

**WESTCHESTER COUNTY HEALTH CARE CORPORATION**

**BOARD OF DIRECTORS MEETING**

**September 9, 2020**

**6:30 P.M.**

**VIA WEBEX**

**VOTING MEMBERS PRESENT: Orlando Adamson, M.D., William Frishman, M.D., Renee Garrick, M.D., Herman Geist – Via Webex, Susan Gevertz – Via Webex, John Heimerdinger – Via Webex, Mitchell Hochberg, Patrick McCoy, Tracey Mitchell – Via Webex, Alfredo Quintero, Mark Tulis, Richard Wishnie**

**VOTING MEMBERS EXCUSED: Zubeen Shroff**

**NON-VOTING MEMBERS PRESENT: John Flannery – Via Webex, Michael Israel, Martin Rogowsky, Michael Rosenblut**

**STAFF PRESENT: Julie Switzer, EVP, General Counsel  
Gary Brudnicki, Senior Executive Vice President  
Kara Bennorth, EVP, Chief Administrative Officer  
Marc Chasin, M.D., CHIO  
Anthony Costello, SVP, Professional Support Services  
Michael Doyle, M.D., Executive Director and CMO, HealthAlliance  
Mark Fersko, EVP, Financial Planning  
Paula Fessler, Chief Nursing Executive  
Michael Gewitz, M.D., Executive Director, MFCH  
David Ingber, SVP, Network Financial Operations  
Mary Leahy, M.D., CEO, Bon Secours Charity Health System  
John Morgan, SVP, Financial Operations  
Jordy Rabinowitz, SVP, Human Resources  
Josh Ratner, SVP, Strategic Planning**

## CALL TO ORDER

The September 9, 2020, meeting of the Westchester County Health Care Corporation ("WCHCC") Board of Directors was called to order at 6:30 p.m., by Mr. Hochberg, Chair. A quorum was present.

### VOTING MEMBERS PRESENT

Orlando Adamson, M.D.	Mitchell Hochberg
William Frishman, M.D	Patrick McCoy
Renee Garrick, M.D	Tracey Mitchell – Via Webex
Herman Geist – Via Webex	Alfredo Quintero
Susan Gevertz – Via Webex	Mark Tulis
John Heimerdinger – Via Webex	Richard Wishnie

### NON-VOTING MEMBERS PRESENT

John Flannery – Via Webex  
Michael Israel  
Martin Rogowsky  
Michael Rosenblut

## EXECUTIVE SESSION

The Board moved into Executive Session for the purpose of discussing strategic planning.

MR. HOCHBERG ASKED FOR A MOTION TO MOVE OUT OF EXECUTIVE SESSION. MR. TULIS MOTIONED, SECONDED BY MR. MCCOY. THE MOTION CARRIED UNANIMOUSLY.

## REPORT OF THE CHAIR/ADDITIONS TO THE AGENDA

MR. HOCHBERG ASKED FOR A MOTION TO APPROVE THE MINUTES FROM THE JULY 15, 2020, MEETING OF THE BOARD. A MOTION WAS MADE BY MR. WISHNIE, SECONDED BY MR. QUINTERO, TO APPROVE THE JULY 15, 2020, WESTCHESTER COUNTY HEALTH CARE CORPORATION BOARD OF DIRECTORS MEETING MINUTES. THE MOTION WAS APPROVED UNANIMOUSLY.

## REPORT OF THE PRESIDENT OF THE MEDICAL STAFF

Dr. Frishman provided the report of the President of the Medical Staff. He presented a credentialing packet (dated September 9, 2020, and attached to these minutes) containing information on Credentialing Appointments, Additional Privileges, and completed FPPEs.

A discussion ensued.

### **Motion to Approve Recommendations for Appointments, Additional Privileges, and completed FPPEs.**

MR. HOCHBERG ASKED FOR A MOTION TO APPROVE THE RECOMMENDATIONS FOR APPOINTMENTS, ADDITIONAL PRIVILEGES, AND COMPLETED FPPEs. MS. GEVERTZ MOTIONED, SECONDED BY DR. ADAMSON. THE MOTION CARRIED UNANIMOUSLY.

## REPORT OF THE PRESIDENT

Ms. Bennorth advised the Board that WMC is working on a video, Healing Chronicles, which will chronicle the COVID-19 pandemic response across WMCHHealth.

Ms. Bennorth informed the Board that WMC will hold a virtual three race series in October, a 5K, a 10K, and the Healing Half.

Ms. Bennorth advised the Board that WMC is working on a virtual Benefit. She stated this will be a one hour produced program to benefit WMCHHealth network wide, premiering on November 12th. She stated this will be a combination of storytelling, guest appearances, entertainment, and fund raising opportunities.

Ms. Bennorth informed the Board that on the community engagement front, WMC received the Healthy Visit NY 30 Leader Award for 2021. She stated that for the 2<sup>nd</sup> year in a row WMC has attained top performance status from the Human Rights Campaign.

Ms. Bennorth advised that WMC is working on expanding its success on educational programs in the community throughout the pandemic, and is currently working on a colon cancer screening event in conjunction with the African American Men of Westchester.

Ms. Bennorth reminded the Board of WMC's successful digital marketing efforts during the COVID pandemic which drove business to the testing tents and call centers. She stated that WMC is now pivoting those marketing efforts to drive business back to the service lines. Ms. Bennorth advised that WMC's recent ad campaign received over 5 million views on its organic social website.

Ms. Bennorth presented the Video of the Month to the Board featuring WMC over the past six months during the COVID pandemic.

Mr. Costello presented a slide show of ongoing construction projects. He reminded the Board that WMC took advantage of its low census on 4 South in the main tower earlier this year, and completely demolished and abated the existing unit, which consisted of 22 patient rooms. He stated that the work is being done by the in-house staff, which decreases the cost of outside contractors by approximately fifty percent.

Mr. Costello showed images of the Ambulatory Care Pavilion's ("ACP") 6<sup>th</sup> floor patient room expansion into the main tower project. He stated that floors 4-6 are completed and the 7<sup>th</sup> floor should be completed within a month or so, creating an additional 48 private patient rooms in total.

Mr. Costello show images of Central Sterile Processing and advised that new sterilizers and washers are being added to meet the demand of the increased elective surgery volume with quicker turnaround times for instruments.

Mr. Costello showed images of the 1<sup>st</sup> floor of the ACP where Walgreens will be located. He stated that Walgreen's has entered into an agreement to provide an outpatient pharmacy, and will deliver prescriptions to the patient's bedside upon discharge.

Mr. Costello showed images of the OB/GYN suite at 19 Bradhurst Avenue. He stated that Dr. Tedjarati is focused on rebuilding the Maternal Fetal Medicine program. Mr. Costello advised that WMC is awaiting approval by DOH on the completed space.

Mr. Costello showed images of the new Maria Fareri Children's Hospital ("MFCH") Neighborhood at MidHudson Regional Hospital ("MHRH"), which opened last week.

Mr. Costello informed the Board that a seven bed Joint unit was opened at MHRH as a result of three orthopedic physicians coming on staff. He stated that the new unit is next to the Physical Medicine and Rehabilitation unit, which is convenient for patients requiring rehab.

Mr. Costello advised the Board that the Nuclear Medicine project at MHRH, in conjunction with the Philips Agreement, is just about completed.

Mr. Costello advised that the development of the MHRH Cath Lab has been initiated and signed documents are in place.

Mr. Costello showed images of the new Children's area of the Emergency Department at MHRH.

Mr. Costello advised the Board that the blasting at HealthAlliance's ("HA") Mary's Avenue campus is complete. He stated that the footings are being poured, and abatement is underway. Mr. Costello reminded the Board that the Mary's Avenue Consolidation is a \$100 million dollar project. He stated that the project completion date is scheduled for May 2022.

Mr. Costello informed the Board that the pediatric hospitalists for MHRH are all on board. He stated that Children's Medical Group has entered into an agreement with MHRH to share pediatric hospitalists at fair market value when the need arises.

Mr. Costello stated that MHRH has contracts with Vassar and Marist Colleges for surveillance COVID testing for students and staff. He stated that the Valhalla campus is providing those services for Pace University.

Dr. Doyle informed the Board of the following clinical updates:

- APS Cardiology is providing tremendous support and stimulating HA's medical staff with robust Cardiology Grand Rounds;
- HA is resuming Outpatient Sleep Studies;
- Surgery is at 85-90% pre-COVID levels, the ED volume is still recovering, Radiology and Cardiology volumes are on budget;
- Detox services are available at the Broadway campus; and
- Kingston's COVID test site is averaging 40-50 daily tests.

Dr. Doyle stated that HA is focused on DNV survey readiness.

Dr. Leahy informed the Board that Charity has recently added a nephrologist and GYN urologist, as well as a robotic urologist who will split his time between Good Samaritan Hospital ("GSH") and Valhalla.

Dr. Leahy informed the Board that the two new EP physicians who recently joined Charity have begun performing the WATCHMAN procedure for the first time at GSH. She stated that next week the first TAVR procedure will be performed at GSH.

Dr. Leahy advised the Board that the physician practice volume is at 98% of pre-COVID volumes. She stated that the ED volume is up to 80% of pre-COVID levels.

Dr. Leahy advised that Charity continues its community outreach efforts with elected officials, pastors, the NAACP, local Rabbis, and various EMS services. She stated that this is an effort to expand the ways in which Charity can better provide services to the community, even in a non-COVID era.

Dr. Leahy advised the Board that the Medical Group is an Accountable Care Organization (“ACO”). She stated that for 2019, the ACO hit both its quality metrics and financial target, resulting in shared savings with CMS. Dr. Leahy advised that the ACO will receive over \$3.3 million, which constitutes 40% of the shared savings.

Dr. Leahy recapped the Medical Village Project. She stated that it is a \$42 million project and reminded the Board that Charity was awarded a \$24.5 million grant. Dr. Leahy stated that the project includes the following:

- Renovate and expand the Emergency Department;
- Add 5 observation beds, expand fast track bays, co-locate 4 behavioral health treatment rooms;
- Create a new Medical/Surgical unit;
- Consolidate all private room med/surge beds to the 3<sup>rd</sup> floor;
- Create a new laboratory;
- Create a new Imaging service line; and
- Create a wellness/community center and provide space for community partners.

Dr. Gewitz informed the Board that it is national Pediatric Cancer and Sickle Cell Disease Awareness month. He stated that there are several events planned. Dr. Gewitz advised that simultaneously, there was a release of the MFCH’s stem cell transplant program results for Sickle Cell patients published in JAMA Pediatrics.

Dr. Gewitz advised the Board that two of MFCH’s faculty members recently received accolades. He stated that Dr. Heather Brumberg was elected President of the Eastern Pediatric Research Society, and he noted she is the first woman to hold this position in over sixty years. Dr. Gewitz also added that Dr. Sheta Shah was named the Chair of the Advocacy and Policy Committee for the Pediatric Academic Societies.

Dr. Gewitz stated that the MFCH opened a new Neighborhood at MHRH last week due to a need for pediatric acute care services in the region as Vassar recently closed their pediatric program. He stated that this move aligns with WMC’s vision to provide care close to home. Dr. Gewitz advised that the new unit is staffed with pediatric specialty nurses and pediatric hospitalists. He stated that the staff chose the name of The Farming Neighborhood.

Dr. Gewitz showed a video presentation of the new Neighborhood.

Dr. Garrick informed the Board that WMC has three searches underway for the following departments: Neurology, Radiation Medicine, and Hematology.

Dr. Garrick advised that the hospitalist program’s seven days on seven days off schedule has been receiving great feedback from patients and families.

Dr. Garrick informed the Board that during COVID, the Network learned to work as a team and follow the TeamSTEPPS Model. She stated that this model engages the doctors, nurses, dieticians, and social workers to all work together as a team. Dr. Garrick advised that GNYHA has been engaged to have a train the trainer session on TeamSTEPPS at WMC.

Dr. Garrick stated that Risk Management has reinvigorated its Safety Council, which is made up of various providers and staff interested in working collaboratively and becoming experts in TeamSTEPPS.

Dr. Garrick informed the Board that WMC is starting a collaborative orthopedic, neurosurgery and spine initiative. She stated this initiative should kick off before the end of the year.

## **REPORT OF THE COMMITTEES**

### **AUDIT AND CORPORATE COMPLIANCE COMMITTEE**

Mr. Heimerdinger, Chair, Audit and Corporate Compliance Committee, stated that the Committee met on August 26, 2020.

Mr. Heimerdinger informed the Board that Ms. Ariel reported that the following three audits are in progress: MidHudson Inpatient Substance Abuse Program, Inpatient Rehab Program and the Medical Record Coder Assessment Audit. Ms. Ariel reported that the MidHudson Inpatient Substance Abuse Program and the Medical Record Coder Audit were being reviewed by management and awaiting their response.

Mr. Heimerdinger advised the Board that Ms. Ariel reported on the following four completed coding audits: Ventilator, Septicemia, Inpatient Rehab Facility at Valhalla, and a Speech Therapy Audit.

Mr. Heimerdinger informed the Board that Mr. Palovick discussed the status and results of Internal Audits completed and in process. Those audits in process included: Radioisotope Controls, Physical Medicine and Rehabilitation Revenue Cycle, and the Cerner myCare System Implementation Phase 3. The audits completed during this period included: WMC – 2019 Senior Management Expenses and WMC – Cross Country Healthcare Contract Administration.

### **FINANCE COMMITTEE**

Mr. Tulis, Chair, Finance Committee, stated that the Committee met on August 12, 2020.

Mr. Tulis advised the Board that Total Cash and Investments at June 30, 2020, were higher than at December 30, 2020. He stated that the increase was attributable to DSH receipts, Medicare Advances, Government Stimulus grants and the draw down on lines of credit, partially offset by a decline in net patient service revenue receipts due to a reduction in volume related to COVID-19, the annual NYS pension payment and other changes.

Mr. Tulis stated that right to use lease assets and current and long term lease liabilities were recorded in 2020 as a result of the adoption of GASB 87, effective January 1, 2020, which changed the accounting for operating leases, resulting in most operating leases converting to a right to use asset.

Mr. Tulis reported that the current portion of other long-term liabilities increased due to the receipt of Medicare Advances and other balance sheet activity.

Mr. Tulis advised that the bottom line net loss year to date was \$13.0 million (including pro-forma adjustment of \$73.0 million) compared to \$5.5 million for 2019. He stated that the pro-forma adjustment relates to cash received in July from Government Stimulus Grants.

Mr. Tulis reported that net patient service revenue decreased in 2020 compared to 2019 as a result of volume shortfalls in 2020 associated with COVID-19. He stated salaries and benefits increased primarily as a result of hiring new physicians in 2020 and the full year impact of physicians hired in the second half of 2019. Mr. Tulis reported that supplies and other expenses decreased in 2020 compared to 2019, as a result of the reduction in patient volume in 2020.

Mr. Tulis advised the Board that the Finance Committee met this afternoon, prior to the Board Meeting. He stated that the Committee approved the minutes of the August 12, 2020, meeting and then moved into Executive Session.

## **QUALITY COMMITTEE**

Ms. Gevertz, Chair, Quality Committee, stated that the Committee met on July 17, 2020.

Ms. Gevertz advised the Board that Dr. Garrick reviewed the report of the Quality and Safety Committee meeting of May 14, 2020. She highlighted the reports of the following Departments: Cardiovascular Council, Environment of Care Council, and Radiation Medicine. Dr. Garrick also reviewed the QA/PI reports on Palliative Care, Patient Experience, Antimicrobial Stewardship and Behavioral Health.

Ms. Gevertz advised the Board that the Committee received a presentation on Pathology and Laboratory Services by Dr. Piscitelli, who highlighted the following:

- Transitions have taken place, most notably the BioReference Partnership;
- Various elements and categories of the Quality Program ;
- Overview of a specimen's journey through the laboratory;
- Quality monitoring performed at the pre-analytic, analytic and post analytic phases and the quality indicators/metrics at each phase;
- Regulatory Framework, noting that The College of American Pathologists ("CAP") is the primary regulatory body;
- CAP inspection window is currently open and preparation is underway;
- NYSDOH renewed the laboratory's permit on June 29, 2020; and
- Accomplishments and opportunities.

Ms. Gevertz informed the Board that the Committee received a presentation on the Maria Fareri Children's Hospital Quality Council by Dr. Gewitz, Dr. Altman and Ms. Umbro. She stated that Dr. Gewitz highlighted the following:

- The Quality Council's Table of Organization and reporting schedule; and
- COVID Experience – The number and demographics of children with either COVID or the related Multisystem Inflammatory Syndrome in Children ("MIS-C"), and the approach to MIS-C.

Dr. Altman continued the presentation with the following highlights:

- Solution for Patient Safety – is the cornerstone of the MFCH Quality Improvement Program. Data was presented regarding serious harm events, hospital acquired conditions with a focus on CLASBI and the significant improvements that resulted from steps taken to address CLASBI rates;
- Early recognition and treatment of sepsis – an evidence based bundle is followed. Sepsis data since 2014, bundle compliance and obstacles were presented. A focus is on improving documentation of the care provided which is expected to improve with the implementation of the new EMR;
- Center of Excellence for Pediatric Quality Measures – patient satisfaction survey is being used, unplanned readmissions are being tracked and there has been a significant drop of unplanned readmissions; and
- Well Baby Nursery Quality – newborn screening data related to four measures presented and all NYS benchmarks were exceeded except for one. Hepatitis B vaccine rates were presented and there has been great improvement in the past 5 years.

Dr. Gewitz then presented information regarding exclusive breast feeding data, the Pediatric Surgery Program and the Pediatric Trauma Program.

Ms. Umbro presented information regarding regulatory and corrective actions, including a revised Virtual Road Map, the Safety Event Decision Algorithm, and the Serious Safety Event Rate. She noted that there were no NYPORTS reportable events in 2020.

Lastly, Dr. Gewitz presented a summary of the Quality Council's priorities for 2020.

Ms. Gevertz stated that Ms. McFarlane provided the regulatory report for the Committee.

**NEW BUSINESS**

There was no new business.

**ADJOURNMENT**

MR. HOCHBERG ASKED FOR A MOTION TO ADJOURN THE SEPTEMBER 9, 2020, MEETING OF THE WESTCHESTER COUNTY HEALTH CARE CORPORATION BOARD OF DIRECTORS. DR. FRISHMAN MOTIONED, SECONDED BY MS. GEVERTZ. THE MOTION CARRIED UNANIMOUSLY.

Respectfully submitted,

  
AnnMarie Fernandez, WCHCC Assistant Secretary