

NASSAU HEALTH CARE CORPORATION

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BOARD OF DIRECTORS/EXECUTIVE COMMITTEE MEETING

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Nassau University Medical Center

2201 Hempstead Turnpike
East Meadow, New York

February 6, 2017
6:10 p.m.

Reported by:

Ephraim Jacobson

1 APPEARANCES:
2 BOARD OF DIRECTORS/EXECUTIVE COMMITTEE MEMBERS
PRESENT:
3 MICHAEL MIROTZNIK, Esq., Chairman of the
Board
4 VICTOR POLITI, MD, President, CEO
WARREN D. ZYSMAN, LCSW, Board Member
5 LINDA REED, Board Member
JEMMA MARIE HANSON, RN, Board Member
6 MICHAEL M. DELUCA, MPA, Board Member
GIUSEPPE CARUSO, MD, Board Member
7 RUSSELL CAPRIOLI, DPM FACFAS, Board
Member
8 KRISHAN KUMAR, MD, Board Member
9 ALSO PRESENT:
10 JOHN P. MAHER, Chief Financial Officer
HAROLD MCDONALD, Chief Administrative
Officer
11 CRAIG V. RIZZO, Esq., Special Assistant
to the NHCC
12 MAUREEN ROARTY, EVP, Human Resources
MEGAN C. RYAN, Esq., EVP, Chief
13 Compliance Officer
KATHY SKARKA, RN, EVP, Patient Care
14 Services
VINCENT DISANTI, Revenue Cycle Management
15 MICHAEL FERRANDINO, Security and
Investigative Services
16 KEVIN F. MANNLE, Facilities
JOHN CIAMPOLI, ESQ., Counsel to the Board
17 of Directors
PAUL MUSTACCHIA, MD, Chair Medicine, CMO
18 Designee
JOHN RIGGS, MD, Chair, OBGYN
19 RACHEL ROBBINS, MD, Chair, Pathology
ANNABELLE LUI-PANCHO, Director of
20 Laboratory Services
KAREN MGCLYNN, RN, Deputy CNO
21 BEATRIZ FUSCHETTO, Board-Executive
Assistant
22 SHELLEY LOTENBERG, Director of Public
Affairs
23 ROSEMARIE LESTZ, Executive Secretary, A.
Holly Patterson
24 KEVIN MANNLE, VP, Facilities
ANNE SALVO, Administrator, OBGYN &
25 Pediatrics

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VINCENT DISANTI, Revenue Cycle Management
ELIZABETH FAUGHNAN, ESQ., Assistant NHCC
Counsel, Dept. Legal Affairs
ROBERT TEPPER, ESQ.
LOUIS IMBROTO, ESQ.
BARABARA VAN RIPER, ESQ., Attorney NHCC
GERALD WRIGHT, ESQ., Attorney NHCC
ANNE MARIE STUDDERT, Director,
Intragovernmental Affairs

1 MR. MIROTZNIK: Good evening, ladies and
2 gentleman, and welcome to the February 6, 2017
3 board meeting of the NUMC Nassau Health Care
4 Corporation. I call to order the meeting.
5 Everyone has the agenda. I call for approval
6 for the full/executive minutes of the
7 executive committee minutes of 12/2/16, 1/5 of
8 '17, 1/9 of '17 and the executive session
9 minutes of 12/2/16 and 1/5 of '17.

10 Beatriz, those are the minutes that I've
11 just executed?

12 MS. FUSCHETTO: Yes.

13 MR. MIROTZNIK: I've executed them all.
14 They've been reviewed. I call for the
15 approval. May I have a vote? First? Doctor?
16 Second? Unanimous. I have nothing to report.
17 Dr. Politi, thank you for making it back to
18 the meeting. I turn the mic over to you.

19 DR. POLITI: Thank you. Just for the
20 sake of brevity and to move the meeting
21 forward, I'll pass it on to you.

22 THE COURT: Ms. Reed's in lovely Florida
23 and we understand, Beatriz, she wanted to be
24 part of the meeting. You have her cell?

25 MS. FUSCHETTO: Yes.

1 MR. MIROTZNIK: Just bear with us a
2 moment.

3 MS. FUSCHETTO: Linda, can you hear us?

4 MS. REED: I can hear you.

5 MR. MIROTZNIK: Hi, Linda. Thanks for
6 joining us. Can we call for the approval of
7 the meeting committee minutes of 12/27/16.
8 Can I have a motion? Mr. Zysman, second. All
9 in favor? Unanimous. Thank you.

10 Mr. Zysman, the DSRIP committee meeting
11 report, if any?

12 MR. ZYSMAN: We asked for -- we've asked
13 for information to be provided and I have not
14 received the information to date. If we have
15 it, we will call a meeting.

16 MR. DELUCA: Can I just ask a question.
17 Who are we waiting on information from?

18 MR. ZYSMAN: Dr. Politi.

19 MS. REED: Mike?

20 MR. MIROTZNIK: Yes.

21 MS. REED: I thought we were just going
22 to do executive?

23 MR. MIROTZNIK: No, we have an agenda.

24 MS. REED: But I don't need to be on for
25 the whole agenda.

1 MR. MIROTZNIK: Okay. You want us to
2 call you back, have a hamburger and we'll call
3 you at executive?

4 MS. REED: Well, yes, I mean -- I
5 can't -- other things are going to be
6 discussed.

7 MR. MIROTZNIK: Yes. We'll call you back
8 then.

9 MS. REED: You got it.

10 MR. MIROTZNIK: Thank you.

11 MS. REED: Bye.

12 MR. MIROTZNIK: Mr. DeLuca?

13 MR. DELUCA: I'm fine. Thank you.

14 MR. MIROTZNIK: Mr. Zysman, Item No. 7,
15 finance committee meeting?

16 MR. ZYSMAN: We are in the process of
17 setting one up. The information request has
18 gone in, specifically for position control
19 matters. We're waiting for information before
20 we can schedule the meeting. It has not been
21 responded to in a number of weeks.

22 DR. POLITI: Just an update on that.
23 We've had several pre-position control
24 meetings. We finalized the final draft for
25 you, Mr. Zysman, and Mr. Maher and his team

1 are going through the finances. We should
2 have something for you possibly tomorrow.

3 MR. MAHER: Tomorrow morning.

4 DR. POLITI: Tomorrow morning.

5 MR. ZYSMAN: A few days ago, I think it
6 was last week, I asked for whatever you had.

7 DR. POLITI: Yes, sir.

8 MR. ZYSMAN: And that hasn't been
9 responded to, either.

10 DR. POLITI: We had a meeting Friday. We
11 had something where I was advised that it was
12 significantly amended. So I did not want to
13 send out a document that was not something
14 that would not provide the information.

15 MR. ZYSMAN: Why don't you show me what
16 you're working on and you can always amend it.

17 DR. POLITI: We will get you out
18 something tomorrow, and we're looking forward
19 to having that meeting, because there are
20 several critical clinical positions that we
21 need --

22 MR. ZYSMAN: You had indicated that
23 information and it's been delayed since.

24 DR. POLITI: We're working very hard,
25 very diligent.

1 MR. MIROTZNIK: In Mr. Cohn's absence,
2 we're going to table the legal audit and
3 governance committee.

4 MS. FUSCHETTO: Excuse me. Were the
5 minutes approved for the finance?

6 MR. MIROTZNIK: Mr. Zysman, we have to
7 call for approval of the 12/17/16 minutes.

8 MR. ZYSMAN: I'm not prepared to vote on
9 it.

10 MR. MIROTZNIK: Beatriz, if you can carry
11 that over to the next board meeting and as
12 well as No. 8 --

13 MR. ZYSMAN: Megan's saying she didn't
14 look at them.

15 MR. MIROTZNIK: Okay. We'll figure it
16 out. John, are you aware of anything in the
17 minutes that are of urgent --

18 MR. MAHER: I haven't seen the minutes.

19 MR. MIROTZNIK: They're going to be
20 tabled until the next meeting. Same thing
21 with legal audit and governance. Ms. Reed's
22 committee, compensation committee, she does
23 not have a report. Mr. Zysman, contracts
24 committee?

25 MR. ZYSMAN: I'm looking to a

1 conversation with Mr. Ciampoli. He indicated
2 this could be voted on as a block; is that
3 correct?

4 MR. CIAMPOLI: That would be correct.

5 MR. ZYSMAN: So I'm looking at --
6 Ms. Faughnan, if you can come over here so I
7 can just show you what I'm looking at. This
8 was something that we just didn't have time to
9 go through at a previous contracts meeting and
10 that Mr. Ciotti, I believe, was at and we just
11 did a three-month extension in order to get it
12 to this point. So on Mr. Ciampoli's
13 recommendation, I'm going to ask you to create
14 a resolution for these 25 contracts and, you
15 know, call for a vote.

16 Just for the record, we're going to
17 provide you Exhibit A, which is the 25
18 contracts that Ms. Faughnan is going to to be
19 including in this resolution.

20 (Whereupon, the 1/17/17 Legal Extensions
21 Contract Meeting-Summary Sheet was marked as
22 Exhibit A for identification as of today's
23 date.)

24 MR. TEPPER: Mr. Zysman, if it's all
25 right with the Board, we'll just reference

1 that attachment -- that attachment is part of
2 the record, rather than reading each firm and
3 all the amounts, with all the amounts and firm
4 names on there, if you have no objection?

5 MR. ZYSMAN: If it's good with you, it's
6 good with me.

7 MR. TEPPER: It's fine with us.

8 MS. FAUGHNAN: The NHCC Board of
9 Directors authorizes the president to
10 negotiate and execute amendments of agreements
11 with the law firms listed on Exhibit A in the
12 amounts listed on Exhibit A each for a
13 nine-month term effective April 1, 2017.

14 MR. ZYSMAN: Any questions on the motion?

15 MR. TEPPER: Just for clarification, that
16 Exhibit A would be the first two pages of this
17 sheet labeled January 17, 2017 Legal
18 Extensions Contracts Meeting -- Summary Sheet.
19 It's 25 entries. It's two pages, and there
20 should be a copy in the record and annexed to
21 this Exhibit.

22 MR. ZYSMAN: I don't believe they're all
23 extensions I believe there's at least two
24 that are new.

25 MR. MIROTZNIK: So the record is clear --

1 MS. FAUGHNAN: You're correct. I
2 apologize. You're correct. I will amend --

3 MR. ZYSMAN: Ms. Faughnan, why don't we
4 correct the motion. Ms. Fawn, you'll reframe
5 the motion?

6 MS. FAUGHNAN: Yes, I will. I'm sorry.
7 The NHCC Board of Directors authorizes the
8 president to negotiate and execute extensions
9 of agreements with the 23 law firms listed on
10 Exhibit A entitled January 17, 2017 Legal
11 Extensions Contracts Meeting - Summary Sheet.
12 Those 23 law firms in the amounts listed on
13 Exhibit A each for a nine-month term effective
14 April 1, 2017, and the Board of Directors also
15 authorizes the president to execute and
16 negotiate two new contracts with the law firms
17 of Devitt Spellman Barrett, LLP and Phillips
18 Lytle, LLP each for a nine-month term
19 effective April 1, 2017 in the amounts listed
20 on Exhibit A.

21 MR. MIROTZNIK: Just a question on the
22 motion. If we can just make a note on the
23 motion. It's not the 23 contracts, but it's
24 items 1 through 23.

25 MS. FAUGHNAN: As extensions, and then --

1 MR. MIROTZNIK: Correct, and then 24 and
2 25 are the new contracts.

3 MS. FAUGHNAN: I apologize.

4 MR. MIROTZNIK: Legal, is that -- can we
5 get a representation that's clear? Legal?

6 MR. TEPPER: That's clear if it's
7 possible that 23 is a new contact as well.
8 But I propose that whatever is on the sheet,
9 whether they're new or amended will effectuate
10 the Board in terms of the terms and the dollar
11 amount.

12 MR. MIROTZNIK: Okay.

13 MR. ZYSMAN: Okay.

14 MR. MIROTZNIK: Thank you.

15 DR. POLITI: Just a point. John Ciotti's
16 name's on here, on every -- on just about all
17 of them. Should that be changed to legal
18 department such as -- or maybe I can ask you,
19 Mr. Ciampoli.

20 MR. CIAMPOLI: He signed the forms to
21 underlie the contracts so -- his name's on
22 there.

23 MR. ZYSMAN: How about this, Dr. Politi,
24 how about we add to the motion, this
25 discussion, that you will oversee the review

1 of the LD200s anything that needs to be
2 complete, which may include if you feel the
3 need to substitute the name.

4 DR. POLITI: Yes, I think that would be
5 the proper thing to do. Absolutely.

6 MR. CIAMPOLI: Okay.

7 MR. MIROTZNIK: Including No. 8 where
8 Mr. DiSanti's listed?

9 DR. POLITI: Absolutely.

10 MR. ZYSMAN: You're comfortable with
11 that?

12 DR. POLITI: Yes, I am. I think that's
13 the proper, and I'm no lawyer --

14 MR. ZYSMAN: If we can add to the motion
15 that Dr. Politi will ensure that all the
16 LD200s are complete in its entirety and
17 consistent with Exhibit A and may substitute
18 the name of the owner of the contract at his
19 discretion.

20 How long -- Dr. Politi, how long do you
21 think it will take to get that completed?

22 DR. POLITI: I'll have to talk to the
23 attorneys and let you know.

24 MR. ZYSMAN: Within thirty days.

25 DR. POLITI: Mr. Zysman, I have no idea

1 what's involved with that.

2 MR. ZYSMAN: Ms. Faughnan is nodding her
3 head yes.

4 MS. FAUGHNAN: I would expect that they
5 would be approved within thirty days.

6 DR. POLITI: You expect -- will the Board
7 accept the word "expect"?

8 MS. FAUGHNAN: If not already, they will
9 be.

10 MR. ZYSMAN: Within 30 days. Can I get a
11 motion?

12 MS. HANSON: So moved.

13 MR. ZYSMAN: Second? Favor? Unanimous.
14 Thank you very much.

15 MR. MIROTZNIK: We have some contracts in
16 this meeting?

17 MR. ZYSMAN: We have a few. Some of
18 these were tabled because of recusal. I
19 believe right now we're in executive
20 committee. We don't have full board quorum.
21 I recuse from No. 1, Jzanus Consulting, Inc.,
22 and No. 11, Jzanus Ltd.

23 MR. MIROTZNIK: Item No. 4?

24 MR. ZYSMAN: No. 4, Jzanus Consulting as
25 well.

1 MR. MIROTZNIK: With those three, we'll
2 have to kick them over to the next meeting.
3 We don't have quorum to vote on those items.

4 MR. ZYSMAN: No. 2, Allscripts, Farooq
5 Ajmal.

6 MR. MCDONALD: It's being tabled.

7 MR. ZYSMAN: Can I get a motion to table
8 No. 2, Allscripts? Second? Favor?
9 Unanimous. Any others that are on this list
10 are going to be tabled, Mr. Donald?

11 MR. MCDONALD: No. That's all that I'm
12 aware of.

13 MR. ZYSMAN: WGM Obstetrics & Gynecology,
14 P.C. Dr. Riggs?

15 DR. RIGGS: Yes, thank you. This is just
16 a renewal of a contract which is crucial to
17 our residency program. When I came about a
18 year and a half ago, we were on probation with
19 several citations. This is a corrective
20 action plan. Our residents have done about
21 close to 200 procedures with this group two
22 days a week, and this is a renewal of a
23 two-year deal of 50,000 for each doctor.

24 MR. ZYSMAN: The reason this was moved
25 over to the full board executive committee and

1 the contracts meeting is there was some
2 discussion about the different residency
3 programs, and in this particular case, correct
4 me if my memory is wrong, we don't have enough
5 cases to handle the residents that are in the
6 department. So what we're doing is we're
7 paying an outside vendor to provide them that
8 training and those cases for that reason; am I
9 correct?

10 DR. RIGGS: Correct, yes. Every
11 residency program in the country sends
12 residents out for that particular reason. I
13 don't know one that doesn't.

14 MR. DELUCA: Is this for four doctors?

15 DR. RIGGS: No, two doctors. One's on
16 Wednesday and one's on Thursday. We send our
17 chief residents to go there and do stuff that
18 we can't do here. They have robotics,
19 minimally invasive surgery, uro and
20 gynecology, cases that are complex and crucial
21 to their numbers for the case logs. We're
22 going to meet our requirements when they come
23 up for review. If we lose this contract, I
24 don't think that we'll be getting approved as
25 a residency.

1 DR. CAPRIOLI: Is there adequate case
2 load here or these specific high technology
3 program --

4 DR. RIGGS: There's not an adequate case
5 amount here right now. What I'm doing,
6 recently we just lost our OB attending chief
7 of OB to retirement. I'm bringing in two
8 private groups to split the deal to come in
9 and work half and half, to bring in private
10 groups. We're not like North Shore or
11 Southside. They're buying practices. They
12 actually bought some of the people that I
13 wanted to bring in. I got two groups coming
14 in.

15 I have another one retiring, two more
16 retiring within the year, and I'm planning on
17 doing the same thing, bringing in private
18 groups in have to increase the volume here,
19 because long term I don't want to count on
20 outside sources.

21 DR. CAPRIOLI: They get the bulk of their
22 logs here or they really log most of their
23 cases outside?

24 DR. RIGGS: The bulk are here. We did
25 555 cases here last year. Goldman and Wagner

1 did 175 in a ten-month period.

2 DR. CAPRIOLI: Thank you.

3 MR. DELUCA: Would this be considered
4 cost effective, Doctor?

5 DR. RIGGS: Absolutely.

6 MR. MIROTZNIK: Dr. Politi, anything to
7 add? Would you like us to approve that and is
8 it necessary? Is it crucial?

9 DR. POLITI: I had a long discussion with
10 Dr. Riggs after the other meeting as well as
11 some other chairmen, and they all felt
12 unanimously that this was a -- it was
13 necessary for their residency and it's
14 necessary for the hospital as well.

15 MR. MIROTZNIK: So you'd ask that the
16 Board have an affirmative vote in favor of
17 this?

18 DR. POLITI: Yes, I do.

19 DR. RIGGS: Thank you.

20 MR. MIROTZNIK: Ms. Faughnan.

21 MS. FAUGHNAN: The NHCC Board of
22 Directors authorizes the president to
23 negotiate and execute an extension of an
24 agreement with WGM Obstetrics and Gynecology
25 PC to assist the OBGYN residency program and

1 provide our residents with education,
2 oversight, teaching and training in advanced
3 endoscopic gyn surgeries in an amount not to
4 exceed \$200,000 for a two-year term effective
5 February 1, 2017.

6 MR. ZYSMAN: Any questions on the
7 motion? Can I get a motion? Second? Favor?
8 Unanimous.

9 No. 5, Med-Metrix, Mr. DiSanti. Let me
10 just provide some background to the Board. If
11 you look at the cost of this, it's \$100 per
12 case and there's a number of these. Some -- I
13 guess this is a contingency \$100 per case?
14 That language changed?

15 MR. DISANTI: It's \$100 per case.

16 MR. ZYSMAN: It's \$100 regardless if
17 it's -- if you're successful or not.

18 MR. DISANTI: Correct.

19 MR. ZYSMAN: There's no limit on this,
20 and there was many thousands of cases, going
21 back, I think Mr. DiSanti shared with us, to
22 2011, and every case you send out costs the
23 hospital \$100 to send it out. So the concern
24 was putting some kind of ceiling on it so that
25 we knew if we were approving, you know, a

1 thousand dollar-contract or a million dollar
2 contract.

3 Some of the estimates that Mr. DiSanti
4 gave us at the last meeting were close to one
5 million dollars plus without considering cases
6 for this year. So we asked him to bring it to
7 the full Board and to maybe put some kind of a
8 number or control on it so that we understood
9 what we were voting on, and No. 5, have you
10 done that or is it still open-ended?

11 MR. DISANTI: Yes. We've done that both
12 for Med-Metrix and for Health ROI.

13 MR. ZYSMAN: So what is the total cost of
14 Med-Metrix?

15 MR. DISANTI: For 2016 the total cost for
16 Med-Metrix was \$50,000. They generated
17 \$100,000 in revenue. For 2015 numbers, 300
18 accounts, was \$30,000. They generated
19 \$48,000. They're a company who looks at
20 our --

21 MR. ZYSMAN: My question is for 2017, the
22 contract, have you put a ceiling on the amount
23 of expenditure or it just \$100 -- if you send
24 ten thousand boxes, we're paying \$100 a box?
25 How many boxes are you sending?

1 MR. DISANTI: One of the things we've
2 added to the new contract as we move forward,
3 we have our patient accounting people
4 reviewing the cases prior to them being be
5 sent out to the agency. So this way we have
6 better control as we move forward on these
7 outpatient high dollar accounts.

8 MR. ZYSMAN: In the past when you sent it
9 out, was there any review?

10 MR. DISANTI: There was.

11 MR. ZYSMAN: Every time you send it out,
12 you're spending \$100?

13 MR. DISANTI: Correct.

14 MR. ZYSMAN: How do you know if the case
15 is even worth challenging if those there
16 people weren't with you,

17 MR. DISANTI: These cases are all, as the
18 insurance companies are letting us know, no
19 authorizations for medical necessity. When we
20 go back into the Eagle system, which is our
21 system for finding authorizations on file, and
22 then we'll go back to the insurance company
23 and fight. So we have the documentation on
24 our Eagle system to go ahead and fight these.

25 MR. ZYSMAN: Not my question. I

1 appreciate it. My question is how far back do
2 these cases go that you're looking to send out
3 in 2017?

4 MR. DISANTI: The cases are active cases.

5 MR. ZYSMAN: All of them are going to be
6 2017 cases?

7 MR. DISANTI: That's correct.

8 MR. ZYSMAN: You're no longer going back
9 to 2011?

10 MR. DISANTI: No, sir.

11 MR. ZYSMAN: How many cases so far do you
12 have to send out in 2000 -- here's my other
13 question. Why would you be sending out any
14 cases, you know, in 2017 right now?

15 MR. DISANTI: We --

16 MR. ZYSMAN: This is like bad debt
17 collection, right?

18 MR. DISANTI: These are cases that have
19 been denied either for medical necessity or
20 for no authorization.

21 MR. ZYSMAN: But if you're telling me you
22 found the authorization or your staff finds
23 it, why would you need to end it to this
24 company? Why don't you just send in back out
25 to the insurance company?

1 MR. DISANTI: That's why we have the --
2 you know, we have the gap measure for us to go
3 ahead and check before we send it to the
4 agency. So we're doing our homework before it
5 goes to the agency for them to either send a
6 medical record or follow up.

7 MR. ZYSMAN: Let's slow it down. Your
8 staff submits a bill?

9 MR. DISANTI: Correct.

10 MR. ZYSMAN: The bill doesn't have an
11 authorization on it. It get rejected by the
12 insurance company. Then your staff gets a
13 rejection. Then someone on your staff goes
14 through the system and says hey, John Doe had
15 an authorization number. We just didn't put
16 it on the form, and the insurance company
17 rejected it because we didn't put it on the
18 form. Are you telling me in order to get it
19 on the form we send it out and pay \$100 or is
20 your staff putting it on the form and
21 submitting it?

22 MR. DISANTI: No. A lot of times,
23 Mr. Chairman, it's on the form and they're
24 just denying it, saying that there's no
25 authorization. They might also ask for

1 clinical documentation over and above
2 challenging it. So that's when we involve --

3 MR. ZYSMAN: So where does this company
4 get the clinical documentation from?

5 MR. DISANTI: Our EMR.

6 MR. ZYSMAN: Your staff gets it out of
7 the EMR?

8 MR. DISANTI: No, we'll --

9 MR. ZYSMAN: The company, for \$100 do
10 they come in and take that information out or
11 is your staff providing it to them?

12 MR. DISANTI: No. They're going into the
13 EMR and they're reading the information
14 specific to that account and then writing the
15 appeal.

16 MR. ZYSMAN: They have access to our EMR?

17 MR. DISANTI: That's correct.

18 MR. ZYSMAN: Why don't we have the
19 capacity to do that? That seems like regular
20 general course managed care, right? They deny
21 the authorization. The respondents say no, we
22 have the authorization. Denied for clinical
23 reasons, you submit the medical paperwork.
24 This isn't like typical bad debt collection.

25 MR. DISANTI: Right now we only have

1 currently one nurse plus a supervisor who's
2 doing clinical analysis internally.

3 MR. ZYSMAN: How many did you have in
4 2016?

5 MR. DISANTI: We had 500 accounts.

6 MR. ZYSMAN: No, how many nurses?

7 MR. DISANTI: In 2016?

8 MR. ZYSMAN: Yes.

9 MR. DISANTI: We had one and a half. One
10 of them left in July or August. I think in
11 July.

12 MR. ZYSMAN: I mean why --

13 MR. DISANTI: The concentration for the
14 institution was on the inpatient side because
15 they're high dollars, if you will.

16 MR. ZYSMAN: That's not the question.

17 MR. MIROTZNIK: Vince, the last question
18 was why didn't you fill that spot?

19 MR. DISANTI: The department doesn't
20 report to me.

21 MR. DELUCA: Mr. Chairman, may I ask a
22 question in like simpler terms. Simple and
23 stupid. Keep it simple and stupid. Sometimes
24 when you submit these, there are some glaring
25 things that are just missing, some really

1 basic things that are just missing. I've seen
2 this. Does somebody in your department go
3 over these before you give them to Med-Matrix
4 for just the basic things? Does someone do
5 that?

6 MR. DISANTI: As of 2017 we will be doing
7 that, sir.

8 MR. DELUCA: You will be?

9 MR. DISANTI: Yes.

10 MR. DELUCA: I would think that it would
11 be much more cost effective for us to have
12 really sharp people to report to you that go
13 through this, and that's what Mr. Zysman is
14 talking about.

15 Am I right?

16 MR. ZYSMAN: One hundred percent.

17 MR. DELUCA: Why don't you -- why didn't
18 you put -- why don't you put in a request for
19 these people? I don't understand when you say
20 it doesn't report to you. What doesn't report
21 to you?

22 MR. DISANTI: The nursing department and
23 the clinical --

24 Luke: So the nurses are the people that
25 you have that go through these, right? Is

1 that right? You use nurses?

2 MR. DISANTI: Yes. Internally, we do.

3 MR. DELUCA: Internally. So who would
4 you have to -- who would you have to speak to
5 to be able to augment the staff? Who would
6 you talk to right now?

7 MR. DISANTI: The department reports up
8 to nursing.

9 MR. MIROTZNIK: Listen, we're going like
10 this, left-right, left-right, left-right. I
11 feel like I'm at the U.S. Open. Kathy?

12 MS. SKARKA: Yes.

13 MR. MIROTZNIK: Can you come closer?

14 MR. ZYSMAN: Before we -- I'm sorry. We
15 went through this at a contracts meeting for
16 about a half-hour, 45 minutes, because the
17 concept of sending unlimited cases out that go
18 back as far as 2011, which is what you said
19 before tonight, which now you're saying 2017.

20 MR. DISANTI: We're talking about two
21 separate contracts.

22 MR. ZYSMAN: The concept is going to be
23 the same for both. I know that because we
24 went through it already. We spent a lot of
25 time on that. You couldn't give us a cap on

1 how much. Between that meeting which was a
2 couple weeks ago and today we were looking for
3 you to be more prepared than you were at that
4 meeting, okay, and tonight I'm hearing like a
5 lot of things and we're kind of processing how
6 to solve it and we kind of would like for you
7 to do that and not have to process it with us
8 and to do it, you know, between meetings.

9 MR. DISANTI: This was an outpatient
10 contract. This was not -- this one does not
11 go as far as back as 2011. The other
12 contract, Health ROI, yes, goes back as far as
13 2011.

14 MR. ZYSMAN: Your describing for 2017 why
15 you have to spend \$100 a case. How many
16 thousands of cases do you think you're going
17 to have?

18 MR. DISANTI: We're going to have between
19 four and five hundred cases for the year.

20 MR. ZYSMAN: Four or five hundred cases
21 for the year?

22 MR. DISANTI: That's correct.

23 MR. ZYSMAN: Why don't you just ask for
24 \$4,000 or \$5,000, rather than \$100 a case.

25 MR. MIROTZNIK: It's \$40,000.

1 MR. ZYSMAN: \$40,000. Why don't you ask
2 for \$40,000?

3 MR. DISANTI: We can do that.

4 MR. DELUCA: Or \$50,000. You know, cover
5 it. But more important, just to go back a
6 little bit, if this was an ideal world, you
7 own this completely, what would you do to
8 streamline it yourself? What would you do?

9 MR. DISANTI: I'd have my staff review it
10 prior to going out to an agency.

11 MR. DELUCA: If you don't have enough
12 staff, what would you do?

13 MR. DISANTI: I'd request additional
14 staff to be able to handle it.

15 MR. DELUCA: Why don't you do that?
16 Who's going --

17 MR. MIROTZNIK: Have you done that?

18 MR. DELUCA: Have you done that?

19 MR. DISANTI: Not yet.

20 MR. DELUCA: So let's help him.

21 MR. MIROTZNIK: We're here to help.

22 MR. DELUCA: Right.

23 MR. MIROTZNIK: Otherwise we could be
24 home having dinner. Harold, we're here to
25 help. What kind of help?

1 MR. MCDONALD: I'm not sure if we need
2 your help. What we needed was different
3 leadership within the department, additional
4 leadership within the department. In the
5 past, utilization management, which we're
6 talking about here, will have done case
7 management and social work and CVI and the
8 rest. We didn't have the right leadership
9 within that department and then we lost our
10 star player in that department. That took
11 place in --

12 MR. MIROTZNIK: Somebody retired after
13 many, many years.

14 MR. MCDONALD: Somebody left for a number
15 of reasons. What we've also done is we've
16 moved the leadership in the department to
17 nursing, and nursing has identified an
18 individual who should be capable of running
19 the department the way it should be and that
20 individual just needs some training and that's
21 the direction we're heading in now.

22 So we're looking to bring in new
23 leadership that's going to be over utilization
24 management that's going to be reporting
25 directly to Vince, to me and also to Kathy,

1 and then when we've got that person in place,
2 add to staff in that department so that we can
3 do more of these on our own.

4 MR. ZYSMAN: Harold, I'm going to steal a
5 line I've heard many times from Mr. DeLuca in
6 these meetings. If you have three people who
7 they're reporting to, so who's responsible for
8 the work?

9 MR. MCDONALD: They're going to be
10 reporting to Kathy.

11 MR. ZYSMAN: They're going to report to
12 Vince or Kathy?

13 MR. MCDONALD: They're going to report to
14 Kathy.

15 MR. ZYSMAN: Are there going to be any
16 physicians involved with any of the reviews
17 and appeals? Kathy, maybe you should be one
18 presenting this contract?

19 MR. DELUCA: Well, it's about revenue,
20 though. It's about revenue, so Vince should
21 really be the guy that decides if he needs
22 more people and he needs more trained people
23 to do it. You know, if I were you people, to
24 be quite candid, I wouldn't get us involved in
25 this stuff. I wouldn't get us involved in

1 this. We're going to muddle this and it's not
2 going to work out, right? Solve it amongst
3 yourselves.

4 MR. MIROTZNIK: I agree.

5 MR. DELUCA: Solve it amongst yourselves
6 and go to your CEO if you people can't solve
7 it. I mean this is important. This is
8 ongoing collection of money and we need money.
9 If I mis-spoke, please tell me. Please, if I
10 don't have it right. I may not have it right.

11 MR. DISANTI: One hundred percent.

12 MS. HANSON: Can I? I'm just concerned
13 that we still have to get somebody and train
14 somebody at this point. I mean I hear
15 urgency. You know, this is not going to go
16 away. We need somebody that can, you know,
17 hit the ground running and do the work that
18 needs to be done. So, you know, hindsight,
19 whatever. Now we're here. Now what do we do
20 now to fill the hole for what we have to do
21 moving forward? If we still have to get
22 somebody trained to fill the hole, I'm a
23 little concerned.

24 MR. MCDONALD: The stop gap is going to
25 go to this consulting firm who's going to pick

1 up the work while we bring the staff in and
2 train the staff that we need to do it
3 ourselves.

4 MS. HANSON: You know, I just have to say
5 this because it's going to drive me a little
6 crazy, but I've been on this board since '08
7 and I just doesn't understand why don't we
8 have some succession planning going on. If we
9 knew that we had a key person in that area
10 that was not going to be there for whatever
11 reason, retired, whatever it was and we knew
12 that we were going to have a big hole there,
13 where is our succession planning in this
14 institution?

15 MR. MCDONALD: We had almost no notice.

16 MS. HANSON: Why weren't we looking at
17 this before she walked out the door?

18 MR. MCDONALD: We had almost no notice
19 that this person was going to be leaving. She
20 was not of retirement age and within a week or
21 so, I don't know how much notice we got, but
22 it was extremely short notice and she just
23 left.

24 MS. HANSON: How long did she leave? How
25 long ago did she leave?

1 MR. MCDONALD: She left in July.

2 MR. DELUCA: Mr. Chairman, can I just add
3 something to what you said. The problems that
4 I've experienced is that when you have a
5 multidisciplinary problem and you got a number
6 of different departments that all contribute
7 to something, if you don't have one person to
8 have it coordinated by and reported to, it
9 falls through the cracks every single time.
10 So you got to have -- go ahead, Doctor.

11 DR. CAPRIOLI: Can I add to your comment?

12 MR. DELUCA: Please do.

13 DR. CAPRIOLI: That I think it would make
14 sense that before it's sent out, someone
15 should sign it and say all right, we did our
16 review. This requires being sent out. That's
17 it, because you can't just randomly send them
18 out and say you know what -- they received an
19 authorization of that, we can do that
20 internally. That's all you have to do, and
21 then someone, the person in authority asks who
22 sent those out. Then you know that we're
23 wasting revenue.

24 MR. DELUCA: Good comment. Do you agree,
25 Dr. Politi, with what what you heard here?

1 DR. POLITI: I mean, from what I
2 understand, when she left you guys were doing
3 that, and then, what do you do with the cases
4 since then? One hundred percent of them from
5 July to now it's getting sent out?

6 MR. DISANTI: Not on the inpatient side.

7 DR. POLITI: We're just talking
8 inpatient, not on the outpatient. On the
9 inpatient side.

10 MR. DISANTI: On the inpatient side for
11 2016 we had 1400 accounts that were denied.
12 We went ahead and reviewed those accounts, all
13 1400 accounts internally. We looked at zero
14 to one-day stays. We looked at that. Out of
15 those 1400 accounts that we looked for 2016,
16 700 exceeded the zero to one-day.

17 So the zero to one, we felt internally we
18 could go ahead and manage those. The ones
19 that are greater than the one-day stay, we
20 felt internally that we could not manage those
21 accounts, and our recommendations was -- would
22 be to send out to Health ROI to review those
23 cases.

24 MR. ZYSMAN: The zero to one-day stays,
25 which are the least likely to get reimbursed,

1 you found those are the easiest for your staff
2 to handle, but the ones that are greater than
3 zero to one-day stays, which are more likely
4 to be reimbursed -- that means they've been
5 admitted here. Right, zero to one-day is
6 difficult because that means the person may or
7 may not have ever been admitted, right, versus
8 greater than one-day stay, right, that means
9 that the person was here for a reason. A
10 doctor was treating them. Nurses were taking
11 care of them. Those are probably the stronger
12 claims.

13 DR. POLITI: Just to sum it up in really
14 simple terms. There are different types of
15 denials. When we look at our cases, 1400
16 cases, 700 of them were either zero or one-day
17 stays. We know we have about a 95 percent
18 denial rate that's upheld in zero and one-day
19 stays. These are the alcoholics that we bring
20 in. These are the overdoses that sign out MA.
21 So we routinely get denied.

22 So we're not going to send those 700
23 cases out for \$100 a case, knowing that that's
24 our highest percentage of loses. But we do
25 know that the remainder cases that go from day

1 three onward, we will make a lot of money from
2 that if we fight those cases. There's an
3 opportunity to fight those cases and so we
4 will send them out.

5 Of those additional cases, those
6 fourteen -- of those 700, we did receive --
7 what was our return on those 700?

8 MR. DISANTI: 80 percent.

9 DR. POLITI: 80 percent return rate. We
10 paid for those 700 cases \$700,000?

11 MR. DISANTI: No, 700 cases.

12 DR. POLITI: No, it was more money. It
13 was \$395 a case, not \$100 a case. We're
14 talking out -- inpatient, we're talking here.

15 MR. DISANTI: Inpatient.

16 MR. ZYSMAN: Doctor, what you said sounds
17 100 percent right. The issue is two-fold.
18 One, the cost of this is -- for '16 is about
19 half the amount we spent.

20 DR. POLITI: I went over those numbers
21 with Vince and what we've determined --

22 MR. ZYSMAN: Then in the year before we
23 spent \$38,000 or \$30,000 to collect \$48,000.
24 So all you're saying may be true, but
25 understand, he's saying he's spending his

1 staff time on the things that get 95 percent
2 denials on and never get paid on, rather than
3 spending his staff time on the stuff that
4 we're paying \$50,000 to collect \$50,000 and
5 \$30,000 to collect \$48,000.

6 DR. POLITI: Mr. Zysman, we're looking at
7 the 700 and we're looking at which we can send
8 out. The additional 700 that we do send out
9 at 395 a case, correct? That costs us what?
10 What's 395 times 700? \$210,000. Whatever it
11 is.

12 MR. DELUCA: Just multiply it by 400.

13 MR. DISANTI: It cost us \$280,000.

14 DR. POLITI: What was your return on
15 that?

16 MR. DISANTI: 80 percent of --

17 DR. POLITI: John, you gave me numbers.
18 What's the number?

19 MR. DELUCA: You want to know something,
20 it's really all irrelevant. You know what's
21 relevant, is that he needs -

22 DR. POLITI: Say it out loud, please.
23 How much did you get?

24 MR. DELUCA: Say it.

25 MR. DISANTI: 4.6 million.

1 DR. POLITI: 4.6 million. So
2 Mr. Zysman, we're saying we're spending
3 \$200,00 and we're getting 4.6 million. So --

4 MR. ZYSMAN: This contract is for 4.6
5 million.

6 MR. DISANTI: We're talking about the
7 Health ROI and then Med-Metrix. He's talking
8 about the Health ROI contract.

9 DR. POLITI: He's talking about the
10 inpatient.

11 MR. DISANTI: Which is the inpatient.

12 DR. POLITI: 4.6 million. He didn't
13 bring that up the last time. He didn't have
14 those numbers.

15 MR. ZYSMAN: He just gave data on this.

16 DR. POLITI: That's the Med-Metrix.

17 MR. ZYSMAN: On this Med-Metrix, and the
18 numbers I just quoted were the numbers he just
19 said.

20 MR. DISANTI: That's the outpatient.

21 DR. POLITI: Outpatients pay very little.
22 We don't go aggressively after those
23 outpatients, because we do get a lot -- we
24 don't get a lot of money from it.

25 Truthfully --

1 MR. ZYSMAN: Dr. Politi, tell us what you
2 want to do? Do you want to give a 40 or 50
3 thousand dollar cap? What do you want to do?

4 MR. DISANTI: Mr. Zysman, before I got
5 here, they weren't even at the outpatient
6 denials, the high end hand surg, CT scans, MRI
7 denials.

8 MR. ZYSMAN: Mr. Maher, is that true?

9 MR. MAHER: The denials on some of
10 radiology procedures, they may not have looked
11 at, may not have done that.

12 MR. ZYSMAN: All outpatient procedures
13 weren't being looked at prior to --

14 MR. MAHER: No.

15 MR. ZYSMAN: -- prior to Mr DiSanti
16 starting here?

17 MR. MAHER: No.

18 MR. DISANTI: The high-dollar --

19 MR. MIROTZNIK: When did you start here,
20 Vince?

21 MR. DISANTI: '14.

22 DR. POLITI: Vince, just give us a cap so
23 we can move on.

24 MR. DISANTI: \$50,000 per year.

25 MR. ZYSMAN: It's a one-year contract.

1 So what do you mean by per year?

2 MR. MAHER: Three years.

3 DR. POLITI: No, three years.

4 MR. ZYSMAN: Was this RFPd?

5 MR. DISANTI: Yes.

6 MR. ZYSMAN: This was the lowest bidder?

7 MR. DISANTI: This was the lowest
8 responsible bidder.

9 MR. ZYSMAN: What was the lowest bidder?

10 MR. DELUCA: While he's looking for that,
11 Harold, could you --

12 MR. DISANTI: It was the lowest bidder.
13 I apologize. It was the lowest bidder.

14 DR. POLITI: I knew it was.

15 MR. DELUCA: Could you work with Kathy
16 and Vince and try to get some -- a couple of
17 really sharp clinical people. I would think
18 you need that, right?

19 MR. DISANTI: Yes.

20 MR. DELUCA: I don't think you need us to
21 get involved, right?

22 MR. DISANTI: Okay.

23 MR. DELUCA: You'll do that, right?

24 MR. DISANTI: Yes.

25 MR. DELUCA: Thank you.

1 DR. CARUSO: You need clinical people to
2 review. But clinical people can't appeal.
3 Like I review at the hospital, too, but then I
4 can't appeal, because I don't know what
5 they're looking for in the appeal.

6 MR. DELUCA: But he does. Vince knows.

7 DR. CARUSO: You need kind of two sets of
8 people, you know --

9 MR. DELUCA: But he has that. He has
10 that. You're right. You're absolutely right,
11 Doctor.

12 DR. CARUSO: I don't think -- you know,
13 what I've seen in context, I don't think this
14 is really a lot of money for what you're
15 getting back.

16 MR. DELUCA: I agree.

17 DR. CARUSO: And I think we should now
18 move and I think we should -- if we're going
19 to make a motion, we should make a motion to
20 approve.

21 MR. DELUCA: I agree.

22 DR. CARUSO: And I think he knows what he
23 needs to do. He needs to add some staff and
24 do more. You can handle more on the hospital
25 side, of course that better. That's just like

1 billing ourselves and outsourcing it to an
2 outside contractor.

3 MR. DELUCA: Totally agree.

4 MR. MIROTZNIK: May I just make one
5 comment, and I agree with the doctor one
6 hundred percent. But Kathy, do you have the
7 available resource to assist this to move
8 forward in a positive direction to wean us off
9 the consultants?

10 MS. SKARKA: Yes. I'm moving forward
11 with in terms of identifying the start of a
12 nurse manager who's going to go and get some
13 training and take an online course and go to
14 Northwell. That's my plan for her training so
15 she can see how it's done, and then in the
16 next two weeks she'll be there and we'll have
17 that as a starting point and then probably -- I
18 have one individual already in place and the
19 director's doing the work herself.

20 So that will be three people, and then
21 right after she's done training the next two
22 weeks I hope to identify another individual.

23 MR. MIROTZNIK: Just so we're clear, the
24 Board -- you have not asked us for any
25 additional resources, have you?

1 MR. DISANTI: No.

2 MR. MIROTZNIK: I just want to make it
3 clear that if you need additional resources,
4 we're here to help you to move the process
5 along with Maureen, with the doctor and with
6 Mr. Zysman's committee. So I just want to
7 make that -- we're clear on this, right?

8 MR. DISANTI: Yes.

9 MR. DELUCA: Kathy, you need to work with
10 Vince, though. You have to agree on who these
11 people are. He has to be part of it. Vince
12 has to be part of it.

13 MS. SKARKA: No problem.

14 MR. MIROTZNIK: Certainly three years
15 after what Kathy just said on the record,
16 three years is not -- I mean, we don't need
17 three years. I mean -- John --

18 DR. CARUSO: I think you always need it,
19 because there's going to be times when you
20 can't rely on --

21 MR. DISANTI: He's right.

22 MR. DELUCA: You always need it. You
23 always need it.

24 DR. CARUSO: Remember, if you outsource
25 it this way, there's nobody on vacation. If

1 I'm your employee, you got vacation, sick
2 time, Family Leave Act. You have everything.
3 When you outsource this, it's because you got
4 to get it out. That's \$100 a case, but
5 they're doing it all.

6 MR. MIROTZNIK: I leave it to Dr. Politi
7 and his staff to tell us what they would
8 require of the Board.

9 DR. CARUSO: I think you need a minimum
10 here. If you don't want to say 50, say 40.
11 But you need a minimum. You need to get two
12 years --

13 MR. DISANTI: Two years.

14 DR. CARUSO: If you want two years, then
15 make it two years.

16 MR. DELUCA: Yes, he's absolutely right.

17 MR. ZYSMAN: I think we should approve it
18 based on the time that you've indicated, but
19 provide a plan in some period of time. What
20 period of time do you guys need -- you and
21 Kathy need to put together a plan.

22 MR. DISANTI: Sixty days.

23 MR. ZYSMAN: You want to give an update
24 in 90 days?

25 DR. POLITI: It's two years.

1 MR. DISANTI: I know I want the two
2 years, but her said --

3 DR. POLITI: Just say you need two years
4 and \$50,000 a year.

5 MR. MIROTZNIK: No, no. He was only
6 asking -- hold on. Just so we're clear,
7 Mr. Zysman was just asking how long to sort of
8 report back and Vince was very aggressive in
9 saying 60 days. But why don't we go within
10 the next 120 days. You and Kathy can come to
11 the Board and let us know what's going on.

12 MR. DISANTI: We'll do that.

13 DR. CARUSO: I think we should approve
14 it.

15 MR. ZYSMAN: Ms. Faughnan, we'll do an
16 up-to amount of \$50,000 for each years.

17 MS. FAUGHNAN: For two years or two --

18 MR. ZYSMAN: This was RFPd, right?

19 MR. DISANTI: Yes.

20 MS. FAUGHNAN: The NHCC Board of
21 Directors --

22 MR. DELUCA: Wait, wait. Excuse me.
23 Mr. Chairman, may I just ask one more
24 question. Maureen, do you agree with what you
25 just heard? It's important that we have her

1 agreement.

2 MS. ROARTY: I agree.

3 MR. DELUCA: You agree with it? You
4 think we're going down a right road here?

5 MS. ROARTY: Yes. Wherever possible we
6 try to fill positions from inhouse. But I
7 agree. That's what we're seeking to do.

8 MR. DELUCA: Thank you.

9 MS. FAUGHNAN: The NHCC Board of
10 Directors authorizes the president to
11 negotiate and execute a contract with
12 Med-Metrix for a two-year term effective
13 January 1, 2017 in a total amount not to
14 exceed \$50,000 per years for a total amount of
15 \$100,000 at a cost of \$100 per case to provide
16 -- to review and submit outpatient medical
17 denial claims.

18 MR. ZYSMAN: That are not recoverable by
19 the department.

20 MR. MIROTZNIK: Vince, is that what
21 you're seeking?

22 MR. DISANTI: Yes, sir.

23 MR. MIROTZNIK: Dr. Politi?

24 DR. POLITI: I agree. Thank you.

25 MR. MIROTZNIK: Mr. Maher?

1 MR. MAHER: Yes.

2 MR. ZYSMAN: Can I get a motion for
3 approval? Second? Favor? Unanimous.

4 EGS Financial.

5 MR. DISANTI: Can we do Health ROI first?
6 That's in line with Med-Matrix, both doing,
7 you know, working on denials.

8 MR. ZYSMAN: I'm going to wind up asking
9 the same questions. They're are all here for
10 the same reason. We already processed through
11 everything. Do you have an up-to amount for
12 EGS Financial, No. 6, or there's still no
13 up-to amount, per case? You could send out
14 one hundred thousand cases and you can send
15 out ten cases.

16 DR. POLITI: Vince, how many outpatient
17 cases did you send out last year?

18 MR. DISANTI: I'll tell you exactly.
19 Three thousand cases.

20 DR. POLITI: Three thousand cases?

21 MR. DISANTI: This is for third-party
22 follow-up, 2985.

23 DR. POLITI: What does that mean?

24 MR. DISANTI: It's the responsibility
25 of --

1 DR. POLITI: No, Vince. All we want to
2 know is how many cases did you send out for
3 outpatient cases?

4 MR. ZYSMAN: Vince, how about we do this?
5 Vince, this is what we're going to do. I'm
6 going to go to No. 12 and No. 13. You come up
7 up with the up-to amount with Harold, so that
8 we don't have to process and do the math on
9 each of these as we go along. Okay?

10 No. 12, Northwell Pediatric, Anne Salvo.
11 Is Anne here? Hey, Anne.

12 MS. SALVO: I'm here to request to an
13 amendment to a contract with Northwell for
14 pediatric cardiology services. They've been
15 with us since 2010. This amendment is
16 requesting an increases of services for a
17 three-year period for a total of \$390,000.

18 MR. ZYSMAN: Dr. Politi, are you aware
19 of this pediatric cardiology contract?

20 DR. POLITI: Just trying to refresh my
21 memory. I'm know we had a pediatric
22 cardiology contract, but I'm not sure --

23 MS. SALVO: This is an amendment to our
24 current pediatric contract. We recently have
25 lost our on-site part-time pediatric

1 cardiologist several months back and we're
2 requesting to increase the contract from 0.3
3 to 0.5. With that, they'll cover two half
4 sessions and provide 24/7 on site on call
5 coverage to us.

6 DR. POLITI: I know we need the 24/7
7 coverage.

8 MS. SALVO: Yes.

9 DR. POLITI: We need that for our
10 pediatrics. I wasn't familiar with the
11 clinical. He's going from 0.3 to 0.5?

12 MS. SALVO: Correct.

13 DR. POLITI: We have the volume to
14 support that.

15 MS. SALVO: We have the -- the clinic
16 needs for about 0.2. The remainder is for
17 that coverage that we need for our neonatal
18 care unit.

19 DR. POLITI: We're paying them 0.5?

20 MS. SALVO: Yes.

21 DR. POLITI: From 0.2 -- again I'll ask
22 the same question. Do we have the volume to
23 support 0.3?

24 MS. SALVO: Yes. When I reviewed the
25 numbers in 2015 we did over 400 clinic visits

1 and 164 consults.

2 DR. POLITI: Dr. Kumar, pediatrics, do
3 they require this?

4 DR. KUMAR: Yes, I think so. Absolutely.

5 DR. POLITI: In your mind as chairman --
6 interim chairman of pediatrics, you would
7 recommend this?

8 DR. KUMAR: Absolutely.

9 DR. POLITI: Based on the recommendation
10 of Ms. Anne Salvo and our interim pediatric
11 chairman, I would recommend we go forward with
12 this case -- with this contract.

13 MR. MIROTZNIK: Stand by. Dr. Kumar, to
14 reiterate, you're in favor of the vote on this
15 contract in the affirmative?

16 DR. KUMAR: Yes.

17 MR. MIROTZNIK: It is necessary to the
18 health, safety and welfare of the young people
19 that you treat?

20 DR. KUMAR: Absolutely.

21 MR. MIROTZNIK: Ms. Salvo?

22 MS. SALVO: Yes, absolutely.

23 MR. MIROTZNIK: Dr. Politi?

24 DR. POLITI: Yes, I do.

25 MR. MIROTZNIK: We're budgeted? We're

1 okay for this contract that we voted on?

2 MR. MAHER: Yes. There's also Part B
3 that's not reflected on this that we get one
4 hundred percent of it.

5 MR. MIROTZNIK: With that being said, I
6 make a motion. May I have a second? Mr.
7 DeLuca? Ms. Hanson? All in favor?
8 Unanimous. Thank you. Thank you, Anne.

9 MS. SALVO: Thank you.

10 DR. POLITI: Thank you, Ms. Salvo.

11 MR. ZYSMAN: No. 13, Avant-Garde
12 Performance Improvement, LLC. Dr. Faust?

13 MR. MCDONALD: Dr. Faust is out of town
14 and Maureen is also out of town so I'll be
15 presenting for them. The request is for
16 \$118,000 for a six-month term. Avant-Garde is
17 a consulting firm we bring to help us review
18 for the upcoming trauma survey.

19 So they'll be coming back -- what we're
20 looking to do is have them come back in and
21 work with the departments to make sure that
22 we've got everything in place for the survey,
23 which is supposed to take place in June of
24 this year.

25 MR. DELUCA: You mean to make sure we're

1 in compliance?

2 MR. MCDONALD: To make sure that we're in
3 compliance. It's a number of visits that this
4 consulting firm will be coming to work with
5 us.

6 MR. ZYSMAN: Can I get a motion?
7 Ms. Faughnan?

8 MS. FAUGHNAN: The NHCC Board of
9 Directors authorizes the president to
10 negotiate and execute an amendment of an
11 agreement with Avant Garde Performance
12 Improvement LLC to provide trauma consulting
13 services with respect to the trauma one survey
14 for a six-month term effective February 1,
15 2017 in an additional amount not to exceed
16 \$118,000.

17 MR. MIROTZNIK: All in favor of the
18 motion? Unanimous.

19 Ms. Faughnan, on No. 12 I didn't have you
20 read the motion in. I made a mistake. Can we
21 re-take that motion?

22 MS. FAUGHNAN: Sure. The NHCC Board of
23 Directors authorizes the president to
24 negotiate and execute an amendment of an
25 agreement with Northwell Health to provide

1 additional pediatric cardiology services for a
2 three-year term effective December 16, 2016,
3 in an additional amount not to exceed
4 \$319,000.

5 MR. MIROTZNIK: Same vote. Mr. DeLuca,
6 second. All in favor? Unanimous. Thank you,
7 Ms. Faughnan.

8 MR. ZYSMAN: Mr. DiSanti, do you have it
9 all tied out or do you need more time?

10 MR. DISANTI: Just a second.

11 MR. ZYSMAN: PI medline. Frank
12 Intagliata. This is a very large contract.

13 MR. INTAGLIATA: Good evening,
14 Mr. Chairman.

15 MR. ZYSMAN: Good evening.

16 MR. INTAGLIATA: This contract is for our
17 medical surgical supply distribution. It is a
18 \$7,000,000 annual spend. It is a budgeted
19 expense to the hospital. In our review in
20 2011 going forward to 2016, it's a cost plus
21 contract. So the hospital is spending roughly
22 \$280,000 to \$300,000 per year.

23 In my review of this, the contract was
24 expired on 12/31/16, and we came before the
25 board on a sort of an FYI in the summer and we

1 suggested that we have a GPO in place for this
2 contract. But for further transparency we
3 went out for a formal bid.

4 The results of the formal bid were in
5 September and the request of the Board was to
6 do an outside audit. The outside audit was
7 done by Garfunkel Wild, and was submitted the
8 first -- in our contracts meeting.

9 MR. DELUCA: Frank, what does GPO mean?

10 MR. INTAGLIATA: Group purchasing
11 organization.

12 MR. DELUCA: Don't use any acronym or
13 euphemisms or anything that everybody in this
14 room will not be familiar with, please?

15 MR. INTAGLIATA: Yes, sir.

16 MR. DELUCA: Thank you.

17 MR. INTAGLIATA: And so --

18 MR. MIROTZNIK: May I ask you -- I'm
19 sorry to interrupt? Legal? Mr. Ciampoli?
20 That Garfunkel Wild audit that's part and
21 parcel of Mr. Intagliata's testimony, can that
22 be marked as Exhibit B as part of the record?

23 MR. CIAMPOLI: Sure.

24 MR. MIROTZNIK: Could you make that
25 available? Mark that as Exhibit B.

1 (Whereupon, the Garfunkel Wild audit
2 letter was marked as Exhibit B for
3 identification as of today's date.)

4 MR. INTAGLIATA: What you have there,
5 Mr. Chairman, is the addendum that reviewed
6 the audit and said that we did not have a
7 signed requisition to go forward. It's part
8 of our purchasing procedures. That
9 requisition should have been signed by
10 administration, you know, before we went out
11 for formal bid.

12 So we went through that process and what
13 I'm submitting tonight is their follow up that
14 says there is a signed requisition.

15 MR. MIROTZNIK: Who is part -- because
16 we're going to ask you these questions. This
17 is a very large contract and we do this on
18 small contracts. Who is part of your group
19 that reviewed the responses from the bidders?

20 MR. INTAGLIATA: My team in purchasing?

21 MR. MIROTZNIK: Yes.

22 MR. INTAGLIATA: IT consists of the buyer
23 and director of purchasing or --

24 MR. MIROTZNIK: Put their names on the
25 record.

1 MR. INTAGLIATA: It was Elizabeth
2 Barrett, the buyer and Douglas Bruce is the
3 technical coordinator. That's the way
4 procurement processes the work and follows up
5 on the bidding procedure and makes a
6 recommendation to the technical coordinator
7 for approval.

8 MR. MIROTZNIK: Who prepared the RFP?

9 MR. INTAGLIATA: The formal bid that went
10 out was prepared by Elizabeth Barrett, the
11 buyer.

12 MR. MIROTZNIK: Did legal review it or
13 did you have an outside firm review it?

14 MR. INTAGLIATA: An outside firm reviewed
15 it.

16 MR. MIROTZNIK: Who was that?

17 MR. INTAGLIATA: Garfunkel Wild.

18 MR. MIROTZNIK: That's counsel that's
19 known to this hospital and this Board for
20 many, many years, Dr. Politi, correct?

21 DR. POLITI: Correct.

22 MR. MIROTZNIK: Who was the contact
23 person you dealt with at Garfunkel Wild?

24 MR. INTAGLIATA: Michael Keane.

25 MR. MIROTZNIK: Michael's appeared before

1 this Board on numerous occasions as well. The
2 sum and substance of their recommendation is
3 that the procedures that you put in place were
4 followed and adhered to?

5 MR. INTAGLIATA: Yes.

6 MR. MIROTZNIK: The bids that were
7 received and reviewed were in conformity with
8 all applicable laws, Mr. Tepper?

9 MR. TEPPER: I haven't seen this.

10 MR. MIROTZNIK: You weren't part of that?

11 MR. TEPPER: No.

12 MR. MIROTZNIK: Continue, Mr. Intagliata.
13 Thank you.

14 MR. INTAGLIATA: The addendum then is in
15 place, right? The addendum says we did have a
16 signed rec. Now the part where we save money.
17 We can eliminate --

18 MR. MIROTZNIK: What?

19 MR. INTAGLIATA: Where we save money.
20 Again, there's an expense for everything we
21 bring into the hospital. This staff regularly
22 reports to me. It is our inventory that is
23 distributed throughout the organization.
24 Under the terms of this agreement that we'll
25 put forward, we will start with a deduction of

1 four percent to two percent, so we will
2 immediately realize a \$140,000 savings just
3 based on our traditional volume. In addition
4 to that, there will be several rebates put in
5 place for manufactured products. Prior to
6 this, we only used a distributor that did not
7 manufacture products.

8 In this particular arena there are two
9 companies, Cardinal and MedLine. They
10 represent probably 65 to 70 percent of the
11 market share of manufactured products. Our
12 goal is to move forward to 35, 40, 45 percent
13 manufactured products where we get an eight
14 percent reduction and a zero percent
15 distribution, which will up our savings
16 towards a quarter of a million dollars in year
17 one.

18 Additionally, we'll get a growth rebate
19 of five percent and a trailing rebate of one
20 and a half percent. To add to this, we had a
21 full-time salary that came to me in August
22 said they had another position. It was a
23 temporary work force person that my
24 predecessor had in place to evaluate and run
25 reports. That salary was \$78,000. We have

1 not replaced that salary and we are able to go
2 and use the technology of the firm we're
3 hiring, and run our own -- run our reports at
4 no cost to us, which will be validated by the
5 buying people.

6 So I'll be very happy to report to the
7 Board of a 15-month funnel that shouldn't
8 exceed \$300,000 and will continue that way for
9 a period of three years and then we'll have
10 two years, two options for two, years and I'll
11 come to the board and I'll tell you my
12 findings and then we'll support whether we're
13 going to give them an extension for two more
14 years or we'll rebid it and try to drive down
15 the cost further.

16 MR. MIROTZNIK: We're buying these
17 products with other partners, so to speak?

18 MR. INTAGLIATA: Yes. What happens to
19 this is if they doesn't manufacture the
20 product, we get to negotiate with the local
21 vendors. Again, it's a group purchasing
22 organization, the GPO, and we drive down the
23 cost and make it a bidding war, and then once
24 we get a low number we either distribute
25 through MedLine with another manufactured

1 product or we go to them.

2 MR. MIROTZNIK: Northwell is part of the
3 GPO?

4 MR. INTAGLIATA: Northwell, interesting
5 enough, has their own GPO, but they want us --
6 they want to receive our rebates. They like
7 to do some of these things and I think we can
8 take this on ourselves and save the money.

9 MR. MIROTZNIK: Mr. DeLuca?

10 MR. DELUCA: Frank, are there any
11 opportunities with consortiums through the
12 Nassau-Suffolk Hospital Council that you've
13 explored?

14 MR. INTAGLIATA: No, I have not. The
15 only thing we did explore in this was Stony
16 Brook that does approximately \$18,000,000 a
17 year.

18 MR. DELUCA: Are we a member this year of
19 the Nassau-Suffolk Hospital Council?

20 DR. POLITI: Yes, we are.

21 MR. MCDONALD: Yes.

22 MR. DELUCA: Because that's something I
23 would look into.

24 MR. INTAGLIATA: Okay. Being a member, I
25 would just have to run it by our legal team to

1 determine what contracts we can piggyback on.

2 MR. DELUCA: Yes. They offer, you
3 know -- it's a good resource, a very good
4 resource.

5 DR. POLITI: As a matter of fact,
6 Mr. Rizzo attends all their meetings and is
7 very happy with the Nassau-Suffolk Hospital
8 Council.

9 MR. DELUCA: I used to be the guy that
10 attended those meetings.

11 MR. RIZZO: We'll look into it.

12 MR. DELUCA: Great. Thanks.

13 MR. MIROTZNIK: Any further questions in
14 the room? John, any comment?

15 MR. MAHER: No.

16 MR. MIROTZNIK: You're familiar with this
17 particular --

18 MR. MAHER: I'm familiar with MedLine and
19 also familiar with the work Frank's doing, and
20 I agree with everything he said.

21 MR. MIROTZNIK: You ask that we move
22 forward on this?

23 MR. MAHER: I would, absolutely.

24 MR. MIROTZNIK: In favor?

25 MR. MAHER: Yes.

1 MR. MIROTZNIK: Dr. Politi?

2 DR. POLITI: Yes, I agree. I spoke with
3 Frank and I think it's a great deal. He came
4 up with something that actually might increase
5 the revenue here at the hospital.

6 MR. MIROTZNIK: Dr. Mustacchia?

7 DR. MUSTACCHIA: From what I've heard and
8 what I understand, it sounds like something
9 that I would support.

10 MR. ZYSMAN: Can we get a motion?

11 MS. FAUGHNAN: The NHCC Board of
12 Directors authorizes the president to
13 negotiate and execute an agreement with
14 MedLine Industries, Inc. to provide medical
15 and surgical supply distribution services for
16 a three-year term effective February 15, 2017,
17 with two 2-year options in an annual amount
18 not to exceed \$7 million per year for the
19 initial three-year term.

20 MR. ZYSMAN: Motion? Second? Favor?
21 Unanimous. Thank you.

22 Simplex Grinnell, Michael Ferrandino,
23 Purchasing Department.

24 MR. FERRANDINO: Good evening, this is
25 coming to the Board for approval. It's a

1 request for an extension of the current
2 blanket order. It's BPNC 2012-1802 in
3 accordance with the New York State contract.
4 We're looking to extend to August 26 of 2020,
5 and this was for fire alarm maintenance and
6 testing at A. Holly Patterson in the amount
7 \$178,500, and this is being brought to the
8 Board to conform with the new purchasing
9 requirements in that the aggregate amount of
10 the contract with Simplex Grinnell will be
11 exceeding the threshold.

12 This contract is because the New York
13 State contract that we're working off of
14 expires at the end of this month and the new
15 contract will be in effect to August 26 of
16 2020.

17 Back on March 1 of 2012 on the original
18 blanket order, \$225,000 was put into the
19 contract, of which as of today \$19,941 are
20 remaining. All these previously approved --
21 have been previously approved budget expenses
22 and there's no new funds that we're asking to
23 add to the contracts. It's merely an
24 extension to piggyback with the New York State
25 contract.

1 MR. ZYSMAN: The original procurement,
2 was it bid? RFPd?

3 MR. FERRANDINO: It's a state contract.

4 MR. ZYSMAN: Can someone define what that
5 means?

6 MR. INTAGLIATA: Mr. Chairman, New York
7 State provides leveraged pricing for various
8 services like this throughout the state and it
9 is part of our procurement policy to use that
10 as a source without procurement, and this
11 contract probably's been in effect for a
12 decade at the hospital. The blanket contract
13 that Michael's requesting is what controls the
14 expenditure for A. Holly.

15 MR. ZYSMAN: For legal, is this
16 acceptable? Are there any issues with this
17 extension from a legal perspective?

18 MR. TEPPER: No. State contract is an
19 acceptable means.

20 MR. ZYSMAN: Ms. Faughnan.

21 MR. MIROTZNIK: Thank you,
22 Mr. Ferrandino.

23 MR. DELUCA: Can I just ask Mike?
24 Michael, are you convinced that is the most
25 cost effective way to did this?

1 MR. FERRANDINO: I am. With the company
2 here, the equipment that's in place is Simplex
3 equipment and they have some proprietary
4 components in the system.

5 MR. DELUCA: Thank you.

6 MS. FAUGHNAN: The NHCC Board of
7 Directors authorizes the president to
8 negotiate and execute an extension of an
9 agreement with Simplex Grinnell LP to provide
10 fire alarm testing and full maintenance at
11 A. Holly Patterson Extended Care Facility for
12 a three and a half year term effective March
13 1, 2017 in an additional amount not to exceed
14 \$178,500.

15 MR. ZYSMAN: Can I get a motion? Second?
16 Favor? Unanimous.

17 Vince, do you have all the things ready?

18 MR. DISANTI: Yes, we have them there.

19 MR. ZYSMAN: Let's go through them. EGS
20 Financial, what's the up-to amount?

21 MR. MCDONALD: The not to exceed amount
22 is \$250,000 a year.

23 MR. ZYSMAN: What is that based on?

24 MR. MCDONALD: It's based on a mix of
25 inpatient and outpatient claims. It's \$25 for

1 inpatient claims and \$10.25 for outpatient.

2 MR. ZYSMAN: How many cases? I just --
3 we went through this before, right? So you
4 came up with the number of \$250,000. I'm just
5 asking how many cases that's based on.

6 MR. MCDONALD: About 14,000 claims.

7 MR. ZYSMAN: 14,000 claims dating back to
8 when? Just 2017 also?

9 MR. DISANTI: Based on 2016 numbers.

10 MR. MCDONALD: There are various years
11 for these claims, but primarily 2016.

12 MR. DISANTI: That's correct.

13 MR. ZYSMAN: Is the Board satisfied with
14 that? How far back does it go? What's the
15 furthest back?

16 MR. DISANTI: It goes back --

17 MR. MIROTZNIK: Just for the record, a
18 number of us sitting on the Board are not --
19 we never went to the pre-contact committee
20 meeting. I know Mr. Zysman spent a lot of
21 time doing this. So for some of us that ask
22 questions, remember, we weren't there.

23 MR. DISANTI: Primarily 2015 and 2016
24 claims.

25 MR. ZYSMAN: How far back does it go?

1 Are you submitting 2012 claims under this
2 contract?

3 MR. DISANTI: This contract involves a
4 accounts that are 91-days plus.

5 MR. MAHER: John, is there a line that we
6 should draw where it's not worth spending the
7 money to go after it that in your professional
8 opinion it is going to be uncollected?

9 MR. MAHER: At some point that's true,
10 but you have to make an effort or else your
11 maintenance and effort to go after bad debt is
12 considered deficient.

13 MR. MIROTZNIK: When would you tell them
14 to stop and just --

15 MR. MAHER: Are these 91 -- I'm --

16 MR. MIROTZNIK: You can talk.

17 MR. MAHER: These are 91-day claims and
18 they haven't been paid? Is that --

19 MR. DISANTI: 91-plus, yes.

20 MR. MAHER: In these cases, these are
21 claims that the third parties have been
22 unresponsive to us? Ninety days seems a bit
23 close, but the faster you collect, the better
24 that we have -- to have the money, so 90
25 days --

1 MR. ZYSMAN: Would you recommend a more
2 attentive review process if it's greater than
3 a certain period of time? Like would you
4 allow 2010 claims without a more attentive
5 review process?

6 MR. MAHER: I don't know that anything
7 beyond the middle of 2015 would be worth going
8 after at this point. I just don't see it.
9 Medicare has a one-year window. Medicaid has
10 90 days, and if it's an appeal, you know, you
11 got --

12 MR. MAHER: John, if it's greater than
13 2015, can you work up a plan with
14 Mr. DiSanti --

15 MR. MAHER: Sure.

16 MR. ZYSMAN: -- Mr. McDonald and
17 Dr. Politi to review it prior to sending it
18 out?

19 MR. MAHER: I will.

20 MR. ZYSMAN: Just for 2015 and 2016
21 claims and 2017. Ms. Faughnan, just include
22 those years.

23 MS. FAUGHNAN: The NHCC Board of
24 Directors authorizes the president to
25 negotiate and execute an extension of an

1 agreement with EGS Financial to provide
2 third-party follow-up billing for inpatient
3 and outpatient contracts for NUMC for the
4 years 2015, 2016 and 2017 at a fee of --
5 inpatient fee of \$25 per account, a fee of
6 \$10.25 per outpatient in a total amount not to
7 exceed \$250,00 for a one-year term effective
8 January 1, 2017.

9 MR. ZYSMAN: Can I get a motion? Second?
10 Favor? Unanimous.

11 EGS Financial, No. 7. They're getting two
12 contracts for two different things, I guess.

13 MR. MCDONALD: The second contract here
14 is LD200 2986, and it's for Medicaid
15 applications, and the request is for a
16 one-year contract not to exceed \$25,000, and
17 the charge is \$495 per application.

18 MR. ZYSMAN: These are also for years
19 '15, '16 and '17.

20 MR. DISANTI: Yes.

21 MR. ZYSMAN: Ms. Faughnan.

22 MS. FAUGHNAN: The NHCC Board of
23 Directors authorizes the president to
24 negotiate and execute an extension of an
25 agreement with EGS financial to provide and

1 process Medicaid eligibility applications for
2 a one-year term effective January 1, 2017 at a
3 cost of \$495 per account and a total amount
4 not to exceed \$25,000 for the one-year term.

5 MR. ZYSMAN: Motion? Second? Favor?
6 Unanimous. Thank you.

7 Health ROI.

8 MR. MCDONALD: This is a three-year
9 request. It's LD200 2981. It's for \$250,000
10 every year. So \$750,000 in total, in an
11 amount not to exceed \$300 per case, these are
12 cases for 2016 and 2017.

13 MR. ZYSMAN: This was RFPd?

14 MR. MCDONALD: Yes.

15 MR. DISANTI: Yes.

16 MR. ZYSMAN: Was this the lowest bidder,
17 or respondent, rather?

18 MR. DISANTI: Lowest responsible bidder.

19 MR. ZYSMAN: Was it the lowest?

20 MR. DISANTI: No, it was not the lowest.

21 MR. ZYSMAN: What was the lowest?

22 MR. DISANTI: \$200.

23 MR. ZYSMAN: The lowest was about
24 33 percent less. Why did you choose this one?
25 What was wrong with the one that was 33

1 percent cheaper?

2 MR. DISANTI: There was no New York
3 presence. This was Sutherland. Sutherland
4 was the lowest bidder. It's really the
5 experience, if you will, Mr. Chairman.

6 MR. ZYSMAN: Your representation is --
7 what was the name of the company?

8 MR. DISANTI: Sutherland.

9 MR. ZYSMAN: Sutherland doesn't do this
10 work, but they responded to it.

11 MR. DISANTI: It's something new for
12 them. It's a new line of business.

13 MR. ZYSMAN: Is that what they said in
14 their RFP?

15 MR. DISANTI: Yes.

16 MR. ZYSMAN: What happened, you
17 determined them not qualified?

18 MR. DISANTI: That's correct.

19 MR. ZYSMAN: Who was involved on that
20 committee with you?

21 MR. DISANTI: It was me, Mr. Gatto. When
22 Donna was here, Donna was involved. We had
23 a --

24 MR. MIROTZNIK: Who's Donna?

25 MR. DISANTI: Donna Skura. That was our

1 contracts person.

2 MR. ZYSMAN: Who else? Any employees of
3 the hospital other than you?

4 MR. DISANTI: Donna was an employee of
5 the hospital.

6 MR. ZYSMAN: Ms. Roarty, is Donna Skura
7 an employee of the hospital?

8 MS. ROARTY: She's not on our payroll.

9 MR. ZYSMAN: Is Mr. Gatto an employee of
10 the hospital?

11 MS. ROARTY: No.

12 MR. ZYSMAN: Were you the only employee
13 of the hospital in that RFP selection?

14 MR. DISANTI: No, Emilia Fillizola was as
15 well.

16 MR. ZYSMAN: Who's that?

17 MR. DISANTI: She one of the -- she works
18 in finance.

19 MR. ZYSMAN: What's her title?

20 MR. DISANTI: I can't recall. Also Carol
21 Williams was also involved. She was one of
22 the nurse clinicians. I have to go back and
23 check, to be honest with you, Mr. Chairman,
24 but I think Dr. M was involved also on the
25 committee.

1 MR. MIROTZNIK: Is that short for
2 Mustacchia? Dr. M?

3 MR. DISANTI: Yes.

4 MR. MIROTZNIK: Mr. Tepper, the -- is
5 there procurement policy requirements that
6 there have to be a certain amount of employees
7 from the institution part of the procurement
8 process?

9 MR. TEPPER: No, there's no requirement.
10 As long as they're acting in the best interest
11 of the company and they're loyal to us.

12 MR. MIROTZNIK: Not employees? They
13 don't have to be employees?

14 MR. TEPPER: They're working for our
15 benefit. As long as there are some employees
16 on there overseeing it I don't have a problem
17 with it.

18 MR. MIROTZNIK: Vince, is there any
19 problem with you getting like a three-month
20 extension on this and going through the
21 process again? It seems like the whole team
22 is no longer employed at the hospital. The
23 contracts is for three-quarters of a million
24 dollars.

25 MR. DISANTI: That's for three years.

1 MR. MIROTZNIK: It's still a lot of
2 money. Can you redo this if we go out three
3 months or so?

4 MR. MCDONALD: To redo the RFP or just to
5 internally have a new group come together?

6 MR. MIROTZNIK: Some representation that
7 the people on the committee are employed by
8 the hospital and it's contemporaneous to this
9 Board voting. How long ago was this RFP done?

10 MR. DISANTI: About fall.

11 DR. POLITI: Can you say who's on that
12 committee again?

13 MR. DISANTI: Donna Skura, Mike Gatto,
14 Dr. Mustacchia, Carol Williams.

15 DR. POLITI: Let's start. You're on the
16 committee?

17 MR. DISANTI: Correct.

18 DR. POLITI: Are you an employee?

19 MR. DISANTI: Yes, sir.

20 DR. POLITI: Is Paul Mustachia on the
21 committee?

22 MR. DISANTI: Yes.

23 DR. POLITI: Is he an employee?

24 MR. DISANTI: Yes.

25 DR. POLITI: Who's the next guy?

1 MR. DISANTI: Carol Williams.

2 DR. POLITI: Is Carol Williams on the
3 committee?

4 MR. DISANTI: Yes.

5 DR. POLITI: Is she an employee?

6 MR. DISANTI: Yes.

7 DR. POLITI: When you have a normal RFP,
8 is it usual and customary to have three
9 employees on the RFP committee.

10 MR. DISANTI: That's usually yes
11 minimum --

12 DR. POLITI: Just say yes.

13 MR. DISANTI: Yes.

14 DR. POLITI: So they have three employees
15 that are on the committee.

16 MR. MIROTZNIK: You cleared things up.

17 DR. POLITI: Thank you.

18 MR. MIROTZNIK: Dr. Mustacchia?

19 DR. MUSTACCHIA: Yes, sir.

20 MR. MIROTZNIK: You were on this
21 committee?

22 DR. MUSTACCHIA: Yes, sir.

23 MR. MIROTZNIK: Are you requesting this
24 Board to vote in the affirmative to extend, to
25 continue this contract?

1 DR. MUSTACCHIA: To the extent that I was
2 involved I was satisfied with the discussion.
3 I was not involved in the final
4 decision-making process. My attendance is
5 spotty on these committees because of other
6 responsibilities.

7 MR. MIROTZNIK: I understand that.

8 MR. ZYSMAN: Members of the Board,
9 Dr. Politi, are you recommending that we move
10 forward with this?

11 DR. POLITI: Yes, I am.

12 MR. MIROTZNIK: Thank you, Mr. DiSanti.

13 MR. DISANTI: You're welcome.

14 MS. FAUGHNAN: The NHCC Board of
15 Directors authorizes the president to
16 negotiate and execute an agreement with Health
17 Resources Optimization, Inc., aka Health ROI,
18 to review medical clinical denial and to
19 appeal insurance companies for patient
20 accounts for 2016 and 2017 at a cost of \$300
21 per case for a three-year term effective
22 January 1, 2017 in an amount not to exceed
23 \$250,000 per year and a total amount not to
24 exceed \$750,000 for the three-years term.

25 MR. ZYSMAN: Can I get a motion --

1 Mr. Maher?

2 MR. MAHER: I just need a clarification.
3 Is this to bill or to appeal accounts?

4 MR. DISANTI: Appeal.

5 MR. MAHER: The record was read to bill
6 accounts.

7 MS. FAUGHNAN: I said re-bill. I thought
8 I said re-bill.

9 MR. MIROTZNIK: Sir, would you physically
10 strike "re-bill" and put --

11 MR. MAHER: To appeal.

12 MR. MIROTZNIK: -- to appeal in its
13 place? Legal, good?

14 MS. FAUGHNAN: Yes.

15 MR. MIROTZNIK: Take a vote. Second?

16 MR. ZYSMAN: Motion? Second? All in
17 favor? Unanimous. Thank you.

18 MR. DISANTI: Thank you.

19 MR. MCDONALD: I think there's one left,
20 Mr. Chairman.

21 MR. ZYSMAN: Which one?

22 MR. MCDONALD: No. 9, Advanced
23 Reimbursement, LD200 2990.

24 MR. ZYSMAN: What's the total amount?

25 MR. MCDONALD: The request is for an

1 amount \$400,000 for 23 months effective
2 2/1/16.

3 MR. DISANTI: No, that was for the name
4 change.

5 MR. ZYSMAN: What is it?

6 MR. DISANTI: It's a name change. It's a
7 change of a name from HCE to Advanced in 2016.
8 So we want to just set the record straight
9 that they went from HCE to Advanced in 2016.

10 MR. ZYSMAN: So there's no numerical
11 change in this?

12 MR. DISANTI: No, just the name change in
13 2016.

14 MR. ZYSMAN: Ms. Faughnan, can you do a
15 resolution with just a name change? If it's
16 simple, let's do it. If it's not simple, lets
17 go on to the next and wrap this up. Is it
18 simple or not?

19 MS. FAUGHNAN: We believe it's simple.

20 MR. ZYSMAN: Let's do it.

21 MS. FAUGHNAN: The NHCC Board of
22 Directors authorizes the president to
23 negotiate and execute an assignment and
24 assumption of agreement with HCE to assign --
25 to allow the assignment and assumption of

1 agreement to Advanced Reimbursement
2 Management, otherwise known as Adreima,
3 A-D-R-E-I-M-A, effective February 1, 2016 to
4 the end of that contract term 12/31/2016.

5 MR. ZYSMAN: Can I get a motion? Second?
6 Favor? Unanimous? We're done with this?

7 MS FUSHCETTO: I think there's No. 10.

8 MR. ZYSMAN: What's the up-to amount on
9 the next one?

10 MR. MCDONALD: Same company. We're
11 looking to extend the contract.

12 MR. DISANTI: From 1/1/17, a one-year
13 contract not to exceed \$200,000.

14 MR. ZYSMAN: When was this RFPd?

15 MR. DISANTI: It's being RFPd now,
16 Mr. Chairman.

17 MR. ZYSMAN: Is it going to take a year
18 to RFP it?

19 MR. DISANTI: No.

20 MR. ZYSMAN: Then why are you asking for
21 a year extension?

22 MR. DISANTI: We can do it in six months.

23 MR. ZYSMAN: Good. Ms. Faughnan, six
24 months. What's the up-to amount for year?

25 MR. MCDONALD: \$100,000 for a year.

1 MS. FAUGHNAN: The NHCC Board of
2 Directors authorizes the president to
3 negotiate and execute an extension of an
4 agreement with Advance Reimbursement
5 Management to process Medicaid applications
6 for a six-month term effective January 1, 2017
7 in an amount not to exceed \$495 dollars per
8 account and a total amount not to exceed
9 \$100,000 for the six-month term.

10 MR. ZYSMAN: Can I get a motion? Second?
11 Favor? Unanimous.

12 MR. MCDONALD: The last one.

13 MR. ZYSMAN: That was the last one. What
14 else is there?

15 MR. MCDONALD: The last one is No. 10.
16 It's LD200 2989.

17 MR. ZYSMAN: That's the one we just did.

18 MR. MCDONALD: No. 9 had two pieces. One
19 wad the name change and one was the extension.

20 MR. MIROTZNIK: You're just doing the
21 name change now?

22 MR. DISANTI: We did both.

23 MS. FUSCHETTO: We did that, and then
24 they did the extension.

25 MR. ZYSMAN: What's No. 10?

1 MR. MCDONALD: No. 10 is Allegiance
2 Billing and Consulting, LD200 2989.

3 MR. ZYSMAN: What's the up-to amount?

4 MR. MCDONALD: The up-to amount is
5 \$500,000. This work account is from 2016 and
6 2017. It's a mix of inpatient and outpatient
7 accounts.

8 MR. ZYSMAN: Ms. Faughnan.

9 MS. FAUGHNAN: The NHCC Board of
10 Directors authorizes the president to
11 negotiate and execute an extension of an
12 agreement with Allegiance Billing and
13 Consulting to provide third-party follow-up on
14 inpatient outpatient accounts at a cost of \$25
15 class per inpatient account, \$15 per
16 outpatient account for a one-year term
17 effective January 1, 2017 in a total amount
18 not to exceed \$500,000.

19 MR. ZYSMAN: Motion? Second? Favor?
20 Unanimous.

21 MR. DISANTI: Thank you.

22 MR. ZYSMAN: I ask the Board to table the
23 2016 expense-based contracts, No. 1 through 6.
24 Can we mark it as Exhibit C. Can I get a
25 motion to table? Second? Favor? Unanimous.

1 Thank you.

2 (Whereupon, the table of expense-based
3 accounts was marked as Exhibit C for
4 identification as of today's date.)

5 MR. ZYSMAN: I need a motion to approve
6 the contracts minutes from 1/17/2016.

7 DR. CAPRIOLI: So moved.

8 MR. MIROTZNIK: Second.

9 MR. ZYSMAN: Favor? Unanimous. Thank
10 you.

11 MR. MIROTZNIK: Any other business?
12 Employment issues? Complaints? Compliments?
13 Ms. Roarty, any compliments? No one? No
14 compliments?

15 MS. HANSON: I have --

16 MR. MIROTZNIK: You have a compliment or
17 a complaint?

18 MS. HANSON: It's neither. It's more
19 information. I am very concerned. I have a
20 question about the move with Dr. Kumar related
21 to this position that he's taking over and I
22 don't know what kind of conversation we can
23 have, but can I have more information on it?

24 MR. MIROTZNIK: Sure. So what we'd like
25 to do is we'd like to adjourn. Let me just

1 finish the agenda, Ms. Hanson, and we're going
2 to ask to go into executive session. Is that
3 okay, members of the Board, a few more
4 moments?

5 MR. DELUCA: Yes.

6 MR. MIROTZNIK: Any public comments? No
7 further comments? I call for the --

8 DR. POLITI: Can I ask one quick
9 question?

10 MR. MIROTZNIK: Yes, sure, Doctor.

11 DR. POLITI: I heard that we're tabling
12 these cases on the end?

13 MR. MIROTZNIK: Yes.

14 DR. POLITI: Because I know that Foley &
15 Lardner is on here. I know that John Maher
16 was going to speak to that, because this is
17 something that we can -- it's very important.

18 MR. ZYSMAN: We can handle it at the next
19 contracts meeting.

20 DR. POLITI: We have some contracts that
21 need to done now that might result in our
22 obtaining quite a lot of money from Foley &
23 Lardner. We received a letter this last week
24 that we were approved for a CREP funding of
25 \$16,000,000. Jeff Thrope is actively involved

1 day to day working on that \$16,000,000. It
2 has to do with an indemnification issue. In
3 addition, the BBP Quip, \$10,000,000.

4 MR. ZYSMAN: Yes, but Dr. Politi, the
5 Foley & Lardner has to do with 2016. They
6 have a contract for 2017 that's quite sizable.

7 DR. POLITI: This is the work that
8 they've done leading up to plus receiving that
9 letter on approval.

10 MR. ZYSMAN: Let's have a discussion in
11 contracts. We don't need to discuss this now.
12 There is an active contract with Foley &
13 Lardner.

14 DR. POLITI: Mr. Maher?

15 MR. MAHER: There's some back monies that
16 were owed because they went over their
17 contract max. But they went over their
18 contract max because they were doing work for
19 the NQP PPS. So we were actually an agent to
20 pass through their dollars. We were paid by
21 the NQP.

22 MR. ZYSMAN: Didn't NQP hire their other
23 attorney.

24 MR. MAHER: They should have at that
25 time, but we were acting as the agent and

1 paying Foley & Lardner for work and we were
2 reimbursed by NQP for that work.

3 DR. POLITI: We were getting that money
4 back. So I think it is very important,
5 Mr. Zysman that, if anything, it's only
6 \$100,000.

7 MR. ZYSMAN: No, I think it's a seven or
8 eight hundred dollar contract.

9 DR. POLITI: Overall.

10 MR. ZYSMAN: With the underlying, right?

11 DR. POLITI: I think what we're looking
12 for here is just a couple hundred thousand.

13 MR. ZYSMAN: All I'm saying is all these
14 items require discussion. So let's discuss it
15 at the contracts meeting.

16 DR. POLITI: I have no argument,
17 Mr. Zysman, with any of the other --

18 MR. ZYSMAN: Foley & Lardner can continue
19 to do work under the active contract. I mean,
20 I don't think they've -

21 DR. POLITI: They've earned the money,
22 they've worked for the money, they deserve the
23 money. I don't make it my policy --

24 MR. DELUCA: Which one is this, No. 1?

25 DR. POLITI: No. 5, and they're actively

1 involved in getting us \$26,000,000. I don't
2 want to -- and he works very closely with Park
3 Strategies. They're hand in hand. As a
4 matter of fact, they may go up to Albany next
5 week just to deal with these issues.

6 MR. DELUCA: Is this timely, Mr. Maher?

7 MR. MAHER: I'm sorry. Is it?

8 MR. DELUCA: Timely.

9 MR. MAHER: Yes.

10 MR. DELUCA: Let's do it. Mr. Chairman,
11 we defer to you.

12 MR. ZYSMAN: This is my question. Why
13 weren't we notified when we went over? Why
14 are you going for it in 2017?

15 DR. POLITI: It truthfully didn't really
16 go over. This money was for NQP and we
17 received the money from NQP. But it requires
18 the Board to allow us to write the check to
19 them. So it's sort of a pass-through. It's
20 not even our money.

21 MR. ZYSMAN: But you're looking for an
22 additional hundred thousand dollars. How much
23 is the underlying contract?

24 DR. POLITI: The underlying contract was
25 \$600,000. But \$300,000 of that --

1 MR. ZYSMAN: So you spent \$600,000 --

2 DR. POLITI: But we didn't.

3 MR. ZYSMAN: And at some point in time in
4 2016 we spent an additional hundred thousand
5 above that.

6 DR. POLITI: But we didn't spend the 600,
7 Mr. Zysman. We only spent 300. The other 300
8 was DSRIP money that was reimbursed to us.

9 MR. MIROTZNIK: May I say something? I
10 dot mean to cut you off. The only reason I
11 asked to table it was because I have members
12 of the Board that have other obligations.

13 DR. POLITI: I just want --

14 MR. MIROTZNIK: Ms. Hanson has things.
15 Let me finish. I have things to do.
16 Mr. DeLuca is kind enough. He has somebody
17 downstairs waiting for him. So that's all the
18 reason I asked to table it for two and a half
19 weeks or so, so we can put it on the agenda
20 and vote.

21 If there's exigent circumstances here,
22 please tell us which one is exigent and let's
23 vote on it and move forward. Please somebody.

24 DR. POLITI: I believe No. 5, Foley &
25 Lardner. I'll attest to this on the record is

1 an urgent payment that is requires us to keep
2 goodwill and to keep our contract going with
3 Mr. Thrope.

4 MR. MIROTZNIK: Who's presenting it?

5 DR. POLITI: Who's get the legal contract
6 for Foley & Lardner?

7 MR. MCDONALD: Mr. Maher is most familiar
8 with the work that they're doing. It's an
9 additional hundred thousand for the work done
10 in 2016.

11 MR. MIROTZNIK: Somebody present it. Who
12 is going to present it tonight it?

13 MR. MAHER: Mr. Chairman, I would that
14 the Board of Trustees, Board of Directors of
15 the Nassau Health Care Corporation authorize
16 an expenditure of \$97,109 to the firm of
17 Foley & Lardner for work provided during the
18 calendar year of 2016, which was work that was
19 done on behalf of NQP for which the hospital
20 was reimbursed.

21 MR. MIROTZNIK: We got the money already?

22 MR. MAHER: We got the money already,
23 yes.

24 MR. MIROTZNIK: You're asking that we
25 vote on this tonight?

1 MR. MAHER: Yes.

2 MR. MIROTZNIK: Dr. Politi, is this what
3 you -- the issue, the most exigent number --

4 DR. POLITI: Yes. Yes, it is.

5 MR. MIROTZNIK: Out of 1 through 6 --

6 MR. ZYSMAN: Why didn't NQP pay directly
7 if you did work for NQP?

8 MR. MAHER: Because the contract was with
9 NHCC.

10 DR. POLITI: The way it's set up is we
11 don't pass any money over --

12 MR. MAHER: How do you represent an
13 outside entity and NHCC?

14 MR. MAHER: Because when we --

15 MR. ZYSMAN: I'm not asking you. I'm
16 asking the lawyer --

17 DR. POLITI: Mr. Maher has those answers
18 very well --

19 MR. MAHER: At the onset of the DSRIP
20 program, Foley & Lardner was doing all of the
21 work for not only us, our HUB, but it was also
22 doing work for the PMO. At the time in
23 hindsight we should have split it out but we
24 did not. The money was all processed through
25 the hospital, and the PMO as well as the hub

1 has reimbursed all of the dollars that both of
2 those entities have spent during the course of
3 the last year and a half.

4 MR. ZYSMAN: Dr. Politi, why did NQP RFP
5 legal services in 2016 to select a different
6 party other than Foley & Lardner?

7 DR. POLITI: At one point -- it's John
8 Maher's -- it wasn't just by hindsight a
9 mistake. At the time we did that purposely to
10 control. So we controlled every dollar that
11 came into NQP and we knew where it was going.

12 As far as Foley & Lardner, we brought in
13 a second attorney called Nixon Peabody that
14 was going to handle the day-to-day routine
15 matters of the PMO, not of our hub.

16 MR. ZYSMAN: Foley & Lardner is no longer
17 doing that.

18 DR. POLITI: Unfortunately no one know as
19 much about DSRIP as this gentleman that we
20 have working for us and both Nixon Peabody and
21 just about every other law firm in DSRIP
22 refers to Jeff Thrope for some information.

23 MR. ZYSMAN: So it's your representation
24 that he'll continue to represent both NHCC,
25 NQP as well as Nixon Peabody?

1 DR. POLITI: He does not represent Nixon
2 Peabody. He represents NUMC. He's our
3 representative and solely and only our
4 representative at the DSRIP.

5 MR. MAHER: He represents only our hub?

6 DR. POLITI: Our hub.

7 MR. ZYSMAN: He represents the NUMC hub?

8 MR. MAHER: He represents the NUMC hub,
9 correct

10 MR. ZYSMAN: He's in communication with
11 the NUMC hub?

12 MR. MAHER: Yes, he is.

13 DR. POLITI: Yes. As a matter of fact,
14 he's down there with James now giving him a
15 full tutorial, and they're getting along great
16 and it's a solid choice.

17 MR. ZYSMAN: Go ahead, Ms. Faughnan.

18 MS. FAUGHNAN: The NHCC Board of
19 Directors authorizes the president to
20 negotiate and execute an amendment of an with
21 Foley & Lardner for legal service -- in an
22 additional amount to not to exceed \$100,000
23 for legal services provided during the year of
24 2016.

25 MR. ZYSMAN: Can I get a motion? Second?

1 Favor? Unanimous. Thank you.

2 MR. MIROTZNIK: Let the record reflect
3 we're tabling 1, 2, 3, 4 and No. 6. With that
4 being -- anything else of exigent
5 circumstance, Dr. Politi?

6 DR. POLITI: No, and I thank the Board
7 very much for that consideration.

8 MR. MIROTZNIK: You're quite welcome.

9 DR. POLITI: Again, you've gone above and
10 beyond and I thank you all.

11 MR. MIROTZNIK: Call for a motion to
12 adjourn the Board meeting of February 6, 2017.
13 All in favor? Unanimous. Motion to to go
14 into executive session of the -- I want to
15 adjourn to go into executive session. All in
16 favor? Unanimous. We adjourn the full board
17 meeting.

18 (Whereupon, at 7:50 p.m. the Board
19 entered into executive committee session.)

20 MR. MIROTZNIK: Make a motion to come out
21 of -- to adjourn executive session of the
22 executive committee. All in favor? Unanimous
23 thank you. Motion to adjourn the public
24 session of the executive committee of the
25 Board of NU-health. All in favor? Unanimous.

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Everyone have a nice evening. Get home safe.

(Time noted: 8:20 p.m.)

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INDEX TO MOTIONS

DESCRIPTION	PAGE
The NHCC Board of Directors authorizes the president to negotiate and execute extensions of agreements with the 23 law firms listed on Exhibit A entitled January 17, 2017 Legal Extensions Contracts Meeting - Summary Sheet. Those 23 law firms in the amounts listed on Exhibit A each for a nine-month term effective April 1, 2017, and the Board of Directors also authorizes the president to execute and negotiate two new contracts with the law firms of Devitt	11

1 Spellman Barrett, LLP and Phillips Lytle, LLP
2 each for a nine-month term effective April 1,
3 2017 in the amounts listed on Exhibit A.

4
5 Dr. Politi will ensure that all the LD200s 13
6 are complete in its entirety and consistent
7 with Exhibit A and may substitute the name of
8 the owner of the contract at his discretion.

9
10 Motion to table No. 2, Allscripts 15

11
12 The NHCC Board of Directors authorizes the 18
13 president to negotiate and execute an extension
14 of an agreement with WGM Obstetrics and
15 Gynecology PC to assist the OBGYN residency
16 program and provide our residents with education,
17 oversight, teaching and training in advanced
18 endoscopic gyn surgeries in an amount not to
19 exceed \$200,000 for a two-year term effective
20 February 1, 2017.

21
22 The NHCC Board of Directors authorizes the 47
23 president to negotiate and execute a contract
24 with Med-Matrix for a two-year term effective
25 January 1, 2017 in a total amount not to exceed

1 \$50,000 per years for a total amount of \$100,000
2 at a cost of \$100 per case to review and submit
3 outpatient medical denial claims.

4
5 The NHCC Board of Directors authorizes the 53
6 president to negotiate and execute an amendment
7 of an agreement with Avant Garde Performance
8 Improvement LLC to provide trauma consulting
9 services with respect to the trauma one survey
10 for a six-month term effective February 1, 2017
11 in an additional amount not to exceed \$118,000.

12
13 The NHCC Board of Directors authorizes the 53
14 president to negotiate and execute an amendment
15 of an agreement with Northwell Health to provide
16 additional pediatric cardiology services for a
17 three-year term effective December 16, 2016, in
18 an additional amount not to exceed \$319,000.

19
20 The NHCC Board of Directors authorizes the 63
21 president to negotiate and execute an agreement
22 with MedLine Industries, Inc. to provide medical
23 and surgical supply distribution services for a
24 three-year term effective February 15, 2017,
25 with two 2-year options in an annual amount not

1 to exceed \$7 million per year for the initial
2 three-year term.

3
4 The NHCC Board of Directors authorizes the 66
5 president to negotiate and execute an extension
6 of an agreement with Simplex Grinnell LP to
7 provide fire alarm testing and full maintenance
8 at A. Holly Patterson Extended Care Facility for
9 a three and a half year term effective March 1,
10 2017 in an additional amount not to exceed
11 \$178,500.

12
13 The NHCC Board of Directors authorizes the 69
14 president to negotiate and execute an extension
15 of an agreement with EGS Financial to provide
16 third-party follow-up billing for inpatient and
17 outpatient contracts for NUMC for the years 2015,
18 2016 and 2017 at an inpatient fee of \$25 per
19 account, a fee of \$10.25 per outpatient in a total
20 amount not to exceed \$250,00 for a one-year term
21 effective January 1, 2017.

22
23 The NHCC Board of Directors authorizes the 70
24 president to negotiate and execute an extension
25 of an agreement with EGS financial to provide

1 and process Medicaid eligibility applications
2 for a one-year term effective January 1, 2017 at
3 a cost of \$495 per account and a total amount not
4 to exceed \$25,000 for the one-year term.

5
6 The NHCC Board of Directors authorizes the 77
7 president to negotiate and execute an agreement
8 with Health Resources Optimization, Inc., a/k/a
9 Health ROI, to review medical clinical denial
10 and to appeal insurance companies for patient
11 accounts for 2016 and 2017 at a cost of \$300 per
12 case for a three-year term effective January 1,
13 2017 in an amount not to exceed \$250,000 per year
14 and a total amount not to exceed \$750,000 for the
15 three-years term.

16
17 The NHCC Board of Directors authorizes the 79
18 president to negotiate and execute an assignment
19 and assumption of agreement with HCE to allow
20 the assignment and assumption of agreement to
21 Advanced Reimbursement Management, otherwise known
22 as Adreima, effective February 1, 2016 to the end
23 of that contract term 12/31/2016.

24
25 The NHCC Board of Directors authorizes the 81

1 president to negotiate and execute an extension
2 of an agreement with Advance Reimbursement
3 Management to process Medicaid applications for
4 a six-month term effective January 1, 2017 in an
5 amount not to exceed \$495 dollars per account and
6 a total amount not to exceed \$100,000 for the
7 six-month term.

8
9 The NHCC Board of Directors authorizes the 82
10 president to negotiate and execute an extension
11 of an agreement with Allegiance Billing and
12 Consulting to provide third-party follow-up on
13 inpatient outpatient accounts at a cost of \$25
14 class per inpatient account, \$15 per outpatient
15 account for a one-year term effective January 1,
16 2017 in a total amount not to exceed \$500,000.

17
18 The NHCC Board of Directors authorizes the 92
19 president to negotiate and execute an amendment
20 of an with Foley & Lardner in an additional amount
21 to not to exceed \$100,000 for legal services
22 provided during the year of 2016.

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CERTIFICATE

I, Ephraim Jacobson, a shorthand reporter and Notary Public within and for the State of New York do hereby certify:

That the witness whose testimony is hereinbefore set forth was duly sworn by me, and the foregoing transcript is a true and accurate record of the testimony given by such witness to the best of my ability.

I further certify that I am not related to any of the parties to this action by blood or marriage, and that I am in no way interested in the outcome of this matter.



Ephraim Jacobson

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CERTIFICATION

I, Michael Mirotznik, Chair of the
Executive Committee of the Board of Directors
hereby approve these minutes.

NAME

DATE

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