's required by the Joint Commission on Public Ethics and the form is also posted on the department's website. If you have not signed in, please go back out to the table and do that so we can make sure that we have a record of your attendance.

Mr. Robinson All of those things are done and here we go. These are for acute services and construction. Application 231049C, Montefiore Nyack in Rockland County. Certify a new dual single dual specialty ambulatory surgery extension clinic for orthopedics and pain management at 3 Center Rock Road in West Nyack. I want to make a note here that there is a correction to the exhibit. The Department of Health recommendation is approval with conditions and contingencies. It is not including a five-year limited life.

Mr. Robinson With that, may I have a motion, please?

Mr. Robinson Thank you, Dr Torres.

Mr. Robinson Second?

Mr. Robinson Who seconded?

Mr. Robinson Thank you.

Mr. Robinson Ms.Glock, where are you?

Mr. Robinson There you are.

Ms. Glock Good afternoon. It's Shelly Glock with the department. This project, Montefiore Nyack Hospital is requesting approval of a new dual single specialty ambulatory surgery extension clinic for orthopedics and pain management in West Nyack. The proposed facility will be certified for ambulatory surgery, single specialty orthopedics, single specialty pain management, and other medical specialties for MRI services. This project is part of an initiative to establish a musculoskeletal center in Rockland County to reduce the outmigration of orthopedic cases and to address the anticipated growth in joint replacement and ambulatory spine surgeries. This proposed center will house a state-of-the-art ambulatory surgery and imaging center, a physical therapy center, as well as an

orthopedic spines and pain practice. This project addresses some physician alignment, as well as the current wait times for elective orthopedic procedures. The goal of the project is to improve patient access to orthopedics, orthopedic surgery and imaging for the residents of Rockland County. The applicant states there's a gap in ambulatory surgery services in Rockland County, which leads to more than 46% of outmigration or 7,000 cases annually to other New York surgery centers and an estimated equal number leaving for New Jersey. Approval of the project will improve access to orthopedic and pain management services, as well as imaging services in an outpatient setting for the residents of Rockland County. Currently, there are no hospital extension clinics providing ambulatory surgery services operating in Rockland County. There is one ambulatory surgery center, advanced surgery, located about 4.5 miles away, which does provide multi-specialty surgery services. Based upon a review of compliance, public need and financial feasibility, the department is recommending approval with conditions and contingencies.

Mr. Robinson Thank you.

Mr. Robinson Any questions from members of the committee or the council?

Dr. Soffel Good afternoon. Denise Soffel, council member I was noticing in the application that Rockland County is 26% Medicaid while the projection for this center is that they will be serving 8% Medicaid when they're fully up and running. I just was wondering, why is there not an access problem for Medicaid beneficiaries and where are they going to receive these services?

Ms. Glock I'm going to defer to the applicant, but I believe it was said the projections in the application are based on those current cases that they're capturing that are out migrating, but I'm going to defer to the applicant to address that question.

Mr. Robinson Can we ask the applicant to come forward, please?

Mr. Robinson Thank you.

Mr. Robinson Please push the button on the mic and make sure the red light is on. If you could first introduce yourself.

Dr. Geller Mark Geller, President CEO of Montefiore Nyack Hospital.

Mr. Novak I'm Mike Novak, Chief Operating Officer for Montefiore Nyack Hospital.

Mr. Robinson Thank you.

Mr. Robinson I wonder if you could respond to the question.

Dr. Geller Sure.

Dr. Geller The cases that are in the application are cases we're bringing back from New Jersey. By definition, it's almost devoid of Medicaid patients because they can't go to New Jersey for care. Nyack Hospital's a safety net hospital. We care for 30 to 35% of our total volume of Medicaid patients. Over time, I imagine as the center matures, those patients will go there as well.

Mr. Robinson Is that responsive to your question?

Dr. Soffel Yes, it is.

Mr. Robinson Thank you.

Mr. Robinson Please go ahead.

Dr. Bennett I am Dr. John Bennett. I'm a member of the council. I've got three, three questions. I noticed that I'm thinking about the population, as was just highlighted. In the summary we have here there's a mention of the hospital spending 0.01% of revenue on community health improvement. Talk to me a little bit about how that fits in with your population being 35% Medicaid, and maybe, you know, because that's a little bit of a disconnect for me.

Dr. Geller We provide extensive charity care to the community. We do have active participation in community health. I would want to validate that number, but we are extraordinarily active in the community, a very diverse community, providing services in the community around diabetes, hypertension, maternal care. I'm not sure where that exact number comes from, but we have a very robust community service, and we provide extensive charitable care.

Dr. Bennett It would seem that based on your payer mix, it should be higher than that.

Mr. Robinson Dr. Bennett, could I ask you to just get a little closer to the mic? It's hard picking up your voice.

Dr. Bennett I mean, and if you're doing all that stuff, that numbers should be higher, which that's why it surprised me.

Dr. Geller I would want to check that number.

Dr. Bennett My second question was in looking at the projected finances, I noticed that the expenses go down. I mean, it was kind of interesting. Year one, you've got a big operating margin and then, you know, in starting up a new facility, it's usually the opposite way, right? I thought that was curious.

Dr. Geller I asked that question as well. Part of it was how we recognize depreciation in year one. I think as the center matures; the case mix changes. There'll be more cases at lower revenue over time.

Dr. Bennett That Medicaid shift maybe.

Dr. Geller I mean, should be accretive to the organization throughout the duration of the project.

Dr. Bennett My third question is a little harder to frame and maybe a little more challenging. It's interesting that there are no outpatient centers in Rockland County, which I think was stated. I don't think that's a good thing for care. In all the different hats I've worn, I know that outpatient surgical centers have better customer service, often better quality and patient experience. They also have a lower total cost of care. I'm always interested in, you know, how are you going to address the idea that these services have to

be made more affordable to be accessible even for the commercial population? How are you going to address in this center making care more affordable?

Dr. Geller A number of ways, first, many of the procedures that we're currently performing on an inpatient basis will be moving to ambulatory outpatient. By definition will decrease the overall cost of care. I think providing services efficiently and comprehensively in one place so that the totality of the patient issues are cared for at one time in one setting will efficiently deliver care. I think that will take some cost out of care.

Dr. Bennett You anticipate moving procedures that were previously done inpatient as opposed to outpatient at the hospital to an outpatient setting?

Dr. Geller Correct.

Dr. Bennett Because that's important, right? What we find, what the data shows commercially is that the outpatient setting at a hospital and in Article 28 facility, the cost forgets about reimbursement. The cost to the employer is a lot higher at a hospital facility than an outpatient facility.

Dr. Geller We're also looking at different models of providing care. To the extent that the large employers are self-insured, we're looking at because we will now have all the services in one place providing cost certainty for certain disease entities, work related injuries so that we can do it efficiently and with certainty around cost. We find that that is an appealing offering to many self-insured large employers.

Dr. Bennett Thank you.

Mr. Robinson Dr. Torres.

Dr. Torres Great.

Dr. Torres Dr. Bennett, thank you so much for your comments. I think that having a facility or hospital that offers these services to the community at large is something that is wonderful. I only encourage you and I'm telling you for a reason, monitor and look at how the hospital is leveraging their engagement with community-based organizations and communities of color and the vulnerable, because there have been disconnects. I think that having a service that helps meet a dire need again is something that's much needed. I'll be monitoring on the community side to see that level of engagement and commitment to the people that need it the most.

Dr. Torres Thanks.

Mr. Robinson Thank you.

Mr. Robinson Other questions from the committee of members of the council.

Mr. Robinson Thank you very much.

Dr. Geller Thank you very much.

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

Mr. Robinson I'm going to call the question.

Mr. Robinson All in favor?

Mr. Robinson Any opposed?

Mr. Robinson Motion carries.

Mr. Robinson Thank you.

Mr. Robinson Calling application 231240C, Lenox Hill Hospital in New York County. I'm noting a conflict and recusal by Mr. Kraut, who's leaving the room, and an interest by Dr. Lim. This application is to certify a new oncology extension clinic at 1345 3rd Avenue in New York. The department is recommending approval with conditions and contingency.

Mr. Robinson A motion, please.

Mr. Robinson Dr. Torres.

Mr. Robinson A second.

Mr. Robinson Mr. Holt.

Mr. Robinson Ms. Glock.

Ms. Glock Lenox Hill Hospital, which is an existing 632 bed hospital located on 77th Street is seeking approval of a new extension clinic at Third Avenue as stated. This extension clinic will be certified for radiation oncology and includes adding two Lenox Diagnostic Imaging and Pharmacy in a leased space of a newly constructed medical office building. Northwell Health is the sole corporate member of Lenox Hill Hospital. The primary service area for this project consists of portions of New York Kings and Queens County. The extension clinic proposes to provide the services as previously mentioned, and with this project, the hospital is creating an extension clinic to consolidate outpatient services into one location, thereby enabling patients to continue to conveniently access cancer services. The consolidation of outpatient services will support these patients through all phases of their illness, so patients will be able to receive imaging services, infusion services and radiation oncology, lab and pharmacy all in one location, as opposed to having to access those services in multiple sites through Manhattan. Lenox Hospital is also seeking to add to additional Lenox at the extension clinic. The applicant reports that the volume of Article 28 cancer care within the service area has grown by 8.1% over the five-year period of 2017 to 2021. The New York City region, as you see in the exhibit, currently has 76 Article 28 licensed clinics and a need for 96. The applicant is projecting a little over 33,000 visits with Medicaid utilization at 30 almost 35%. Based on our review, the department is recommending approval with conditions and contingencies of the project.

Mr. Robinson Thank you.

Mr. Robinson Questions from the committee or the members of the council.

Mr. Robinson Ms. Monroe.

Ms. Monroe We've had other situations in the city where they have moved services away from where people have been used to getting them, and with little attention paid to those people who had traditionally gone to a location. I'm trying to understand if that's an issue here or if this is not that situation.

Ms. Glock I'll defer to the applicant.

Mr. Robinson Can we ask the applicant to come forward and introduce themselves, please?

Ms. Monroe Do you want me to repeat my question?

Mr. Robinson Could we do some introductions, make sure the red light is on, and then close to the mic, please.

Dr. Baker Good afternoon. I'm Dr. Daniel Baker. I'm the Executive Director at Lenox Hill Hospital.

Mr. Cogswell Hi. My name is Jonathan Cogswell. I'm the Vice President of Design and Construction for Lenox Hill.

Ms. Khan Good morning. Cynthia Khan, Vice President, Strategic Planning.

Ms. Byrd Hi. Peggy Byrd. Vice President, Finance.

Mr. Flanigan Morning. John Flanigan, Senior Vice President, Government Affairs.

Dr. Baker As I understand, the question is concerning the consolidation of services out from the community to where patients would normally receive care without concern for those patients in that regard. The project is not aimed to do that. The project is aimed to increase these services. We look at our radiation medicine. We're not removing the radiation medicine from our hospital, but actually adding services that would go to the project just down the block. The same thing with the radiology component pieces and the lab as well. We're not consolidating services out from and away from the community in this.

Mr. Robinson Was that responsive?

Ms. Monroe I believe so.

Mr. Robinson Thank you.

Mr. Robinson Dr. Bennett.

Dr. Bennett Yes.

Dr. Bennett Hi, John Bennett. This is my perennial question again. You're taking services out of the hospital, putting them in the community. That's great. We hope to see better accessibility, hopefully better quality, less hassle for the patients. They don't have to go to the hospital, all that stuff. We all know that what often happens is it's all about the rates on the commercial and on the backs of the consumer. What are you doing to lower the cost?

Dr. Baker I understand that concern equally. I think it's something that we share in terms of how do we overall lower the cost of care across the board with health care. The idea in this in the consolidation is really becoming much more patient centric. It decreases the totality of the visits and the extremities paced on the patient because often all of these services are needed within one particular visit. The idea of lowering the cost of care is lowering the cost of the burden on the patient, both from what they experience getting to and from care, but also in the totality of the actual cost of care for that particular episode by allowing for all of the services to be done together.

Dr. Bennett Oh, that's great. Again, it's a lot of times it gets down to unit cost because in these types of procedures, you're not going to be in a value-based arrangement, I don't think. That would be the ideal. If you're not, I think we have to be cognizant of the fact that there's a set cost in the hospital even as an outpatient. What we find is there's a cost in a quite frankly, and there's national data to show this. I'm not giving away any secrets. There's a cost in a for instance, a physician owned outpatient facility, and that's lower. We have the cost in the hospital owned facilities, which tend to be higher. There's a lot of talk about payment site neutrality now in Medicare, because that cost shift is burdening employers. I really think it's important to remember that we have to take that price point down. I'm speaking for the consumer, I think because, you know, in the capital region here in Albany, we represent 400,000 consumers. We have to be mindful of the fact that unit cost matters, especially in a fee for service world.

Dr. Baker Absolutely. Understood and agreed.

Mr. Robinson Other comments or questions from members of the committee or the council?

Mr. Robinson Thank you very much.

Mr. Robinson I'm opening this up to see if there's anyone from the public that wishes to speak on this application.

Mr. Robinson Seeing none, I'm going to call the question.

Mr. Robinson All in favor?

Mr. Robinson Any opposed?

Mr. Robinson Motion carries.

Mr. Robinson Thank you.

Mr. Robinson Please ask Mr. Kraut to return.

Mr. Robinson Application 231254C, Rome Memorial Hospital Inc in Oneida County. This is to perform renovations to update and expand the surgical space. The department is recommending approval with conditions and contingencies.

Mr. Robinson A motion, please.

Mr. Robinson Mr. Thomas.

Mr. Robinson And a second.

Mr. Robinson Dr. Torres.

Mr. Robinson Ms. Glock.

Ms. Glock Rome Memorial Hospital is a 130-bed nonprofit hospital in Rome, Oneida County. They are requesting approval for the renovation of four operating rooms and two procedure rooms with a pre-op and a post-op support area and the addition of some shelf space on the second floor for future use. Four new modern ORs will be constructed to replace the existing four ORs that were constructed in 1965. The project also includes an efficiency designed surgical waiting area, preoperative and post-operative support areas to facilitate easy navigation inpatient flow. The project was awarded \$26,000,000 in state funding through the statewide Health Care Facility Transformation Program to support the project. As a result of this project, the applicant expects to expand their surgical specialties by providing a state-of-the-art environment that will enhance their ability to recruit highly skilled surgeon to the region to enhance access to care. They're projecting 3,650 inpatient visits and over 110,000 outpatient visits for both the first and third year, with 31% outpatient Medicaid utilization. As I stated, the project cost is funded through the Statewide Health Care Facility grant program with equity of \$19,000,000 additionally and fundraising of about \$10,000,000. Based on our review of financial feasibility and compliance and public need, the department is recommending approval with conditions and contingencies.

Mr. Robinson Thank you very much.

Mr. Robinson Questions.

Mr. Robinson Applicant questions only.

Mr. Robinson Does anybody from the public wish to comment on this application?

Mr. Robinson Hearing none I'll call the question.

Mr. Robinson All in favor?

Mr. Robinson Any opposed?

Mr. Robinson The motion carries.

Mr. Robinson Thank you.

Mr. Robinson Application 231273C, Flushing Hospital Medical Center in Queens County converting two medical surgical beds, four pediatric beds and six transitional care beds to twelve psychiatric beds and perform renovations to create an involuntary inpatient psychiatric unit and relocate and update a medical surgical unit. The department is recommending approval with conditions and contingencies.

Mr. Robinson A motion by Mr. Thomas.

Mr. Robinson A second by Dr. Torres.

Ms. Glock Flushing Hospital Medical Center is requesting in Queens County is requesting approval to eliminate its existing eighteen bed voluntary psychiatric unit and to construct a thirty-bed involuntary inpatient psychiatric unit and increase the psychiatric bed complement from the current eighteen to thirty through conversion of two medical surgical beds, four pediatric beds and six transitional care unit beds. Additionally, the project will relocate the hospital's existing med surge inpatient unit from the third floor to the second floor of the main building to make room for the new psychiatric unit and to perform some cosmetic upgrades on the entire second floor. This project was awarded \$13,000,876 dollars in state funding to the Statewide Health Care Facility Transformation Program to support the project due to an identified need in the service area. The expansion of the inpatient psych unit will address current design and infrastructure deficiencies and will help address the involuntary psychiatric bed capacity shortage in Queens County. Currently, patients are being transferred to other psychiatric facilities from Flushing Hospital, and placement are often takes significant time and can lead to extended wait times in the ED. For the new involuntary psychiatric unit the applicant is projecting 730 discharges and 8,760 patient days, resulting in about 8% occupancy in the first year and resulting in 100% occupancy projected in the third year. Based upon the department's review, we are recommending approval with contingencies and conditions.

Mr. Robinson Thank you very much.

Mr. Robinson Questions, comments from the committee or the council.

Dr. Lim Dr. Lim.

Mr. Robinson I can't tell you whether I got to put my glasses on or what.

Dr. Lim Is my mic working?

Dr. Lim Actually, have some questions for the applicant if they can come out.

Mr. Robinson Can we have the applicant come forward and please introduce yourselves?

Ms. McNamara Hi. I'm Megan McNamara on behalf of the applicant.

Mr. McNamara Patrick McNamara, Assistant Vice President, Finance for Medicines Health Network, Flushing Hospital.

Mr. McNamara Thank you.

Dr. Lim Thank you.

Dr. Lim I have two questions, and I hope you can answer them and bear with me for the long lead up to the first question. You currently have licensed eighteen psychiatric beds, but those are for people who are voluntarily willing to be admitted. Those are not currently operating that those haven't been operating for some time. When they were operating, the ATC in 2019 was thirteen out of the eighteen. I see that you're going up to thirty, and by no means this is great to see. We know that there is often a lack of available psychiatric beds, particularly in certain areas of New York City. I think my question is, is how you came to thirty as the new number, as the new sort of total bed count, and I understand if you're starting to accept people who need involuntary hospitalization, you might have an increase in census. You're only at thirteen out of eighteen in 2019. When we're looking at the other

hospitals and I was a little surprised, actually, to see this with psychiatric units in Queens, putting aside one hospital, which has a unit closed, all of them have been operating even in 2020, 2022 at generally well under 80%. You also had mentioned in the beginning that this will it should have a positive fiscal impact. I guess my concern is sort of how realistic is that, you know, that ATC count of 80% in the first year and a 100% occupancy of a psych unit. That's clinically very challenging. If you just could speak to how you got to that bed count in the ATC and where do you expect that you'll get these additional patients who need admission from?

Mr. McNamara Sure.

Mr. McNamara Flushing Hospital previously had a voluntary psychiatric unit, which I believe is only one of two remaining units in the state of New York. The logistics of getting patients into that voluntary unit historically had been very challenging. We had always looked to eventually transition to an involuntary unit, knowing the needs of our community and knowing the challenges that we have. As far as the thirty-bed unit that was really modeled for the physical plant, the thirty-bed sewer that well, and a Jamaica hospital, our affiliated hospital, we run two twenty-eight bed involuntary psych units. That twenty-eight to thirty beds complement from experience is a good staffing model and offer providing care as well as offer margins to help the facility to fill those thirty beds. Flushing Hospital this year is on track without being a 939 receiving hospital to transfer out over 200 patients that would have been a candidate for the involuntary psychiatric unit. Flushing Hospital also takes full financial risk on approximately 130,000 individuals, both linked to the hospital through primary care and other community organizations. Within that group, on an annual basis, those patients have been incurring over 700 inpatient psychiatric admissions in Queens and across New York City. Those are patients that we are very interested in getting into intensive care management, being able to meet the needs of the community we're taking risk on at Flushing Hospital. The combination of, you know, the patients we've had that we've been transferring out, the patients we're taking risk on that we know have been incurring psychiatric stays as well as the volume we anticipate from being a 939 receiving hospital is really how we got the comfort level to fill those thirty beds. Facility wise, it was a good footprint for what we're able to achieve there.

Dr. Lim I understand.

Dr. Lim Thank you.

Dr. Lim My second question is which actually dovetails very well with your talk about at risk. Can you tell me a little bit more about your ambulatory based services? Because I think if we're talking about ultimately in a value-based care system, we want to keep patients out of the inpatient setting. Can you tell us a little bit more about your outpatient into mental health services and if there's any plans to grow or expand that at any point.

Mr. McNamara Sure.

Mr. McNamara The behavioral health focus at Flushing Hospital, in addition to the inpatient proposed unit, we do have outpatient mental health clinic at Flushing Hospital, which we are in the process of contemplating expansion for. We have done a lot of work also with Flushing with tele psychiatry. Even though we've been seeing, you know, COVID has put some constraints on the patient's willingness to come in physically, we've had a pretty substantial uptick in tell us psychiatry. We've been engaging with that population. We also have a inpatient substance abuse clinic from that unit and also a large outpatient

reflection substance abuse clinic, which we are looking to expand. Through that kind of complement of inpatient substance abuse, outpatient behavioral health, outpatient substance abuse, this is really the other component that we need to meet the needs of those patients. In a full risk environment, the fact that we'll be able to have the full complement from tele psychiatry to inpatient psychiatric services as needed is really what we see as the needs of our community.

Dr. Lim Got it.

Dr. Lim Thank you.

Mr. Robinson Ms. Monroe.

Mr. Robinson For the speakers, we are having some difficulty with the audio if you're not really close to the mic. It really applies to everybody. Do your best.

Mr. Robinson Please, go ahead.

Ms. Monroe I'm as close as I can be.

Mr. Robinson Yes, you are.

Ms. Monroe It's probably even here in the fine print somewhere, but you're closing four adolescent or pediatric beds. Were those med surge beds or psychiatric beds? Will you still have pediatric beds or is that what you had was four and you're closing that unit?

Mr. McNamara The beds, pediatric beds are medical pediatric beds. I believe there's still going to be a complement of pediatric beds that meet the senses that we've been seeing at Flushing Hospital over time. We don't anticipate that any of the bed changes, be it med surge, transitional care or those pediatric medical beds will anyway impact our ability to serve the patient's needs.

Ms. Monroe How many pediatric beds will you have left?

Ms. McNamara Sixteen.

Mr. McNamara It was sixteen.

Ms. Monroe Good.

Ms. Monroe Thank you.

Ms. Monroe They're not psychiatric, adolescent psychiatric beds.

Mr. McNamara Correct.

Ms. Monroe Thank you.

Mr. Robinson Any other questions?

Mr. Robinson Is there anyone from the public that wishes to comment on this application?

Mr. Robinson Hearing none I'll call the question.

Mr. Robinson All in favor?

Mr. Robinson Any opposed?

Mr. Robinson Motion carries.

Mr. Robinson Thank you.

Mr. Robinson I think it's a very needed set of services and really thank your hospital for submitting this application.

Mr. Robinson Back to ambulatory surgery centers 231274C, New Hyde Park Endoscopy in Nassau County, converting a single specialty ambulatory surgery center to multi-specialty and perform renovations to add two new operating rooms. Department recommending approval with conditions and contingencies.

Mr. Robinson Motion, please.

Mr. Robinson Thank you very much, Dr. Berliner.

Mr. Robinson Second.

Mr. Robinson Mr. Holt.

Mr. Robinson Thank you.

Ms. Glock New Hyde Park Endoscopy is an existing Article 20 Ambulatory surgery Center in Lake Success, New York. This application seeks approval to convert from a single specialty to a multi-specialty ambulatory surgery center and perform the requisite renovations, including the addition of two operating rooms. They are currently certified for gastroenterology. Upon approval of the application, they will add general surgery, pain management and pediatric urology. Upon approval of the application, they will be renamed New Hyde Park Surgery Center. The applicant is projecting about 12,000 procedures in year one and three, with 16 and a half percent Medicaid and little less than 1% charity care. These projections are based on the current practices of the participating surgeons and the four new physicians who are interesting in joining the center will bring about 26/25 new cases. Based upon our review, we are recommending approval with conditions and contingencies.

Mr. Robinson Thank you.

Mr. Robinson Dr. Torres.

Mr. Robinson Do you have a question?

Mr. Robinson I'm not seeing any questions.

Mr. Robinson Applicants questions only.

Mr. Robinson Is there anyone from the public that wishes to speak on this application?

Mr. Robinson Hearing none I'll call the question.

Mr. Robinson All in favor?

Mr. Robinson Any opposed?

Mr. Robinson Motion carries.

Mr. Robinson Thank you.

Mr. Robinson This is an application for a diagnostic and treatment center under construction 23108066C. This is Open Door Family Medical Center Inc in Westchester County. This is to perform renovations to expand the facility. This is a safety net project. Department is recommending approval with conditions and contingencies.

Mr. Robinson A motion, please.

Mr. Robinson Dr. Berliner.

Mr. Robinson Second, Mr. Thomas.

Ms. Glock Open Door Family Medical Center, Inc is a voluntary not for profit Article 28 Diagnostic and Treatment Center, a federally qualified health center. They are requesting approval to renovate existing space in Ossining and certify an extension clinic to be located at 2 Church Street in Ossining. The existing space is at 165 Main Street. Open Door provides primary care, medical specialties such as behavioral health and dental services. The new extension clinic will be part of Open Doors, Family Medical Center, Ossining and Primary Care, and their health center will focus mainly on women's health, podiatry and optometry. The primary service area is Ossining and Croton on Hudson. They cover many zip codes which are within a medically underserved area. Open Door is constrained by the current conditions and its current site. This project will expand the clinical space to bring the building up to current codes. That with another CON that they have filed, which will create a new diagnostic and treatment center iis going to create a medical campus. The applicant is projecting about 56, almost 57% Medicaid and charity care at 2%. The department is recommending approval with conditions and contingencies.

Mr. Robinson Thank you.

Mr. Robinson Questions from the committee or the council members.

Dr. Soffel I'm sorry. It's not a question. It's a comment. As somebody who's worked in the consumer advocacy world for a long, long time, especially around Medicaid issues. I just want to say I am delighted to see you expanding access to dental care because it is a huge, huge problem. I am really happy to see that people are responding to a real unmet need in communities across New York State. Kudos.

Mr. Robinson Well-said.

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

Mr. Robinson I'll call the question.

Mr. Robinson All in favor?

Mr. Robinson Any opposed?

Mr. Robinson Motion carries.

Mr. Robinson Thank you.

Mr. Robinson Another ambulatory surgery application, noting a conflict and recusal by Dr. Lim who's leaving the room. Application 2311161B, Queens Endovascular Center, LLC in Queens County. This is to establish and construct a single specialty ambulatory surgery diagnostic and treatment center for vascular access at 30/30 Northern Boulevard on the fifth floor in Long Island City. The department is recommending approval with conditions and contingencies with the expiration of the operating certificate five years from the date of issuance.

Mr. Robinson May I have a motion?

Mr. Robinson Dr. Torres.

Mr. Robinson May I have a second?

Mr. Robinson Mr. Thomas.

Ms. Glock Queen's Endovascular Center request approval to establish and construct a single specialty. Article 28 Ambulatory Surgery Diagnostic and Treatment Center. It's an ambulatory surgery center in leased space in Long Island City, Queens County. The center will specialize in providing endovascular procedures to patients with end stage renal disease. The sole managing member of Queens Endovascular you could see in the exhibit are Dr. Mobley, who's board certified in interventional diagnostic radiology, will be the Medical Director, and there'll be six physicians who will perform the proposed ESRD. The applicant is proposing Medicaid, a 10% charity care at almost 4. These are based on the current practices of the participating surgeons. Based upon the department's review, we are recommending approval with conditions and contingencies with an expiration of the operating certificate five years from the date of issuance.

Mr. Robinson Thank you.

Mr. Robinson Questions.

Mr. Robinson Ms. Monroe.

Ms. Monroe I understand what dialysis is. Is endovascular go beyond dialysis two different kinds of treatment?

Mr. Robinson It's to establish the port so that you can do dialysis. It's the surgical procedure that sets it up.

Ms. Monroe Thank you.

Mr. Robinson Yep.

Mr. Robinson Other questions?

Mr. Robinson Applicant questions only.

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

Mr. Robinson I'll call the question.

Mr. Robinson All in favor?

Mr. Robinson Any opposed?

Mr. Robinson Motion carries.

Mr. Robinson Thank you.

Mr. Robinson Ask Dr. Lim to return, please.

Mr. Robinson Application 231233, Buffalo Surgery Center, LLC in Erie County. This is a transfer of 24% ownership interest from existing members to six new members. Department is recommending approval with conditions with an expiration of the operating certificate three years from the date of issuance.

Mr. Robinson May I have a motion?

Mr. Robinson Thank you, Dr. Berliner.

Mr. Robinson Second, Dr. Torres.

Ms. Glock Buffalo Surgery Centers an existing Article 28 Ambulatory Surgery Center in Amherst, Erie County. This application seeks approval to transfer 24% ownership interest from existing members to six new members. The CON is being submitted for a full review as more than 25% ownership interest will have been transferred in the past five years, which necessitated it coming for review. Upon approval twenty-five members will each have a 4% interest. There are no proposed changes in services or locations. The department is recommending approval with conditions and contingencies with an expiration of the operating certificate three years from the date of issuance.

Mr. Robinson Thank you.

Mr. Robinson Questions, please.

Mr. Robinson None from the committee or the counsel.

Mr. Robinson I don't see an applicant here.

Mr. Robinson Is there anyone from the public wishing to speak on this application?

Mr. Robinson I'll call the question.

Mr. Robinson All in favor?

Mr. Robinson Any opposed?

Mr. Robinson Motion carries.

Mr. Robinson Thank you.

Mr. Robinson Application 221185E, Citywide Health Facility Inc in Kings County. This is to transfer 100% of shareholder interest from four withdrawing shareholders to two new shareholders. Department recommending approval with conditions and contingencies.

Mr. Robinson Motion by Dr. Berliner.

Mr. Robinson Second, Dr. Torres.

Ms. Glock Citywide Health Facility is an existing New York corporation. They're requesting approval to transfer 100% of shareholder interest in the Article 28 DTC from four withdrawing members to two new members. They do provide radiology services at the main site. They have an extension clinic also in Brooklyn. This application is not proposing to add or change any services. You can see the ownership interest in the operations before and after the requested change in the exhibit. The current medical director will continue to serve as the medical director. The department is recommending approval with conditions and contingencies.

Mr. Robinson Questions, please.

Mr. Robinson Applicant questions only.

Mr. Robinson Anybody from the public wishing to speak?

Mr. Robinson All in favor?

Mr. Robinson Any opposed?

Mr. Robinson Motion carries.

Mr. Robinson Thank you.

Mr. Robinson The following application has been deferred at the applicant's request. This is 221153B, Careful MD Beacon Inc in Dutchess County. More to come on that I assume.

Mr. Robinson We'll call application 231113E, WNY Medical Management in Erie County. This too is a transfer of ownership 16.67% ownership interest from one withdrawing member to one new member. Department is recommending approval with conditions with an expiration of the operating certificate three years from the date of issuance.

Mr. Robinson A motion, please.

Mr. Robinson Thank you, Dr. Torres.

Mr. Robinson Second, Dr. Berliner.

Mr. Robinson Ms. Glock.

Ms. Glock This application seeks approval to transfer 16.67 membership interest from one existing member to a proposed new member. This is an existing Article 28 ambulatory surgery center multi-specialty ASC, located in Erie County. You can see the proposed membership change in the exhibit. Based upon our review of character and competence, financial feasibility and public need. There is no need review per public health law. We are recommending approval with conditions and contingencies with an expiration of the operating certificate three years from the date of issuance.

Mr. Robinson Questions from the committee or the council.

Mr. Robinson Anybody from the public wishing to speak on the application?

Mr. Robinson I'll call the question.

Mr. Robinson All in favor?

Mr. Robinson Any opposed?

Mr. Robinson Motion carries.

Mr. Robinson Thank you.

Mr. Robinson 231208B, Bronx Community Health Network Inc in Bronx County. This is to establish and construct a new diagnostic and treatment center at 3763 White Plains Road in the Bronx, and also to certify a mobile van extension clinic to be parked at 3676 White Plains Road in the Bronx. This, by the way, amends and supersedes a previous application CON number 2212219. Department recommends approval with conditions and contingencies.

Mr. Robinson Motioned by Mr. Thomas.

Mr. Robinson Second by Dr. Berliner.

Mr. Robinson Ms. Glock.

Ms. Glock Bronx Community Health Network is an existing not for profit, community-based organization and a federally qualified health care health center. They are requesting approval to establish and construct a new Article 28 Diagnostic and Treatment Center. This proposed center will have two sites, the main site on White Plains Road in the Bronx, which will provide primary medical care, dental and behavioral health services. They'll also have a second site, which will be a mobile van extension clinic, which will be parked overnight in a secure parking area on White Plains Road. The Mobile Van Extension Clinic will provide primary medical and dental services. As stated, this CON is actually an amendment to a previous CON project which was approved, which was precipitated by a change in the Chief Executive Officer, a change in the membership of the Board of Directors, as well as changes to the main site architectural plans and total project costs. The changes to the architectural plan include an increase in the number of exam rooms from eight to twelve and an increase in the number of dental chairs from three to four. The primary service area is in the Williamsburg neighborhood in the Bronx, extending out to North Bay, Chester and Pelham Gardens. This is a health professional shortage area for

primary care and dental, also a medically underserved area. They are projecting 58% Medicaid, 7% charity care. We are recommending approval with conditions and contingencies.

Mr. Robinson Thank you very much.

Mr. Robinson Questions, please.

Mr. Robinson Dr. Bennett.

Dr. Bennett I don't know if the applicants here, but it's more of a comment and a question that out of interest. Dental care is a huge problem. In the Capital Region here is the largest Medicaid managed care payer in Albany County, I mean getting dentists is really hard. I don't know. I just want to say thanks for doing this. We need more people doing this. Just tell me a little bit about the dental services that you're going to provide.

Ms. Akbar Aqeelah Akbar, Strategic Initiatives Administrator, Bronx Community Health Network. We have determined that, as you say, dental care is extremely necessary in our communities. One of the reasons why we amended the CON is because we noticed that there was an extensive need. We were able to modify our architectural plans, include an additional dental laboratory. We anticipate that we will be serving adults and children pediatrics as well for dental care.

Dr. Bennett I mean, where'd you get the dentists?

Ms. Akbar Well, actually, it's so funny. Right across the street there was a dental practice. As soon as she noticed that we were opening up across the street she immediately came to me and she said, I'd like to have space in your building.

Dr. Bennett She's willing to do that population. We have a really hard time. We just had a dental clinic here in Albany shut down. It had been run by St Peter's Hospital and they just shut it down. We're really struggling.

Ms. Akbar We even modified our mobile health unit so that we could serve dental care.

Dr. Bennett Well, it's great. Congratulations.

Ms. Akbar Thank you.

Dr. Bennett Thank you.

Mr. Robinson I think the rest of the council committee certainly echoes Dr. Bennett's comments with regard to providing more access for dental services. It's terrific.

Mr. Robinson Dr. Torres

Dr. Torres Could you confirm the address again?

Ms. Akbar 3763 White Plains Road.

Dr. Torres Are you focusing also on the older adult population?

Ms. Akbar Yes, indeed we are. As we did our needs assessment, one of the things that the older population told us is that they wanted a space where they could get full service care, so medical, dental, pharmaceutical, plus we anticipate that we'll be able to provide some community services as well. Mental health services will be able to... Our basement can accommodate nutrition, dietary presentations. We intend to be sort of a hub for the community.

Dr. Torres This is a group of older adults at 3377 White Plains Road that it's in great need of these services. It's wonderful that a resource is coming right next to them.

Ms. Akbar Thank you.

Mr. Robinson I think we can continue with the accolades in just a moment.

Mr. Robinson Is there any other questions of the council?

Mr. Robinson Thank you for coming up.

Mr. Robinson Is there anyone from the public that wishes to speak on this application?

Mr. Robinson Just underscoring the fact that projects like this, which really address significant community need, really very important community need. It's just wonderful to see these applications coming up and being able to hear about them and hopefully move them forward so that they can be implemented. Thank you very much.

Mr. Robinson I'm going to call the question now.

Mr. Robinson All in favor?

Mr. Robinson Any opposed?

Mr. Robinson Motion carries.

Mr. Robinson Thank you.

Mr. Robinson 231218B, Moses Health Center in Bronx County. This is to establish and construct a new diagnostic and treatment center at 871 Westchester Avenue in the Bronx. Department is recommending approval with conditions and contingencies.

Mr. Robinson A motion, please.

Mr. Robinson Dr. Berliner.

Mr. Robinson A second by Mr. Thomas.

Mr. Robinson Ms. Glock.

Ms. Glock This application is requesting approval to establishing construct a new diagnostic treatment center in the Bronx. The center will provide comprehensive primary care and specialty services, and upon approval of the application, the site will be known as Moses Health Center. The proposed operators are listed in your exhibit. The proposed facility will be in a medically underserved area and in a health professional shortage area

for primary care, dental health and mental health. Projecting 57% Medicaid and charity care 2%. The department is recommending approval with conditions and contingencies.

Mr. Robinson Questions, please.

Dr. Soffel Question for the applicant about the hours of operation.

Mr. Robinson Could we ask the applicant to come forward, please? Introductions, please, and as close to the mic as you can get. The red light is on.

Mr. Shapiro Bob Shapiro, consultant to the applicant.

Dr. Soffel Good afternoon. My question is, given that you are hoping to open a diagnostic and treatment center in a medically underserved area, why was there any consideration of extended hours and weekend hours so that there is in fact a significant improvement in access to services in that community?

Mr. Shapiro Clearly, the hours as proposed are the startup hours, and we will be addressing the needs as they occur to go evening hours and weekends.

Mr. Robinson Other questions?

Dr. Bennett I have a question of the applicant.

Dr. Bennett I don't know, maybe this is a stupid question. I created a lot of medical practices in the first part of my career before I got into the health plan world. I don't know. This looks like a medical practice to me. What are you going to do differently that makes it a diagnostic and treatment center? This is an LLC, right? It's not in Article 28, right?

Mr. Robinson No, it is an article 28.

Dr. Bennett Oh, it is.

Dr. Bennett What are you going to do different than just a medical practice?

Applicant Well, basically it's a comprehensive approach with multispecialty working in addressing the needs of the community, working with the local hospitals to make sure that the appropriate specialists coming into the center to create a holistic, seamless level of care.

Dr. Bennett You can do that in a medical practice, right?

Applicant The owners, you know, in this situation is one physician and two businesspeople. The only way to have a medical practice in New York State is to be in Article 28.

Dr. Bennett To have the business people be involved in it?

Applicant In the ownership, yes.

Dr. Bennett In the ownership, it just clicked. Because they want the businesspeople to participate in the ownership. It can't be a PLLC. You just connected the dots.

Mr. Robinson Other questions for the applicant or the department.

Mr. Robinson Thank you very much.

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

Mr. Robinson I'll call the question.

Mr. Robinson All in favor?

Mr. Robinson Any opposed?

Mr. Robinson Motion carries.

Mr. Robinson Thank you very much.

Mr. Robinson Application 231265B, GMZY Health Management in Orange County. This is to establish and construct a new diagnostic treatment and treatment center at 745 State Route 17M in Monroe, New York, not Monroe County. I withdraw the last comments. Let me go back to J Health. I put a checkmark next to that too soon.

Mr. Robinson This is for J Health Inc application 231223B in Queens County, establish and construct a new diagnostic and treatment center to be constructed at 107-15 71st Avenue in Forest Hills. Here the department recommends approval with conditions and contingencies.

Mr. Robinson Motion, please.

Mr. Robinson Dr. Berliner.

Mr. Robinson Second, Dr. Torres.

Mr. Robinson Ms. Glock.

Mr. Robinson J Health is a not-for-profit corporation seeks to establish and construct a new Article 28 Diagnostic Treatment Center in Forest Hills, Queens County, to provide primary care, behavioral health and medical specialty services. You can see that we did character and competence on the CEO and the board members in your exhibit. They are projecting on Medicaid utilization at 41% with charity care at 2. We are recommending approval with conditions and contingencies.

Mr. Robinson Thank you.

Mr. Robinson Questions from the committee or counsel?

Mr. Robinson Ms. Monroe.

Ms. Monroe Shelly, are they establishing a second site? Do they have a site now and they're keeping that site or moving it into this site? I don't quite understand. I appreciate that it's a not-for-profit corporation, but are they operating today somewhere else?

Ms. Glock We don't see that indicated in the exhibit. I see it as they're establishing a new DTC with twenty exam rooms. I do not see a reference to a current facility, but I would defer to the applicant.

Ms. Monroe My question is, because what is their track record, if you would?

Mr. Robinson Introductions, please.

Mr. Cicero I'm Frank Cicero, a consultant representing the applicant. This is Moshe Schwartz, who is the CEO of the Applicant. Ms. Monroe, it's an existing, not for profit corporation. It exists today. They're not providing services yet. They're proposing a new diagnostic and treatment center as a not for profit. That, as it becomes operational after six months will apply to become a federally qualified health center. That is their goal.

Ms. Monroe It's a brand-new operation.

Mr. Cicero Yes, it will be.

Ms. Monroe Okay.

Ms. Monroe Are there other FQHCs in the neighborhood that would be I'll use the word competing?

Mr. Cicero I don't believe so. There's been no objection to the application. There's been no comments received as far as I know, by the department. I can let Mr. Schwartz speak to that, perhaps.

Mr. Schwartz The only FQHCs that are in the area are actually dialysis centers. Our plan is really to focus on the prevention of management and prevention of diabetes, obesity related illness in order to really not need as much dialysis. I certainly hope they won't object to us being there to provide care for these patients.

Ms. Monroe I was thinking less about dialysis centers and more about other federally qualified health centers.

Mr. Schwartz There are none.

Ms. Monroe Thank you.

Mr. Robinson Thank you.

Mr. Robinson Questions.

Mr. Robinson Any other comments from the applicant?

Mr. Schwartz No, thank you.

Mr. Robinson Thank you very much.

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

Mr. Robinson I'll call the question.

Mr. Robinson All in favor?

Mr. Robinson Any opposed?

Mr. Robinson Motion carries.

Mr. Robinson 231265B, GMZY Health Management in Orange County. This is to establish and construct a new diagnostic and treatment center at 745 State Route 17M in Monroe, Orange County, New York. The department is recommending approval with conditions and contingencies.

Mr. Robinson Motion, please.

Mr. Robinson Dr. Berliner.

Mr. Robinson Second, Dr. Torres.

Ms. Glock GMZY Health Management LLC is seeking approval to establish and construct an Article 28 diagnostic and treatment center to provide primary care laboratory services and pulmonology. This will be located in Monroe, New York, in a medical office building and leased space. You can see the proposed membership and their ownership percentages in the exhibit. The proposed primary service area is Monroe, as stated in Orange County. Specifically, the applicant is expecting a large percentage of their patient volume to come from the Hasidic community. This location is a health professional shortage area for primary care. They are projecting 57% Medicaid, 4% charity care. We are recommending approval with conditions and contingencies.

Mr. Robinson Thank you.

Mr. Robinson Questions, please.

Mr. Robinson Anybody else from the public wishing to speak on this application?

Mr. Robinson All in favor?

Mr. Robinson Any opposed?

Mr. Robinson Motion carries.

Mr. Robinson Thank you.

Mr. Robinson Now, into dialysis. Application 211108E, Empress Dialysis LLC doing business as Brooklyn Community Dialysis in Kings County. Establish Empress Dialysis LLC as the new operator of Brooklyn Community Dialysis, a twenty-four-station dialysis center currently operating as an extension clinic of Bronx Dialysis Center. Department recommending approval with conditions and contingencies.

Mr. Robinson Motion, please.

Mr. Robinson Dr. Torres.

Mr. Robinson Second, Dr. Berliner.

Ms. Glock Empress Dialysis is requesting approval to be established as the new operator of Brooklyn Community Dialysis, which is an Article 28 Diagnostic and Treatment Center in Brooklyn. This is an extension Clinic of Bronx Dialysis Center, currently operated by Knickerbocker Dialysis. The facility is a twenty-four-station chronic renal dialysis center, also certified to provide home dialysis, in-home peritoneal dialysis, training and support. There'll be no change in services provided. Empress will continue to operate the facility under the name of Brooklyn Community Dialysis. You can see in the exhibit that currently it's operated by Knickerbocker Dialysis Inc at 100%. The proposed membership entity will dilute Knickerbocker Dialysis to an 80% membership interest, and they will bring in an LLC of four physicians at 20%. DaVita of New York, Inc, owned by DaVita Inc, is the sole owner of shares and parent of Knickerbocker Dialysis. The medical director will continue. There'll be no change in the dialysis stations or the home training and support services. The department is recommending approval with conditions and contingencies.

Mr. Robinson Thank you.

Mr. Robinson Questions.

Mr. Robinson Questions only.

Mr. Robinson Anybody from the public on this application?

Mr. Robinson All in favor?

Mr. Robinson Any opposed?

Mr. Robinson The motion carries.

Mr. Robinson Application 211109E, Latsch Dialysis LLC doing business as Westchester Home Training in Westchester County. This is to establish Latsch Dialysis LLC as the new operator of Westchester Home Training, a home training and support only dialysis center currently operating as an extension Clinic of Bronx Dialysis Center. The department is recommending approval with conditions and contingencies.

Mr. Robinson A motion.

Mr. Robinson Thank you, Mr. Thomas.

Mr. Robinson And second by Dr. Berliner.

Ms. Glock Latsch Dialysis is requesting approval to be established as the new operator of Westchester Home Training. This is an Article 28 diagnostic treatment center in Yonkers. It's an extension Clinic of Bronx Dialysis Center operated by Knickerbocker Dialysis currently. They are certified to provide home hemodialysis and peritoneal dialysis training and support services only. There will be no change in services as a result of this application. I can see in the exhibit the ownership change. Currently it's owned by Knickerbocker Dialysis Inc. The proposed membership will dilute that membership to 70%, bringing in a new LLC at 30% comprised of four physicians. DaVita is the sole owner of Knickerbocker Dialysis Inc. The department is recommending approval with conditions and contingencies.

Mr. Robinson Thank you.

Mr. Robinson Questions.

Dr. Soffel I have a question that's not so much specific, but it's maybe a little bit broader. Does New York have a methodology and needs methodology for determining the need for dialysis services and or for home dialysis services?

Ms. Glock We do have a need methodology for dialysis stations, which is not based in regulation. I believe it's something that in the past has taken up by policy. It's interesting that you should bring that up, Dr. Soffel, because at this point, those numbers, those projections are outdated and need to be updated. COVID put a damper on being able to get a lot of that data. That's work that the department will need to undertake if the committee so wishes to continue with a need methodology that's not set in regulation. In terms of the home training, I mean, that's something that CMS is pushing everyone to do. There is no need methodology around the home training piece.

Dr. Soffel I guess that the answer to my next question is you don't know. Is New York currently underserved in terms of dialysis services?

Ms. Glock I think that some sections, some specific areas of New York, you know, there is a need for additional end stage renal dialysis, but it really depends on the area and the population. Of course, you're going to see a much larger population in need for the service in Downstate, in the populated areas.

Mr. Kraut The last time we ran numbers, I think was in 2021. It was a few hundred. There's a deficit of a few hundred given the ageing of the population, access to transplant. It varies by county because we do have a concentration of about 264 dialysis centers or so in the state.

Ms. Glock Something like that.

Mr. Kraut That includes both hospital based and freestanding and some are now in SNF, RHCF facilities as well.

Ms. Glock We're also seeing dialysis tend to be set up in skilled nursing facilities.

Ms. Monroe Is there a plan to update that methodology?

Ms. Glock There is a plan to actually, as part of our CON streamlining to undertake that topic with the committee and council.

Ms. Monroe It's just striking because in the earlier meeting of the public health agenda, prevention of diabetes and other related illnesses really takes a priority and obviously has an impact analysis.

Mr. Kraut I would also tell you if you look back historically where we have done need based or population need based methodologies, we have never been right. I mean, and those of you of my vintage CAT scanners and MRIs.

Dr. Bennett Cath labs.

Mr. Kraut Cath labs.

Mr. Kraut Open heart surgery programs.

Ms. Monroe Are you suggesting we don't try to update?

Mr. Kraut No, I'm just saying you should, but I'm not sure it requires a need method.

Ms. Monroe That's what I mean.

Mr. Kraut We need dynamic planning, which I'm not going to spend and repeat a planning committee. It has to be a little more dynamic. I think the streamlining is to permit the state to be more agile in responding to identified needs and encourage development or restrict it. It goes both ways. Yeah. That was a little history. Footnote of history.

Mr. Robinson Good discussion. Thank you for raising that.

Mr. Robinson Other questions for this particular application?

Mr. Robinson All in favor?

Mr. Robinson Any opposed?

Mr. Robinson Motion carries.

Mr. Robinson Thank you.

Mr. Robinson This is now moving on to certified home health agencies.

Mr. Robinson Mr. Furnish, are you here somewhere?

Mr. Furnish I'm over here in the hinterlands.

Mr. Robinson I'm telling you, the distance here, I mean.

Mr. Robinson We're glad to know you're there. We'll send smoke signals when we're ready.

Mr. Furnish Thank you.

Mr. Robinson 231104C, Health Quest Home Care Inc, a certified agency in Dutchess County acquires the Hudson Valley Certified Home Health Agency, currently operated by Hudson Valley Care Partners, LLC and add Ulster County to the Health Quest Home Care's Service area. Here, the department is recommending approval with a condition.

Mr. Robinson Can I have a motion?

Mr. Robinson Thank you, Dr. Torres.

Mr. Robinson Can I have a second?

Mr. Robinson Mr. Thomas.

Mr. Robinson Go ahead, Mr. Furnish.

Mr. Furnish Yes.

Mr. Furnish Just before I start, this is a construction application, not an establishment application, just to make that clear. Health Quest Systems doing business as Home Health Health Care a not for profit seeks approval to acquire and merge the assets of the Hudson Valley Care Partners Certified Home Health Care Agency or a CHA. They currently serve Dutchess County and Hudson Valley Health Partners, which is the merged entity currently serves Ulster. Upon approval, the Hudson Valley Health Care Partners will close, and Health Quest Home Care will be the surviving CHA serving both Dutchess and Ulster Counties. Projected total is 34,712 visits in year one, up to 44,900 in year three. They will continue to provide home health aide services, medical social services, medical supply and equipment, nursing, nutritional, occupational therapy, physical therapy, speech pathology and will add maternal child health visits and infusion therapies to their mix. Their network includes the Vassar Brothers Medical Center and the Northern Dutchess Hospital in Dutchess County and Putnam County. While they will be their primary sources of referral, they plan to market its services to hospitals in surrounding counties that discharge patients residing in Ulster County. Their character and competence are met and their financial needs were found acceptable. As a result, we request conditional approval.

Mr. Robinson Thank you.

Mr. Robinson Questions.

Mr. Robinson Anybody from the public on this application?

Mr. Robinson I'll call the question.

Mr. Robinson All in favor?

Mr. Robinson Any opposed?

Mr. Robinson Motion carries.

Mr. Robinson Thank you.

Mr. Robinson This is an application for establishment also for a certified home health agency. 231234E, Visiting Nurse Service of Ithaca and Tompkins County Inc and Tompkins County transferring 100% ownership interest to a new not for profit corporate member. Department is recommending approval with a condition.

Mr. Robinson Motion, please.

Mr. Robinson Dr. Berliner.

Mr. Robinson Second, Mr. Thomas.

Mr. Robinson Mr. Furnish.

Mr. Furnish This is Mark Furnish again from the department. Cayuga Health Systems, which is a not for profit, seeks approval to be established as a sole member and active parent of Visiting Nurse Services of Ithaca and Tompkins County. The Visiting Nurse Services will remain as separate Article 36 CHA. This just changes to the sole member and active parent. No change in services due to the change in the governing structure. Need is met. Their project projected volume is 70,566 visits in year one and up to 127,324 in year three. Their current network consists of two hospitals Cayuga Medical Center and Schuyler Hospital. Their character and competencies is met. There are no project's costs associated with this transaction or application.

Mr. Robinson Thank you.

Mr. Robinson Questions from the committee or council members.

Mr. Robinson Anybody from the public on this application?

Mr. Robinson I'll call the question.

Mr. Robinson All in favor?

Mr. Robinson Any opposed?

Mr. Robinson Motion carries.

Mr. Robinson Thank you.

Mr. Robinson Noting that application 231044E, Sunset SNF Operations has been deferred at the department's request, so that is off the list. We move on to applications for home health agency licensure. These are establishment and changes of ownership.

Mr. Robinson Application 222102E, NAE Edison LLC doing business as Edison Home Health Care Concierge Living with a geographic service area that includes Allegheny, Bronx, Cattaraugus, Chautauqua, Dutchess, Erie, Genesee, Kings, Monroe, Nassau, New York, Niagara, Orange, Orleans, Putnam, Queens, Richmond, Rockland, Suffolk, Sullivan, Ulster, Westchester and Wyoming counties. Transferring proposing the transfer of 1 or 2% ownership interest to a new member LLC. Department is recommending approval with conditions.

Mr. Robinson Motion, please.

Mr. Robinson Dr. Torres.

Mr. Robinson Thank you.

Mr. Robinson A second, please.

Mr. Robinson Thank you. Dr. Bennett.

Mr. Robinson Mr. Furnish.

Mr. Furnish Yes.

Mr. Furnish This is the third cycle in a row where we've had since the lifting of the moratorium. The past two weeks of cycles I've given you an overview of what the new methodology is. This is a transfer of ownership. It's got the transfer of ownership as twenty-five or more patients in all the counties listed. Therefore, it meets the need. The character and competence is met. As you can see in that organizational chart, this is a national company coming in with a very large chain organizational chart. As a result of that, because it would be hundreds and hundreds of people we'd have to review. What we did was we limited it to the great grandparent status like we do with Article 28. Everybody else has to sign what's called an affidavit of no control, saying that they will not have any control over the Article 36. The reason why in the past we've reviewed all the way up the chain was because of that controlling language in Article 36. What we're going to do going forward is looking on a case-by-case basis to determine where control ends. When we make that determination, we'll make the applicant sign at the higher levels an affidavit of no control, saying that any membership change has to come back to us for approval. However, they don't have any control over the Article 36 and their financial summary is met as well. With that, we recommend approval.

Mr. Robinson Thank you.

Mr. Robinson Mr. Kraut.

Mr. Kraut Yes.

Mr. Kraut Mark, this is probably one of the more complicated structures. They've signed affidavits of no control but if there's any change in any of the other entities, do they have to come back? What are we approving?

Mr. Furnish You're approving the Article 36 up to the great grandparent level.

Mr. Kraut We're talking to HHAH Holdings LLC. We're up to four levels.

Mr. Furnish Correct.

Mr. Kraut Before we get the big line and we have the multiple entities. I know who's not in control. Who do we hold accountable if in the event something happens? Not the corporation, the individual who we are approving for establishment as the owner operator and maybe, you know, because I want to affirm that on the record as who is individually responsible for the activities of this entity in case there's an issue?

Mr. Furnish There are quite a few names. Do you want me to read them?

Mr. Kraut Every one of these individuals are co equally responsible?

Mr. Furnish Correct, just like every other establishment application you do. Everyone's on the hook.

Mr. Kraut I mean, you don't have to read it because it's in there. I'm just establishing a record in case there's an action.

Mr. Furnish These are the people that we listed are on the hook for anything that goes wrong with the Article 36.

Mr. Kraut And they're personally...

Mr. Furnish Personally.

Mr. Kraut If there's any change to those individuals that has to come back as a transfer.

Mr. Furnish Correct.

Mr. Kraut Okay.

Mr. Kraut Thank you.

Mr. Robinson We really thank you for that clarification. That's one of the most confusing charts that we've had to run across.

Mr. Kraut It's not an unfortunate it's the reality. We're going to see complicated structures because of access to capital, the role of private equity. Aside from the hospitals and most of health care in our state is for profit. They have these illegal structures, not for profit. We have a corporate law. Not to suggest that anything's wrong about this. It's just it's complicated. We need to be clear in this room what we're approving. That's all. I mean, I'm not speaking against the structure. I just want to know what I'm approving.

Mr. Robinson Ms. Monroe.

Ms. Monroe I need a little bit more clarity on that. You're saying there are about... And I didn't count them, but nineteen or twenty people who are individually accountable for this Article 36. Is that correct?

Mr. Kraut Correct.

Ms. Monroe There's any change of any of them. If I go somewhere else, it has to come back.

Mr. Furnish If they add new members they have to come back. People have to be established.

Ms. Monroe Here's a guy, Robert McCourt. He's the CFO. If he leaves and someone else takes his place, will we need to look at the application again?

Mr. Furnish If they replace him, yes. Just like you would any other Article 36.

Ms. Monroe There's a lot of people. We could be here often, but I just wanted to understand that.

Mr. Robinson That's why they pay you the big bucks.

Mr. Furnish You just got to treat it just like you would any other Article 36, any Article 28, any kind of membership change. You have to do that.

Ms. Monroe I don't want to prolong this, but let me prolong it a bit. They're going to run in New York State, and something happens to a patient enrolled in the Erie County. Who is accountable for that injury to the patient or whatever might have happened?

Mr. Furnish The Article 36, which has their names on the operating certificate.

Ms. Monroe They are all equally responsible for that.

Mr. Furnish Correct, and now if you wanted if in these large national chains that come in, if you sign an affidavit of no control, that's fine. You don't have any say in how the Article 36 looks is run. We've got them on record with the affidavit of no control stating that.

Ms. Monroe I'm just looking at who's accountability for day-to-day operations.

Mr. Furnish We're very clear on this in this instance and in any instance we bring.

Ms. Monroe I appreciate that. Thank you.

Mr. Kraut What number are we up to?

Mr. Furnish The last count was 1,420, but not including the hard work of the past three cycles.

Mr. Kraut Thank you.

Mr. Furnish Sure.

Mr. Robinson Dr. Berliner.

Mr. Kraut Here we go.

Dr. Berliner Just a question. What is the slash concierge living mean imply? How does it fit into the home care?

Mr. Robinson Mr. Furnish.

Mr. Furnish If the applicants here, I'll have them answer that question.

Mr. Robinson I just want to make note of the fact that unless they just forgot to sign in, I don't see the applicants anywhere on the next set of applications.

Mr. Robinson Oh, they're here.

Mr. Robinson That's interesting.

Mr. Robinson Thank you for being here. I think you do need to sign in like we asked you to when you came into the room on the applications that are relevant to you. Thank you for being here.

Mr. Kraut Just sign after.

Applicant So sorry about that.

Mr. Robinson Please go ahead, Dr. Berliner.

Dr. Berliner I'm sorry. I was just asking what the concierge living means in relation to this application or to what it means in terms of the services you provide?

Applicant The services we provide, and you think about help at home itself. We're the largest national provider of home care and personal care in the country today. We operate in eleven states. We actually support close to 70,000 clients in those eleven states. Lucky enough, more than that to support close to 55,000 caregivers, direct care workers in those eleven states. Concierge living, I think what is meant by that is we do a great job of really taking care of people in the home and making sure that we support the caregivers at all costs. We've got a great track record of forty years of supporting caregivers and will continue to do that. Our passion is really taking care of people in the home with dignity and respect in their preferred setting.

Mr. Robinson Other questions from the committee or the council?

Mr. Robinson Anything you guys want to say other than that?

Mr. Robinson Thank you very much.

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

Mr. Robinson All in favor?

Mr. Robinson Any opposed?

Mr. Robinson Motion carries.

Mr. Robinson Thank you.

Mr. Robinson Application 222195E, Assist Care Home Health Services LLC doing business as Preferred Home Care of New York Preferred Gold. The geographic service area again pretty long; Bronx, Dutchess, Kings, Nassau, New York, Orange, Queens, Richmond, Rockland, Suffolk, Sullivan, Ulster and Westchester counties. This is transferring 100% membership interest to a new member LLC. Department is recommending approval with contingencies.

Mr. Robinson Motion, please.

Mr. Robinson Thank you, Dr. Berliner.

Mr. Robinson Second, Dr. Torres.

Mr. Robinson Mr. Furnish.

Mr. Furnish Yes.

Mr. Furnish This is the same setup as the as the last application. This is the last of the complicated corporate structures for today. In this case, HHAH Group Holding Company is requesting approval to expand its current operations into New York by acquiring Assist Homecare Health Services LLC doing business as Preferred Home Care Preferred Gold under Article 36. This group is coming in changing ownerships to this facility. They meet the need based on twenty-five or more currently serving under each county listed. The

character and competence is checked and is acceptable based on the current construct that we just discussed. The financial summary is okay. With that, we request approval.

Mr. Robinson Thank you.

Mr. Robinson You folks are the same people that are involved with this application.

Mr. Robinson Thank you.

Mr. Robinson Questions?

Mr. Robinson Dr. Berliner.

Dr. Bennett Is this just a corporate way of appealing more to paying clients the same way the concierge living is?

Mr. Furnish Correct.

Dr. Bennett Okay.

Dr. Bennett Thank you.

Mr. Robinson Was that answered?

Mr. Robinson Other questions?

Mr. Robinson Anybody from the public on this application?

Mr. Robinson I'll call the question.

Mr. Robinson All in favor?

Mr. Robinson Any opposed?

Mr. Robinson Motion carries.

Mr. Robinson I think you're done except for signing in.

Mr. Robinson Thank you very much.

Applicant Thank you.

Mr. Robinson Application 222263E, Visiting Nurses Home Care. Geographic Service Area, Albany, Clinton, Columbia, Delaware, Essex, Franklin, Fulton, Greene, Hamilton, Montgomery, Rensselaer, Saratoga, Schenectady, Schoharie, Warren and Washington counties. This establishes Albany Visiting Nurse Home Care Services Group Inc as the parent and Albany Med Health System as the grandparent. A Visiting Nurse Association of Albany Home Care Corporation. Department is recommending approval.

Mr. Robinson Motion, please.

Mr. Robinson Dr. Torres.

Mr. Robinson Thank you, Mr. Thomas, for a second.

Mr. Robinson Mr. Furnish.

Mr. Furnish Yes.

Mr. Furnish This is an establishment application to state that a certificate of need application is to establish Albany Visiting Nurse Homecare Services Group Inc as the parent and Albany Medical Center Health System as the grandparent of the Visiting Nurse Association of Albany's Home Care Corporation. It meets need because they're serving over twenty-five patients in the county listed. The character and competence were met and the financial summary is acceptable. Therefore, we request approval.

Mr. Furnish Thank you very much.

Mr. Robinson Questions?

Mr. Robinson Yes, Dr. Berliner.

Dr. Berliner Is the applicant here?

Mr. Robinson I do need to ask you to as well, if you would sign in after.

Applicant Yeah, I just did.

Mr. Robinson Oh, you just did.

Mr. Robinson Thank you so much.

Applicant Is there a question?

Mr. Robinson You have to introduce yourself.

Mr. Jones Oh, sorry. Matthew Jones. I'm general counsel for Albany Med Health System.

Dr. Berliner A lot of the counties that you want to expand to are places where of well-known shortage of health workers, particularly, you know, lower level health workers in terms of job functions. How are you going to find people to staff in all of these counties?

Mr. Jones As far as I know, there is no expansion of additional counties contemplated by this application. We'd just be continuing to operate in the counties in which we currently operate.

Dr. Berliner Are you aware if there's currently a shortage of home care workers? Are there people waiting for service that can't be met because there is a shortage of workers?

Mr. Jones Not that I'm aware of.

Mr. Robinson Any other questions of the applicant?

Mr. Robinson Thank you.

Mr. Robinson Any comments from you?

Mr. Robinson Anybody from the public wishing to speak?

Mr. Robinson I'll call the question.

Mr. Robinson All in favor?

Mr. Robinson Any opposed?

Mr. Robinson Motion carries.

Mr. Robinson Thank you very much.

Mr. Jones Thank you.

Mr. Robinson Application 231028E, Cyrus Manor Residential Center LLC doing business as Cyrus Manor Home Care. This has a geographic service area of only one county, Monroe County. Establish Cyrus Manor Residential Center LLC as the new operator of a licensed home care services agency currently operated by Shyer Senior Living LLC at 2515 Culver Road in Rochester. Department is recommending approval.

Mr. Robinson Motion, please.

Mr. Robinson Dr. Berliner.

Mr. Robinson Second, Dr. Torres.

Mr. Robinson Mr. Furnish.

Mr. Furnish Yes.

Mr. Furnish This is a application for an ALP, an assisted living program. It's solely associated with this one facility. It's to ensure that home care services can be done through the proper channels, which is in Article 36, which is why it meets the need in this case, because it is associated with this single help assisted living program. The character and competence is met and financial feasibility is met as well. Therefore, the department recommends approval.

Mr. Robinson Thank you.

Mr. Robinson Questions?

Mr. Robinson Applicant questions only.

Mr. Robinson Anybody from the public?

Mr. Robinson All in favor?

Mr. Robinson Any opposed?

Mr. Robinson Mr. Thomas, you just left the room.

Mr. Robinson Thank you.

Mr. Robinson We are moving to certificates. Do I have to run through these individually? Can I batch them?

Mr. Robinson Here we go. This is a certificate for dissolution. Fultz Home in Herkimer County requests consent for filing to dissolve. Department is recommending approval.

Mr. Robinson May I have a motion?

Mr. Robinson Second?

Mr. Robinson Thank you, Dr. Torres, Mr. Thomas.

Mr. Robinson I assume nothing to say about this.

Mr. Robinson All in favor?

Mr. Robinson Any opposed?

Mr. Robinson Motion carries.

Mr. Robinson Certificate of amendment to the certificate of incorporation for St Luke's Health Care in Oneida County changes its purpose. Department is recommending approval.

Mr. Robinson Motion, please.

Mr. Robinson Dr. Berliner and Dr. Torres.

Mr. Robinson No questions.

Mr. Robinson All in favor?

All Aye.

Mr. Robinson Any opposed?

Mr. Robinson Motion carries.

Mr. Robinson Long Island FQHC Inc in Nassau County is a corporate name change. Department's recommending approval.

Mr. Robinson Motion, please.

Mr. Robinson Dr. Berliner.

Mr. Robinson Second, Mr. Thomas.

Mr. Robinson Questions.

Mr. Robinson I'll call the question.

Mr. Robinson All in favor?

Mr. Robinson Any opposed?

Mr. Robinson Motion carries.

Mr. Robinson Finally, Saint Elizabeth Medical Center in Oneida County changing its purposes as well. Department recommends approval.

Mr. Robinson May I have a motion?

Mr. Robinson Thank you, Dr. Berliner.

Mr. Robinson A final second, Mr. Thomas.

Dr. Bennett Can I just ask a question about that?

Mr. Robinson You may.

Dr. Bennett I'm just curious what they're changing their purpose. What are they changing it from and to? I'm just curious.

Mr. DiCocco Yes, this is Vince DiCocco from the Department of Health. The corporate purpose is changing because they're actually merging through a transformation grant. They're going to one campus combining the two facilities.

Dr. Bennett Why does that change their purpose? Maybe I don't have the right understanding of the legal definition of purpose.

Mr. DiCocco Because Saint Elizabeth is now leaving the campus. They're going to merge into one operating certificate in their new property.

Dr. Bennett That's a change in purpose. I mean, you're still going to be taking care of people.

Mr. DiCocco Yes, but they both are operating under this single entity.

Dr. Bennett Right.

Mr. DiCocco They're changing their legal names. They're changing the member constitution.

Dr. Bennett That's fine.

Mr. Robinson I think we have to call that question still on the motion.

Mr. Robinson All in favor?

Mr. Robinson Any opposed?

Mr. Robinson Motion carries.

Mr. Robinson That indeed is the last item on our agenda. I will turn it over to Mr. Kraut if he has any announcements to make.

Mr. Kraut Yeah, just to remind everybody that the full council meeting will be on Thursday, September 7th. Just, as usual, we need to have a full quorum there. It's going to be a pretty busy agenda. Enjoy the last few days of Summer.

Mr. Robinson We are adjourned.

Mr. Robinson Thank you, everybody, very much.