

New York City Economic Development Corporation

New York City Council Oversight Hearing:
Fiscal Year 2018 Executive Budget Testimony
James Patchett, President
May 9, 2017

Good afternoon Chairs Ferreras-Copeland, Garodnick, and Cornegy, and members of the Committees on Finance, Economic Development, and Small Business.

My name is James Patchett and I serve as President of the New York City Economic Development Corporation (“NYCEDC”). I am pleased to join Department of Small Business Services Commissioner Gregg Bishop in testifying before you today, as well as my incredible staff, who will join me shortly to answer any questions you might have.

I would like to take this opportunity to speak briefly about some of the larger capital allocations in NYCEDC’s FY18 Executive Budget, with a focus on a few items that are new since we last met. But first, I would like to give updates on some of the items I discussed in my Preliminary Budget Hearing earlier this year.

After two years of planning and imagining, last week NYCEDC launched the first phase of our new ferry service. This rollout included a new route from the Rockaways to Pier 11 Wall Street, and officially integrated the existing East River route into our new ferry system – now for just \$2.75 per ride. So far the public response has been incredible, with more than 49,000 riders in the first week. In June, we will debut our South Brooklyn route and later this summer the Astoria route. In 2018, we will launch the Lower East Side and the Soundview Routes.

When complete, the full NYC Ferry network will consist of 20 vessels and landings as well as a homeport facility at the Brooklyn Navy Yard. In order to execute this ambitious project, we set a capital budget of \$59 million for the construction of barges, and other capital infrastructure needs. We also budgeted \$96 million for the purchase of new vessels and maintenance and upgrades to the existing East River Ferry vessels. Finally, we have allotted \$41 million for our homeport facility at the Brooklyn Navy Yard.

Last week's successful launch is a testament to the work our team has done in so many communities across the city over the past few years. We hosted over 250 outreach meetings with elected officials, federal, city and state agencies, community boards and civic organizations. We engaged second graders across the city to source creative names for our brand-new ferry boats with our vessel naming contest. At this point I am sure you have all heard about my personal favorite- Lunchbox.

In my testimony in March, I spent some time discussing the tools and industries that the City will focus on to create 100,000 well-paying jobs over the next decade. Our team has been hard at work on a detailed plan, and the methodology we will need to ensure job quality. As I have said before, we are evaluating several different strategies to create these jobs. We will continue to activate city-owned sites like the Brooklyn Army Terminal (BAT) and Bush Terminal (Bush) to grow industrial and manufacturing jobs. We are also looking for ways to invest in the jobs of the future through incentive programs that catalyze business growth and sector-based investments in promising industries like tech and life sciences.

In addition to these updates, there are a few new executive budget items that I would like to discuss.

One of our longstanding priorities at NYCEDC is improving access to our city's waterfront. We firmly believe that this mission is a critical part of our work to strengthen neighborhoods and improve New Yorkers' quality of life. That is why projects like Inwood NYC are so critical. We are ensuring the neighborhood remains affordable for working families by creating new affordable housing and reconnecting the community to the waterfront.

As you know, last month the Mayor announced the inclusion of \$100 million in the Capital budget for a section of the **Manhattan Waterfront Greenway** which will connect 53rd to 61st street. As part of that allocation, NYCEDC will undertake a \$5 million study to identify opportunities to complete the entire greenway. This investment will help close the funding gap for a critical portion of the long-imagined, contiguous 32-mile waterfront pedestrian esplanade. We anticipate that the design phase of the project will begin this year, construction will follow in 2019 and completion in 2022.

We are also making significant investments in our creative economy – including a brand new **Made in NY Campus** at Bush terminal that will provide state of the art facilities for garment manufacturing, film, and media production. We have identified \$142 million in our Executive budget for necessary upgrades to the campus including major renovations to existing and underutilized facilities, new construction and investments in utilities and circulation. We expect

that these investments will revitalize the campus and make it an attractive location for fashion manufacturers struggling with high rents in other parts of the city.

After decades of decline, we are seeing the industrial and manufacturing sector stabilize, and we are even seeing growth in some subsectors. To help spur that growth, this administration has invested over \$150 million to renovate the Brooklyn Army Terminal. To date, renovations at BAT have included public realm improvements, capital improvements, resiliency improvements, and a newly outfitted annex building specifically for food manufacturing. BAT is an important source of industrial employment for the City. As a result of our investments in the facility, we have reached 93% occupancy for the more than 3.1 million square feet of affordable, leasable space currently online. BAT has over 100 tenants that range from a chocolate factory to jewelry and furniture manufacturers – all of which employ more than 3,700 New Yorkers. To build on this success, we have \$8.5 million in our FY18 budget for elevator and boiler upgrades to continue our efforts to turn BAT into a world-class industrial campus.

Finally, we have included \$1.8 million in our FY18 budget for our CleaNYC program. This initiative removes blight from sidewalks in City's commercial corridors and Industrial Business Zones throughout New York City's five boroughs. To date, the program has successfully completed power washing nearly 1.6 million square feet of sidewalk. In order to ensure CleaNYC has access to the most efficient equipment with the most up-to-date, environmentally friendly technology, EDC is moving forward with a public RFP to source specially-designed trucks. Our FY18 allotment will allow for the purchase of 14 customized truck-mounted high pressure cleaning systems for concrete surfaces that include a water recovery & recycling

system. Once all 14 trucks are on the road, we anticipate cleaning half a million square feet per day allowing us to beautify NYC's commercial corridors and encourage even more business activity.

To conclude, in all of our efforts, we at NYCEDC remain committed to supporting equitable growth across all corners of the city. I look forward to continuing to work with all of you and keep you updated as these exciting projects evolve. Thank you all for your attention – I am happy to take any questions you have.

TESTIMONY BY
COMMISSIONER GREGG BISHOP
NEW YORK CITY
DEPARTMENT OF SMALL BUSINESS SERVICES
BEFORE
THE COMMITTEE ON FINANCE,
THE COMMITTEE ON ECONOMIC DEVELOPMENT
AND
THE COMMITTEE ON SMALL BUSINESS
OF THE
NEW YORK CITY COUNCIL
TUESDAY, MAY 9, 2017

INTRODUCTION

Good morning Chair Garodnick, Chair Cornegy, and Chair Ferreras-Copeland, and the members of the Committees on Finance, Economic Development, and Small Business. My name is Gregg Bishop and I am the Commissioner of the New York City Department of Small Business Services ("SBS"). I am pleased to join President James Patchett and my colleagues at the New York City Economic Development Corporation ("NYCEDC") to testify today. I am joined by SBS First Deputy Commissioner Jackie Mallon and my senior leadership team.

At SBS, we aim to unlock economic potential and create economic security for all New Yorkers by connecting New Yorkers to quality jobs, building stronger businesses, and fostering vibrant neighborhoods across the five boroughs. Today, I want to share an update on our efforts over the last year to strengthen the City's support for jobseekers, small businesses, and commercial corridors in neighborhoods around the city. After my testimony, I am happy to take your questions.

I will start by providing an overview of our agency budget. From there, I will outline the services made possible by this funding. SBS' FY18 Executive Budget is \$191.7 million with a headcount of 332 employees. The Executive Budget includes pass-through funding for other financial needs within City government, including: \$41.2 million for EDC, \$21.2 million for NYC & Co., and \$17.5 million for Governors Island. The remaining \$110.4 million of the FY18 Executive Budget is allocated for SBS's programs. Now, I am going to focus on how this funding supports SBS's mission.

SUPPORT FOR JOB SEEKERS:

At SBS, we help New Yorkers to find jobs by training local residents and connecting jobseekers to employers in need of talent. Through our network of 20 Workforce1 Career Centers, SBS provides recruitment expertise, industry knowledge, and skill-building workshops to match candidates to jobs. Annually we successfully connect more than **25,000** New Yorkers with quality employment and 4,000 New Yorkers with the training needed to advance their careers.

As part of our efforts to connect New Yorkers to quality jobs, SBS will administer the Mayor's Green Jobs Corps program in partnership with the Mayor's Offices of Sustainability and Climate Policy. This three-year initiative aims to train 3,000 individuals through a variety of trainings including pre-apprenticeships. We will recruit for the program through our Workforce1 Career Centers beginning in June and welcome your help with raising awareness about this opportunity.

SBS is leveraging the City's Industry Partnerships in key economic sectors to design training programs that meet employers' needs, and help New Yorkers to enter and advance in sectors that are driving New York City's economy. Training programs have launched in the construction, healthcare, food service and hospitality, and technology sectors.

SBS is working to create better jobs for New Yorkers through our healthcare industry partnership, New York Alliance for Careers in Healthcare (NYACH). Recently NYACH input informed the **Certified Recovery Peer Advocate (CRPA)** training program, a first-of-its-kind program that will fill the growing need for peer support services in substance use treatment in alignment with the City's ThriveNYC initiative. The program will train 200 peer support workers with experience in substance use per year; with the first cohort graduating this June. The **Bilingual Medical Assistant Training Program** is another NYACH-informed initiative that

provides tailored training to immigrant New Yorkers with limited English proficiency, supporting access to higher wages and a career path as a Medical Assistant.

SUPPORT FOR BUSINESSES:

Small businesses provide opportunities for individuals to strengthen their own economic security and provide jobs for members of their communities. We have seven **NYC Business Solutions Centers** across the five boroughs that provide free, accessible services to local businesses, including securing financing and accessing City benefits. Over the last year SBS served over 15,000 small businesses. To serve industrial and manufacturing businesses, SBS operates eight **Industrial Business Services Providers**.

To ensure that small businesses remain an essential part of the character of NYC neighborhoods, we recently launched **Love Your Local**, a public engagement campaign and business operational support program. This new initiative celebrates and promotes the diverse, independent, small businesses that enrich neighborhoods across New York City - and encourages New Yorkers to share their favorite businesses on an interactive online map. Eligible businesses will be able to apply for business advisory services and a share of \$1.8 million in business assistance support. Since the launch on Valentine's Day, we have seen over 1,700 businesses added to the map and I would encourage you all to visit nyc.gov/loveyourlocal.

SBS offers **commercial lease education workshops** to help business owners better understand the components and implications of signing a commercial lease. After developing an understanding of lease negotiations, businesses in the process of signing a lease can utilize SBS's **Legal Assistance** services. This initiative connects business owners with pro-bono attorneys, who will review the lease and point out any concerns that should be addressed. SBS has released an RFP to expand our commercial lease legal services to support **Chairman**

Cornegy's Commercial Tenant Harassment Law, which gave essential legal protections to commercial tenants who previously lacked these protections.

To ensure that the City's procurement reflects the diversity of our city and business owners, SBS plays a key role in the City's Minority and Women-owned Business Enterprise ("M/WBE") program. Mayor de Blasio has made a significant commitment to the city's M/WBE firms, creating the **Mayor's Office of M/WBEs** and announcing a bold new vision for the City's M/WBE program - which includes a goal of awarding at least 30% of the dollar amount of City contracts to M/WBEs by 2021, and a goal of doubling the number of certified M/WBEs to 9,000 by 2019. SBS is working with the Mayor's office to support the City's commitment, hitting a record high of more than 4,500 City-certified M/WBEs in FY16, a 23% increase since the start of Mayor de Blasio's administration. The Mayor's investments have allowed SBS to add additional staff capacity to our certification, outreach and capacity building teams. We will also use these investments to increase and deepen our **capacity building programs**. Out of the M/WBEs that have won contracts, nearly 2/3 had used our services and we hope to increase that number this year.

We are proud to have recently announced the **Contract Financing Loan Fund**, which allows M/WBEs to apply for low-interest contract financing loans of up to \$500,000. The loans from this revolving fund are capped at a 3 percent APR. Simultaneously, SBS has made the M/WBE certification application more user-friendly and created an application for sole-proprietors. We are also launching a **\$10 Million Bond Fund** this summer to help M/WBEs secure bonding or increase bond capacity.

Every year SBS brings together certified M/WBE firms and City agencies with contracting opportunities for our M/WBE Procurement Fair. Our upcoming **11th Annual Citywide Procurement Fair** is an excellent opportunity to see our efforts and connect M/WBEs with

procurement opportunities with City, State, and Federal agencies. We encourage you to invite the M/WBE's in your district to join us at this event on June 21st at BNY Mellon for another great fair.

Immigrant-owned businesses make up half of the City's small businesses and play an essential role in strengthening our economy, uplifting communities, and defining the unique business character of New York City. Our **Immigrant Business Initiative (IBI)** offers targeted support to immigrant entrepreneurs through free business courses in Spanish, Chinese, Haitian Creole, Russian, Korean, and Bengali. The program recently published a step-by-step guide for immigrant entrepreneurs. The guide, **'Building Your Business in New York: A Guide for Immigrant Entrepreneurs,'** covers topics such as signing a commercial lease, navigating government, and understanding the rights of immigrant New Yorkers. Developed by SBS in partnership with Citi Community Development, the guide will be available in six languages. We also partner with the New York Public Library, Brooklyn Public Library, and Queens Public Library systems to better reach entrepreneurs in immigrant communities. Since the start of the de Blasio administration, SBS has provided more than 12,200 services to foreign-born New Yorkers.

Another initiative to expand the reach of our services to more New Yorkers is the **Childcare Business Pathways (CBP)** program, developed in partnership with NYCHA and Citi Community Development. The program works directly with NYCHA entrepreneurs to launch and grow their home-based childcare business. In April, the first cohort of 18 entrepreneurs completed 42 hours of business education programming and 13 hours of specialized childcare training to become licensed childcare providers.

SBS offers a number of programs to address critical business compliance and regulatory needs. Through **Small Business First**, a multi-agency initiative to reduce the regulatory burden

on small businesses and increase compliance, **Compliance Advisors** guide business owners through government processes such as inspections and violations, helping these owners avoid costly fines and penalties. Since the program's launch a year ago, we have provided more than 1,500 compliance services, helping businesses to correct violations that could have resulted in fines of more than \$1.2 million dollars. Compliance consultations are available free of charge and allow small business owners to receive direct, on-site guidance from the City.

NEIGHBORHOODS

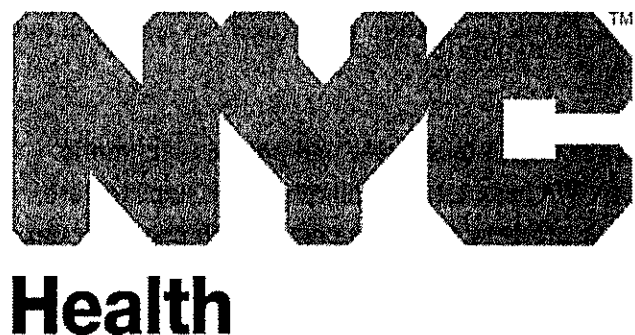
SBS works with community-based organizations to build vibrant neighborhoods where New Yorkers can shop, work, and live. Through **Neighborhood 360°**, SBS invests in community-based organizations to support revitalization projects in our city's commercial corridors. SBS published six **Commercial District Needs Assessments** (CDNAs) of Downtown Flushing, Downtown Staten Island, East Harlem, East New York, Inwood, and Jerome Avenue. These reports identify the needs and opportunities for local neighborhood revitalization, with recommendations for merchant organizing, public programming, and other quality of life improvements. The next round of CDNAs is currently being conducted in partnership with community organizations in Bushwick, Coney Island, Corona, and Longwood/Crotona Park East.

Community-based organizations have paramount expertise about their neighborhoods, but can struggle with capacity issues when implementing projects. The **Neighborhood 360° Fellows program** pairs neighborhood development professionals with community-based organizations to provide full-time support. The first cohort graduated this March and the second cohort of 10 fellows was just selected and will begin their placements in June. **Neighborhood 360° Grants** allow organizations to tap into approximately \$3 million in annual program grants to develop and staff revitalization projects that address needs identified in the CDNAs. Eleven

community-based organizations, representing six neighborhoods across every borough, were awarded nearly \$9 million over three years to fund catalytic economic development projects. The **Avenue NYC** grant program, funded through Federal CDBG investments, supports organizations in low- to moderate-income areas to implement commercial revitalization activities that benefit businesses and local residents. In April, \$1 million in grants were awarded in fund 34 unique neighborhood development projects across the city. SBS recently relaunched the **Neighborhood Challenge** program, in partnership with EDC, to bring tech companies and nonprofits together to enhance commercial districts. Neighborhood Challenge will make awards of up to \$100,000 to fund innovative ideas that use data-driven capacity building solutions to improve operations, target services, or address local public policy challenges. Since launching, Neighborhood Challenge has awarded 26 organizations nearly \$1.7 million and SBS looks forward to seeing the inventive solutions that will be created through the program's new partnership structure.

In addition to supporting new initiatives to improve commercial corridors, SBS oversees the largest network of **Business Improvement Districts (BIDs)** in the country, with 74 BIDs that delivered more than \$134 million in services this year alone. Every day, our network of BIDs deliver services that support more than 85,000 small businesses. In the past year we've guided several BID expansions and new BID formations through local organizing and the legislative process, such as the **Greater JFK Industrial BID** in Queens and the **New Dorp BID** in Staten Island. Our annual BID Trends Report illustrates the contributions BIDs make to local businesses and our communities including holding over 4,000 public events that attracted 10.5 million attendees and logging 1.4 million hours of supplemental sanitation services.

We look forward to working with council in the year ahead. Thank you and I would be happy to take your questions.



Testimony

of

Mary T. Bassett, MD, MPH, Commissioner

New York City Department of Health and Mental Hygiene

before the

**New York City Council Committee on Health
Jointly with the Committee on Finance and the
Committee on Mental Health, Developmental Disability, Alcoholism,
Substance Abuse & Disability Services**

on the

FY 2018 Executive Budget

May 09, 2017

**City Hall – City Council Chambers
New York City**

Good afternoon Chairpersons Ferreras-Copeland, Johnson, Cohen and members of the committees. I am Dr. Mary Bassett, Commissioner of the New York City Department of Health and Mental Hygiene. I am joined today by First Deputy Commissioner Dr. Oxiris Barbot and Sandy Rozza, Deputy Commissioner for Finance. Thank you for the opportunity to testify on our Executive Budget for fiscal year 2018.

Our great city has long been heralded as a leader in innovative and progressive public health initiatives, and that has continued this year. We have taken comprehensive steps to curb the opioid epidemic, expanded our groundbreaking effort to address mental health needs for our city's most vulnerable residents, and confronted the emerging outbreak of Zika virus. We have rebranded and expanded services in our Sexual Health clinics and have continued to champion chronic disease prevention efforts. Last month, we learned that the legal challenge to our sodium warning label requirement has ended. And a day later, we testified on a package of tobacco-related bills that will help make substantial gains in reducing tobacco use in the City.

Before I discuss the Department's newly funded efforts in the Executive Budget, I'd like to take a moment to discuss both the State and Federal fiscal climates.

During our Preliminary budget hearing in March, I raised the very concerning issue of proposed State cuts to Article 6 funding. The Governor's executive budget included a \$32.5 million cut to the Department through this vital public health aid mechanism. I am pleased to report that this cut did not come to fruition in the enacted State fiscal year 2018 budget. The Department avoided the need to reduce TB and asthma staff, scale back tobacco and obesity media campaigns, distribute fewer naloxone kits, or close one of our Sexual Health clinics.

In addition, despite the Governor's annual effort to fold School-Based Health Centers into Medicaid Managed Care, the State Department of Health once again provided a one-year extension. We are relieved that these essential programs are protected for fiscal year 2018, but we will continue to push for a permanent carve out for future years. Thank you for your continued support on this issue. Finally, I am pleased that New York has joined 48 other states in raising the age of criminal responsibility. While not specifically a health issue, we know that treating youth as adults in the criminal justice system harms youth economically, educationally and emotionally, and these factors affect health.

Now let me turn to the federal government. While we do not yet have concrete details of the President's fiscal year 2018 Budget, the so-called "skinny budget" released in March, and a separate document released shortly thereafter regarding proposed cuts for fiscal year 2017, make clear that this Administration's public health priorities do not align with our own. Potential cuts to the National Institutes of Health, the Centers for Disease Control and Prevention, the Prevention and Public Health Fund, and the Environmental Protection Agency, as well as other

vital federal entities could have dire implications on the health and well-being of the people in our city.

It is possible that the Department could lose tens of millions in federal funding. This kind of cut would severely hamper our ability to implement effective public health initiatives, and would put the City at increased risk for infectious disease outbreaks and higher chronic disease incidence. Both the President's budget proposal and the House's recently passed American Health Care Act (AHCA) will slash funding for public health preparedness and response, which is irresponsible and dangerous. As I mentioned in my Preliminary Budget testimony, since 2010 we have seen the uninsured rate across all ages drop to a current all-time low of 9.3 percent in New York City. If the American Health Care Act passes through the Senate in its present form, it may reverse this positive trend, leaving millions of New Yorkers without affordable coverage and care. The lives of working poor, pregnant women and new mothers, people with pre-existing conditions, seniors, and those with disabilities, among many others, will be negatively affected by this piece of legislation.

Our nation's immediate fiscal future may be plagued with uncertainty, but we must stand firmly by our City's values. This means we will continue to push back on these funding threats in order to best serve New Yorkers. In addition to potential cuts to our own agency's work, the cross-sector nature of public health makes us extremely concerned about threats to agencies that handle education, social services, emergency preparedness, transportation, housing, and the environment. We do not know what the President's budget will contain, but we will persist in our efforts to protect and promote the health of all New Yorkers.

Budget Highlights

I will now speak to the fiscal year 2018 Executive budget for the Department. Our current operating budget is \$1.5 billion, of which \$643 million is City Tax Levy and the remainder is federal, state and private dollars. This reflects a net increase in spending of \$49 million from the fiscal year 2018 Preliminary budget. I am also pleased to report that our agency has found \$59 million in City Tax Levy savings over two years. These savings will have no impact on services.

The fiscal year 2018 Executive Budget helps to ensure that the Department can continue to provide necessary services, create and enforce effective policy, and implement equitable and evidence-based programs. I will now highlight the major new funding streams that have been added to the Executive budget.

Intensive Mobile Treatment (IMT) Teams

We launched NYC Safe in August of 2015 to provide behavioral health support to the small subset of New Yorkers who have both displayed or threatened violence against the public

and struggle with a mental illness and/or substance use disorder. We know that NYC Safe is working – as of March 2017, 96% of participants have not been charged with a violent offense since being referred to the program. After a year and a half of operational experience, we have a better understanding of the needs of the target population and how best to meet our goals. To this end, we are adding \$1.1 million in fiscal year 2018 and \$4.4 million in the out-years to the Intensive Mobile Treatment – or IMT – program.

IMT was launched as a demonstration project in January 2016 with three teams serving up to 25 clients each. The teams work with people who raise concerns about violent behavior and have had recent and frequent contact with the mental health, criminal justice and homeless systems, and for whom traditional treatment models have proven ineffective. The teams include peer specialists, master's level behavioral health professionals, nurses, and psychiatrists who engage clients across multiple settings 24 hours a day, seven days a week. There is no time limit for this support. This new funding will enable IMT to add four more teams, and increase capacity to reach more New Yorkers. We currently have teams in Brooklyn, Manhattan and the Bronx, and we will extend services to Staten Island and Queens.

HealingNYC

We are pleased to have an additional \$8.2 million allocated to the Department for HealingNYC, our plan to reduce opioid overdose deaths by 35% over 5 years. Overdose deaths from opioids, which include both opioid analgesics and heroin, are a public health crisis in New York City. In 2016, we have seen 1,268 confirmed overdose deaths, with 80% involving opioids and are on track to see this number exceed 1,300 when data are finalized. This disturbing increase parallels the entry of fentanyl in the city's street drugs. Approximately half of the confirmed drug overdose deaths from July to mid-December 2016 involved fentanyl. We can confidently say that fentanyl is driving the increase in overdose death rates in the New York City. These overdose deaths are preventable.

This new funding will allow the Department to expand its multipronged approach, increasing naloxone distribution, buprenorphine training, judicious prescribing, public awareness campaigns, and introducing a rapid assessment and response capacity. More specifically, in fiscal year 2018, the city will distribute nearly 62,000 naloxone kits. The Department will distribute approximately 48,000 of these kits, and other City agencies will distribute the remainder. In addition to increasing the number of naloxone kits available, this new funding will help us increase the number of patients who receive buprenorphine treatment from 38,000 to 58,000 over the next five years. Funds will also be used to increase public awareness through media campaigns and outreach. These efforts are critical, and we remain steadfast in our commitment to curbing this epidemic.

Other budget highlights

I also want to touch briefly on a few additional funding changes in the Executive Budget. The Department will receive \$1.3 million in funding for the provision of mental health services to additional residents at the Center for Urban Community Services – or CUCS – for fiscal year 2018 and beyond. Previously, CUCS was a 43-bed transitional living community for homeless women with mental illness, and in early 2017, they moved to a larger space. This funding adjustment will cover the on-site rehabilitation services for the Center, including an additional 32 beds in the new space.

There is an adjustment in the budget to account for the shifting of funds for the NYC 15/15 Supportive Housing initiative, from Department of Social Services (DSS) to the Health Department. Supportive housing is affordable, permanent, and independent housing for individuals and families coming from a period of homelessness, hospitalization or incarceration. The program provides support for tenants within a neighborhood and community, and offers programming on various topics, including mental health services, financial independence and community integration. The NYC 15/15 initiative aims to fund and develop 15,000 new units of supportive housing in New York City over a period of 15 years. This funding shift will allocate \$26.5 million to the Department in fiscal year 2018, \$50.3 million in fiscal year 2019, and \$74.4 million in fiscal year 2020 to administer the program in partnership with DSS and HPD. The Department is responsible for contract management, budget management, program development, technical assistance, program monitoring and evaluation.

I'd also like to point out the Service Provider Wage Adjustment in the budget, which will support our social service provider workforce with another round of Cost-of-Living Adjustment increases. In recognition of the critical role that these providers play in New York City, the Executive Budget allots \$6.3 million in fiscal year 2018, \$12.4 million in fiscal year 2019, and \$18.9 million in fiscal year 2020 for this adjustment. Lastly, we received an additional \$79 million in the capital plan for animal shelter construction and renovation.

Conclusion

We have had an exciting and productive year at the Department. I am grateful that the City budget for fiscal year 2018 provides funding to advance our priorities. Thank you again for the opportunity to testify, and for your support of the Department's work. We are pleased to answer any questions.



**NEW YORK CITY COUNCIL
FISCAL YEAR 2018
EXECUTIVE BUDGET HEARING**

**COMMITTEE ON HEALTH
COMMITTEE ON FINANCE
COMMITTEE ON MENTAL HEALTH, DEVELOPMENTAL
DISABILITY, ALCOHOLISM, SUBSTANCE ABUSE &
DISABILITY SERVICES**

**STAN BREZENOFF
NYC HEALTH + HOSPITALS
INTERIM PRESIDENT
AND
CHIEF EXECUTIVE OFFICER**

MAY 9, 2017

Good afternoon Chairpersons Johnson, Ferreras-Copeland, and Cohen, and members of the Health, Finance, and Mental Health, Developmental Disabilities, Alcoholism, Substance Abuse, & Disability Services Committees. I am Stan Brezenoff, Interim President and Chief Executive Officer of the NYC Health + Hospitals (“Health + Hospitals”). I am joined by P.V. Anantharam, our Chief Financial Officer, Machel Allen, MD, our Chief Medical Officer, and John Jurenko, our Vice President for Government & Community Relations; as well as leadership from Health + Hospitals. Thank you for the opportunity to share our thoughts on the FY18 Executive Budget as well as other programmatic initiatives.

Health + Hospitals is the safety net provider for all New Yorkers, serving nearly 1.2 million people, of which more than 425,000 are uninsured. In 2016, there were 4.5 million outpatient visits, and approximately 1.2 million emergency room visits, which is approximately 30 percent of the City’s emergency department visits. There were 195,000 patient discharges, including 18,000 newborn deliveries. Our commitment to the patients and communities we serve is unwavering, and we will continue to uphold our mission of providing high quality, affordable, culturally responsive health care to all regardless of their ability to pay or immigration status.

But, the stark reality is that we are facing a fiscal cliff. We have a large budget gap – \$1.1 billion in FY18, which is increasing to \$1.9 billion by FY21. This is brought on by higher costs and inefficiencies in our system, and reimbursement policy changes at the federal and state levels that have yielded severe shortfalls associated with being the city’s single largest provider of care to Medicaid and uninsured patients.

We have busy emergency departments – some of the busiest in the country – with low admission rates, which indicate patient needs could be better addressed in lower-cost, lower acuity settings. We also have excess inpatient bed capacity, as do other hospitals across New York City, reflecting the success of strategies to better serve patients in their communities before intensive inpatient care is needed. And as always, we need greater investment in outpatient, post-acute care, and integrated social services. Hence the need to transform into a high-performing, competitive, and financially sustainable community based system.

As you know, we have developed an ambitious plan to address these dual challenges of financial stress and the imperative of better serving our communities. The transformation plan – a combination of savings initiatives, revenue enhancements, and targeted investments in the long term transformation of our system – will meet

its financial targets this fiscal year. Next year the plan will be more challenging, as some of our expectations around enhanced federal support will probably not be met. We continue to innovate and look for new ways to enhance the effectiveness of our services while meeting the stiff financial challenges in front of us.

Finance – FY18 Gap Closing Initiatives

While we are transforming public health care delivery in response to structural changes to the national and local health care landscape, especially in the midst of our financial crisis, we are also making strategic changes to meet our budget gap-closing targets. We are taking the opportunity where we can, at the managerial level to adopt industry standard organizational models and reduce the layers of management within our system to bring it more in line with other health care organizations. This necessary restructuring will help us function more efficiently and yield savings to address our serious financial challenges, and will have no impact on services or patient care, quality or safety.

Six weeks ago, when I testified before Chairman Johnson and members of the Health Committee, I outlined how we will close our \$779 million gap for FY17, and will end the year with a cash balance of \$100 million and meet our obligations with the City. I am pleased to report that we will remain on track.

In FY18, I am confident that we are on a path to greater financial solvency, and will build a stronger, agile, and more stable organization. We will aggressively pursue opportunities to close the projected \$1.1 billion gap by pursuing \$820 million in revenue generating initiatives, and \$387 million in expense reductions. This will be accomplished by the following:

Revenue

1. Implementing Medicaid Waiver Programs (\$483 million)
2. Pursuing federal and state charity care funding (\$85 million)
3. Implementing health insurance initiative (\$252 million)

Expense

1. Implementing Supply Chain and Care Management Initiatives (\$137 million)
2. Restructuring and Personnel Initiatives (\$250 million)

Revenue Enhancing Initiatives Highlights:

Medicaid Waiver Programs (\$483 million): The Medicaid waiver funds are primarily in programs that are ongoing, such as the NYS Delivery System Reform

Incentive Payment (DSRIP) program, or that have been implemented this year, such as Value Based Payment Quality Incentive Program (VBP QIP), and the Care Restructuring Enhancement Pilots (CREP). We anticipate these programs to continue, and we will continue to work in partnership with both the State and Federal governments to realize additional waiver revenue opportunities.

Federal and State Charity Care (\$85 million): Health + Hospitals will seek approval to avert the loss of Disproportionate Share Hospital (DSH) funding using an existing 1115 waiver provision to convert a portion of authorized Federal Supplemental Medicaid funds to DSRIP performance based payments; and we will work with stakeholders around the state to ensure an equitable distribution of any DSH cuts.

Health Insurance Initiatives (\$252 million): Health + Hospitals will pursue many efforts to improve our revenue collection, including improved documentation and coding, and denials management. We will receive additional revenue from enhanced Medicaid and Medicare rates through the establishments of Federally-Qualified Health Centers (FQHCs). MetroPlus is expected to deliver significant additional revenue through care management of its population, achieving high quality scores that result in bonus funds, and increasing membership both generating additional enrollments and decreasing disenrollments. Lastly, through the implementation of new and additional outreach and enrollment strategies, we will ensure that all uninsured patients are evaluated for existing subsidized health cover programs.

Cost Reduction Initiative Highlights:

Supply Chain and Care Management Initiatives (\$137 million): Savings will be achieved through product standardization, contract negotiations, and leveraging corporate wide volumes to achieve better pricing. In addition, the 340B contract pharmacy program will be expanded, and Health + Hospitals will expand its care management program to improve patient care, thereby controlling costs.

Restructuring and Personnel Initiatives (\$250 million): Health + Hospitals is embarking on an organizational restructuring that is based on industry best practices, to create a more efficient and financially sustainable management structure to direct resources where we need them the most – at the front line of patient care. This effort will assist us in functioning more efficiently and yield savings to address our serious financial challenges.

We are pleased to report positive, but modest news out of Albany. The final version of the State FY 2017-18 budget provides \$20 million gross over two years in new

funding for enhanced safety net hospitals serving a high share of Medicaid and uninsured individuals. Although the budget does not outline a methodology for funding distribution, based on an internal analysis, Health + Hospitals anticipates receiving funding on qualifying hospitals' Medicaid and uninsured discharges. We estimate that we could be eligible for 40-50% of the funds. This represents an important first step in recognizing the challenges facing safety net hospitals. We are thankful to members of the New York State Legislature for this critical funding, our labor and community partners, and the members of the City Council for weighing in on our behalf.

While these initiatives and new State funding are promising in bringing much needed financial and operational relief, there still remains budgetary actions emanating out of Washington that will have a negative impact on the system. As you know, Washington continues to roil the nation's healthcare landscape with a revived attempt to repeal and replace the Affordable Care Act (ACA) with the Republican-sponsored American Health Care Act (AHCA). We will continue to oppose the AHCA, and are working closely with the Mayor's Office, health care associations, our labor partners, and New York's congressional delegation to keep the ACA the law of the land.

In light of these uncertain times, I would like to remind members of the Committees that Health + Hospitals remains committed to the health of all our patients, regardless of their immigration status. Over the last several months, we've implemented the following programs to protect our patients.

- Immigrant Forums: Health + Hospitals, along with the Mayor's Office of Immigrant Affairs, the New York Immigration Coalition, and the New York Legal Assistance Group (NYLAG) has held – and is continuing to hold – a series of forums at our facilities aimed at informing our patients of their rights, and Health + Hospitals' commitment to protecting patient privacy (and not inquiring about immigration status). We held four of these forums in March 2017, and throughout the months of April and May, we will host three additional forums.
- Legal Strategies: We continue to pursue legal strategies with the City and State to oppose the travel ban and the damaging effect it would have on immigrant communities.
- Educating Our Employees: We are educating our staff on helping immigrant patients in an uncertain climate, and have communicated with all our staff to assuage their concerns and direct them to Health + Hospitals' Office for Diversity and Inclusion with any questions.

- Open Letter to Patients: In December 2016, Health + Hospitals, along with the Mayor's Office of Immigrant Affairs, posted an "Open Letter to Patients" reaffirming Health + Hospitals' and the City's commitment to serving the immigrant community, and protecting the privacy rights of all those we serve.

We also share the Council's concerns about immigration actions taking place at our facilities involving patients and employees. This is consistent with the ICE Sensitive Locations Policy that states that enforcement actions at locations such as hospitals, places of worship, and schools, generally should be avoided. Health + Hospitals will exercise its right to review and challenge any document that ICE produces that seeks to grant access to non-public areas or patient information.

Update on Programmatic Initiatives

Delivery System Reform Incentive Payment Program (DSRIP) - OneCity Health

OneCity Health is Health + Hospitals' DSRIP performing provider system (PPS) that is leading our system in the State's triple aim of improving care, improving health, and lowering health care costs, by building a population health and care management infrastructure to better manage the access, outcomes, and utilization of our patients. These efforts are preparing us to shift from volume-based payments to value-based reimbursement from the federal and state governments. It is also in keeping with the recommendations made in the *One New York Health Care for Our Neighborhoods* report issued by the Mayor last year, and the recently released *Commission on Health Care for our Neighborhoods* issue brief on building clinical partnerships.

By way of background, the DSRIP program is not a grant program; there is performance risk associated with achieving certain health outcome targets as set by the New York State Department of Health. Because of this risk, on the basis of analysis provided to all PPSs from the Greater New York Hospital Association, we have to expect that our earnings may be lower than the maximum valuation of \$1.2 billion. The partnership may earn above that amount by accelerating the care management efforts to care for high-risk, high-needs patients with high inpatient utilization and by investing in staffing and other infrastructure needed to improve primary care access and frontline-level population health management and that has to be our priority.

OneCity Health Highlights

OneCity Health has several charges, including establishing more effective partnerships with organizations that care for the same patients, including other health systems and community based organizations; designing and implementing new interventions in the clinical, emergency department and inpatient setting, intended to reduce unnecessary utilization; developing and advancing models intended to better integrate primary care and behavioral health, both at Health + Hospitals and in community clinics; and supporting capacity building to help sustain organizations important to meeting social needs, including community based organizations. These goals are being implemented through many initiatives, including but not limited to:

Centralized Care Management: In our hospitals, we are supporting high-risk patients for 30 days following discharge through the Care Transitions program. Transition Management Teams are now in five Health + Hospital facilities, with five more beginning soon. Over 900 patients have been followed by the team, who meet the patient while in the inpatient setting and support them in the community. Additionally, in our primary care sites we are expanding the Health Home program by providing care management services to all appropriate patients who have complex medical and social needs. The primary care provider can make referrals to embedded care coordinators provided by OneCity Health's Health Home lead agencies. The program launched at six Health + Hospital sites and four OneCity Health DSRIP community partner primary care practices - 100 referrals have been made in this pilot phase. In 2014, six Health + Hospitals facilities received a 3-year grant from the Centers for Medicare & Medicaid Services' (CMS) Health Care Innovation Awards Program to use a multidisciplinary team to assess patients who present in the emergency room with ambulatory care sensitive conditions, create a plan that would avoid unnecessary hospitalizations, and provide support after discharge. OneCity Health is transitioning from the grant program at these six sites, and will provide a uniform approach to screening and enrolling into care management for all appropriate patients who are treated and released.

Outpatient-clinic based improvements: At five of our Health + Hospital sites and five of our community partner sites, we are beginning to integrate behavioral health services into primary care appointments to more effectively screen and treat patients for depression, and provide treatment for medical needs common among patients with severe behavioral health needs. We are assisting 52 primary care partner sites to achieve Patient-Centered Medical Home (PCMH) recognition to ensure a larger network of high-quality primary care services, and we are integrating palliative care into primary care appointments to better manage patients' pain or other distressing

symptoms. Lastly, we are referring pediatric patients with frequent asthma exacerbations to community health workers who complete an asthma assessment, and conduct home visits to evaluate the environment for asthma “triggers.”

Community Outreach and Linkages to Services: We have contracted with 38 community (non-hospital) partners across four boroughs to connect individuals to insurance and primary care - to date, they have connected approximately 2,500 people to primary care and approximately 3,200 individuals to insurance. These efforts are in alignment with Health + Hospitals’ efforts to enroll all eligible uninsured patients. And, 55 OneCity Health partners, including five Health + Hospitals sites, are currently completing cultural competence and health literacy assessments to better understand opportunities for improvement.

Infrastructure: We are implementing universal screening and identification of social supports needs using tools in our electronic health record or care management platform; and training and engagement of care management and social work staff, including access to the Mayor’s Office of Operation’s Worker Connect portal. This will allow social workers to better identify the scope of patients’ needs and current services.

Social Service Integration: We are expanding access to social services of known high need patients, including partnering with New York Legal Assistance Group (NYLAG), which is a nonprofit organization dedicated to providing free legal services in civil law matters to low-income New Yorkers, as well as addressing food insecurity through SNAP enrollers and WIC outreach to Health + Hospitals facilities.

Administrative Structure

Last year, we transitioned from the system’s old organizational structure based on geographic networks centered around hospitals to three service lines focused on patient care - hospitals, ambulatory care, and post-acute care. Here are some highlights.

Hospitals: We are in the process of developing a system-wide clinical service plan that will guide us in appropriately scaling our inpatient service capacity to meet the needs of the communities we serve, and redesign the distribution of clinical services across facilities to better manage the access, outcomes, and utilization by our patients. The CEO for each hospital will be held accountable for the performance of their hospital, based on a hospital-specific scorecard.

Ambulatory Care: In coordination with inpatient, post-acute, and OneCity Health initiatives across the system, on the outpatient side we are focused on improvements to meet the needs of the community and grow our patient base by increasing access, and improving quality of care. And, in keeping with the Mayor’s Caring Neighborhoods initiative, our primary care expansion is well underway. Of the seven identified facilities – we completed renovating three in the Bronx and Brooklyn within the last six months, and over the summer and fall of 2017, we expect the remaining four in Brooklyn, Queens, and Staten Island to be done. Expanded services at these sites will now include, comprehensive primary care, and specialties based on community needs, which include behavioral health, cardiology, endocrinology, and after-hours urgent care.

Post-Acute Care: Each year, our post-acute care facilities provide 800,000 patient encounters for frail and elderly New Yorkers at five skilled-nursing facilities, three adult day health centers, a home health agency, and a long-term care acute care hospital. Four of our five skilled nursing facilities have received a 5 star quality rating – the highest grade given by CMS. While we have some of the highest rated facilities in the country, we are always seeking to make improvements by implementing new skilled-nursing facilities services, and identifying ways to collaborate with our managed care partners to improve quality.

LGBTQ Health Care

Recently, 22 Health + Hospitals sites received the designation “Leader in LGBTQ Healthcare Equality” from the Human Rights Campaign Foundation for 2017. The honor acknowledges hospitals, community health centers, and nursing homes across the country that embrace LGBTQ inclusion and patient-centered care.

Accomplishments in LGBTQ Health Care:

- In 2011, Health + Hospitals became the first public health care system in the United States to mandate LGBT Cultural Competence Training for staff, and it has continued to develop and evolve LGBTQ training.
- In 2014, Health + Hospitals/Metropolitan was the first public hospital in New York City to open an LGBTQ Health Center to help reduce barriers and increase access to health care for the LGBTQ community. Last year, the hospital expanded its health services for transgender patients, including gender-affirming surgeries and increased access to hormone therapy. We thank the Speaker for the funding.

- Earlier this year, the health system received a multi-million dollar grant from the New York State Department of Health for staff training, which includes strategies for fostering diversity and inclusion in the workplace related to LGBTQ issues.
- Health + Hospitals has partnered with the National LGBT Health Education Center, a program of the Fenway Institute, to optimize the health system's ability to effectively serve LGBTQ communities by creating a certification track for physicians interested in completing intensive training to increase core competencies in LGBTQ health services. The pilot program will launch in April.

Capital

Critical to Health + Hospitals transformation is upgrading its information technology infrastructure to support an integrated patient-focused approach for care delivery and more efficient operations. In the FY18 Executive Budget, Health + Hospitals received upwards of \$200 million in capital funding for FY18-FY27 for the installation of a new patient registration and billing system that will integrate with the clinical records system at all sites, as well as funding to upgrade network infrastructure equipment and bio-medical devices at multiple facilities.

Below are highlights of some of the key Capital projects that have received council support.

- The renovation, expansion, and outfitting of the Roberto Clemente clinic is complete. Patients will now have access to behavioral health programs. We would like to thank Council Member Rosie Mendez for her support and contribution to the successful completion of this project.
- On Staten Island, the Vanderbilt Avenue site will open this fall. This new \$28 million, 18,000 square foot ambulatory care facility will offer comprehensive primary medical and mental health services for children and adults. The site will also feature an after-hours urgent care center to better accommodate patients' needs. I want to thank Council Member Debi Rose for her contribution to this project.
- In Queens, work is underway at Elmhurst Hospital to renovate and expand its adult emergency room. The project is currently in a design phase, and we expect that it will be completed in 2019. We would like to thank the Queens Borough President and the Queens City Council delegation for their support.

- I also want to thank Council Member Mathieu Eugene for his commitment to provide funding for Kings County Hospital to replace and upgrade needed medical equipment.

FEMA

In addition to the aforementioned ongoing capital projects, we continue to work on key projects to rectify the damage caused by Hurricane Sandy and to make our facilities more resilient to protect them from future storms. We have been working closely with our partners in the Mayor's Office of Recovery and Resiliency and the New York City Economic Development Corporation on these initiatives. Projects to relocate and/or protect critical infrastructure equipment including electrical, mechanical, heating and ventilation units as well as projects to mitigate the effects of floods are underway at Bellevue, Coler, Coney Island and Metropolitan.

Information Technology

Epic: We are in the process of implementing a new Epic revenue cycle, which will integrate seamlessly with our Epic patient electronic medical records system that we began adopting last year. The new technology will standardize revenue collection in Health + Hospitals 11 acute care facilities and across dozens of our community based sites, and yield up to \$142 million annually in revenue, based on FY16 patient volume. The benefits of the integrated suite are significant. Health + Hospitals will now experience improved clinical documentation to support billed services, reduced claims denials, and accelerated reimbursement; providers will now have access to consolidated and complete patient record to improve efficiency, and patients will more easily understand the costs of their care, and pay their bills online. The 2-year launch of the integrated revenue cycle and electronic medical record platform is expected to begin by the end of 2018, and fully completed by the end of 2020. Health + Hospitals will invest \$289 million over the next five years to fully implement the integrated suite across the system. The City of New York has allocated \$150 million in capital funds, and Health + Hospitals will invest \$139 million from its operating costs – pending approval by our Board of Directors.

The Enterprise Resource Planning (ERP): The project is designed to replace the existing financial systems that are over 30 years old. The new system will replace six existing systems into one integrated system. A single ERP system allows for organic integration, workflow, business process, and reporting, streamlining operations and reducing cost of implementation and system maintenance. Reporting is much quicker and easier since all the information is stored in the same manner and in the same place. An ERP allows for increased productivity, accountability,

performance-based management reporting and dashboards using outcome-based indicators. The goal is to implement a user-friendly and fully integrated ERP application with related modules, data integration, training, implementation assistance and ongoing software support. The ERP architecture will be highly flexible to enable rapid change to support business needs and provide access to data. First phase of this implementation will begin this summer, which will replace the existing back office accounting systems and the core supply chain management system.

Radiology: We are implementing a new radiology system that will increase efficiency, bring about standardization to our system, and improve patient outcomes and quality care. Health + Hospitals will realize savings by eliminating duplicate hardware needs, redundant applications and related resources thus resulting in a more efficient support model. This work is underway at four facilities, and will be completed by the end of the year.

Behavioral Health

As the provider of the majority of inpatient psychiatric treatment in New York City, Health + Hospitals understands the critical need for greater access to mental health care in New York City. We continue to lead and expand efforts to provide much-needed behavioral health services for New Yorkers at every stage of life, at our many patient care locations. We have integrated universal depression screenings for adults in primary care practices across the City, have successfully led efforts throughout the boroughs, to screen all pregnant women and new mothers for maternal depression. We have focused efforts to promote health care services to young people at YouthHealth neighborhood centers. And, we are very proud to be expanding a pilot program established at the Bronx Family Justice Center (FJC) to provide on-site behavioral health services at each of the city's five FJCs, which are designed to provide a comprehensive range of services to survivors of domestic violence in each borough. And lastly, Health + Hospitals is leading efforts in NYC to address the opioid epidemic that is devastating many of our communities. We have begun efforts to routinely screen and offer team-based care for harmful substance use in our primary care clinics. And as part of the Mayor's HealingNYC initiative, we are quadrupling the number of providers able to treat opioid use disorder with medication, and are establishing an innovative addiction consult service to help care for the tens of thousands of patients we diagnose with substance use disorder every year.

Correctional Health

This year –2017– marks the first year in which Correctional Health Services (CHS) is the direct provider of care in the city’s jails. We have made and continue to make tremendous progress in increasing the quality of and access to care for one of New York City’s most vulnerable patient populations. Our infrastructure has been re-engineered to enhance the expertise and support of our providers. We continue to successfully roll out our initiatives including enhanced pre-arraignment health screening, expansion of PACE units, extension of telehealth services, and treatment of Hepatitis C. We continue to leverage the resources of Health + Hospitals to improve continuity and quality of care during and after incarceration, including linkages with Metroplus, Gotham Health and Health + Hospitals/Coler, one of our skilled nursing facilities.

As part of the City’s opioid strategy, CHS is also expanding its substance use services including doubling the methadone maintenance program, tripling the buprenorphine program, quintupling Naloxone distribution at the visit center, and extending re-entry services for opioid addicted patients who are at high risk of overdose death after release from the jail system.

Thank you for the opportunity to testify, and I look forward to your questions.

**THE COUNCIL
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Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: _____

(PLEASE PRINT)

Name: Dr Mary Bassett

Address: Commissioner

I represent: DOHMH

Address: _____

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Date: _____

(PLEASE PRINT)

Name: Dr Orlin Barbot

Address: First Deputy Commissioner

I represent: DOHMH

Address: _____

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Date: _____

(PLEASE PRINT)

Name: Hillary Kuhns

Address: Asst. Commissioner

I represent: DOHMH

Address: _____

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Date: _____

(PLEASE PRINT)

Name: Sandy Pozza

Address: Deputy Commissioner

I represent: DASH

Address: _____

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☐ in favor ☐ in opposition

Date: 5/9/17

(PLEASE PRINT)

Name: PV Ananthram, CFO

Address: _____

I represent: NYC Health + Hospitals

Address: _____

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Date: 5/9/17

(PLEASE PRINT)

Name: Machelle Allen, M.D., Chief Medical Officer

Address: _____

I represent: NYC Health + Hospitals

Address: _____

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Date: 5/9/17

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Name: John Jurek, VP

Address: _____

I represent: NYC Health + Hospitals

Address: _____

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☐ in favor ☐ in opposition

Date: 5/9/17

(PLEASE PRINT)

Name: Stan Berzoff, President

Address: _____

I represent: NYC Health + Hospitals

Address: _____

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Date: _____

(PLEASE PRINT)

Name: President James Patchett, EDC

Address: _____

I represent: _____

Address: _____

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Date: _____

(PLEASE PRINT)

Name: Extra Vice President Local 49 Frank Fink, Ed

Address: _____

I represent: _____

Address: _____

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Date: _____

(PLEASE PRINT)

Name: Shahz Ali

Address: 110 William Street

I represent: NYC SBS

Address: _____

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Date: _____

(PLEASE PRINT)

Name: Gregg Bishop - Communist Party

Address: 110 William Street

I represent: Dep. of Small Business Services

Address: _____

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Date: _____

(PLEASE PRINT)

Name: James Mallon

Address: 110 William Street

I represent: NYC SBS

Address: _____

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Date: _____

(PLEASE PRINT)

Name: Andrew Schenck

Address: 110 William Street

I represent: NYC SBS

Address: _____

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