WESTCHESTER COUNTY HEALTH CARE CORPORATION

BOARD OF DIRECTORS MEETING

February 2, 2022

6:00 P.M.

EXECUTIVE BOARD ROOM

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

NON-VOTING MEMBERS PRESENT: John Flannery, Michael Israel, Martin Rogowsky, Michael Rosenblut

STAFF PRESENT: Julie Switzer, EVP, Chief Legal Officer

Gary Brudnicki, Senior Executive Vice President

Kara Bennorth, EVP Marc Chasin, M.D., CHIO

Anthony Costello, EVP, Chief Operating Officer

Michael Doyle, M.D., Executive Director and CMO, HealthAlliance

Mark Fersko, Revenue and Finance Advisor

Michael Gewitz, M.D., Executive Director, MFCH

Mary Leahy, M.D., CEO, Bon Secours Charity Health System

Jordy Rabinowitz, SVP, Human Resources

Josh Ratner, EVP, Chief Strategy Officer

Phyllis Yezzo - CNO

Daniel Zelazny, M.D. - President of the Medical Staff

REPORT OF THE PRESIDENT

Dr. Garrick provided an update on the WMCHealth COVID-19 inpatient census. She stated that the peak of inpatients, excluding the early onset of the pandemic in 2020, occurred in early January 2022, and is now rapidly declining.

Mr. Costello provided a COVID-19 Network update to the Board, which included the following:

- Census WMC 17% positive inpatient census, MHRH 29% positive inpatient census,
- Supplies less than 1% weekly burn rate, there are 1.85 million masks on hand;
- Workforce Quarantine 3% of the workforce is positive;
- Workforce Vaccinations 99.6% vaccinated;
- COVID 19 Testing 330,396 tests performed to date, 9% positivity rate;
- COVID Call Center 350,126 encounters;
- Antibody Testing 19,730 tests performed to date, positivity rate of 12%; and
- Vaccinations 692,070 doses administered with 7,608 does administered to children in 5-11 age group.

Mr. Ratner provided a Network Strategy update for the Board. He reviewed Governor Hochul's proposed 2023 Executive Budget. Mr. Ratner stated that the NYS Budget includes a \$10 billion investment in healthcare and strengthening of the healthcare workforce, transforming the state's healthcare delivery system, as well as other initiatives.

Mr. Costello reviewed the Valhalla January 2022 volumes compared to the January 2021 volumes. He stated that all areas for January 2022 were higher than January 2021.

Clinical Operations Updates:

- MFCH Telemetry installation in progress;
- Abbott ID Now program implemented for Workforce testing;
- Launched at home diagnostic testing services for pre-infusion oncology patients; and
- Successful completion of ACS Accreditation Survey.

Physician Recruitment:

- 2 Pediatric surgeons;
- 2 Orthopedic surgeons;
- 1 Radiologist;
- 1 Anesthesiologist; and
- 1 Chief, Microbiology

Mr. Costello updated the Board on several in-house construction projects including the Blood Bank, the Heart Institute waiting room, and the Radiation Medicine corridor.

Mr. Costello reviewed the MHRH January 2022 volumes compared to the January 2021 volumes. He stated that all areas for January 2022 were higher than January 2021.

Clinical Operations Updates:

- Telestroke Go Live with APS (Valhalla) providers;
- Expanded telemetry capacity to 6 Cooke;
- 5 additional beds; and

Abbott ID Now testing go live for employees.

Physician Recruitment:

- 1 Psychiatrist;
- 1 Anesthesiologist;
- 1 General Surgeon; and
- 1 Otolaryngologist.

Dr. Leahy, CEO, Bon Secours Charity Health System ("Charity") provided the following updates:

Provider and Clinical Updates:

- Orthopedics;
- Cardiology;
- Hematology/Oncology; and
- Neurology

Operational Updates:

- · Cerner project; and
- Good Samaritan Radiology (MRI, CT and Nuclear Medicine) Renovations

Community Outreach:

- Good Samaritan Hospital supported several initiatives, including Unity Day at the local Martin Luther King Community Center; and
- Bon Secours Community Hospital supported the Warming Center in Port Jervis with the gift of a washer and dryer.

Dr. Leahy informed the Board that Charity will begin working on its Strategic Plan this quarter.

Dr. Gewitz provided a clinical operations and Maria Fareri Children's Hospital ("MFCH") update.

Dr. Gewitz advised the Board that there are presently sixteen neonates in the NICU. He stated that the MFCH has begun phase 1 of the NICU Expansion project, which is expected to be completed by summer. Dr. Gewitz informed the Board that the Foundation has been instrumental in getting the project started.

Dr. Gewitz informed the Board that the MFCH has begun a process to lead to the certification of a Cleft-Craniofacial Center. He stated that clefts are the most common congenital anomaly after Down Syndrome, approximately 1 in 700 births. Dr. Gewitz advised that there are no certified centers between Albany and New York City. He stated that a Craniofacial Team consists of experienced craniofacial surgeons, pediatric neurosurgeons, ENT team, and speech therapists.

Dr. Gewitz informed the Board that the MFCH saw a 20% increase in total transfer volume in 2021, with a large number coming from outside the Network.

Dr. Gewitz discussed a new acute COVID-19 therapy for at-risk patients. He stated that the therapy is first in human trial, is IRB approved, is FDA approved, and IND# obtained.

Dr. Garrick provided the following Medical Leadership Update:

Regulatory Update:

- MHRH
 - January DNV Primary Stroke Certification
- Valhalla
 - December DNV Comprehensive Stroke Certification periodic survey;
 - December ACC TAVR Certification;
 - o TAVR Certification;
 - NYSDOH CAP Laboratory survey report received;
 - December NYSDOH COVID Tent inspection no findings; and
 - ACS Trauma Re-verification Peds and Adult report pending.

GME Program Development:

- Vascular Surgery Fellowship approved by ACGME First class 2022;
- ENT Residency submitted to ACGME for approval; and
- Obstetrics and Gynecology now sponsored by WMC.

Dr. Garrick discussed a publication in the Journal of the Academy of Consultation – Liaison Psychiatry, New Clinical Arenas of Neuropsychological, Medical, and Psychiatric Findings After Recovery from Acute COVID-19. She stated that this publication by Drs. Ferrando, Dornbush, Lynch, Sivan, Klepacz, Karmen, Chen, Lobo and Lerman, was the first of its kind. Dr. Garrick reviewed the number of participants in the study, the medical questions being looked at, and the results of the study.

Dr. Garrick discussed the program development of Palliative Care. She highlighted the following:

- Numerous studies have demonstrated the significant benefits of palliative care at the patient, hospital, and healthcare system level including:
 - o Improvement in symptom burden;
 - Increased patient/family satisfaction with care;
 - Better patient and family experience with communication leading to improved hospital HCAHPS scores;
 - o Reduced 30-day readmission rates and improves ICU utilization; and
 - Reduced hospital mortality due to discharge to more appropriate care settings.

Dr. Garrick advised the Board that inpatient consult volumes for palliative care have increased 26% in the past 12 months, and 44% in the past 24 months.

Dr. Garrick discussed clinical advances in solid organ transplantation with the Board. She advised that the donor pool has been expanded to include organ donors with COVID (positive PCR test). She reviewed the donor characteristics, as well as the recipient characteristics. Dr. Garrick stated that from March 2021 to January 2022, there have been 12 organ transplants in adult patients from 10 COVID positive donors. She advised that 11/12 patients received anti SARS-CoV-2 monoclonal antibodies. Dr. Garrick stated that in the 12 patients, there was no transmission of SARS-CoV-2 to the recipient, no increased risk of organ rejection post-transplant, and no risk of transmission to the transplant/hospital team.

Dr. Garrick advised the Board of academic productivity, stating that there were 90 publications by four departments over the last four months.

REPORT OF THE COMMITTEES

DIVERSITY, EQUITY, AND INCLUSION COMMITTEE

Mr. Shroff, Chair, Diversity, Equity and Inclusion Committee, stated that the Committee met earlier this afternoon.

Mr. Shroff informed the Board that the Committee received a Minority/Women Owned Business Enterprise ("MWBE") update from Mr. Costello.

Mr. Shroff informed the Board that the Committee received a Human Resources Diversity, Equity, and Inclusion presentation from Mr. Rabinowitz. He discussed the 2021 accomplishments including the following:

- Partnership/pilot program with Rockland Jewish Family Service to employ eleven neuro-diverse adults as medical coders;
- Broad-based enhanced recruitment efforts designed to capture diverse/inclusive candidates including:
 - Social media presence;
 - o Job boards, including Diversity Inc.; and
 - o Employee referral programs
- Implementation of a fair market standardized comp structure for all non-represented positions to avoid disparate pay practices;
- Benefit Equity: Constant review of health and welfare programs (general low-cost comprehensive coverage available to all levels of our workforce, trans procedures; ABA therapy; and financial/mental/physical wellness initiatives.

Mr. Shroff advised that Mr. Rabinowitz reviewed the Valhalla Workforce Diversity Dashboard, and discussed the Human Resources 2022 Goals with the Committee.

Mr. Shroff stated that Mr. Ratner then provided a presentation on External/Community Health Equity activities.

discussed the approach to expanding community partnerships, communities of focus, and the continued work and next steps.

Mr. Shroff advised that the Committee then received a presentation on the Center for Women's Health Equity by Dr. Tedjarati. He discussed the healthcare disparities created by inequitable access, systemic barriers and biases, and education and training. Dr. Tedjarati then discussed the Task Force on Health Disparities, its core mission, and the accomplishments since 2019. He discussed the Taskforce's vision and plan moving forward, as well as the Table of Organization.

Mr. Shroff then advised the Board that Mr. Israel updated the Committee on the recruitment of Matilde Roman, SVP, Diversity, Equity and Inclusion Officer.

FINANCE COMMITTEE

Mr. Tulis, Chair, Finance Committee, informed the Board that the Finance Committee met prior to the Board meeting and reviewed the financial statements for the year ended December 31, 2021.

Mr. Tulis advised the Board that total cash and investments declined, primarily as a result of repaying a portion of the 2020 Medicare Advances, an increase in patient accounts receivable due to volume, and other balance

sheet changes. He stated that other long-term liabilities decreased, as a result of a reduction in the NYS pension liability, and deferred inflows of resources increased primarily due to pension related adjustments.

Mr. Tulis informed the Board that the bottom line profit was \$10 million for the year ended December 31, 2021, compared to a loss of \$63 million for the year ended December 31, 2020. He stated that the net patient service revenue was higher in 2021, which reflects the return to normal volume levels.

Mr. Tulis advised that the NYS non-cash pension adjustment was a positive \$11 million in 2021, compared to a negative \$47 million in 2020, primarily due to the pension plan's investment performance in 2021 compared to 2020.

Mr. Tulis advised that total acute care volume reflects the return to normal volume levels on both the Valhalla and MHRH campuses.

QUALITY COMMITTEE

Ms. Gevertz, Chair, Quality Committee, stated that the Committee met on January 7, 2022.

Ms. Gevertz informed the Board that Dr. Garrick presented the report of the Quality and Safety Council meeting of November 11, 2021. Dr. Garrick advised that the following departments presented: Palliative Care, Patient Experience, and Obstetrics and Gynecology. She stated that QA/PI reports were submitted by the Glycemic Council, the Cardiovascular Council, and the Neurology Council.

Ms. Gevertz advised the Board that the Committee received a presentation on Pain Management by Drs. Sekri and Asprinio, and Ms. Cooney. They highlighted the following:

- The Pain Quality Council's Mission;
- PCA Utilization;
- High Dose IV Opioids;
- Increase the safety of opioid prescribing for inpatients;
- Challenges and Opportunities; and
- Future Direction.

Ms. Gevertz informed the Board that the Committee also received a presentation on Patient Experience by Ms. Byrnes. She highlighted the following:

- The Three Pillars of the Department;
- Strategic Approach;
- Network Standardization;
- OB/GYN Volume Data;
- Acceptance Times by Service;
- Midas data regarding Services and Events;
- Quality Initiatives for OB and GYN;
- Safe Reduction of Primary Cesarean Section Births Overview;
- Post-Partum Hemorrhage Risk Assessment;
- · Abnormal Placentation; and
- Accomplishments and Next Steps.

Ms. Gevertz informed the Board that Ms. Cuddy presented the 2022 Quality Reporting Calendar (the "Calendar"). She stated that the Committee voted to recommend approval of the Calendar to the Board.

MR. SROFF ASKED FOR A MOTION TO APPROVE THE 2022 QUALITY REPORTING CALENDAR. MS. GEVERTZ MOTIONED, SECONDED BY MR. WISHNIE. THE MOTION CARRIED UNANIMOUSLY.

Ms. Gevertz stated that Ms. McFarlane provided a regulatory report to the Board, as well as an update on recent surveys.

NEW BUSINESS

Ms. Switzer presented Resolution 1-2022 to the Board. She reminded the Board that the Corporation designated itself as lead agency for purposes of the New York State Environmental Quality Review Act ("SEQRA") and provided notice of this designation to all involved agencies and certain other interested agencies and has received no objection to such designation within the statutory time period. Ms. Switzer advised that the Resolution 1-2022, authorizes the Corporation, acting through its management, to prepare, file and publish a negative declaration in accordance with SEQRA.

MR. SHROFF ASKED FOR A MOTION TO APPROVE RESOLUTION 1-2022, AUTHORIZING THE CORPORATION TO PREPARE, FILE, AND PUBLISH A NEGATIVE DECLARATION IN ACCORDANCE WITH SEQRA. MR. TULIS MOTIONED, SECONDED BY MR. MCCOY. THE MOTION CARRIED UNANIMOUSLY.

ADJOURNMENT

MR. SHROFF ASKED FOR A MOTION TO ADJOURN THE FEBRUARY 2, 2022, MEETING OF THE WESTCHESTER COUNTY HEALTH CARE CORPORATION BOARD OF DIRECTORS. MR. HOCHBERG MOTIONED, SECONDED BY DR. WISHNIE. THE MOTION CARRIED UNANIMOUSLY.

Respectfully submitted,

AnnMarie Fernandez, WCHCC Assistant Secretary