

CITY COUNCIL
CITY OF NEW YORK

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TRANSCRIPT OF THE MINUTES

Of the

COMMITTEE ON HIGHER EDUCATION

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June 14, 2017
Start: 10:23 a.m.
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HELD AT: Council Chambers - City Hall

B E F O R E: INEZ D. BARRON
Chairperson

COUNCIL MEMBERS:

JAMES VACCA
FERNANDO CABRERA
LAURIE A. CUMBO
YDANIS A. RODRIGUEZ
JUMAANE D. WILLIAMS
VANESSA L. GIBSON

A P P E A R A N C E S (CONTINUED)

Vita Rabinowitz
CUNY's Executive Vice Chancellor and University
Provost

Maurizio Trevisan
Dean of Sophie Davis School

Stephan Lestin
Student at Sophie Davis School of Biomedical
Education

Christopher Wanyonyi
Director of Admissions at Sophie Davis Biomedical
Education

Eric Appelbaum
Chief Medical Officer of SBH Health System

Jona Kerluku
Vice Chair of Fiscal Affairs in the University
Student Senate

Hercules Emile Reid
Vice Chair of Legislative Affairs for the
University Student Center

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[gavel]

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CHAIRPERSON BARRON: Good morning. Thank

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you so much for coming to be here and be a part of

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this hearing. Good morning and welcome to today's

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oversight hearing on the CUNY School of Medicine. My

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name is Inez Barron and I have the distinction of

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being the Chair of the Committee on Higher Education.

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Before I speak on the hearing topic I want to address

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my unnumbered preconsidered resolution which calls on

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the New York State legislator to pass and the

12

Governor to sign Assembly Bill 6811, Senate Bill

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5120, an act to establish a private student loan

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refinance task force. The task force would bring

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together the state control of the Higher Education

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Service Corp and the private lending institutions of

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New York that offer student loans to study and report

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on ways in which these lending institutions can be

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incentivized to create student loan refinancing

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programs. Between the increasing cost of a college

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education and flat and declining wages student debt

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has reached a record high for the 18th consecutive

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year. In the first quarter of 2017 the Federal

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Reserve Bank of New York estimated that outstanding

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federal and private student debt in the United States

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2 had doubled since 2009 to more than 1.4 trillion
3 dollars. Even more troubling is that 11 percent of
4 that debt is in default. This number also includes
5 1.1 million student borrowers who do... defaulted for
6 the first time in 2016. In New York State, the
7 comptroller reported that student loan debt more than
8 doubled from 2006 to 2015 to 82 billion dollars and
9 the number of student loan borrowers increased to 20...
10 2.8 million. In New York City 16.2 percent of the
11 city's consumers have an average student loan balance
12 of 35,300 dollars and 14 percent of those borrowers
13 were at least 90 days late in the fourth quarter of
14 2016. In light of this astronomical debt burden which
15 can prevent students from completing school, becoming
16 home owners, qualifying the student for auto loans,
17 starting small businesses, and saving for the future
18 it remains unclear how we are to expect younger
19 generations and especially black and Latino youth who
20 have been historically disenfranchised to be
21 competitive in a 21st century economy. If the current
22 administration is committed to quote, "making America
23 great again" it would not be consistently with
24 drawing policy memos issued by the Obama
25 Administration which were meant to strengthen

1
2 consumer protection for student loan borrowers. These
3 actions directly disadvantage women who graduate with
4 a pay gap and minorities who disproportionately leave
5 school without earning a degree and suffer higher
6 rates of unemployment than their white peers.
7 Additionally, first generation college students are
8 more likely to have limited access to information and
9 knowledge about student loans. Uninformed borrowers
10 are susceptible to making decisions that make it
11 harder to repay their loans. According to the most
12 recent census data by 2020 65 percent of all jobs
13 will require a college degree. In New York 69 percent
14 of all jobs will require post-secondary education
15 thus equipping our high school graduates with a
16 college degree will prepare them for the future.
17 Additionally, data also show that individuals with
18 higher levels of education are more likely to read to
19 their children who are likely to attain at least the
20 equivalent amount of education as their parents. I
21 therefore encourage everyone here to reach out to
22 your state representatives as well as Governor Cuomo
23 and urge them to support Assembly Bill 6811, Senate
24 Bill 5120. President Trump so calls America First
25 Budget cuts billions of dollars to crucial programs

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2 for low income students and other important supports
3 for underserved students which will do nothing to
4 address the rising tuition, college access, or
5 college graduation. We have a collective
6 responsibility to respond at the state and local
7 level and to work together to ensure that New York
8 City students are afforded the opportunity to attend
9 and graduate from college without crippling student
10 loans. Do any of my colleagues want to have comment
11 on that preconsidered resolution? Okay, thank you so
12 much. Now to the oversight topic, CUNY School of
13 Medicine. Building on the strong record of city
14 college Sophie Davis School of Biomedical Education,
15 the CUNY School of Medicine's mission is to recruit
16 and educate highly skilled medical practitioners to
17 provide quality health services in communities that
18 experience a shortage of primary care physicians.
19 According to the Association of American Medical
20 Colleges, AAMC, the national projected shortfall for
21 physicians will be between 7,300 and 41,100 by 2030.
22 The demand for physicians will only continue to
23 increase because within that same time period the
24 United States population is estimated to grow from
25 321 million to 359 million. One of the key reasons

1
2 why the supply of physicians has not kept up with the
3 demand is because many medical students are choosing
4 to specialize as opposed to becoming primary care
5 physicians. Many students make this choice based on
6 their student loans which average 180,000 dollars.
7 The national average... the average national income of
8 a primary care physician is less than 2,010... 210,000
9 dollars while incomes for certain specializations are
10 well over 380,000 dollars. However, because CUNY
11 medical students will be graduating with lower
12 student loans they will have greater flexibility in
13 choosing to become primary care physicians. Medical
14 schools have not done a good job in aggressively
15 recruiting students of color. Nationally the
16 Association of American Medical Colleges indicates
17 that black women account for only two percent of all
18 physicians. For black males that number is even more
19 distressing because only 515 students matriculated
20 medical schools across the country in 2014 or 27
21 fewer black men than in 1978. Additionally, despite a
22 243 percent increase in the Latino population, from
23 1980 to 2010 the Latino doctors has decreased by 22
24 percent. And I also want to as we're talking about
25 history want to cite Doctor Susan Smith McKinney who

1
2 was the first female African American to graduate in
3 New York State, she graduated in 1867 from the New...
4 from New York Medical College for Women and she was
5 the valedictorian of her class, just to let you know
6 the caliber of people that we're talking about and we
7 also want to cite perhaps more commonly known black
8 doctors as Doctor Hale Williams, Doctor Charles Drew,
9 Doctor Ernest Everett Just. So, we have a history of
10 having significant black doctors. These developments
11 are extremely disappointing because minority
12 physicians are more likely than their white
13 counterparts to work in underserved minority
14 communities. Increasing diversity is an important
15 step towards enhancing cultural and linguistic
16 competent care which utilizes the knowledge, skills,
17 and attitudes required to bridge ethnic, cultural,
18 and linguistic gaps between patients and physicians.
19 According to the American Association of Medical
20 Colleges the average cost of a four-year medical
21 school tuition is nearly 230,000 dollars whereas at
22 the Sophie Davis School of Biomedical Education
23 tuition is about a tenth of that. Tuition for the
24 bachelors portion of the Biomedical Education Program
25 is consistent with full time enrollment at city

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2 college at 3,165 dollars per semester for New York
3 State residents and 560 dollars per credit for non-
4 resident students. For the doctor of medicine in
5 medical education the proposed tuition is 19,000
6 dollars per semester for resident students and 31,630
7 dollars per semester for non-resident students which
8 is consistent with the rate charged by the state
9 university of New York System for its medical school.
10 We do want to note however that in Cuba if you wanted
11 to go to medical school it would be free. During
12 today's hearing, I'm interested in an overview of the
13 first year of the new CUNY School of Medicine as well
14 as its recruitment efforts especially with regard to
15 attracting underrepresented minorities. I would also
16 like to receive a demographic breakdown, breakdown of
17 the inaugural class as well as the faculty and
18 advisors. Additionally, I'm interested in learning
19 more about the school's medical curriculum programs
20 available to assist students in navigating their
21 coursework including information of the school's
22 efforts to maintain diversity and inclusion. I would
23 also like to know the status of the campaign to raise
24 20 million dollars in scholarships to provide the
25 inaugural class with interest free loans. I would

1
2 like to acknowledge my colleagues on the committee
3 who are here present; Council Member Vacca, Council
4 Member Rodriguez. Also, I'd like to thank M. Ndigo
5 Washington, my Director of Legislation; Joy Simmons,
6 my Chief of Staff and CUNY liason; Kiru Jachiru [sp],
7 Council... Committee Council; Chloe Rivera, the
8 Committee's Policy Analyst, and Jessica Ackerman, the
9 Committee's Finance Analyst. Now in accordance with
10 the rules of the council I'll ask my council to
11 administer the oath and we're going to call the first
12 panel. We're going to have the Vice Chancellor, Vita
13 Robinowitz from Central Administration, Dean Maurizio
14 Trevisan, CUNY Medical School, and Mr. Stephan
15 Lestin, a student at CUNY's Medical School, if you
16 would come forward please, thank you. Have a seat
17 right there, thank you. Now we have full lighting.

18 COMMITTEE CLERK: Thank you, please raise
19 your right hand. Do you affirm to tell the truth, the
20 whole truth and nothing but the truth in your
21 testimony before this committee and to respond
22 honestly to the council members questions? Thank you.

23 STEPHAN LESTIN: I do.

24 COMMITTEE CLERK: Thank you.

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2 CHAIRPERSON BARRON: Thank you, you may
3 begin.

4 VITA RABINOWITZ: Thank you, good morning
5 Chairperson... [cross-talk]

6 COMMITTEE CLERK: Excuse me, just turn on
7 the mic please.

8 CHAIRPERSON BARRON: The light should be
9 on, yes...

10 VITA RABINOWITZ: Okay...

11 CHAIRPERSON BARRON: Pull it a little
12 closer... [cross-talk]

13 VITA RABINOWITZ: Good, better?

14 CHAIRPERSON BARRON: Yes.

15 VITA RABINOWITZ: Okay, great thank you.
16 Good morning Chairperson Barron and, and Higher
17 Education Committee of the City Council. Before
18 delivering the Chancellor's remarks regarding the
19 CUNY School of Medicine I want to convey his and my
20 profound gratitude to the council, to this committee
21 and especially to Chairperson Barron and Council
22 Member Vacca for your most generous support of CUNY's
23 remediation reform effort in the city approved
24 budget. Sorry... Council Chair Barron, again Councilman
25 Vacca, Committee members please know that your

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2 allocation is going to make a critical difference in
3 our ability to accelerate our implementation efforts
4 and I look forward to sharing with you our progress
5 in improving remedial outcomes, reducing achievement
6 gaps, and raising graduation rates at CUNY. I also
7 want to thank you Chair Barron and members of the
8 committee for this opportunity very much appreciated
9 to discuss the new CUNY School of Medicine and to the
10 extremely important mission it is fulfilling for the
11 people of New York. I am Vita Rabinowitz, CUNY's
12 Executive Vice Chancellor and University Provost and
13 I am here today speaking on behalf of Chancellor
14 Milliken who was unable to appear in person because
15 of health issues that I am delighted to report are
16 improving. I will be reading his prepared testimony
17 but the medical school and its important work are
18 priorities for him, for me, and for the entire
19 university. So, I am pleased to be here to have the
20 opportunity to be with Dean Maurizio Trevisan, one of
21 our students, Stephan Lestin and the... several other
22 students from CUNY Med who have come here today as
23 well as representatives of our highly valued partner,
24 the Saint Barnabas Health Care System who can help
25 provide the overview that you want and answer any

1
2 questions you may have. The mission of the CUNY
3 School of Medicine is not just vital to our city, it
4 is intimately connected with the University's overall
5 mission and our new strategic vision. As Chancellor,
6 I made the opening of our new medical school one of
7 my highest priorities and it is very meaningful to me
8 that our partners have joined us in making it a
9 reality. It is essential that CUNY continue its
10 decades of hard work in creating opportunities for
11 medical education to students from underrepresented
12 groups and make quality healthcare available to the
13 underserved areas of our city. The school is
14 intrinsically collaborative, an important objective
15 in our strategic framework. It is deeply connected to
16 significant needs of our city since the school's
17 fundamental aims involve increasing the diversity in
18 the medical field, producing badly needed primary
19 care physicians where there is a serious, serious
20 shortage in the city, and bringing quality healthcare
21 to underserved communities, an ongoing problem that
22 our school addresses in innovative ways that is why I
23 believe that the medical school speaks volumes about
24 who we are at CUNY and the many ways we contribute to
25 making New York prosperous and exciting while

1
2 providing exceptional opportunities to our students.
3 As you stated Chair Barron originally the program was
4 founded decades ago in 1973 as the Sophie Davis
5 School of Biomedical Education. For promising young
6 students. Sophie Davis provided a five-year program
7 that gave students a bachelor of science degree and
8 then the first two years of medical school focused on
9 basic science education stopping short of the
10 following two years which include intensive clinical
11 education. the students then went on to complete
12 their medical degrees at one of a number of other
13 medical schools with which CUNY had built strong
14 relationships. We enjoyed great success for many
15 years with that model and Dean Trevisan will
16 highlight some of these successes shortly. As proud
17 as we are of our results over these many years the
18 world changed and we needed to adapt to ensure that
19 our mission and our contributions could be sustained
20 for our students and our communities. For a variety
21 of reasons, the slots with the final two years of
22 medical training were disappearing and it was growing
23 increasingly difficult to place Sophie Davis students
24 in appropriate schools to complete their degrees. In
25 addition, some schools were altering their teaching

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2 models by introducing more and more clinical training
3 into the first two years of medical school creating
4 further challenges for our approach. Our staff was
5 able to assess the issues and identify what became an
6 excellent solution that we believe will continue to
7 serve New Yorkers well for decades to come. We formed
8 a partnership with the Saint Barnabas Health System
9 in the South Bronx as our teaching partner and the
10 first class commenced in 2016. We appreciate very
11 much the substantial support we received from the
12 Governor and the state as well as from the city
13 council and the city. Our new program covers seven
14 years and we continue to recruit directly from high
15 school. Our Director of Admissions is in the audience
16 today. We believe that this is an excellent track for
17 students passionate about building careers in
18 medicine in New York City. We work closely with many
19 high schools in the area to identify good candidates
20 and make students aware of the opportunity that the
21 CUNY Medical School provides to highly motivated
22 students. We are delighted with the response from
23 applicants and the makeup of our classes. At this
24 time 62 percent of our enrolled students are females
25 and 38 percent males. About half of the entering

1
2 class is from underrepresented minorities, 59 percent
3 are the sons and daughters of immigrants and 11
4 percent are immigrants themselves for a total of 70
5 percent. You could hardly find anywhere in the nation
6 a group better positioned to understand and
7 contribute to the underserved parts of our city. More
8 importantly you could hardly find a group more
9 representative of the promise of this city's and this
10 nation's future. So, thank you again for your
11 interest in the CUNY Medical School, for your
12 support, and we look forward to learning how we can
13 improve and how we can be responsive to the city's
14 interest. Thank you Chairwoman Barron.

15 MAURIZIO TREVISAN: Can you hear me,
16 good. Thank you, Chairperson Barron and members of
17 the committee, for the opportunity to discuss the
18 important developments of the CUNY School of Medicine
19 and the impact that it has on our community. I am
20 Maurizio Trevisan, the Dean of this medical school
21 located in Harlem, I myself live in Harlem. I want
22 first of all to take this opportunity to thank the
23 city council for your support for CUNY and the School
24 of Medicine throughout the years. As Vice Chancellor
25 Rabinowitz indicated the challenge that we were

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2 facing required us to rethink the school and now we
3 have been approved by the state to grant BMD degree
4 and have received preliminary accreditation by the
5 accrediting medical school, the liaison committee on
6 medical education in June 2015. We are excited again
7 to have a strong community partnership with Saint
8 Barnabas Health System, the Medical Director of the
9 hospital and the Chair on Medicine are here to
10 support the testimony and to speak if you have any
11 specific questions about the association. As the
12 Chairperson Barron indicated our mission has remained
13 unchanged over the years to provide access to medical
14 education to talented youth from social ethnic and
15 racial backgrounds historically underrepresented in
16 medicine and to develop physicians committed to
17 practice in underserved communities with a special
18 emphasis on primary care. Financial aid and
19 scholarships. Our BS-MD students now pay the CUNY
20 undergraduate tuition as the... as Chairperson Barron
21 said for the first three years and then the 38,000
22 dollars a year for the medical school year, years
23 four through seven. Currently during the college
24 years one to three most of the students, 80 percent
25 receive financial support in the form of need based

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2 federal and state aid, merit based scholarship or
3 both. Annually we provide... the school provides more
4 than a... one million dollars in scholarships and
5 fellowships every year to our students. Approximately
6 seven to 800,000 is provided during the college years
7 and about 300,000 is provided during the medical
8 school years. A new service based scholarship will be
9 made available next year for eight students per class
10 in the medical school years that will cover 50
11 percent of the annual tuition costs of a total of
12 608,000 dollars per year when fully implemented. We
13 do realize that while the school of medicine has the
14 least expensive tuition of all medical schools in the
15 state, the tuition burden is high especially for the
16 type of students we recruit and we work continuously
17 and diligently to find opportunities to establish
18 scholarships for our students throughout our, our
19 development office. I will briefly talk about the
20 recruitment now and the answer to the seven year BS-
21 BM program is directly from high school, recruitments
22 of applicants to the school combines vigilant
23 attention to area high schools, routine participation
24 in various regional and school based college fair,
25 partnerships with various enrichment programs and

1
2 most recently the initiation of our own Pipeline
3 Program. The office of admissions staff and many
4 current students in the school are involved in these
5 efforts. In addition to this traditional recruitment
6 effort we have started a series of Pipeline and
7 Program in the school. The Sophie Davis Health
8 Profession Mentorship Program is, is focusing on
9 providing high school students the impetus and the
10 knowledge to, to select a health career and its
11 focused mostly on underrepresented in the...
12 communities who are underrepresented in the health
13 profession. Currently 30, 30 percent of the
14 participants are Hispanics, 30 percent black and
15 African American and two thirds of the participants
16 in the Pipeline Program are from economically
17 disadvantaged high schools. The second Pipeline
18 Program is to grow our own doctor or god projects...
19 good projects founded this year in 2016 by the West
20 Harlem Development Corporation and is a collaboration
21 between the school of medicine and the A. Philip
22 Randolph High School. finally we have the Health
23 Professions Recruitment Exposure Program that is run
24 since 2015 completely by our students, they go to, to
25 the high school to expose the students, inspire,

1
2 recruit and mentoring minority high school students
3 who are interested in medicine, science, or research.
4 The admission process is a very competitive one,
5 recruitment activity results in an applicant pool of
6 slightly more than 1,000 applicants this year, we had
7 about... we had 1,228 and we, we recruit approximately
8 90 students about 25 percent of the applicant pool is
9 interviewed following a thorough review of
10 application including academics, school activities,
11 and community service. Invited applicants to receive
12 three interviews, one from a current student and two
13 from faculty or staff for the school including one
14 who is a member of the admissions committee. The
15 admission committee ranks applicants based on the
16 whole file review and presentation by the interviewer
17 to the full committee, this is a... this holistic
18 approach that we use closely follow the
19 recommendation from the Association of American
20 Medical Colleges. We continue to be successful in our
21 mission of enrolling students from communities that
22 are underrepresented in the medical field. As Vice
23 Chancellor Rabinowitz indicated 62 percent of our
24 enrolled students are female in the first class and I
25 can tell you that this year the students entering the

1
2 first year the, the percentage of women is even
3 higher because its 67 percent, 50 percent of our
4 entering class in the medical school comes from
5 groups that are represented in medicine, about 30
6 percent are African, African Americans or black and
7 about 20 percent are Latinos, Hispanics and as Vice
8 Chancellor Rabinowitz said 70 percent of our students
9 are either migrant themselves or sons or daughters of
10 migrants. The table provides the breakdown in, in
11 ethnicity in more detail. Our curriculum is
12 particularly relevant to the ability... to our ability
13 to inspire students to pursue a career in primary
14 care and to be conscious of the social forces that
15 determine the health of, of, of the students. While
16 they pursue art education during the college of the
17 program our students begin to learn the fundamental
18 sciences of the medical curriculum and are exposed to
19 an extensive population health in community oriented
20 primary care curriculum with great emphasis on the
21 societal forces that shape the health of our
22 communities. The social determinacy of health and the
23 principals of, of health equity. I can easily say
24 that this is most likely the most extensive program
25 in the country about focusing on this kind of issues

1
2 in a medical school. The, the school of medicine has
3 an extensive support system for our students that
4 spans from academic support to advising, mentoring,
5 and support of the psychological and social
6 wellbeing. The current financial resources for the
7 medical school are comprised of several sources. We
8 are currently spending approximately ten million
9 dollars to upgrade our facilities and these funds
10 include three million dollars from the city council
11 in addition to the states funding and I want to take
12 this opportunity to express again my deepest
13 appreciation and gratitude for the generosity of the
14 council in supporting our, our capital facilities
15 improvement. In terms of the current operating budget
16 for the academic year 2016-17 the sources are 11...
17 approximately 11 million dollars in tax state funding
18 that is basically the transfer from the old Sophie
19 Davis School of Medical Education to the CUNY School
20 of Medicine. In addition we have 2.8 million from
21 CUNY and tuition revenues of 2.6 million from the MD
22 Program because we have only one class. At the time
23 of full enrollment in the program in 2018 the
24 resources are generated by the tuition of the full
25 medical school per year will be approximately ten and

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2 a half million dollars and approximately 1.4 million
3 dollars in the Physician Assistant Program. So, the
4 table that you have in my written testimony
5 highlights the, the, the total budget at full
6 enrollment 2019 would be approximately 26 million
7 dollars. As, as Vice Chancellor Rabinowitz indicated
8 we are very proud of the fact that our beginning of
9 the new medical school has remained on track with the
10 success and the achievement of the old Sophie Davis
11 Program and in fact I would like to just report some
12 of the statistics in regard to our, our more than
13 2,000 graduates that, that have been graduated from
14 medical school since the beginning of the program.
15 For the last... the, the percentage of graduates in the
16 last 20 years who were underrepresented minorities 35
17 percent, approximately 60 percent have their New York
18 State license, this compares to usually a much lower...
19 much lower rate for people because there's a lot of
20 migration out of the state after medical school.
21 Forty, forty... almost 41 percent are primary care
22 physicians this compares to an... to the national
23 average about 30 percent, over half of the American,
24 Americans 52.3 and Latino 51 percent graduate chose
25 primary care and to support the statement of

1
2 Chairperson Barron then students from minorities
3 background tend to more frequently select primary
4 care as their, as their, as their career. And finally
5 26 percent of our graduates practice in our
6 professional shortage areas, medically underserved
7 area, population designed by HRSA as having too few
8 primary care providers, high infant mortality, high
9 poverty and or high elderly population this 26
10 percent compares to about 14 percent in New York
11 State that work in the health profession here so our,
12 our, our graduates almost twice as much as the rest
13 of the.. of the.. graduates from medical school. I'd
14 like to thank you for the opportunity to share this
15 information with you about our unbelievably special
16 school and I'd be happy to answer any questions.
17 Thank you.

18 CHAIRPERSON BARRON: Thank you and next
19 panelist.

20 STEPHAN LESTIN: Just making sure it's
21 on, alright. Good morning Chairperson Barron..
22 Chairperson Barron and members of the committee, I
23 would like to thank you guys for having me today to
24 give my personal testimony about Sophie Davis. I
25 would like to briefly share a story about myself

1
2 prior to me starting my testimony because I feel like
3 for you to truly appreciate where you're heading you
4 have to take... you have to look back and see where you
5 started from. As a kid growing up my mother as an
6 immigrant always let me know that she came here to
7 this country to give me the opportunities that she
8 never had... [cross-talk]

9 CHAIRPERSON BARRON: Excuse me if you
10 could put your name into the record please, give us
11 your name.

12 STEPHAN LESTIN: Oh I'm sorry, my name is
13 Stephan Lestin. I'll start... I'll start over. My name
14 is Stephan Lestin and as a kid growing up my mother
15 as an immigrant would always let me know that she
16 came to this country to give me the opportunities
17 that she never had. She told me that education is the
18 one thing that nobody can ever take away from you and
19 she told me that she was not a celebrity and could
20 not give me all the things celebrities could but the
21 one thing that she can guarantee me was that I was
22 going to get a good... a good education. With that
23 being said prior to starting my senior year of high
24 school my mother unexpectedly lost her job and that
25 being said she was unable to keep up with the tuition

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2 of my school at the time and there we go I was going
3 to be losing the very education that I was told that
4 I wouldn't be able to lose but with a stroke of luck
5 and a generous donor I was able to receive a full
6 scholarship for my senior year of high school and
7 when I met with the donor he told me that he had
8 heard about my story of wanting to become a doctor
9 and let me know that he saw himself in me and told me
10 that he was giving me a scholarship because he wants
11 me to be somebody that does something good in the
12 world. Fast forward... fast forwarding five years from
13 then I can officially say that I am now a graduate of
14 the Sophie Davis School Biomedical Education and in
15 two years I'm on track to receiving my medical degree
16 from New York Medical College. However while I was in
17 Sophie I often found myself asking this question,
18 what are you fighting for. In our respective lives we
19 are driven by the sense of purpose in order to fuel a
20 desire to accomplish the wonderful and uncertain
21 goals we assign ourselves. This drive is it
22 encouraged or deterred by the hardships we encounter.
23 Exposure to the harsh reality of being the eldest
24 child raised by a single mother of two and enduring
25 hardships such as her loss of employment have allowed

1
2 me to comprehend the deterring forces of success in
3 underrepresented neighborhoods. However the hardships
4 I encountered are not uncommon within youth minority
5 populations. Fortunately my strong support system has
6 not only helped me overcome the mounting obstacles in
7 my life but also intensify my passion to become a
8 physician. Thus the desire to support, educate, and
9 heal the upcoming generation despite the stereotype
10 labor society became engrained within my mind. Proud
11 of my acceptance into Sophie Davis I remember being
12 told discouraging phrases such as you won't get in,
13 you aren't smart enough, why didn't you apply to
14 easier schools which at the time I believe were true.
15 In hindsight I now see that minority students are
16 often the most susceptible to these statements due to
17 the many socioenvironmental factors that prevent them
18 from achieving academic excellence. I can attest that
19 without the support of many faculty members and my
20 fellow classmates that I would not have been able to
21 complete this program. During my time here I was able
22 to participate in support groups such as Black Male
23 Initiative otherwise known as BMI which was designed
24 to increase the retention rates of black males within
25 the Sophie Davis... Sophie Davis Program and was led by

1
2 Mr. Gerald Urse. BMI consisted of bi-weekly meetings
3 which included one on one mentorship with both
4 upperclassmen and alumni, open group discussions on
5 academic techniques, internships, jobs, and research
6 opportunities. Through Sophie Davis and BMI I was
7 able to work with award winning scientist at Memorial
8 Sloan Kettering Cancer Center researching a diverse
9 array of fields ranging from advanced brain tumors to
10 even studying the effects of marital status on the
11 cardiovascular health of immigrant taxi cab drivers.
12 And I was even allowed to present my work at national
13 scientific conferences in both Texas and Florida. My
14 entrance into Sophie Davis has not only granted me...
15 has not only granted me access to a career in
16 medicine but it also serves as a platform for me to
17 inspire and motivate a younger generation. My
18 interactions while working with the youth... the youth
19 in Harlem Health Centers allowed me to witness the
20 complexities of medicine and fully comprehend that is
21 a multifaceted topic that we used together, clinical
22 knowledge, and social understanding and support of a
23 patient's voice. Growing up in similar backgrounds I
24 continuously see that mentorship played a vital role
25 in my success up until this point. To pay it forward

1
2 I desired to make a positive educational change
3 within my community. As Vice President of Student
4 National Medical Association SNMA, I led A.P.
5 Randolph High School Mentoring Program to establish a
6 center for change encouraging students... encouraging
7 more students to... in pursuit... encouraging more
8 students to attend college in pursuit of their
9 dreams. I forged a lasting bond with my mentee, a
10 disadvantaged young man like myself by relating to
11 his personal life and transforming his shortcomings
12 into tools of motivation. As an external tool I was
13 able to internalize problems of youth and motivate
14 them. when invited back to A.P. Randolph High School
15 for their... as the key note speaker to their gateway
16 to medicine induction ceremony I was discovered that
17 my mentee was awarded a full scholarship to Princeton
18 University. My ability to help one student achieve
19 his dreams of going to college sparked a passion to
20 mentor others. In addition I was given the
21 opportunity to lead Sophie Davis's first Health,
22 Health Professions Mentorship Pipeline Program. This
23 two-year mentoring program was designed to introduce
24 minority high school students across the New York
25 City area to help profession careers. In light of

1
2 this program our pipeline graduating class has seven
3 out of the 30 students attending Sophie Davis in the
4 fall and the others will pursue health careers at
5 schools such as Brown University, Penn State, Fordham
6 University, CUNY Albany, and Macaulay's honors
7 programs at both Hunter and Brooklyn College but by
8 far my favorite aspect of being a Sophie Davis
9 student was being surrounded by such inspirational
10 peers. Behind the scenes many of my classmates dealt
11 with both personal a familial illness, language
12 barriers, and financial crisis but still managed to
13 make it to class every day and excel while keeping a
14 smile on their faces. I will forever be grateful for
15 Sophie Davis for nurturing us into not only
16 physicians who are academically brilliant but also
17 wholesome, compassionate, empathetic, and culturally
18 competent individuals. We are constantly taught to be
19 our patients advocates and become doctors who do not
20 sit idly in the face of health and social injustice
21 but take action. Examples of this include last year's
22 BMI, Flint Water Crisis benefit dinner in which we
23 raised approximately 4,000 dollars to provide fresh
24 water, supplies, and goods to those effected in
25 Flint, Michigan. As well as my many classmates who

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2 traveled to Ghana to provide medical assistance free
3 of charge to local villages my peer service is a
4 constant reminder that there's no limit to our
5 potential in redefining the face of medicine. My
6 enlightening experiences with patients, peers,
7 faculty, and research while at Sophie Davis allowed
8 me to see the importance of viewing patients
9 holistically. As a future physician I will view
10 patients beyond the scope of their physical disease
11 by listening to their stories and supporting them on
12 their journey to improvement. I intend to unite my
13 two greatest passions; medicine and education to
14 bring healing to others thus my question is finally
15 answered, I fight to help others realize their
16 potential, I fight to serve my community, and I fight
17 to make a difference. Thank you.

18 CHAIRPERSON BARRON: Thank you so much. I
19 want to thank the panel for their testimony. This is
20 an exciting time because this is in fact an analysis
21 or an evaluation of what we've done in this first
22 year so I've got lots of questions and I'm sure my
23 colleagues do as well. In, in your testimony Dean
24 Trevisan you said that there's 49 percent that is the
25 under... that includes underrepresented minorities can

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you give me the breakdown of how many are black, how many Latino... [cross-talk]

MAURIZIO TREVISAN: 30 percent are black or...

CHAIRPERSON BARRON: Talk into the mic please.

MAURIZIO TREVISAN: Sorry, 30 percent approximately are blacks or African Americans and about 20 percent Latinos or Hispanics.

CHAIRPERSON BARRON: Okay, okay, good... [cross-talk]

MAURIZIO TREVISAN: There is... there is a little bit of... [cross-talk]

CHAIRPERSON BARRON: Yeah, I see that... [cross-talk]

MAURIZIO TREVISAN: ...because some, some, some of the kids... [cross-talk]

CHAIRPERSON BARRON: Right... [cross-talk]

MAURIZIO TREVISAN: ...report both... [cross-talk]

CHAIRPERSON BARRON: ...multiple ethnicity... [cross-talk]

MAURIZIO TREVISAN: ...Hispanic and... [cross-talk]

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CHAIRPERSON BARRON: ...I see that... [cross-talk]

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MAURIZIO TREVISAN: ...and, and black so its... [cross-talk]

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CHAIRPERSON BARRON: Okay, I see that.

And for the students that are in your entering class as freshman, the inaugural class, are they all...

what's the majority... or what's the percentage of

those who are continuing from Sophie Davis as opposed

to those who may have come in... [cross-talk]

MAURIZIO TREVISAN: They will all

continue with Sophie Davis... [cross-talk]

CHAIRPERSON BARRON: They're all

continuing so all of these students are from the

Sophie Davis... [cross-talk]

MAURIZIO TREVISAN: Yes... [cross-talk]

CHAIRPERSON BARRON: Going forward is

that going to also be the case... [cross-talk]

MAURIZIO TREVISAN: We will... we will

always be a, a BS-MD Program seven years and the

reason why we do that because as I indicated in, in,

in many medical schools the curriculum is four years

so there is a very... there is a huge competition among

topics so if I want to spend time teaching you how to

1
2 be socially relevant to the individual I, I need to
3 compete with genetics, biochemistry... [cross-talk]

4 CHAIRPERSON BARRON: Uh-huh... [cross-talk]

5 MAURIZIO TREVISAN: ...because we have the
6 seven years we use the, the three years of college to
7 intertwine the three years of college all... a lot of
8 the population and social factors, it's, it's not
9 very... in most of the countries in the world kids go
10 to medical school after high school and... [cross-talk]

11 CHAIRPERSON BARRON: Right... [cross-talk]

12 MAURIZIO TREVISAN: ...and do a six or
13 seven-year program, no this is not... is not... so to, to
14 me the secret of our success is due to the fact that
15 we have the ability to incorporate in our teaching
16 for seven years all these concepts.

17 CHAIRPERSON BARRON: So, in order to be a
18 participant you have to come in at the beginning?

19 MAURIZIO TREVISAN: Yes... [cross-talk]

20 CHAIRPERSON BARRON: You cannot come in
21 midway, you won't have... [cross-talk]

22 MAURIZIO TREVISAN: ...no, you cannot...
23 [cross-talk]

24 CHAIRPERSON BARRON: ...any transfer...
25 [cross-talk]

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MAURIZIO TREVISAN: ...the, the high

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school... [cross-talk]

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CHAIRPERSON BARRON: ...students coming in...

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[cross-talk]

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MAURIZIO TREVISAN: ...graduate or be a

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first-year college student with no more than one

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semester of coursework.

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CHAIRPERSON BARRON: Okay, so it's only

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those who have come in through Sophie Davis, no one

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else can be able to... [cross-talk]

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MAURIZIO TREVISAN: ...no one... no one else...

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[cross-talk]

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CHAIRPERSON BARRON: ...to enter at another

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point, okay. That... I needed to understand that. So,

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then we need to look at the students who are admitted

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to the Sophie Davis Program.

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MAURIZIO TREVISAN: Correct.

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CHAIRPERSON BARRON: And part of my

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briefing indicated that they needed to have I think

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an 85 average in chemistry and biology and other

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science courses and math courses as well. In your

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selection criteria what factor does ethnicity play,

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when you finally selected the 70 students... well when

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you finally selected the students in any entering

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2 class how does ethnicity... how does the fact that
3 someone is black or Latino factor into all of the
4 other criteria that's used to select your students?

5 MAURIZIO TREVISAN: So, quotas are, are
6 illegal, you cannot use quotas and say we want...

7 [cross-talk]

8 CHAIRPERSON BARRON: Correct... [cross-
9 talk]

10 MAURIZIO TREVISAN: So our holistic
11 approach focuses on the... on the desire of the
12 students to have... to become primary care physicians
13 and to care for the community and the, the, the
14 ultimate... the ultimate figures have demonstrated that
15 this approach generates a fairly high level of
16 minorities to come in, that should give you an... as
17 you said we have 30 percent blacks and African
18 Americans, nationally six percent of the... of, of the
19 students are black. So, I... it's, it's... we, we, we
20 know... we, we do not focus specifically I'll say we
21 need to get so many blacks in or so many Latinos but
22 the system... the process is... [cross-talk]

23 CHAIRPERSON BARRON: Process... [cross-
24 talk]

25 MAURIZIO TREVISAN: ...such... [cross-talk]

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CHAIRPERSON BARRON: ...and the criteria...

[cross-talk]

MAURIZIO TREVISAN: ...that it really facilitates this kind of... this... and the interesting thing to me is that if you'll look at the selectivity as a college we have selectivity slightly lower than the MIT, it's a very highly, highly selective program and our data shows that you can be selective and still have a very diverse class, that you don't need to... you don't need to become monochromatic in order to have... [cross-talk]

CHAIRPERSON BARRON: Uh-huh... [cross-talk]

MAURIZIO TREVISAN: ...to have top class.

CHAIRPERSON BARRON: Okay, thank you. In terms of the faculty are, are you anticipating an increase in how many more faculty persons you anticipate you're going to need as your... [cross-talk]

MAURIZIO TREVISAN: We... [cross-talk]

CHAIRPERSON BARRON: ...extending this... [cross-talk]

MAURIZIO TREVISAN: ...we are in the process of... I believe recruiting an additional 30 faculty in the next four or five years.

CHAIRPERSON BARRON: 30 positions?

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MAURIZIO TREVISAN: 30... roughly, yeah.

CHAIRPERSON BARRON: Okay and presently how many faculty do you have in the program?

MAURIZIO TREVISAN: I have the data here... one moment...

CHAIRPERSON BARRON: Okay.

MAURIZIO TREVISAN: Okay... alright, here we go... no, this is graduating class... here we go.

CHAIRPERSON BARRON: Thank you.

MAURIZIO TREVISAN: Full, full time faculty we have 46 full time faculty, we have 57 full time staff and we have nine senior administrators, deans and associate deans.

CHAIRPERSON BARRON: Do you have any part time?

MAURIZIO TREVISAN: We have adjuncts, yes that come to help us with the... with lecturing for instance we have... in addition to the... to the Saint Barnabas physicians who come in to teach the clinical correlates in the first year, we may have some other clinicians who come and talk about... nephrologist that comes and talks about the kidney and I don't really have a, a clear figure of the number of adjuncts that we have, Priscilla?

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CHAIRPERSON BARRON: So, the adjuncts are basically clinicians in the field who... [cross-talk]

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MAURIZIO TREVISAN: ...It's, it's mostly

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CHAIRPERSON BARRON: ...are coming in...

[cross-talk]

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MAURIZIO TREVISAN: ...practitioners, yes.

It can be... can be for instance a behavior scientist

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or a psychologist or some... it, it's mostly

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practitioners.

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CHAIRPERSON BARRON: And what is the

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ratio of... for the, the... for the portion of the

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program that's the BS-MD what's the ratio... [cross-

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talk]

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MAURIZIO TREVISAN: The full-time

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faculty?

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CHAIRPERSON BARRON: No, what's the ratio

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of... yes, students... [cross-talk]

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MAURIZIO TREVISAN: ...of the full-time

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faculty... [cross-talk]

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CHAIRPERSON BARRON: ...to faculty...

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MAURIZIO TREVISAN: The full... [cross-

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talk]

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CHAIRPERSON BARRON: ...to students?

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MAURIZIO TREVISAN: The full-time faculty is 56, 56 percent... the breakdown for... that's what you were asking for, I'm sorry?

CHAIRPERSON BARRON: The ratio of... how many students does each faculty member have responsibility for, if we were to break it down...
[cross-talk]

MAURIZIO TREVISAN: Yeah... [cross-talk]

CHAIRPERSON BARRON: ...and divide the number... [cross-talk]

MAURIZIO TREVISAN: So, the ratio we...
[cross-talk]

CHAIRPERSON BARRON: ...of students...
[cross-talk]

MAURIZIO TREVISAN: ...have 46 faculty and we have... about 350 BS-MD students so 46 divided by 350... seven to one.

CHAIRPERSON BARRON: About seven to one, okay. Okay. So, in a... according to a New York Times article the CUNY School of Medicine was established to help mitigate the issues with regard to placing students in their clinical rotations and I understand that the federal government had to establish a cap

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2 and there weren't the number of physicians that would
3 accommodate graduate... [cross-talk]

4 MAURIZIO TREVISAN: There are a number of
5 challenges...

6 CHAIRPERSON BARRON: Yes.

7 MAURIZIO TREVISAN: One of them is the...
8 that all... because of the shortage of physicians all
9 the medical schools in this country, most of them
10 have increased their class size so have our
11 colleagues in New York so as they increase their
12 class size there is pressure on them to find clergy
13 ship slots for their own students and then the other
14 challenge that we have is that we have a lot... a, a
15 large number of clergy ship slots who are taken by
16 offshore schools. There are many offshore schools who
17 have clergy ship as... somebody told me and I'm not
18 sure it's true that more than 50 percent of the
19 clergy ship slots in New York are taken by offshore
20 schools and that's represented a major challenge for
21 all the... for all New York medical schools so this
22 combination has been lethal for us... lethal for us.

23 CHAIRPERSON BARRON: So, these so called
24 offshore schools are... is... what is the financial,
25

1
2 financial advantage that, that hospitals have in
3 accepting their students?

4 MAURIZIO TREVISAN: So, in... I believe... I
5 believe and I'm, I'm not sure that the offshore
6 schools pay up, up to or almost... around 20,000
7 dollars per students per year so it's a financial
8 incentive to hospitals they're all struggling with
9 the financial resources and the challenge is that
10 when we go... when we do a clerkship according to the
11 accreditation rules that has very strict rules so...

12 [cross-talk]

13 CHAIRPERSON BARRON: Yeah... [cross-talk]

14 MAURIZIO TREVISAN: ...you, you know...

15 [cross-talk]

16 CHAIRPERSON BARRON: Yes... [cross-talk]

17 MAURIZIO TREVISAN: ...in, in the, the
18 offshore schools are not accredited so there's less...
19 there's more leeway, they're not, not accredited by
20 the LCME, accredited with their own... their own thing.

21 CHAIRPERSON BARRON: Uh-huh...

22 MAURIZIO TREVISAN: And so there is less
23 leeway so the, the, the... there is... these... the money
24 that the hospital receives its really go to help
25 their bottom line.

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CHAIRPERSON BARRON: Right. In terms of

that problem of not having positions as students were
completing the Sophie Davis Program did you find that
there was perhaps a gap, did they have to wait...

[cross-talk]

MAURIZIO TREVISAN: Yes... [cross-talk]

CHAIRPERSON BARRON: ...did they... [cross-
talk]

MAURIZIO TREVISAN: ...actually we found
it... this year we have 13 or 14 students...

CHAIRPERSON BARRON: If, if... [cross-talk]

MAURIZIO TREVISAN: ...for the last few
years we have experienced years in which the students
graduate from us, they are accepted in a medical
school but the medical school that accepts them does
not have enough clergy ship slots and therefore they
have to wait a year, we put them on a... on a wait... in...
on a waiting list, this year is the last year we...
this is going to happen.

CHAIRPERSON BARRON: Right because you're
going to be continuing... [cross-talk]

MAURIZIO TREVISAN: Because now we have
our own... [cross-talk]

CHAIRPERSON BARRON: Right... [cross-talk]

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MAURIZIO TREVISAN: ...control and you know have... the students have... we have... we have helped the student to take advantage of this year to either increase their education by pursuing a master of public health or pursuing research and so we have tried to make the best out of the challenge, the students have been very creative in trying to use the, the extra year to actually improve their, their, their knowledge and their academics.

CHAIRPERSON BARRON: So, do you find that as they're doing something in the meantime that they stay in that field or do they just do that for the year and then go back, do you find that... [cross-talk]

MAURIZIO TREVISAN: For instance... [cross-talk]

CHAIRPERSON BARRON: ...students... [cross-talk]

MAURIZIO TREVISAN: ...many... we have five students this year that are waiting to get to down... go to down state... [cross-talk]

CHAIRPERSON BARRON: Right... [cross-talk]

MAURIZIO TREVISAN: ...while they are waiting they're pursuing the MPH at the school public health at downstate. So, they... [cross-talk]

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CHAIRPERSON BARRON: So, do you find that even though they may do something in the meantime they still come back... [cross-talk]

MAURIZIO TREVISAN: Oh yeah, yeah... [cross-talk]

CHAIRPERSON BARRON: ...and go back... okay.

MAURIZIO TREVISAN: These people are eager; these kids are eager.

CHAIRPERSON BARRON: Okay.

MAURIZIO TREVISAN: This, this, this does not... [cross-talk]

CHAIRPERSON BARRON: It doesn't deter them from getting... [cross-talk]

MAURIZIO TREVISAN: It doesn't... [cross-talk]

CHAIRPERSON BARRON: ...back in... [cross-talk]

MAURIZIO TREVISAN: ...it just adds an extra year.

CHAIRPERSON BARRON: Okay and then how is it that you came to partner with Saint Barnabas?

MAURIZIO TREVISAN: Because they are wonderful, that's true, we share... we have exactly the same mission, they, they care about the same thing we

1
2 care, underserved population. I had the first meeting
3 with the former CEO of the Saint Barnabas and the
4 Medical Director who was the... who is the CO now and
5 it was really love at first sight. We... it's, it's
6 really an unbelievable opportunity for us.

7 CHAIRPERSON BARRON: So, as the... as the
8 CUNY School of Medicine continues all of our students
9 in the program will be able to go to the partnership
10 that you have... [cross-talk]

11 MAURIZIO TREVISAN: Most likely... [cross-
12 talk]

13 CHAIRPERSON BARRON: ...with Saint
14 Barnabas... [cross-talk]

15 MAURIZIO TREVISAN: ...not all of them, we
16 have a... we have a... we have a, a... already have a
17 relationship with some of the HHC Hospital in, in
18 particular Harlem Hospital who will... who will be able
19 to pick some students so we are working to make sure
20 that all the students have... there are certain... there
21 are... there are certain clergy ships who are a
22 challenge for everybody in New York because there are
23 not that many, one of them is family medicine for
24 instance, there are many... so...

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CHAIRPERSON BARRON: So, all students
will have a placement if not at Saint Barnabas...

[cross-talk]

MAURIZIO TREVISAN: ...somewhere else...

[cross-talk]

CHAIRPERSON BARRON: ...at least... okay,
somewhere else and can you describe the partnership
with Saint Barnabas in a little more detail or will
that panel come and give us further details of
exactly how that's going to work?

MAURIZIO TREVISAN: So, the, the... just to
give you an, an idea that when we had the LCME, the
accreditation visit and we estimated the contribution
at Saint Barnabas was providing to the school it was
on the excess of six million dollars so six million
dollars that is the time that these physicians in
Saint Barnabas take to teach our students for which
we do not pay and then Saint Barnabas contributes to
this so it's, it's, it's substantial and generous
commitment on the part of the hospital.

CHAIRPERSON BARRON: Okay... [cross-talk]

MAURIZIO TREVISAN: But it's... the... Dr. Ed
Telzak who is the Chair of Medicine at Saint Barnabas
is actually the Chair of the Clinical Medicine

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2 Department in the Medical School so he's, he's not
3 only the Chair of Medicine at the hospital he's even
4 the Chair... the Academic Chair of the, the Clinical
5 Medicine Department in the Medical School, he
6 participates through all the meetings, the life, the,
7 the faculty at Saint Barnabas get appointed, CUNY
8 created the special title for, for the... for them so
9 they can go through the rank of assistant professor,
10 associate professor, full professor and they are...
11 they participate through the... through the... through
12 the life of the school as, as... in fact we just had...
13 Friday we had the nice retreat where we discussed all
14 the opportunities for collaboration and research in
15 education and it was really... it's a blossoming
16 relationship.

17 CHAIRPERSON BARRON: What are the
18 graduation retention rates at the Sophie Davis
19 School, what do... how do we calculate... [cross-talk]

20 MAURIZIO TREVISAN: So... [cross-talk]

21 CHAIRPERSON BARRON: ...students who...
22 [cross-talk]

23 MAURIZIO TREVISAN: ...historically?

24 CHAIRPERSON BARRON: Yeah...
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MAURIZIO TREVISAN: If you'll look at when we take the student the first year to when they graduated from the old Sophie Davis Program.. [cross-talk]

CHAIRPERSON BARRON: Right.. [cross-talk]

MAURIZIO TREVISAN: ...so... let me... let me tell you of the people that graduate from Sophie Davis over the last 40 years 96 percent of the graduates end up with a medical license so basically everybody but before... by, by the time we take the students in the first year and the graduation at five we lose about 20 to 25, 25 percent of the kids and we lose them for a number of reasons. Some of them realize that they don't want to be doctors they want... really was... this was the dream of their parents and not their dream. Some of them have significant, significant social challenges. For instance we had one alumnus who actually graduated who was homeless during, during the time of the... of the... of the Sophie Davis Program. We have a student I remember talking to one student who she's from... she was front Nigeria and all of a sudden, the family from Nigeria decided that she needed to take care of, of her two youngest daughters and so they shipped immediately so, so she

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2 was here alone in New York with two youngest
3 daughters and then, you know she was trying to work
4 full time to raise... to, to support their self, got...
5 come to school, be a mother. These are challenges
6 that... not the traditional challenges that medical
7 students face and... the other one is that they just
8 don't have the ability to, to meet with the... with the
9 requirement of the academic... the academic work is
10 fairly as a student can attest, they work very hard
11 and some of the students may come in... see this is my
12 personal belief, many... it's, it's easy to be at the
13 top of the class in high school, the, the only thing
14 you had to do was to be smart but once, once you come
15 in and everybody is as smart as you are you'll need
16 discipline in your studying, you'll need systematic
17 approach to study and some of the students don't have
18 the ability to deal with that.

19 CHAIRPERSON BARRON: If you could give me
20 the information as to the ethnic... the ethnic data in
21 terms of the graduation I would appreciate that...

22 [cross-talk]

23 MAURIZIO TREVISAN: We have... [cross-talk]

24 CHAIRPERSON BARRON: ... and in terms...

25 [cross-talk]

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MAURIZIO TREVISAN: ...44... [cross-talk]

CHAIRPERSON BARRON: ...of the school... the students that do come into your program do you find that there's a concentration of high schools that are the ones that feed into your program and what are those high schools?

MAURIZIO TREVISAN: Can I ask... [cross-talk]

CHAIRPERSON BARRON: Yes, anyone... [cross-talk]

MAURIZIO TREVISAN: ...the Director of Admissions... [cross-talk]

CHAIRPERSON BARRON: ...who's coming up, you can call the person and we'll have the... [cross-talk]

MAURIZIO TREVISAN: ...yeah... [cross-talk]

CHAIRPERSON BARRON: ...council... if you could just come up, there's a chair on the end you can pull yourself up. Vice President there's a chair on the end for you so that you can still be here.

CHRISTOPER: Thank you very much.

CHAIRPERSON BARRON: If you would... [cross-talk]

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CHRISTOPHER WANYONYI: Hello... [cross-talk]

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CHAIRPERSON BARRON: ...please raise your right hand, the council will have you... [cross-talk]

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COMMITTEE CLERK: Do you affirm to tell the truth, the whole truth and nothing but the truth in your testimony before this committee and to respond honestly to the council members questions?

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CHRISTOPHER WANYONYI: I do.

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COMMITTEE CLERK: Thank you.

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CHAIRPERSON BARRON: Thank you, give us your name and... [cross-talk]

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CHRISTOPHER WANYONYI: Thank you very much Council Member Barron. My name is Christopher Wanyonyi and I'm the Director of Admissions at Sophie Davis. So, I will tell you a little bit about how we recruit students. We do look... we do look at the high schools in New York City particularly the five boroughs, Westchester and Long Island and we try to identify schools that have a good representation of all races and we try to recruit from those schools. We try to recruit from schools that have a good proportion of first generation students and as you are aware we have had a lot of new schools that have

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2 been coming up. So, every year we select five to ten
3 new high schools and we try to visit them. So, that's
4 the first bat and over time we have established
5 several schools that are diverse enough to provide us
6 with all kinds of students that have a good diversity
7 of all students so those become our feeder schools.
8 Schools like Saint Francis Prep, we have public
9 schools in New York City that become our feeder
10 schools and as it was mentioned earlier we ask them
11 students from those schools to go back and to help us
12 to recruit. Secondly, we go to college fairs that are
13 theme oriented like the Latino college fair, we
14 participate in Harlem Wick for example, we have a
15 table there, we do participate in other ethnic groups
16 for recruitment. Thirdly we go to community centers,
17 churches, any community organization that has a
18 meeting where we meet with parents or, or students
19 and that's how we focus our recruitment.

20 CHAIRPERSON BARRON: So, do you find that
21 there are particular high schools that repeatedly
22 offer students that you select to participate in
23 your... in your program?

24 CHRISTOPHER WANYONYI: Yes, we do.

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2 CHAIRPERSON BARRON: And which are those
3 high schools?

4 CHRISTOPHER WANYONYI: We have for
5 example... I mentioned Saint Francis... [cross-talk]

6 CHAIRPERSON BARRON: ...Saint Francis Prep...
7 [cross-talk]

8 CHRISTOPHER WANYONYI: ...Prep... [cross-
9 talk]

10 CHAIRPERSON BARRON: ...right... [cross-talk]

11 CHRISTOPHER WANYONYI: ...we have Medgar
12 Evers High School which is in Brooklyn, we have the
13 Philip... A. Philip Randolph High School which is right
14 on campus... [cross-talk]

15 CHAIRPERSON BARRON: Uh-huh... [cross-talk]

16 CHRISTOPHER WANYONYI: ...and yes Brooklyn
17 Tech is one of the best feeder schools among the
18 selected schools because of the diversity of their,
19 their student body, we have schools in Queens like
20 Saint... not Saint Francis but Francis Lewis High
21 School, Benjamin Cardoza High School and we have
22 schools like Baldwin that will provide students that
23 are, are very diverse.

24 CHAIRPERSON BARRON: Okay, I certainly
25 know that the population at Medgar Evers High School

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has a large ethnic population as black as does A. Philip Randolph, Brooklyn Tech unfortunately one of those elite schools which has a very low number... [cross-talk]

CHRISTOPHER WANYONYI: Uh-huh... [cross-talk]

CHAIRPERSON BARRON: ...of black and Latinos and its ever... it's continually decreasing... [cross-talk]

CHRISTOPHER WANYONYI: Yes... [cross-talk]

CHAIRPERSON BARRON: ...so we do have some issues about the student selection process for those so called elite schools and I do have a, a bill that I've introduced that says we need to look at multiple criteria as we select students for our so called elite high schools and we're hoping to move that forward but I just thank you for the listing of those schools, I think it's important so that people will know even as they're selecting their high schools that there are certain schools that have a greater percentage of their students that are accepted into this program if in fact that's a part of what... if that's... if that's the area that a child wants to go

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2 to. Thank you so much, if we need to have you come
3 back... [cross-talk]

4 CHRISTOPHER WANYONYI: Yes... [cross-talk]

5 CHAIRPERSON BARRON: ...we'll gladly have
6 you come back, thank you.

7 CHRISTOPHER WANYONYI: Thank you.

8 CHAIRPERSON BARRON: We do have questions
9 about students that you enroll, what provisions are
10 there for students to be enrolled in your program who
11 may have some disabilities?

12 MAURIZIO TREVISAN: We... [cross-talk]

13 CHAIRPERSON BARRON: Is your mic on?

14 MAURIZIO TREVISAN: Oh, sorry. We, we
15 work very closely with the Disability Office of City
16 College to try to accommodate... in, in fact as of now
17 we're doing a study... we're... as you said... as I said
18 we're spending ten million dollars to rehab our
19 building... [cross-talk]

20 CHAIRPERSON BARRON: Right... [cross-talk]

21 MAURIZIO TREVISAN: ...and one of the
22 things that we are doing we're doing a study to see
23 what are the challenges that we have in terms of
24 access to certain classes... certain classes and
25 offices so that we can provide accessibility for all

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2 students. For instance we have currently a, a student
3 with narcolepsy and so we give him more time and we
4 have somebody there who... [cross-talk]

5 CHAIRPERSON BARRON: Uh-huh... [cross-talk]

6 MAURIZIO TREVISAN: ...touches him so that...
7 and its working very well. So, we, we work with all
8 the students to, to support them.

9 CHAIRPERSON BARRON: Can you speak to us
10 about the relationship between the Physician's
11 Assistant Program and the Sophie Davis Program and...
12 [cross-talk]

13 MAURIZIO TREVISAN: Yeah... [cross-talk]

14 CHAIRPERSON BARRON: ...how, how students
15 who perhaps may not continue in one program can be
16 accommodated in another, is the relationship... do you
17 help... [cross-talk]

18 MAURIZIO TREVISAN: We have... we have
19 historically in the past enough... some students who
20 have failed to pursue... and with the people who have
21 failed have gone to the PA but we cannot give them...
22 they have to compete with, with the other students so
23 it's... they don't get a preferential treatment because
24 one of the... one of the issues to deal with is that
25 they have... they have a very separate identity as a

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2 program and so PA's don't want to see as the reject
3 of the... of the... of the medical school students. So,
4 you know we have... I know three or four I think that...
5 who have gone... who have moved from there but they
6 have applied and they have competed... actually it's
7 interesting you are asking this question because the
8 PA Program is more competitive than the BS-MD. In
9 the... in the... in the BS-MD we have 1,200... 1,000 to
10 1,200 applicants and we... and we admit 90... [cross-
11 talk]

12 CHAIRPERSON BARRON: Uh-huh... [cross-talk]

13 MAURIZIO TREVISAN: ...in the PA they have
14 about 15, 1,600 applicants and they admit 35 so it is
15 more difficult... it is more... plus, plus you know there
16 is big difference in age because now for instance our
17 PA is a master program... [cross-talk]

18 CHAIRPERSON BARRON: Uh-huh... [cross-talk]

19 MAURIZIO TREVISAN: ...so people that come...
20 and, and many people come to, to the PA profession as
21 a second, second career choice... [cross-talk]

22 CHAIRPERSON BARRON: Uh-huh... [cross-talk]

23 MAURIZIO TREVISAN: ...so there is a big
24 difference in age between an 18-year-old freshman
25 from Sophie Davis and, and them.

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CHAIRPERSON BARRON: Okay, apart from the partnership that you have with Saint Barnabas Health System that allows you to award MD degrees how does the CUNY School of Medicine differ from the Sophie Davis School or is it just an expansion... [cross-talk]

MAURIZIO TREVISAN: It's an... [cross-talk]

CHAIRPERSON BARRON: ...in moving on... [cross-talk]

MAURIZIO TREVISAN: So, if you'll look the administrative structure the Sophie Davis now is the undergraduate portion of the school so the kids come from high school into the Sophie Davis Program not anymore is Sophie Davis School and they do... [cross-talk]

CHAIRPERSON BARRON: Sophie Davis Program... [cross-talk]

MAURIZIO TREVISAN: ...program and... [cross-talk]

CHAIRPERSON BARRON: Okay... [cross-talk]

MAURIZIO TREVISAN: ...they do the first three years and then they move into the four years and the... what... they are both within the administrative unit of the CUNY School of Medicine.

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CHAIRPERSON BARRON: CUNY's announcement of the CUNY School of Medicine accreditation notes that there is a quote, "campaign" underway to raise 20 million dollars in interest free loans for the inaugural BFMD class, how far along in this campaign... [cross-talk]

MAURIZIO TREVISAN: It's a long way... [cross-talk]

CHAIRPERSON BARRON: ...are you... [cross-talk]

MAURIZIO TREVISAN: ...to go.

CHAIRPERSON BARRON: A long way to go... [cross-talk]

MAURIZIO TREVISAN: It's a very challenging, challenging match because the, the, the generous alumnus who provided this match wants... the 20 million dollars comes from... 15 million dollars from the outside matched by five million dollars. So the match is much smaller... [cross-talk]

CHAIRPERSON BARRON: It's not a one to one match?

MAURIZIO TREVISAN: It's not a one... and in order to get the first million of the match we

1
2 need to raise ten million and we are about three
3 million dollars now.

4 CHAIRPERSON BARRON: Uh-huh... [cross-talk]

5 MAURIZIO TREVISAN: So...

6 CHAIRPERSON BARRON: Okay. And so what is
7 this 20 million dollars expected to cover in terms of
8 tuitions and fees and other... [cross-talk]

9 MAURIZIO TREVISAN: Twenty million...
10 [cross-talk]

11 CHAIRPERSON BARRON: ...expenses... [cross-
12 talk]

13 MAURIZIO TREVISAN: ...dollars would be
14 used... the... it... to generate an, an... so the students
15 who apply for it they will get a free loan without
16 interest to, to cover the tuition of the 38,000...
17 actually according to the donor the 38,000 minus the
18 6,500 dollars undergraduate tuition.

19 CHAIRPERSON BARRON: Okay and what are
20 the conditions under which a student will qualify for
21 an interest free student loan, what... [cross-talk]

22 MAURIZIO TREVISAN: The... [cross-talk]

23 CHAIRPERSON BARRON: ...criteria?

24 MAURIZIO TREVISAN: The donor did not set
25 any conditions.

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CHAIRPERSON BARRON: Okay. Okay, so in,
in your testimony you say you provide one million
dollars in scholarships and fellowships every..
[cross-talk]

MAURIZIO TREVISAN: Yes... [cross-talk]

CHAIRPERSON BARRON: ...to the students
approximately, on page two of your testimony... [cross-
talk]

MAURIZIO TREVISAN: Yep... [cross-talk]

CHAIRPERSON BARRON: ...approximately a
total of 700,000, 800,000 is provided during the
college years of the program for the first three
years, so those... [cross-talk]

MAURIZIO TREVISAN: Correct... [cross-talk]

CHAIRPERSON BARRON: ...are the students
that are in the Sophie Davis Program... [cross-talk]

MAURIZIO TREVISAN: Program... [cross-talk]

CHAIRPERSON BARRON: Right, a new service
based scholarship will be made available next year
for eight students per class so this 50 million... this
20 million is for the inaugural class... [cross-talk]

MAURIZIO TREVISAN: That's, that's a
completely separate issue.

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CHAIRPERSON BARRON: Its separate, okay.

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So, now we have the eight students available per

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class in the medical school years that will cover 50

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percent its tuition cost...

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MAURIZIO TREVISAN: Correct.

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CHAIRPERSON BARRON: And so where is that

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money designated?

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MAURIZIO TREVISAN: Okay, so I don't know

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if you're familiar but in the old model of the school

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the students had to sign a commitment that in, in, in

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order they had to, to serve after the, the clinical

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training they had to... [cross-talk]

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CHAIRPERSON BARRON: Uh-huh... [cross-talk]

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MAURIZIO TREVISAN: ...serve for two years

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in an underserved area of New York in primary care it

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well it turned out that approximately 50 percent of

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the... our graduates, as I told you about 50 percent of

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our graduates... [cross-talk]

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CHAIRPERSON BARRON: Yes... [cross-talk]

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MAURIZIO TREVISAN: ...so the 50 percent

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that decided to go into some specialty paid back

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75,000 dollars to, to, to the... to New York State and

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to us basically and so we have this... we have

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identified 600,000 dollars a year from this pot that

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2 will be... it, it seems to me a nice thing to see that
3 the payment of the students who have not fulfilled
4 the commitment goes to in part to support the new
5 generation of students... [cross-talk]

6 CHAIRPERSON BARRON: Okay... [cross-talk]

7 MAURIZIO TREVISAN: ...who are coming
8 through and there will be some... there will be some,
9 some commitment attached to it, it will not be free
10 money in the sense that... we're still discussing it
11 with the facility but there will be some, some
12 service commitment whether or not its primary care or
13 underserved area or both that... in, in order for the
14 students to benefit from this they have to make a
15 commitment to serve.

16 CHAIRPERSON BARRON: And so you said
17 presently the Sophie Davis School required them to do
18 a two-year commitment and those who did not... [cross-
19 talk]

20 MAURIZIO TREVISAN: In the old model.

21 CHAIRPERSON BARRON: In the old model so
22 what does the new model say?

23 MAURIZIO TREVISAN: Nothing because they
24 pay full tuition for medical school. We felt that
25 would be... you know the one other... one other thing why

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the state forced that because they were paying... they were paying specific undergraduate tuition now... see in the old model the... [cross-talk]

CHAIRPERSON BARRON: Uh-huh... [cross-talk]

MAURIZIO TREVISAN: ...students paid... in the... in the seven years... in the seven-year model... in, in the first years of medical school... [cross-talk]

CHAIRPERSON BARRON: Right... [cross-talk]

MAURIZIO TREVISAN: ...four and five they were paying CUNY undergraduate tuition.

CHAIRPERSON BARRON: Uh-huh...

MAURIZIO TREVISAN: And then they would go to medical school and pay the full tuition of medical school, in the old model they paid medical... the, the medical school tuition for the full four years.

CHAIRPERSON BARRON: So, how then... I understand your selection process now tries to identify students who perhaps, I read in the briefing paper, who have some community service that they've given or shown some connection to social organizations how then are we going to try to really match those students that we think will in fact continue... [cross-talk]

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MAURIZIO TREVISAN: Uh-huh... [cross-talk]

CHAIRPERSON BARRON: ...if there's no
commitment for them to say that if I don't... [cross-
talk]

MAURIZIO TREVISAN: ...this is a very...
[cross-talk]

CHAIRPERSON BARRON: ...then I won't get...
[cross-talk]

MAURIZIO TREVISAN: ...good question. So,
let me... the, the forces that shape the choice of
profession... [cross-talk]

CHAIRPERSON BARRON: Uh-huh... [cross-talk]

MAURIZIO TREVISAN: ...are much stronger
than us... [cross-talk]

CHAIRPERSON BARRON: Right... [cross-talk]

MAURIZIO TREVISAN: ...as you said... [cross-
talk]

CHAIRPERSON BARRON: ...yeah and things
change... [cross-talk]

MAURIZIO TREVISAN: ...if you said... if you,
you have a choice let's say I'm going to make 160,000
dollars as a pediatrician or I'm going to make half a
million dollars in intervention cardiologist, it's

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2 challenging. So, the choice has to be made based on
3 belief... [cross-talk]

4 CHAIRPERSON BARRON: Uh-huh...

5 MAURIZIO TREVISAN: And we believe that
6 by having such an intense exposure to what, what,
7 what... you know we, we, we think that we in in
8 addition to, to, to make good physician we want to
9 create more... we want to make good people, great
10 citizens who care and so we believe that to this
11 exposure and to the experience at Saint Barnabas the
12 student will come to appreciate and make a choice
13 based on appreciations because I believe that the
14 ethical or the emotional choice of, of, of deciding
15 to take care of the underserved and work in primary
16 care has to be a, a... from the... from the depth of your
17 heart because otherwise it's impossible... an
18 impossible competition we have.

19 CHAIRPERSON BARRON: And then in terms of
20 remaining in New York State I heard you in part of
21 your testimony I think you said something about...
22 [cross-talk]

23 MAURIZIO TREVISAN: Six... 60 percent.

24 CHAIRPERSON BARRON: 60 percent remain?
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MAURIZIO TREVISAN: Have a license in New York State, they may have a... [cross-talk]

CHAIRPERSON BARRON: A license... [cross-talk]

MAURIZIO TREVISAN: ...you know... [cross-talk]

CHAIRPERSON BARRON: Okay... [cross-talk]

MAURIZIO TREVISAN: ...we, we, we get this information from the American Medical Association master file so if somebody has a license in New York and Florida, we don't know.

CHAIRPERSON BARRON: What kind of reciprocity exists between New York State and other states in terms of being licensed?

MAURIZIO TREVISAN: None.

CHAIRPERSON BARRON: None, you have to, okay...

MAURIZIO TREVISAN: It's one of the sticky... the, the argument is for... just to give you an idea the argument that is in Europe with the... with the European community organization you can graduate in Italy and serve... and practice in Germany, France, in Bulgaria, anywhere; in the states that's not possible.

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2 UNIDENTIFIED MALE: [off-mic] you don't
3 have to take any exams.

4 CHAIRPERSON BARRON: Well... [cross-talk]

5 COMMITTEE CLERK: Excuse me, you'd have
6 to testify...

7 CHAIRPERSON BARRON: You have to... [cross-
8 talk]

9 COMMITTEE CLERK: So... [cross-talk]

10 CHAIRPERSON BARRON: Would you like to...

11 COMMITTEE CLERK: Okay.

12 CHAIRPERSON BARRON: Okay. So, in... I
13 believe in New York State now with entering... being
14 admitted to the bar with the last exam that was
15 given... no, I'm talking... yeah, I know... in the last
16 exam that was given for the bar exam you
17 automatically were credentialed in three or four
18 other states.

19 MAURIZIO TREVISAN: That's correct,
20 that's a... that's a very recent change. I know because
21 my daughter... [cross-talk]

22 CHAIRPERSON BARRON: That... yes, so the
23 last exam... [cross-talk]

24 MAURIZIO TREVISAN: ...my daughter who is a
25 lawyer so she did... [cross-talk]

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CHAIRPERSON BARRON: Okay, she took the last exam so she... [cross-talk]

MAURIZIO TREVISAN: ...no, she was the one before so she did not... [cross-talk]

CHAIRPERSON BARRON: ...she missed it... [cross-talk]

MAURIZIO TREVISAN: She missed it.

CHAIRPERSON BARRON: So, my daughter-in-law did the last one... [cross-talk]

MAURIZIO TREVISAN: Yeah... [cross-talk]

CHAIRPERSON BARRON: ...did the last one so she gets that advantage. So, is there any discussion about that being considered for the medical profession?

MAURIZIO TREVISAN: I'm not very familiar but with... [cross-talk]

CHAIRPERSON BARRON: Do you think that that would be advantageous or do you... [cross-talk]

MAURIZIO TREVISAN: ...I personally... [cross-talk]

CHAIRPERSON BARRON: ...think not... [cross-talk]

MAURIZIO TREVISAN: ...think it would be advantageous personally... [cross-talk]

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CHAIRPERSON BARRON: So, another word then if someone graduated and was licensed in New York State what would be the process by which they could be licensed in other states, it wouldn't have to... what would be the process by which... [cross-talk]

MAURIZIO TREVISAN: Okay, so I'm, I'm going to have to ask... [cross-talk]

CHAIRPERSON BARRON: Okay, would you come up and we'll swear you in.

COMMITTEE CLERK: Please raise your right hand. Do you affirm to tell the truth, the whole truth and nothing but the truth in your testimony before this committee and to respond honestly to the council members questions?

ERIC APPELBAUM: I do.

COMMITTEE CLERK: Thank you.

CHAIRPERSON BARRON: Thank you.

COMMITTEE CLERK: Now state your name for the record.

ERIC APPELBAUM: Eric Appelbaum.

CHAIRPERSON BARRON: Okay, thank you.

ERIC APPELBAUM: I'm the Chief Medical Officer of SBH Health System, good morning. To get licensed in another state you have to apply so you,

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2 you have to have your credentialing package shows
3 that you graduated from an accredited medical school
4 and then they will look at your past history of
5 practice review, you know all your credentials as
6 physicians, malpractice history and.. [cross-talk]

7 CHAIRPERSON BARRON: Uh-huh... [cross-talk]

8 ERIC APPELBAUM: ...there's no sort of
9 reciprocity whatsoever. Holding a license obviously
10 is something that they could potentially hold against
11 you because they're going to look at that history and
12 make sure there's no actions against that license but
13 to your question about whether or not it would be
14 advantageous, you know with today's technology we're
15 starting to cross the line of all this telemedicine
16 and so for instance there's plenty of hospitals that
17 use out of state physicians to read for instance
18 radiology studies... [cross-talk]

19 CHAIRPERSON BARRON: Right... [cross-talk]

20 ERIC APPELBAUM: ...and they are actually...
21 they do have to be licensed in each state and it gets
22 even more complicated because the billing, just
23 because you have a license doesn't mean you're able
24 to bill, you have to apply for a Medicaid and
25 Medicare number and get credentialed so it's become

1
2 very difficult. Now you know in popular areas as, as
3 New York in big urban centers it's not a big deal
4 there's lots of physicians around but when you start
5 to talk about some of the rural areas in, in the
6 United States it's, it's challenging to get a
7 neurologist in, you know Montana at three o'clock in
8 the morning. So, maybe if you made the licensing easy
9 we could have telehealth and that sort of thing flow
10 but right now no one is sort of bent, you know in
11 terms of their position. I did want to make one
12 comment about the question you had about what would
13 keep people in primary care because I'm a practicing
14 primary care physician at Saint Barnabas for 20 years
15 and I also did emergency medicine and I trained at
16 Saint Barnabas and one of the things that I, I always
17 knew about Sophie Davis is when their students go out
18 in their sixth and seventh year in the old program
19 into NYU and to some of the big fancy academic
20 centers, you know it's, it's, it's simply excitement
21 and they get wooed when they run into an
22 interventional cardiologist or a fancy plastic
23 surgeon and up on their banner they say we just did a
24 double transplant or just separated twins which are
25 all wonderful medical things that we need to do, when

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2 you come to Saint Barnabas you see people taking care
3 of the community and we simply don't have all the,
4 the, the... you know the catenary care type stuff,
5 we're taking care of people and I have patients I've
6 been taking care of for 20 years. When we had the
7 patient center medical home grant one of the futures
8 we had was a... we hired an ambulatory chief resident
9 instead of doing a chief resident in medicine we had
10 a regular... the hospital wanted an ambulatory based
11 one and that person sort of followed around some of
12 our primary care physicians and naturally signed on
13 with us and became a primary care doctor, why because
14 he had a mentor or several mentors as... for... it's all
15 about the exposure, it's the first person you run
16 into, its... and here at Saint Barnabas you're going to
17 run into an ambulatory care division that has system
18 wide 250,000 primary care visits... or 250,000
19 ambulatory visits a year whether its behavioral
20 health or pediatrics or internal medicine, you know
21 it's not going to be fancy robotic medicine and you
22 know... I have one interventional cardiologist, I don't
23 have 20, I don't do transplants, you know we, we take
24 care of diabetes and hypertension and you know high
25 cholesterol and address all the social determinates

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2 of health and, and that's what you get at SBH and
3 then that's why I think we can keep the primary care
4 doctors.

5 MAURIZIO TREVISAN: I agree.

6 CHAIRPERSON BARRON: Thank you. So, the
7 process then to be licensed in another state is
8 simply an administrative and clerical one not simply
9 but it's a matter of doing the application, there's
10 not any other... [cross-talk]

11 ERIC APPELBAUM: No, there's no other
12 testing, it's, it's an onerous administration...

13 MAURIZIO TREVISAN: Its separate from the
14 bar from what used to be the bar.

15 CHAIRPERSON BARRON: Okay.

16 MAURIZIO TREVISAN: Because in the bar
17 per law you had to... [cross-talk]

18 CHAIRPERSON BARRON: Yeah... [cross-talk]

19 MAURIZIO TREVISAN: ...complete it.

20 CHAIRPERSON BARRON: Right. Okay, thank
21 you so much, I appreciate that. Before I go to that
22 question to our student presenter so... thank you so
23 much, I'm always interested in, in hearing from first
24 hand participants in programs and you indicated that
25 you went to I guess a private school, high school

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because you were challenged with the tuition from that last year but you were able to get that so you came to Sophie Davis Program and obviously you enjoyed your experience there, why didn't... did you have the opportunity to apply to be a part of the inaugural class or were you already admitted to another program?

STEPHAN LESTIN: So, when I did apply to Sophie Davis like I was the year before that happened.

CHAIRPERSON BARRON: Okay...

STEPHAN LESTIN: So, I mean that's just...
[cross-talk]

CHAIRPERSON BARRON: Okay... [cross-talk]

STEPHAN LESTIN: ...just happened kind of...
[cross-talk]

CHAIRPERSON BARRON: ...so kind of timing?

STEPHAN LESTIN: Yeah, the timing, yeah.

CHAIRPERSON BARRON: Okay...

STEPHAN LESTIN: If I was a year later I would have been in the inaugural class.

CHAIRPERSON BARRON: Okay, thank you I just wanted to understand what that was about. And then in terms of... back to... back to the Dean how do

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2 you assist students once they complete... or once they
3 will be completing the school with getting
4 residencies because that's the next step, right?

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MAURIZIO TREVISAN: So, the residency is,
6 is, is a national match so we are... we have advisors,
7 great physicians who work with the students from...
8 throughout the period of time who try to... what, what
9 we can do is make them ready for... you know make sure
10 that they do what they need to do in, in order to
11 fulfill their dream so we can't... so what I'm... the
12 advisor will work with them and say okay, you want to
13 be a surgeon so they make sure that you have the
14 right... the right exposure and... if you... if let's say
15 if we know that their... [cross-talk]

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CHAIRPERSON BARRON: Uh-huh... [cross-talk]

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MAURIZIO TREVISAN: ...residency program
18 requires a research then so we'll work with the
19 students to make sure that they do research at... or
20 that they publish a paper so we, we do everything
21 that we can... [cross-talk]

22

CHAIRPERSON BARRON: Uh-huh... [cross-talk]

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MAURIZIO TREVISAN: ...to tailor the needs
24 of each student to the... to the... to the residence,
25 residence program they want.

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CHAIRPERSON BARRON: Do you track

students... does the Sophie Davis... well at that time it
was a school... did they track students after
graduation and how long do they track them... [cross-
talk]

MAURIZIO TREVISAN: We, we, we track them
as part of the alumni... so we track the students and
some of them don't want to talk to us... [cross-talk]

CHAIRPERSON BARRON: Right... [cross-talk]

MAURIZIO TREVISAN: ...but, but, but we do
track them.

CHAIRPERSON BARRON: Okay. Okay, so I
think you said that 60 percent of your students are
licensed in New York... [cross-talk]

MAURIZIO TREVISAN: Uh-huh... [cross-talk]

CHAIRPERSON BARRON: Do we have any idea
of how many of them are in those historically
underserved communities?

MAURIZIO TREVISAN: 26 percent.

CHAIRPERSON BARRON: 26 percent.

MAURIZIO TREVISAN: 26 percent of our
graduates not our... it's, it's in the testimony at the
bottom... [cross-talk]

CHAIRPERSON BARRON: Okay.

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MAURIZIO TREVISAN: And that's compared to 14 percent in New York so in, in New York 14 percent of the physicians work in underserved areas.

CHAIRPERSON BARRON: And 26... [cross-talk]

MAURIZIO TREVISAN: ...our... [cross-talk]

CHAIRPERSON BARRON: ...percent of your graduates... [cross-talk]

MAURIZIO TREVISAN: ...20 percent of our graduate's work in the... [cross-talk]

CHAIRPERSON BARRON: Okay. Okay, thank you so much, you've been very enlightening, I've got great hopes for what will continue to be a great program and provide us with doctors whom as we say are not just doctors but are really connected to the work that they do and have a love for the people that they serve and we thank you for this innovative approach and for understanding that you needed to do more for your graduates so that they weren't running into this bottleneck of not being able to find space... [cross-talk]

MAURIZIO TREVISAN: Right... [cross-talk]

CHAIRPERSON BARRON: Thank you for the partnership that you form and look forward to hearing

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about that partnership even more in the next panel,
thank you... [cross-talk]

MAURIZIO TREVISAN: It was a pleasure...
[cross-talk]

CHAIRPERSON BARRON: ...so much, thank you.

MAURIZIO TREVISAN: Can I... is it
appropriate for me to make a request?

CHAIRPERSON BARRON: You can make a
request certainly.

MAURIZIO TREVISAN: I would really would
like to encourage the council to find ways to provide
scholarships to the... to these kids.

CHAIRPERSON BARRON: That sounds
wonderful to me.

MAURIZIO TREVISAN: So, if you... if you
can... if you can work on that, you know in a sense of
providing a, a service as say you, you, you... like,
like the old commitment you get your money... [cross-
talk]

CHAIRPERSON BARRON: Yes... [cross-talk]

MAURIZIO TREVISAN: ...through the city but
you need to come back to the city.

CHAIRPERSON BARRON: Thank you... [cross-
talk]

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MAURIZIO TREVISAN: That would be a wonderful opportunity for our... [cross-talk]

CHAIRPERSON BARRON: Thank you, thank you we appreciate that, thank you so much.

MAURIZIO TREVISAN: Alright.

CHAIRPERSON BARRON: Thank you for coming. And we'll call our next panel. Jonah Kerluku from CUNY USS and Hercules Reid also from CUNY USS.

CHAIRPERSON BARRON: Okay, we're going to ask council to swear you in.

COMMITTEE CLERK: Please raise your right hand, both of you, thank you. Do you affirm to tell the truth, the whole truth and nothing but the truth in your testimony before this committee and to respond honestly to the council members questions?

HURCULES: Yes.

COMMITTEE CLERK: Alright, just... [cross-talk]

CHAIRPERSON BARRON: Thank you, you may begin.

HURCULES: Check, check...

JONA KERLUKU: I'll go first. Good morning honorable members of our city council. My name is Jona Kerluku and I recently graduated Lehman College

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2 with my bachelors of Science. I earned a... earned a
3 3.9 GPA while being involved in community service,
4 student leadership, and athletics. I'm currently
5 completing my term as Vice Chair of Fiscal Affairs in
6 the University Student Senate. I plan to take the
7 MCAT, the Medical College Admissions Test on August,
8 August 19th and then apply to medical school in 2018.
9 As you all know the medical... the MCAT is the
10 admissions exam for medical school and I'm looking
11 forward to taking it. In addition to receiving high
12 grades and a great MCAT score competitive medical
13 school applicants should complete research, it would
14 be better to be published, shadow physicians, do
15 community service, and participate in extracurricular
16 activities. Medical schools also want students to be
17 well rounded. A good applicant has his or her share
18 of experiences in other fields rather than just being
19 deeply integrated in the scientific community. I'm
20 happy to report to this committee that Lehman College
21 has prepared me for medical school and the road
22 ahead. I want to read a testimony from my friend and
23 fellow Lehman College student leader, Zara Adomul.
24 She will be starting her first year at Weill Cornell
25 Medical College next month. She says, as you all may

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2 be aware finding a medical school to call home for
3 the next four years was a tasking process. It is
4 imperative that a medical school possess adequate
5 resources and facilities to train future physicians.
6 As a former student advocate for CUNY I'm requesting
7 that more attention is placed on the CUNY School of
8 Medicine. Many CUNY undergraduates and undergraduates
9 in other universities are interested in the medical
10 school. However many students are also unwilling to
11 sacrifice obtaining the best possible medical
12 training. All I ask is that great consideration is
13 placed on the facilities that will house future CUNY
14 med students. The support from distinguished
15 researchers and physicians and most importantly a
16 strong hospital network to supplement their
17 knowledge. I agree with Zara's perspective. As we add
18 another piece to CUNY which is already the largest
19 urban institution of higher learning in the nation we
20 should make it a priority making sure that CUNY
21 School of Medicine receives all the resources it
22 needs to ensure its success. We need a commitment
23 from all the key decision makers; our legislators and
24 administrators, our deans and professors that
25 physicians of the future that attend this new medical

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2 school have access to everything. I understand that
3 CUNY is a public institution and resources are short
4 but New York City is among the richest cities in the
5 world, we shouldn't have shortages in education. I
6 remember examining a virtual specimen in one of my
7 undergraduate courses and remember... and, and thinking
8 how much more interactive and meaningful the learning
9 experience could have been if we had more in class
10 resources as most CUNY colleges experience in our
11 undergraduate anatomy courses, they were online. I
12 also remember thinking about how important it would
13 be if we had the vast majority of our courses taught
14 by full time faculty that had the time and resources
15 to nurture our talents. The students at this CUNY
16 School of Medicine will depend on you to give them
17 all the resources they need to save lives. Given that
18 consideration I'm humbly requesting that this
19 legislative body work to do everything possible to
20 ensure that CUNY gets the funding and resources they
21 need to make the CUNY School of Medicine a success.
22 Thank you for your time.

23 CHAIRPERSON BARRON: Thank you and next
24 panelist.

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2 HERCULES EMILE REID: Good morning
3 honorable members of our city council. I'd like to
4 start off with making note that what I'm going to be
5 discussing today is in relation to the CUNY School of
6 Medicine and the expansion of CUNY colleges. My name
7 is Hercules Emile Reid and I'm ending my second term
8 as Student Government President at New York City
9 College of Technology. I am also the current Vice
10 Chair of Legislative Affairs for the University
11 Student Center. Both as a student and student leader
12 I have noticed the financial strain on the university
13 and have seen its direct effects on my campus. In my
14 position as Vice Chair... alright, I got it, sorry
15 about that. I have noticed the financial strain on
16 the university and I have seen its direct effects on
17 my campus. In my position as Vice Chair I have been...
18 I have been to Albany on numerous occasions to
19 advocate for things like fund.. more funding for
20 capital projects, faculty, and especially the need to
21 freeze tuition and fully fund CUNY. Due to the lack
22 of funding on the state and city levels CUNY has not
23 been able to maintain its growth over the years. We
24 the university student senate are concerned that the
25 continuous expansion effects quality across the

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2 university system. There is a struggle to provide for
3 the needs of today's students. The colleges don't
4 have funding for essential needs. One of the main
5 issues is a shortage of full time faculty like nurses
6 and other needed services. Teachers are the backbones
7 of the education system and a lack thereof has a very
8 obvious and detrimental impact on the students. My
9 mother's an educator in the New York Teaching System
10 so I've witnessed firsthand the importance of an
11 educator and the impact of a good one in a student's
12 life. As a proud graduate I attribute my large.. a
13 large part of my success to my professors, they
14 however have been stretched thin and at times the
15 quality of education has suffered. With proper
16 funding to hire more full-time faculty the colleges
17 would be able to properly address this issue and
18 ensure that high standards of education are met and
19 maintained. Another one of the current problems is
20 the poor infrastructure on CUNY campuses. Students
21 are in buildings that are falling apart, elevators
22 are breaking down, bathrooms need renovating,
23 buildings are being overcrowded and there's simply
24 not enough space to offer all the classes students
25 will need within the semester. There are leaks in

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2 buildings when it rains and I myself have sat in
3 classrooms where temperatures reached over 90
4 degrees. How can we as a system expect to maintain
5 high quality education in these conditions. If more
6 money was allocated towards the colleges operating
7 budget many of these issues would be remedied. The
8 onus of funding these things should fall on the city
9 and the state not the students who it seeks to
10 educate. It is a... it is great to have a school of
11 medicine and now CUNY is looking to create a school
12 of labor relations. CUNY is being forced to raise
13 tuition by 200 dollars on already financially
14 strained students to make up for needing funders...
15 funds. Even with free tuition now being a CUNY
16 standard we are still having the conversation about
17 operating the college on the backs of students, why?
18 If operating costs are still a major issue how can we
19 expect to financially support the potential growth
20 associated with a free tuition scholarship without
21 remedying the existing issues, new ones will arise
22 and we will run out of building space to host the
23 growing class sizes and we'll inevitably continue to
24 fall apart due to overuse. Faculty, staff, and
25 administration... administrators will be stretched even

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2 more thin and the entire infrastructure will begin to
3 crumble while free tuition serves as a facade for
4 poorly operating public education system. I'm here
5 today as an alumnus to raise awareness of the climate
6 on CUNY campuses, I would like to encourage you to
7 continue to be a part of the growth of this amazing
8 dream machine, it's future depends on people like us
9 who were elected to serve and represent the interest
10 of its constituents. If funds are so tight how then
11 can we consider continuing to expand. If funds are
12 available why not put them to existing programs or
13 underfunded projects, initiatives, and capital
14 projects. The money that would be used to fund new
15 colleges should be used to develop what we already
16 have here and allow each of the 25 colleges of the
17 city university of New York to flourish and reach its
18 full potential. Thank you.

19 CHAIRPERSON BARRON: I want to thank you
20 for coming and for presenting testimony. It's always
21 critical to hear from those who are directly impacted
22 by the funding or lack thereof or underfunding that
23 effects the quality of the education that they
24 receive at CUNY, you all know I'm a CUNY graduate so
25 CUNY's very dear to my heart but we understand that

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2 the state has been continually underfunding and being
3 negligent in its responsibility to provide adequate
4 funding for higher education and we're going to
5 continue to fight in that regard and you know my
6 position is free tuition... [cross-talk]

7 HERCULES EMILE REID: Yes... [cross-talk]

8 CHAIRPERSON BARRON: ...and I don't think
9 that when you have an increase in tuition that is
10 what you call free tuition if it were free there
11 wouldn't be increases and there wouldn't be a cost...
12 [cross-talk]

13 HERCULES EMILE REID: Correct... [cross-
14 talk]

15 CHAIRPERSON BARRON: ...so, I'm being very
16 critical of the so-called Excelsior Scholarship
17 Program which does not in fact provide additional
18 assistant for low income students who are
19 overburdened by the extra cost of text books and
20 transportation and other fees that are associated
21 with that but we do thank you for your testimony and...
22 [cross-talk]

23 JONA KERLUKU: Thank you... [cross-talk]

24 CHAIRPERSON BARRON: ...we're going to
25 continue to fight to make sure that we can get the

1
2 resources that we need to advance education for those
3 students who are moving on in that degree. Thank you
4 so much.

5 HERCULES EMILE REID: Thank you.

6 JONA KERLUKU: Thank you.

7 CHAIRPERSON BARRON: With there being no
8 further testimony we will adjourn this hearing. Thank
9 you.

10 [gavel]

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C E R T I F I C A T E

World Wide Dictation certifies that the foregoing transcript is a true and accurate record of the proceedings. We further certify that there is no relation to any of the parties to this action by blood or marriage, and that there is interest in the outcome of this matter.



Date

July 12, 2017