HEALTH AND HUMAN SERVICES COMMITTEE

OF THE

SUFFOLK COUNTY LEGISLATURE

A regular meeting of the Health and Human Services Committee of the Suffolk County Legislature was held in the Rose Y. Caracappa Legislative Auditorium of the William H. Rogers Legislature Building, Veterans Memorial Highway, Smithtown, New York, on Thursday, April 22nd, 2010 at 2:00 p.m.

Members Present:
Legislator Kate Browning - Chairperson
Legislator Vivian Viloria-Fisher - Vice-Chair
Legislator John Kennedy
Legislator Jack Eddington
Legislator Tom Muratore

Also In Attendance:
Presiding Officer Bill Lindsay - District #8
Legislator Tom Cilmi - District #10
George Nolan - Counsel to the Legislature
Tim Laube - Clerk of the Legislature
Josh Slaughter - Aide to Legislator Browning
Terry Pearsall - Chief-of-Staff to Presiding Officer Lindsay
Marge Acevedo - Aide to Presiding Officer Lindsay
Michael Pitcher - Aide to Presiding Officer Lindsay
Paul Perillie - Aide to Majority Caucus Leader Cooper
Linda Bay - Aide to Minority Caucus Leader Losquadro
Tom Ryan - Aide to Deputy Presiding Officer Viloria-Fisher
Renee Ortiz - Chief Deputy Clerk/SC Legislature
Diane Dono - Budget Analyst/Budget Review Office
Craig Freas - Budget Analyst/Budget Review Office
Allen Kovesdy - County Executive's Office
Ben Zwirn - County Executive's Office
Brendan Chamberlain - County Executive Assistant
Jennifer Freeman - County Executive's Office
Dennis Brown - Deputy County Attorney
Greg Blass - Commissioner/Department of Social Services
Ed Hernandez - Deputy Commissioner/Department of Social Services
Linda O'Donohoe - Asst. to the Commissioner/Dept of Social Services
Dr. James Tomarken - Commissioner/Department of Health Services
Janet DeMarzo - Deputy Commissioner/Department of Health Services
Len Marchese - Director of Management & Adminstrative Services/DHS
Margaret Bermel - Director of Health Administration/DHS
Cheryl Felice - President/AME
Dot Kerrigan - 4th Vice-President/AME
Mary Finnin - Taxpayer of Central Islip/Nursing
Chris Destio - John J. Foley Nursing Facility
Joseph Biondo - Summit Security Services
Kathy Callahan - Director of Operations/Summit Security Services
Michael Grennan - Investigating Manager for Nassau County Operation
Summit Security Services
Colleen Murphy - Empire Justice/SUNY Stony Brook

Wendy Darell - Nassau-Suffolk Hospital Council
Patsy Hirschhorn - Smithtown Youth Bureau
Denise Lee - Smithtown Youth Bureau
Mary {Fradet} - Nurse/John J. Foley Skilled Nursing Facility
Other Interested Parties

Verbatim Transcript Prepared By:
Alison Mahoney - Court Stenographer

(*The meeting was called to order at 2:47 P.M.*)

CHAIRPERSON BROWNING:
Okay, I apologize. However, we will start the Health and Human Services Committee meeting with the Pledge of Allegiance led by Legislator Kennedy.

Salutation

Okay. We will start with our presentations. Is Commissioner Blass here? Oh, you are. Okay, we do have a presentation today. Legislator Muratore made a request. There were some issues about Medicaid fraud and Summit Security Services, which you won the bid with an RFP, I believe a contract was signed. So Legislator Muratore requested that you come and do a presentation, so we appreciate that you've come today. We have Joseph Biondo from Summit Security Services. And with that, I will let you move ahead and explain who you are and what you have been doing.

MR. BIONDO:
Sure. Thank you, Legislator Browning, Chair. My name is Joseph Biondo, Managing Partner of the Investigative Division of Summit Security Services, Inc.. with me are my colleagues, Kathy Callahan who is our Director of Operations and Michael Grennan who is our Investigating Manager who runs our Nassau County Operation with Medicaid and entitlement fraud.

Just a quick background on Summit Security, if I may. Summit was founded in 1976. We are headquartered in Uniondale, Long Island, and we maintain a regional office in Suffolk County, specifically in Melville. We provide comprehensive, investigative and security services both to the public and private sectors. Currently we employ over 3,000 employees in the investigative and security professions.
We are looking to expand our services both in the public and private sectors and specifically in Suffolk County. We have a growing team of management that I guess have over thousand years of combined experience in investigative and security --

CHAIRPERSON BROWNING:
You kind of have to keep your finger on the button, hopefully.

MR. BIONDO:
Okay, sorry.

D.P.O. VILORIA-FISHER:
It's hard when you're turning pages. Maybe somebody can hold it down for you while you're turning your pages.

MS. CALLAHAN:
I'll hold it.

MR. BIONDO:
Okay. It's our desire today to demonstrate an opportunity that we believe would be beneficial to the County of Suffolk and its taxpayers in that we would like to provide a health care Medicaid entitlement fraud investigative services. Summit, under an existing contract with the County, can

provide its investigative services which would compliment the current efforts of the Department of Social Services and its hard-working investigators.

Summit Security Services has over 15 years experience in providing Medicaid and entitlement fraud detection services to New York State and some County agencies. Summit's provided a significant results in cost savings both to State and County agencies, including neighboring Nassau County. We basically have a track record of success in the Medicaid entitlement fraud areas. And again, using Nassau as an example, since September, 2005, we've provided that County with investigative services that has identified over $17 million in fraud, waste and abuse within the Medicaid Entitlement Programs. As a result, there have been numerous prosecutions stemming from our investigative work. We have consistently provided a significant return on our investment to our clients, again, both in the public and private sectors. We just put together a quick overview as an example of, you know, that $17 million broken down by year showing -- especially in 2007, '08 and '09, the last three consecutive years -- a significant increase in each year in the identified over payments within those systems.

Summit would hire and utilize investigators that live in Suffolk County which includes retired law enforcement personnel. Summit's team is well qualified and understands Social Service law and Medicaid regulations as it relates to investigations and auditing. We provide continued training for our personnel to ensure that they're equipped with the tools necessary to successfully conduct these Medicaid and entitlement fraud investigations.

(*Presiding Officer Lindsay entered the meeting at 2:58 P.M.*)

It is our, again, desire and goal to provide trained and proven team investigators to Suffolk County, and we believe that the County would save significant dollars by utilizing, you know, these services. Our strategy, simply the Summit team can work on both Medicaid fraud as it relates to the demonstration project as well as Medicaid entitlement fraud within the client and recipient areas. We will target high value areas where these have been -- where there's been evidence of high concentration of fraud, waste and abuse. We would focus on the existing areas of concern deemed critical by the Department of Social Services and their investigative team.

In summary, basically we have the desire, dedication and proven track record to help Suffolk County in this area and effectively combat fraud waste and abuse within the Medicaid and entitlement areas. Summit Security has an existing contract with the Department of Social Services that can be renewed annually through of December of 2014. We have been approved by New York State and vetted for the DEAA which is the Data Exchange Application, you know, which basically says three months of red tape into doing these investigations have already been, you know, cut out through that RFP process. Summit Security basically can hit the ground running by providing investigative services and results almost immediately.

Again, I would like to thank the committee for this opportunity to present our services and proposal and we look forward hopefully to a beneficial business partnership. Thank you.

CHAIRPERSON BROWNING:
Thank you. You know, Medicaid is State money, okay. So if you could just tell me, when you did it for Nassau County, how much did you say? I'm trying to remember the number that you said you recovered.

MR. BIONDO:
We started the program in September of 2005, and September of 2005 through the first quarter of 2010 was $17,700,000.

CHAIRPERSON BROWNING:
That's right. And -- okay, but now this is all State money that comes to the County. So when you recovered that $17 million, how much of that goes back to the State and how much of it stayed with

the County?

MR. BIONDO:
A question I don't know that I'm qualified to answer. I mean, what our job is is essentially to look for, you know, the fraud within the system. So if somebody is, you know, cheating or receiving over payments or over billing, we would identify that. There's different areas, you know, that I guess these different cases would go to. Many of them have gone to the County Attorneys for, I guess, prosecution in the Civil Courts, many have gone to the District Attorney's Office for prosecution in the Criminal Courts and, you know, the Attorney General's Office as well as the Medicaid Fraud Inspector General's Office receives a lot of that. But again, we wouldn't know specifically what dollars come back, but we know what we can identify in fraud, waste and abuse.

CHAIRPERSON BROWNING:
And how do you get paid; do you get paid on based on the amount that you cover recover? How do you get paid?

MR. BIONDO:
I wish. No, I'm sorry. We get paid basically for service, an hourly rate.

CHAIRPERSON BROWNING:
Hourly. Does anybody else have questions? Okay. Legislator Muratore.

LEG. MURATORE:
Why are we using your firm? Are we using your firm at all; and if we are or we are not, why are we not using you?

MR. BIONDO:
Again, I don't think I can answer that question. I know we do have a contract in place. We haven't done any work as to this point, but most recently we've had a productive conversation with Commissioner Blass where, you know, again, we are looking forward to moving forward and providing services for Suffolk County.

LEG. MURATORE:
So there is a plan in place to utilize your firm.

MS. MAHONEY:
Can you hold the button down?

LEG. MURATORE:
I have it, I guess I'm not pushing hard enough. Maybe I'll ask the Commissioner, why are we using -- or why haven't we used this firm to recoup money for us?

COMMISSIONER BLASS:
Very simply, Legislator Muratore, unlike Nassau County, which staffs its Special Investigative Unit with Examiners, our Special Investigative Unit in DSS is staffed with Investigators, County employees, Investigators, titles I, II and III, and an Investigator IV.

The contract that our guest has alluded to is a contract on an as-needed basis; that's a detail that has to be discussed when we discuss the contract at all. We took on a demonstration project for Medicaid provider fraud as of June of 2006, we did start in 2005 with that, as Nassau did. But our in-house support and our in-house staffing makes it unnecessary for us to use Summit unless our workload is more than our in-house staff can handle, and that's how the contract was drafted.

I have some material to distribute that explains the progress of the in-house effort that we've accomplished so far; it's at least comparable to Nassau. In 15 months, for example, in the 15 months that I just described the starting date of as of June, 2006, we've identified 93 cases for audit

review. Unfortunately, the State OMIG, in their wisdom, chose to approve our doing only 33 of them, they took the other 60 for themselves; that's their prerogative under the program. In fact. Medicaid provider fraud used to be only done by OMIG of the State of New York. They found it to be too much, so they've asked several counties, us included, to do it in addition to them, but they still reserve the right to preempt us on fraud targets that we identify, and we have done a good job of that. But we haven't really reached the point where we need outside assistance to supplement what we consider to be the very professional and capable efforts of our in-house staff who are also, in many instances, former law enforcement individuals, but they are in the Investigator title.

I have copies of the Civil Service description of investigator title as compared to Examiner titles. And as I said, I think Nassau's inclination to utilize them on a full-time basis is due to their having Examiner titles; they haven't gone to Investigator title yet, I don't know why. I do know that our Investigator titles enable us to rely on this very capable firm on an as-needed basis, and thus far we have been able to -- if the State -- let me put it this way. Of the State of New York OMIG gives us approval for more than 33 out of -- out of 93 then that may happen, but it really is based on the direction OMIG takes with this project. But of the 33 that we have identified, 22 involve pharmacies, eight involve transportation fraud, three involve durable medical equipment. According to the guidelines and calculations that OMIG gives us for these 33 cases, the potential for Suffolk County is to recover somewhere seven to $10 million in gross recoveries. And based on OMIG guidelines, we have the potential to keep, the potential to keep 25% of that..

LEG. MURATORE:
Thank you.

CHAIRPERSON BROWNING:
Vivian?

D.P.O. VILORIA-FISHER:
Thank you, Madam Chair. I'm a little bit confused, Commissioner, if you could help me out with this. The County, if it were to -- well, let me go back. There are forensic Investigators in the DA's Office, Forensic Accountants in the DA's Office; do they also go after these cases?

COMMISSIONER BLASS:
They will if we refer the case.

D.P.O. VILORIA-FISHER:
Your mic's not on. I'm sorry, Greg, your mic's not on.

COMMISSIONER BLASS:
I'm pressing this as hard as I can.

D.P.O. VILORIA-FISHER:
I know, I have the same problem.

COMMISSIONER BLASS:
Maybe if I use a pen.

MS. ORTIZ:
No, it's on.

MS. DONO:
It stays on, Greg.

COMMISSIONER BLASS:
Oh, good. So it stays there, so I was turning it off and I thought I was turning it on; maybe that's a freudian slip. In any event, the frauds that require criminal prosecution, if they don't go to

settlement, so far I believe all of our, or the vast majority of our provider fraud cases that we've audited have been negotiated with settlements that don't require referral for prosecution. But we work closely with the DA's Office on this type of auditing, as we do on all our investigations involving welfare fraud in general and employee issues. Any type of SIU case that requires referral to the DA, we have a working relationship with them for that. But our Investigators, our -- we don't call them Forensic Investigators, the Civil Service title to be exact is just the word or the term Investigator, and then it's subdivided into Investigator I, II and III and IV, all of which are on our staff

D.P.O. VILORIA-FISHER:
I was thinking the DA title I remembered, are those the same?

COMMISSIONER BLASS:
Say that again, please?

D.P.O. VILORIA-FISHER:
Forensic Accountants? I remember we had put money in the budget for Forensic Accountants.

COMMISSIONER BLASS:
Yes, there are Civil Service titles for that, too, in the DA's Office. But our SIU team has the capability and indeed the job description in the Civil Service requirements, and the experience they have in our work force on the DSS staff qualifies them to do the work that they're doing and they're doing very well, in our estimation.

D.P.O. VILORIA-FISHER:
Okay. Greg, you said something about the State accepting or rather approving of only about a third of the number that we had flagged as problematic. Why such a disparity between our interpretation of what constitutes I guess fraudulent or misuse of funds and the State's; where is the divide?

COMMISSIONER BLASS:
It's the Sovereignty Clause of the State Constitution. They --

D.P.O. VILORIA-FISHER:
Because they can?

COMMISSIONER BLASS:
They can, right. And they choose to and --

D.P.O. VILORIA-FISHER:
But how does that enure to their benefit? I'm not under -- wouldn't it be a benefit to the State for us to be able to go after that -- those 93?

COMMISSIONER BLASS:
Arguably, yes. And that's why they have created this demonstration project to include select counties, of which Suffolk and Nassau have been too, to do it.

D.P.O. VILORIA-FISHER:
Okay. But maybe I'm thicker than you think, but I'm trying to understand.

COMMISSIONER BLASS:
Not at all.

D.P.O. VILORIA-FISHER:
Why would they approve of only 33 of the 93 when we went after the 93? It would bring more money to the State.

COMMISSIONER BLASS:
It will bring -- they are able to keep 100% when they do the audit from start to finish and the recovery is theirs. When we do it --

D.P.O. VILORIA-FISHER:
Oh, I see. So if they don't approve those 60, then they do the audit 100% and they get the money 100%, we don't get that 25%.

COMMISSIONER BLASS:
We don't have any chance at all.

D.P.O. VILORIA-FISHER:
Ah, so it's about the money.

COMMISSIONER BLASS:
It's all about the money. I would point out, however, that we also will have to invest substantial work before, sometimes, the State says, "Sorry, we like this one, we'll take over." So they don't have to take it at the very beginning. We investigate, we go through the procedures that I'd rather not discuss on the record, and then when there is a certain stage where we have made substantial progress we report to them, we submit the whole idea to them in the beginning. Sometimes they don't tell us -- I should say we submit the audit results that we've accomplished so far in our preliminary stages of investigation to the State and they will sometimes not tell us anything for quite a while, and then they'll say, "Go ahead and take it," or they'll say, "Sorry, this is ours."

D.P.O. VILORIA-FISHER:
Well, then, Commissioner, if we run the risk of putting in the staff hours, doing the leg work and finding that we're only being approved by the State for a third of the number that we come up with, and then when we do reach the completion of that third of that complete number and only get 25%, how would it be a cost benefit to contract with an investigative team such as Summit?

COMMISSIONER BLASS:
The cost benefit would arise if, as and when the volume of the work and the investigative needs of the Special Investigative Unit of DSS call for outside assistance to supplement our efforts, that's when it would be --

D.P.O. VILORIA-FISHER:
So it would only be on an as-needed basis, that's after we're well into the investigation and feel that we're going to be getting the approval by the State and so we're going to be able to bring that investigation to its culmination?

COMMISSIONER BLASS:
That's correct, although so far the volume has been manageable in-house. And that's why our --

D.P.O. VILORIA-FISHER:
But there is an RFP to contract with Summit?

COMMISSIONER BLASS:
Yes, this was done by RFP. The only one that wasn't done by RFP had to be approved by the Legislature and that was for the legal services. But we have Bonadio and Company who we've contracted for auditing services, and the Salient Corporation for computer program assistance rather than take on the expense of some of the computer programming that we would not be able to do cost effectively, and Iverson and Biondo for -- that one was on an as-needed basis and that's the company that became Summit.

D.P.O. VILORIA-FISHER:
Okay. Thank you for bearing with me.

COMMISSIONER BLASS:
Sure.

CHAIRPERSON BROWNING:
Do we have any other questions? No? Curiosity, I had the pleasure of visiting a number of DSS centers and the number of Medicaid recipients right now and the number that we have every month is tremendous. I mean, what again is that number, could you give me that number?
The number of Medicaid recipients at this time.

COMMISSIONER BLASS:
We have approximately 10% of the Suffolk County population on our caseload.

CHAIRPERSON BROWNING:
Right.

COMMISSIONER BLASS:
And if you count Child Health Plus, which we don't administer but which is a Medicaid program of a Federal nature, that rises to 14% of the Suffolk population is on Medicaid.

CHAIRPERSON BROWNING:
So when you are doing your Medicaid investigations, you're not just doing the pharmacies and whatnot, you're actually -- you do private individuals who come in and apply for Medicaid.

COMMISSIONER BLASS:
Yes, we do recipient fraud as well as provider fraud.

CHAIRPERSON BROWNING:
Right, and I guess I want to go back to Summit. As you see, he's talking about 93 cases where we only got 33; do you have any numbers from Nassau County where you've investigated the numbers that you've got and how many that were actually investigating with the County?

MR. BIONDO:
I agree, you know, with Commissioner Blass, that there is a tremendous bottleneck at the State level that sometimes prohibits you, you know, from doing the Medicaid provider investigations through the demonstration project. And recognizing that, I think one of the things that Nassau did was, you know, they said, "Well, let's start looking at, you know, the recipient side," and you know, what it taught us, since 2005 to now, is a lot of those recipient investigations actually pointed to providers that were, you know, also ripping off or over billing, you know, the systems. But we were also able to -- the majority, I think, of the 17 million didn't come from the provider side, it came from the recipient side, you know, where there were over payments being paid, you know, to recipients on a basis where we were able to show that -- you know, we did one project where we partnered up with Social Security Administration and did a match of, you know, Medicaid recipients with the Social Security Administration receiving SSI or SSD, and we found -- Mike, maybe can help me with the numbers. But there are a significant amount, I think over 800 individuals that were on benefits that were not residents of the County, but they were collecting as residents of the County. Some of them lived outside of the County, some of them moved outside of the State, some of them lived outside of the United States, outside the country, but were still receiving benefits. So, you know, from our standpoint, it's almost like, you know, the more lines you have in the water, the more you're going to be able to, you know, identify in fraud, waste and abuse.

CHAIRPERSON BROWNING:
You have some numbers?

MR. GRENNAN:
Yes. Just on that Social Security, we did a project with an agent from Social Security. We reviewed recipients who we felt would be likely not to be residents of the County. We did physically go out

and investigate 1,307 of them, and out of those 1,307, we substantiated 971 of them as either living out of the County, out of the State or, as Mr. Biondo stated, some of them out of the country where they go back to Pakistan or India, whichever country that they originally came from, and still, in the land of direct deposit, receive their benefits.

CHAIRPERSON BROWNING:
That's a lot of people.

D.P.O. VILORIA-FISHER:
That's a big number.

CHAIRPERSON BROWNING:
That's a lot of fraud.

LEG. GREGORY:
(Inaudible).

CHAIRPERSON BROWNING:
Yeah, really. I'm drawing a blank on what I was going to ask the Commissioner.

D.P.O. VILORIA-FISHER:
Well, you were blown away with those numbers.

CHAIRPERSON BROWNING:
Definitely. And I know this predates you, Commissioner, but again, it's trying to understand why we put out an RFP and sign a contract with a company and then we're not using them. I know that there was a State mandate to do this; is that basically the only reason why we did the RFP?

COMMISSIONER BLASS:
The assumption of provider fraud by the Counties was an unknown quantity. But we were prudent enough to have the contract when it came to investigative services. Auditing and computer services we didn't have on an as-needed basis because we didn't have all of the computer programs, as I explained and so on. But when it comes to investigative services, we made sure that the RFP and the contract provided that it's on an as-needed basis. So it's really a limited contract, it's a qualified contract with them. It's not a contract that says, "Here we're going to use you, definitely," it's a contract that said -- and by the way, a contract provides a meeting of the minds by two sides. So it was not that we dictated it, it was that we and Summit agreed to it, that it would be if we needed them. But the staff that we have in-house so far, based upon the audits approved that we do from beginning to end, have not called for, as yet, the necessity of retaining their services as much as with the other services.

CHAIRPERSON BROWNING:
Okay. John.

LEG. KENNEDY:
Mr. Commissioner, I have been listening and I think the essence of what I'm gathering from what's been discussed here is that our function within the department is lightly different than Nassau and that we have a cadre of County employees who function as investigators in the first instance, and that Summit would be someone we would turn to perhaps as an overflow or some type of capacity.

But the gentleman pointed out something as far as this Social Security match that is, I would imagine -- I don't want to minimize it, it takes an extensive amount of work to go through the matching. But Social Security files, actually once somebody gets on to SSD or SSI, are pretty regular, and you have the identifying information. And then I would imagine you're uploading what your information is upon local benefit recipients, from Medicaid in whatever function it's coming. My question to you is have we been able to do a simple balance like that or a match?

COMMISSIONER BLASS:
Yes, that's part of our methodology.

LEG. KENNEDY:
Okay.

COMMISSIONER BLASS:
I don't have -- I'm sorry, I don't have figures for that particular program with me. I have Medicaid figures and I have overall fraud recovery figures for you.

LEG. KENNEDY:
Let me go back to the gentleman; I apologize, sir, I didn't get your name.

MR. GRENNAN:
Yes, sir, my name is Michael Grennan.

LEG. KENNEDY:
Okay, Michael. You referenced 1,307 individuals found to be Social Security recipients, either SSD or SSI, who resided out of -- was it Nassau or Suffolk County?

MR. GRENNAN:
Well, this is for Nassau County. We actually identified a group out of -- you know, we have obviously a lot more recipients in the County than that.

LEG. KENNEDY:
Sure.

MR. GRENNAN:
We just did our computer checks to feel who were the ones we felt would be inclined.

LEG. KENNEDY:
You do some screening and you look at, you know, a likely pool where there might be something --

MR. GRENNAN:
Exactly. We have some internal -- right. So we reviewed 1,300, 1,307 to be exact, and out of that 1,307, 971 of them have not been living in Nassau County.

LEG. KENNEDY:
Okay. And the implications I think are there that when an individual becomes eligible for the receipt of SSI or SSD, then they automatically become entitled to Medicaid benefits, I believe; isn't that so, Commissioner?

COMMISSIONER BLASS:
Yes, and that's why our Medicaid Recipient Fraud does this same thing. And as I say again, I don't have the figures for what we have done with the recipient fraud by that methodology.

LEG. KENNEDY:
Okay.

COMMISSIONER BLASS:
I can get them for you.

LEG. KENNEDY:
Yes, I would be interested in that. Thank you, Commissioner.

COMMISSIONER BLASS:
Sure.

LEG. KENNEDY:
Okay, Madam Chair. Thank you.

CHAIRPERSON BROWNING:
Okay, thank you. Anyone else, questions? Okay. You know, I think we should seriously be looking at Summit Security Services and see, you know, if there is something more we can do, the number of people; like you said, you know, the 10% of the population receiving Medicaid and the number is growing. I'm sure a lot of it is to do with the economy, but I definitely think that it is something that we should be seriously looking at.

We hear all the time about staffing levels at DSS and how they're not adequate. And, you know, I think that to burden the DSS workers with more, if we have a consultant who can do the work and to relieve some of the work for them, I don't think it's necessarily a bad idea.
But I do appreciate Summit coming in and speaking with us and.
And again, like I say, Commissioner, thank you always for everything that you've provided to us today. So with that, I think we will start with our cards.

COMMISSIONER BLASS:
Madam Chairman, do you want to discuss the CN at all, or is everything I've given you self-explanatory?

CHAIRPERSON BROWNING:
Oh. Well, I haven't had a chance to look at this. You're talking about this one?

COMMISSIONER BLASS:
Yes, it's on the agenda. I'll wait until after your public portion if you want. It's a very brief --

CHAIRPERSON BROWNING:
Actually, no, go ahead. If you would like to, go ahead.

COMMISSIONER BLASS:
It's a $75,000 grant that the State -- again, in their wisdom -- told us was available to us on March 24th of this year. Tells us that we are authorized through April 30th to accept it and we have to have all our billings and submissions to them by 15 June of this year.

I can appreciate from the Legislature's perspective that Certificates of Necessity are a last resort, but the scheduling of this grant of $75,000 for intensive case management of clients who are encountering such barriers to their being placed in work sites that they require intensive case management, to address those barriers. That's a program we've had ongoing, this is a $75,000 grant to continuing doing it and it's been successful; I have backup material that I provided to each committee member further to that. And unfortunately, because of the timeframes that have been unloaded by the State, and I don't want to sound ungrateful because it is their money and we are grateful to receive it, but we had to ask for a CN because it doesn't lend itself to a schedule of committee scrutiny beyond here..

P.O. LINDSAY:
Madam Chair, I'll make a motion to take it out of order, the CN, so we an dispose of that. It's a 100% grant, right?

CHAIRPERSON BROWNING:
Sure, but it's a CN.

P.O. LINDSAY:
Oh, right.

D.P.O. VILORIA-FISHER:
It's a CN, so it will be going to our General Meeting.

CHAIRPERSON BROWNING:
Yeah. No, he just wanted to explain what it is when it gets here.

D.P.O. VILORIA-FISHER:
Commissioner, thank you for bringing it to the committee, because sometimes we're surprised at the General Meeting and have five minutes before we have to vote.

P.O. LINDSAY:
Yep.

D.P.O. VILORIA-FISHER:
So thank you for bringing it to us.

CHAIRPERSON BROWNING:
See? That's why he's so good.

D.P.O. VILORIA-FISHER:
That's why he's good.

COMMISSIONER BLASS:
Okay. Thank you very much, everybody.

CHAIRPERSON BROWNING:
Thank you. Thank you, everyone.

And we have three cards; I'm surprised only three. We have -- the first one is Mary Finnin.

MS. FINNIN:
Good afternoon. My name is Mary J. Finnin. I want to address some concerns about the resolution 1364 for Federally Qualified Health Centers. It's before you today for a vote to establish a committee that will have a great deal of authority once it's established.

I question whether, you know, this is the first step that should be taken. I attended the budget hearing when there were many questions about the Federally Qualified Health Centers and Mr. Snow, the consultant, could not answer things such as how -- what is the end relationship or how will it be impacted if we stayed the same under the new health care reform laws, you know, where there will be additional funding for community services. I also have concerns -- he wasn't able to answer that.

There were also questions about what happens to the employees.
The employees now are covered by four different unions, one is non-unionized. This would now be a non-for-profit corporation.

Would this make all the employees now under NLRB? Would there have to be new elections? Would it change representation rights? I think we need a lot more transparency for the public, the patients and the employees. You know, there were not public hearings on this. I think there are a lot of implications in terms of access to care, who owns the health centers, who's going to control, you know, some of the decisions that have to be made. And one of the things that came up at that meeting was if the cost was more than the money the County put in or that they were receiving from the health insurance, who would pay the difference? And the answer was that, well, it's a

non-profit, they'd have to raise the funds. We're asking the poorest, who have no insurance, to go out as the majority members of the corporation, to go out and raise funds for their own health care. They don't have it now.

So there's a lot of problems, you know, with the national law, but I think we should look at how the increased funding from that law will impact our existing structure before we jump in on some other structure that will completely change the ownership and all of the other relationships we have with employees and patients. Thank you.

CHAIRPERSON BROWNING:
Mary, if you want to hold off a minute. What I will do is have someone come from the Health Department who is here to explain some of the information.

You know, the Federally Qualified Health Center is we're not entitled at this time to any Federal money because we're not an FQHC. We don't know exactly how much, we estimate possibly about $7 million we'll achieve from the Federal government because -- if we choose to go with an FQHC. There are different models and the public entity model, there was a financial review committee that met and there were people who were on that committee who are users of the health center.

MS. FINNIN:
Yes.

CHAIRPERSON BROWNING:
They were involved in this and I know they were very vocal and very supportive of doing the public entity, and the reason why that they chose that is because things will stay the same, the staff doesn't change. We still can work with the same hospitals, so say Brookhaven Hospital stays with Shirley, Patchogue and -- however, it changes the funding. Right now we're spending $37 million a year on our health centers and the number is going to go up, and so this is why this is being looked at.

LION, the Long Island Organizing Network, came to us I think about a year-and-a-half, two years ago, recommending we do this. So this is not something that we're going to be jumping into tomorrow, it's going to take quite some time. There are applications that have to be done and approvals have to be done, so we do have -- Janet's here, I don't know if Dr. Tomarken and Janet would like to come up and speak a little on it at some point. But I think maybe some of the information that you're getting is not quite correct and I don't want you to be going away thinking that we're trying to sell the health centers, that's not what the intent is here, and it's certainly not something I want to support. So I will -- Janet, I'll get to the next -- I'll finish up the public portion and then we'll have you guys come up and explain a little bit on the FQHC. Okay?

MS. FINNIN:
Okay. Could I just say that also, I was at the meeting where the presentation was made and I said -- the recommendation wasn't just for FQHC, it was for a unified model which would include all eight health centers, and that language is a little bit different in the resolution. So I didn't know if anything changed. Thank you.

CHAIRPERSON BROWNING:
Okay.

D.P.O. VILORIA-FISHER:
Mary, I had a question.

CHAIRPERSON BROWNING:
Mary, Vivian's got a question.

D.P.O. VILORIA-FISHER:
I just want to go back to the first question that you asked so that I can understand exactly what you were looking for so that I could pose the question to our department. You said that it was your understanding that there would be confusion as to who is employing our staff, that their status might be called into question by this model?

MS. FINNIN:
Under a new corporation, the new non-profit corporation.

D.P.O. VILORIA-FISHER:
Okay. So you're suggesting that the non-profit corporation would be the employer rather than the County?

MS. FINNIN:
I believe so.

LEG. GREGORY:
Press the button.

D.P.O. VILORIA-FISHER:
Mary, you need to press the button.

MS. FINNIN:
I believe so. And as a non-profit corporation, then everyone would be under the NLRB jurisdiction.

D.P.O. VILORIA-FISHER:
Mary, you were a nurse with the County, right? Weren't you working under the -- doesn't the County have a license that the medical professionals work under?

MS. FINNIN:
New York State, I have a license to practice in New York State, yes.

D.P.O. VILORIA-FISHER:
Okay. But who is responsible for the licensing then if it --

MS. FINNIN:
The State Education Department.

D.P.O. VILORIA-FISHER:
No, I mean if it were to change. I mean, right now the County carries a certificate, right, as a provider of Public Health Services?

MS. FINNIN:
My license -- that would not change my licensure or my right to practice.

D.P.O. VILORIA-FISHER:
Okay.

MS. FINNIN:
It would change possibly who my employer was.

D.P.O. VILORIA-FISHER:
Okay. All right, thank you. I'll pose the questions to our department.

CHAIRPERSON BROWNING:
Okay. Next card, Christopher Destio.

MR. DESTIO:
Good afternoon. My name is Chris Destio and I'm an employee of the John J. Foley Nursing Home. I just wonder how the County Executive can say we will net $20 million out of the sale of John J. Foley for it being sold for 36 million. And I also wonder how he can say on his website, LevyforGovernor, how we still are losing $15 million at the John J. Foley nursing home. I just wonder where he gets his information from, maybe from a fortune cookie or something, but his numbers definitely aren't accurate.

Out of the $36 million that is offered for our nursing home, this is what I come up with; sixteen to a sixteen and-a-half million dollar bond that is to be satisfied; two-and-a-half to $3 million a year that the County is still responsible for pertaining to retirees; the payout of the infamous lag payroll -- if we have 275 employees, my number comes up to $1,100,000 -- vacation payouts, and these are conservative numbers, I honestly feel they go higher, is 250,000; comp time payouts, 100,000; sick time payouts to employees who are forced to retire, that's at 100,000.

So let's get back to the retirees. So if I'm correct on this assumption, for at least five years, let's say conservatively the retirees are two-and-a-half million a year for five years, my number comes out to twelve-and-a-half million dollars that the County is responsible for. So as per the Newsday article, if 50 or more workers are eligible for retirement, that would bring this up to over $3 million a year that the County is responsible for.

The employees who will be laid off, too, which I believe there will, we're also responsible for unemployment insurance. The number that I came up with here is $30,050,000, and that's a conservative number and I honestly feel that it will go higher with the following information. That leaves us with about $6 million from the sale of the Foley facility at this point. It was also mentioned that the new owners would keep all the residents except those who cannot be cared for medically. I see County Executive Steve Levy once again backtracking on his commitment.

Back in 1995, the facility was built for about $38 million, and that didn't include the price of each bed at the facility. Since then, day care was extended, so was PT and OT, and I believe the cost is about $4 million, give or take. So if you add that on top on the 38 million, we come up with $42 million in investments to the Foley Nursing Home. And I feel this is the kicker here; that's without the price of each bed at Foley. So would you buy a business, a running business, or you buy a shell of a business, that's the difference. You're buying a business here, which Levy calls it a business, with residents in it.

So Levy wants to sell it at a 19.95 market value and not include the price of each bed; who's the sucker here? And this is really called fiscally conservative. Thank you and have a nice day.

Applause

CHAIRPERSON BROWNING:
Chris, hold on a minute, question.

D.P.O. VILORIA-FISHER:
Chris, can you do me a favor? If you have those, all of those figures in writing, can you please --

MR. DESTIO:
In handwriting, but I can give it to you, sure.

D.P.O. VILORIA-FISHER:
Well, maybe you can neaten it up, you know, and send it to us?

MR. DESTIO:
Yes, I will definitely --

D.P.O. VILORIA-FISHER:
Just so that we can have all of those figures, to hold them side by side.

MR. DESTIO:
I will definitely do that for you, Legislator Fisher, no problem.

D.P.O. VILORIA-FISHER:
Thank you, Chris.

LEG. MURATORE:
Madam Chair?

D.P.O. VILORIA-FISHER:
Thank you, Chris.

MR. DESTIO:
You're welcome.

LEG. MURATORE:
Can I just ask one question?

CHAIRPERSON BROWNING:
Oh, question, Chris; another one.

LEG. MURATORE:
These numbers you came up with, are they -- did you run them by the union and find out if the union agrees with them?

MR. DESTIO:
No, I do my own homework which I have been doing for a couple of years, and the union is doing their numbers and stuff. And I figure out, you know, how many employees we have at Foley. And, you know, being -- working there, you can actually come by -- that's why I said on conservative numbers. I low-balled this, and I believe the numbers are actually very higher. So I don't like coming up here giving misinformation at all. I try to be as accurate as possible and I honestly believe these numbers are definitely higher.

LEG. MURATORE:
So then we should have the real numbers rather than your numbers, you know?

MR. DESTIO:
Oh, I agree with you, Legislator Muratore.

LEG. MURATORE:
I mean, maybe --

MR. DESTIO:
Yes, I agree.

LEG. MURATORE:
Maybe you can reach out to the union and find out if we can get the real numbers?

MR. DESTIO:
I will do my best, sir.

CHAIRPERSON BROWNING:
And we'll also give those numbers to BRO and we'll have you look over them also. John? Don't go anywhere, Chris.

LEG. KENNEDY:
Yeah. There are a number of initiatives that are going on right now as we speak in the building, I believe. And I know that I've heard that there is a computerized chart system that's under way?

P.O. LINDSAY:
Medical records.

LEG. KENNEDY:
Have you seen any of that yet?

MR. DESTIO:
Yeah, it's actually on the med carts right now. If there is more there, I'm not sure, but I know there's on all the med carts but it's not activated yet. I believe that's from the grant that came down from the State, if I'm correct on that.

LEG. KENNEDY:
Well, I was going to ask BRO to speak to the HEAL grants. Thank you. I appreciate that, Chris. I'll throw it back to Madam Chair.

CHAIRPERSON BROWNING:
I think that's it. Thank you, Chris.

MR. DESTIO:
Thank you once again.

CHAIRPERSON BROWNING:
And last, Cheryl Felice.

MS. FELICE:
Good afternoon, Chair Browning and the rest of the Legislature. Thank you very much for allowing us to be here today. My name is Cheryl Felice, I'm President of the Suffolk County Association of Municipal Employees, you've heard me before, and I speak on behalf of the workers over at -- not only in all of Suffolk County, but especially at J.J. Foley with respect to Resolution No. 1337.

We're here to say, you know, here we go again. And we have an opportunity before us to once and for all, I think. Put the matter of the issue of Foley to bed once and for all. I would ask the Legislature to not only table this resolution, but consider not putting this resolution even out of committee until all the facts are in. Until all the facts are in about the RFP process and the other bidders and how the selection was made, about the timing of the public hearing and about the rush to get to a resolution on Foley without all the facts in. Legislator Kennedy appropriately raised the issue over the med cart and this service would effectuate proper billing. AME has been calling for an audit, not just an audit of Foley, but an audit of the Medicaid reimbursement to make sure that the County is getting the reimbursement that it truly deserves.

And lastly, I would just like to say that when did the definition of government change where government has to make a profit? Does the Police Department make a profit? Does the Suffolk County Jail make a profit? Does Social Services or Health Services make a profit? Why is it that Foley is being held to a different standard of having to make a profit? And it's absolutely correct of this body to question every single figure, fact and figure that is coming out of the County Executive's Office, because as you know, it's governed by press release and it changes from day-to-day.
I'm here to tell you and pledge to you that the Association is putting a comprehensive package together to you, for you and will present it to you to, once and for all, prove that the J.J. Foley

Skilled Nursing Facility is the jewel of Suffolk County and should remain a facility that is under the control of Suffolk County government. Thank you.

Applause

CHAIRPERSON BROWNING:
Thank you, Cheryl. No questions. Is there anyone else -- I have no more cards. Is there anyone else in the audience that would like to speak? Okay. With that, we will move on to the agenda.

UNKNOWN AUDIENCE MEMBER:
I just had something.

MR. NOLAN:
Somebody wants to speak.

CHAIRPERSON BROWNING:
Oh, somebody wants to speak? Come on up. If you could state your name, please?

MS. {FRADET}:
Hi. Okay, my name is Mary {Fradet}, I'm a nurse at John J. Foley and I just wanted to advocate for, you know, the facility. I just think that there's definitely a lot of mixed figures out there, and we actually received phone calls today from concerned individuals that actually think the facility is sold at this time. So that is really going to be detrimental to, you know, getting new admissions there, and also, you know, people are getting worried about admitting more residents there.

MS. ORTIZ:
You have to hold the button down.

MS. {FRADET}:
I'm sorry. I'm also concerned because, you know, the administrator did do a really good job turning the facility around and saving money, and he also invested a lot of -- made some investments. Apparently, I'm not sure these are -- it's pretty accurate that I heard that he paid -- there was $100,000 for trucks, food trucks that were bought for the facility, because apparently the food trucks that were there were inefficient. And I don't really -- we don't really know what was wrong with the food trucks that we had. There were 15 or 16 trucks that were bought and, you know, I don't know why that was a necessity.

There's, you know, concerns about some of the money. There's also -- there was a concern about the smoking, the facility that was -- the awning for the smoking, there was a figure of like 60,000 that was spent on that, and I was wondering -- you know, we don't know if that was necessary. You know, there's a lot of -- there's just a lot of concerns about really if the administrator -- I think he did a good job, an efficient job, a pretty good job, but I think if we had somebody from the area that was business minded as well as a people person, this facility could save a lot more money and be more productive also.

I was also speaking to other supervisors and there's other ways that the facility could make money. If they made the rehab facility bigger, they employed more people in the rehab, there's a lot of revenue that can come from that department, and that's really not working to its full potential. So I just wanted to -- there is a big concern now with the ad that was put out that the facility was actually sold already, the way it was worded. So we have a lot of concerns. That's all. Thank you.

CHAIRPERSON BROWNING:
Okay, don't go anywhere. Bill, you have a question?

P.O. LINDSAY:
First of all, it wasn't an ad. There was a newspaper article yesterday of an announced proposal to sell, but an awful lot has to happen before then.

You know, for about the last year, year and a half, we've had an oversight committee that meets almost monthly to go over every nickel and dime. And in all due respect, I disagree with you about the director. For many, many years, we had someone that lived in the area that was a Civil Service person that ran the facility and almost ran it into the ground. For the last, I guess, eleven months, we've had a whole-bed follow policy which means we're over 95% full; that's done more to change the revenue stream there than anything else.

The smoking situation with the awning; if we didn't make dramatic changes there, we stood to lose the license because of patients smoking in the building when they weren't authorized to smoke in the building, and the State Department of Health picked them up. Somebody was asleep at the stick that wasn't watching that.

So I fully support the Director out there and the changes that he's made and he's made a dramatic turnaround of that facility. We've still got a long ways to go and employees could help as well because there's no doubt about it go and the employees could help as well, There's no doubt about it, that the deficits are still there, they"re better than they were but they're still there. I'm not saying that we're going to do away with the deficits, but I think we could still pair them down some more.

MS. {FRADET}:
I agree. I agree that he has turned the facility around, but there is a lot more that could be done. And he's done -- and that has happened in a short time, I believe. You know, he's turned it around, but there's also concerns about was it really necessary, the amount of money that was spent for the awning and the amount of money that was spent for the trucks. That's a concern, that's all.

P.O. LINDSAY:
We were facing fines of several thousand dollars a day and could, could possibly have not been able to bill the State for the patients in the facility. What we're talking about is a cost of a lot, a lot of money and we had to turn that around quick. And I agree, again, we still can do a lot more there, and I think every employee that works there should look in the mirror and see what we can do to make things more cost efficient there

MS. {FRADET}:
Okay, thank you.

CHAIRPERSON BROWNING:
Thank you.

Applause

With that, I guess we'll -- Janet, when we get to the bill on FQHC, I guess we could address it then, because I think we have a few questions.

Tabled Resolutions

1129-10 - Adopting Local Law No. -2010, A Local Law to ensure the integrity of prescription labels in Suffolk County (Cooper).

D.P.O. VILORIA-FISHER:
Motion to table.

CHAIRPERSON BROWNING:
Motion to table for public hearing by Legislator Viloria-Fisher.
I'll second it. All in favor? Opposed? Abstentions? ***It's tabled (VOTE: 6-0-0-0 Including Presiding Officer Lindsay).***

1199-10 - Establishing a Heroin and Opiate Epidemic Advisory Panel to find a solution for the treatment of addicted youth (Horsley). I'll make a motion to table at the request by the sponsor for some changes.

MR. PERILLIE:
It's been amended.

MR. NOLAN:
That's why it has to be tabled.

MR. PERILLIE:
It's after the deadline?

CHAIRPERSON BROWNING:
Yes. Okay. So I think going back again, I made the motion to table.

LEG. KENNEDY:
Second.

CHAIRPERSON BROWNING:
Second, Legislator Viloria-Fisher. All in favor? Opposed? Abstentions? ***It's tabled (VOTE: 6-0-0-0 Including Presiding Officer Lindsay).***

1229-10 - Adopting Local Law No. -2010, A Local Law prohibiting the sale of aerosol dusting products to minors (Horsley).

MR. NOLAN:
That has to be tabled.

CHAIRPERSON BROWNING:
That has to be tabled also, so I'll make a motion to table. Second, Legislator Viloria-Fisher. All in favor? Opposed? Abstentions?
It's tabled (VOTE: 6-0-0-0 Including Presiding Officer Lindsay).

1230-10 - Adopting Local Law No. -2010, A Local Law banning the sale of drinking games to minors (Cilmi). Motion to approve?

LEG. KENNEDY:
I'll make a motion to approve.

LEG. MURATORE:
Second.

CHAIRPERSON BROWNING:
Legislator Kennedy makes a motion to approve. I'll second. All in favor? Opposed? Abstentions?
It's approved (VOTE: 6-0-0-0 Including Presiding Officer Lindsay).

1300-10 - Maintaining a common sense policy for housing sex offenders that protects and safeguards public safety (Stern).

D.P.O. VILORIA-FISHER:
Motion to table.

CHAIRPERSON BROWNING:
Motion to table, Legislator Viloria-Fisher. I'll second it.
All in favor? Opposed? Abstentions? ***It's tabled (VOTE: 6-0-0-0 Including Presiding Officer Lindsay).***

Introductory Resolutions

1317-10 - Authorizing Request For Proposals to relocate the South Brookhaven Family Health Center (Eddington).

LEG. EDDINGTON:
Motion.

CHAIRPERSON BROWNING:
Legislator Eddington made a motion to approve. I'll second. All in favor? Opposed? Abstentions? ***It's approved (VOTE: 6-0-0-0 Including Presiding Officer Lindsay).***

1322-10 - Accepting and appropriating 100% Federal grant funds passed through the New York State Department of Health to the Suffolk County Department of Health Services for the Beach Act Sanitary Survey Project (County Executive). I'll make a motion to approve and place on the Consent Calendar. Second, Legislator Kennedy. All in favor? Opposed? Abstentions? ***It's approved & placed on the Consent Calendar (VOTE: 6-0-0-0 Including Presiding Officer Lindsay).***

1337-10 - Authorizing public hearings and a Legislative Office of Budget Review Analysis on a proposal to provide services at John J. Foley Skilled Nursing Facility -- why am I not surprised I'm seeing Ben walk up -- ***through an entity other than Suffolk County Government (County Executive).*** I'll make a motion to table. Do I have a second?

LEG. EDDINGTON:
I'll second it.

CHAIRPERSON BROWNING:
Second, Legislator Eddington. There are some questions. I will start with we received -- we had a conference call yesterday morning, a 15-minute conference call to tell us that an agreement has been made. Basically we have a buyer, we have a number, and I just have a real hard time saying I'm going to approve a public hearing for something I really have no information on.

You know, I think quite a few of us have some questions about the appraisal, what the contract is. I haven't seen the contract. Who the buyer is, we got the name of the buyer which is another thing that I have a serious concern about. I have a -- I'll read real quick, and I know that there's probably a few more people have something. It's a Daily News article, October 1st of 2008, it says, "Layoffs creating {carawoes} in East New York nursing facility. An East New York nursing home slashed its staff by 20% this summer. Residents charged quality care has dramatically deteriorated," and it continues to talk about that, "Advocates said was an unusually large number of layoffs." I'm not going to read the whole thing, but a resident said, "Some people sit in their waste all day," this was a 69-year old woman that made this comment, "sometimes they bring you your food late and when you get it it's cold." It continues to basically tell how this company is operating. The home was changed hands in June, was run by a non-profit {Wartberg} Lutheran services which was losing money every day, and the home was taken over by Kenneth Rosenberg, and I believe that is who the County Executive has made some desires to sell to. When I read this, it's very disturbing and certainly doesn't make me feel real warm and fuzzy about giving it over to him.

So I think there's a whole lot of questions that we have to ask. You know, who is this company and what other kind of things are they doing? My fear is once you go to a for-profit, quality of care can dramatically drop. So I'm going to open up for any other questions or comments. Nope?

P.O. LINDSAY:
Well, let's listen to what he has to say.

CHAIRPERSON BROWNING:
Okay. Ben, I guess it's your turn.

MR. ZWIRN:
Thank you, Madam Chair. This resolution today just is a pro forma resolution that moves the process forward. This does not mean that the facility is going to be sold. We're not voting today on the sale of the nursing home. But we have gone through this process once before, about a year ago; we had four hearings with respect to the future of the nursing home. But if we're thinking about privatization in the current climate that we have -- and I know Cheryl Felice was talking about, you know, government is not in the nature of having to make a profit. But I think in good and tough economic terms, if services can be provided to a class of individuals in the County that need that service and it can be done in the private sector as well as the public sector and the County can avoid having to pay out additional taxpayer dollars to accomplish that, then it's something that has to be looked at, and that's what the purpose of these resolutions are today, is to go forward.

You have a lot of questions. This is a contract that will have to be, you know, see the light of day, and the hearing process is one way to do that. It's four hearings; it's not just one hearing, it's four hearings, two held by the Executive Branch and two by the Legislative Branch. We did this, again, two years ago, we were both out in Riverhead and both here in Hauppauge who had these hearings. Look, it is a controversial issue, there's no question. We are facing huge deficits going forward, this is one solution to that problem where the services can be provided and the County can save money at the same time.

And I think what you have to do as the Legislature is to take a good, hard look at it. And all we're asking today, we're not asking you -- you want to examine the person who has been -- who is on the contract and what his record is. We have a letter from the State Health Department that would be available to say that they know who he is and if this were to go forward, that they are familiar with him and his record in the industry and that they suspect that there would be approval of such a -- the person involved. But his record will also be on there. He has ten facilities that exist today, I'm sure all of them will be carefully scrutinized, as you should, we have to all do a due diligence on this. But you have to remember, we did this in 2008 and we didn't have -- we weren't this far along, we didn't actually have a purchaser in place with a purchase price.

And I don't think that we can just say we shouldn't look at it. I think it's something that the Legislature owes it to the taxpayers of the County just to take a look, and that's all we're asking at this stage to do that, and it will come before this Legislature at another time for an up or down vote, but that's not where we are today. We have to make a presentation, I think, with respect to all this, whether we do it before the committee and the General Legislature and the public, we can do that; we can even be prepared to do that on Tuesday as we move forward. But I would ask that at least we get this thing to the full Legislature with a discharge motion so that we can move the process forward and we can have an up or down vote at some point in the near future. Because this isn't something that will be done in 2010, but it is a long process, and not to move the process forward today I think would be counter productive. Because this -- unless the Legislature is just going to say no, but at least let's get it to the full Leg so that debate can be held among all 18 Legislators as opposed to just hearing the committee.

CHAIRPERSON BROWNING:
Ben, how long has it taken you guys to get to this point? I mean, how much time have you guys spent on, you know, looking for a buyer, coming up with your appraisal number; I mean, how long

have you taken to do this?

MR. ZWIRN:
I think the RFP period is listed in the resolution, but we brought in a Director and we gave it a fair run, we really did. I mean, we brought in a gentleman, as the Presiding Officer said, who's really done everything he can to try to turn this around and get the maximum revenues that we can. We have a full bed-hold, we've done a lot of improvements there.

P.O. LINDSAY:
Kate, can I talk?

MR. ZWIRN:
And we've tried, but we're still running at sizeable deficits that we have, what, seven and a half million dollars a year --

CHAIRPERSON BROWNING:
Okay, but I didn't get the answer; how long have you been working on this?

MR. ZWIRN:
From the RFP -- we've been working on it for a while, I mean, for a couple of years now.

CHAIRPERSON BROWNING:
Right.

MR. ZWIRN:
But the RFP process went out just in '09, I think it was March of '09.

CHAIRPERSON BROWNING:
Okay. So we received this information yesterday, and if we approve this, we have 30 days before we have our public hearing. And I think that what the Legislators are saying is you've had weeks, months, well over a year to do this. You have been working on this for a very long time and now you're saying if we pass this today you're giving us 30 days to explore everything, and I don't think it's an adequate time. But Bill, you have a question, right?

P.O. LINDSAY:
Not a question, it's just -- Ben, I agree with you, that we do have to take an honest look at this for the sake of our taxpayers. What I disagree with you is the last time we had hearings, the proposal was to close the facility, it wasn't to sell the facility, so this is a whole other ball of wax. And before we move forward that we seek public comment on the whole proposal, I think that we should know what we're talking about. Like Legislator Browning just said, we just got the contract I think in the office this morning?

CHAIRPERSON BROWNING:
I haven't seen it. None of us have seen it.

P.O. LINDSAY:
It's in the Legislature, but either yesterday or today. What I want to happen is I've asked Budget Review to do an analysis of the contract, which I'm sure they're going to undertake in an efficient manner.

The other thing is the issue of the appraisal. I mean, I read in the newspaper this morning that the place was appraised at $18 million in Newsday. I talked to Mr. Kent before, he said, "No, that isn't true. It was appraised at $30 million." And I said, you know, we don't have a copy of the appraisal and -- he said that he would explain it to me. I'm not looking for an explanation, I want a copy of the appraisal so that can be digested as well. And I -- you know, I'm going to put forth a resolution that I think is going to be laid on the table Tuesday to fund the second appraisal. When we buy a

piece of property that's more than $5 million we get two appraisals. We're selling -- we're proposal to sell a facility that's been in the County's purview for a hundred years, that its value somewhere is over $30 million. I think we just want to do our due diligence with this, that's all. It's not that we want to obstruct public comment on this or a full look at the deal, but before we're ready to go forward with public comment, we want to know what the whole deal is.

CHAIRPERSON BROWNING:
Vivian?

D.P.O. VILORIA-FISHER:
Thank you. Thank you, Madam Chair. Mr. Presiding Officer, you took the words right out of my mouth. I sit on ETRB and I look at appraisals of properties that we're buying, and here we have an important piece of Suffolk County history and Suffolk County access to health for the people in our County. And there's one appraisal, we haven't really seen the details of it, we haven't -- we have no details, we haven't done any Legislative review. And we could have a committee such as we have with ETRB who, in a confidential setting, will look at this appraisal very carefully with people from our real estate -- Division of Real Estate, helping us to understand how we arrived at that appraisal. Because everyone knows that appraising property is not simply something that's done with fact but there's art to it as well, and you can get two appraisers who appraise totally differently. So I agree with the County -- with the Presiding Officer in looking for a second appraisal.

But secondly, I'm looking at the parts of this resolution which is to authorize public hearings and a Legislative Office of Budget Review analysis; we don't really need to have a resolution to ask our Budget Review Office to analyze something. And I believe -- let me just finish.

MR. ZWIRN:
Yes.

D.P.O. VILORIA-FISHER:
I believe that to use your term, Mr. Zwirn, you've said, "Let's move the process"; I'm not ready to move the process yet. I'm not ready to move the process until I'm satisfied that we have enough information, that we have time to look at it. I was part of the conference call as well yesterday and I don't want to read the details in the newspaper or hear them in a conference call, I want to have time to get the information officially. I haven't been in my office all day, so I haven't seen any of the details, and I'm certainly not going to vote on something where I'm going to be in the same position as members of the public who are coming to see it, you know, cold and I'm looking at it cold. I want to have an analysis before I can answer the questions that the public might have.

So I certainly am supporting the motion to table, because I think it's certainly premature to have this before us today. And I have to say that I have become a little bit frustrated at being rushed on very, very important issues, and this is being rushed. We have just -- I read about this, of course, in the paper before I received any official word, and there's too much governance by press release.

MR. ZWIRN:
If I just might comment on one of the items that you said, Legislator Viloria-Fisher. Under the Statute, we have to ask for this -- that the BRO do the analysis, it has to be in as part of our legislation. It's not something that we're doing -- I mean, they can take a look at it irrespective of that, but as far as the process going forward, they are required to do that under the Statute as we move forward to consider the privatization of the nursing facility. That's the only reason why we have it in the legislation.

D.P.O. VILORIA-FISHER:
However, we were read some numbers by Mr. Destio, okay, and Cheryl Felice had said that she was also going to provide numbers. We want to have every possible point of view and interpretation of data before BRO and have them do a thorough analysis. And the Legislature can ask our own BRO to go ahead and do an analysis and then we can go to this to give it a thorough vetting, but we need

the time to look at it ourselves. And as Cheryl Felice said, we're not in the business of only looking at the bottom line. I'm very concerned by what Legislator Browning read from the Daily News. We don't know what kind of services are provided by this entity and I'd hate to put the people of Suffolk County at the mercy of someone who's looking at just the bottom line. We have looked -- we have seen what corporate entities have done regarding health services throughout this country because of just looking at the bottom line.

MR. ZWIRN:
Well, the individual is prepared to come before the Legislature and speak. But I can tell you, you know, on the record that his record of running facilities is better than the County's, at the very least.

D.P.O. VILORIA-FISHER:
We need time to look at that.

CHAIRPERSON BROWNING:
John?

LEG. KENNEDY:
Madam Chair, the only thing that I would just like to add is amongst all the other thing that we have to do due diligence on, Ben, and I had a chance to hear the County Executive yesterday, too, as well in his phone conference. There's an awful lot to go through with a contract, there's representations on the value of the property, there's representations on value of the building itself, all of the internal components. You know, there's a sense we're being forced to look at something that, heretofore, wasn't viewed as a business. When you value in a commercial market the sale and purchase of going businesses, there's a value associated with the name. And I will agree with -- well, I'm sorry, I will disagree with you in that I believe John J. Foley has had, over the course of its years, probably a pretty good reputation when it comes to providing humane care for some of the most challenging cases here in Suffolk County. There's no dispute that the patient composition in John J is much different than you'll find in most any other nursing home here in Suffolk County, or for that matter throughout most in the state. And we're not only looking at representations about the workers that work there now or the patients that live there now, but we will be foregoing forever the opportunity to assure that care can be had for some of those most difficult and challenged cases. And there's no contract in the world that's going to bond a successive purchaser to take in 40-year old paraplegics that may have certain mental compromises, or AIDS units or the whole gamut of patient population we see there.

So as we go through all the other due diligence we have to, there's got to be some acknowledge that we are crossing a threshold and eliminating forever that the County will be able to provide care for those folks who don't fit in to any other mix anywhere else. That's an important piece, too.

Applause

MR. ZWIRN:
Let me just say, Legislator Kennedy, that there is a good will component of value that goes with that and that is recognized in the contract, and it's considerable. So it's that -- what you say is true. But with respect to the care of individuals, nobody is going to be tossed out. The only caveat that there is, and it's the caveat that exists now, that if the facility cannot handle a particular patient, the care has to be done somewhere else, then that person is moved to a facility where it can be handled. And that's true now and it will be true forever.

LEG. KENNEDY:
And you know what? I can tell you for a variety of reasons, both through work that I've done in the past, and I make no secret about it, and also through personal experiences with family members, just as you have I'm sure. When you have a loved one that's in a facility, you hope that everything goes okay. God forbid an individual comes down with some kind of an illness that's an acute illness, requires hospitalization, you almost have to go on bended knee to an administrator begging them to

hold the bed so that person is going to be able to return to the facility, if it's a good facility.

It's a practice out there in the business that it's not a -- maybe administrators won't admit it, but you can ship a patient who's a hard to handle case to a hospital for some particular treatment, and then when it comes time to readmit them, "No, sorry, we're full, they're not coming back." And then they're left to go into that whole 90-mile or 150 mile radius to ship somebody to God knows where. So that is part of all of the stuff that we have to look at as it's our responsibility to fully vet.

You know, there's a dollar and cent component here, but let's remember, we're talking about human beings, not widgets. And yes, our tax-paying constituents have the right to have us do the due diligence, but I'll continue to go back and forth with you every day about that purported seven to $10 million delta. Until the day this goes away or is done, I'll continue to harp on the fact that no other entity in Suffolk County carries the retiree costs like John J does. I sat at the last Oversight Committee meeting, I heard about a $3.9 million escrow against what may or may not be State-based adjustments. We're going to look at that delta and it gets wider or it gets smaller. And in 16 more years, we'll own a building outright, and if we only talk about business, enhances our County inventory economically, substantially, so that has to be looked at as well.

Applause

CHAIRPERSON BROWNING:
Okay. I think, you know, last but not least, I think John said it. You know, the patients in John J. Foley, every day something's new, things change with them every day. You know, it's almost to capacity and they're all Medicaid, a majority of them are Medicaid, very few of them are Medicare. And if you're saying that we can't run it at a profit and -- or even break even, with all these Medicaid patients, how in the name of God is Rosenberg going to do it?

The only way I can see he's going to do it is that slowly but surely he's going to wean them out and start bringing in Medicare and have no beds available for the people that serve -- that are served right now. You know, that's what that place was in the 1800's, it was the on-size. And today, I've been in John J. Foley, before I was a Legislator, going there with my kids for the Christmas events and various things. There's people in there who have no family, who don't -- the John J. Foley people are their family. And I'm just concerned that you're going to shove them out the door with nowhere else to go and that's what's so special about this place, and you can't put a dollar amount on that.

Applause

So with that --

MR. ZWIRN:
All I can say is that if we don't move forward, even with a discharge, I mean, if it's possible, and maybe this is the intent of the committee -- and I'm not suggesting it is, but it could be -- is to kill this right here in committee, and I hope that's not the case. I hope we get a chance to at least fully vet it, go through the process that has been laid out before we can go privatize the facility, have the public hearings, have the public input. If we do not move forward, then we will not be able to do that and we will not be able to realize any dollar savings going forward. You've got huge deficits coming forward, this was part of the County Executive's plan, you know, to avoid any tax increases going forward. If we do not move forward, that will never be part of the package, and maybe that's what you want to do, but I would hope that we will be able to at least get it before the entire Legislature so that they can discuss it and debate it there. Thank you.

CHAIRPERSON BROWNING:
And I think Bill said it, we're not saying we're not going to look at, but don't tell me 24-hours later I have to vote on this, make a decision. You took a long time to get to where you are today, we're asking for consideration and giving us time to look at it and let our Budget Review give us their

analysis. So we're just asking for equal time and I think that's fair. So there was a motion to table and I think a second, right.

MS. ORTIZ:
Yes.

CHAIRPERSON BROWNING:
Okay. So, all in favor? Opposed? Abstentions? Okay, ***it's tabled (VOTE: 5-0-0-0).***

Applause

1352-10 - Adopting Local Law No. -2010, A Local Law banning the sale of certain synthetic cannabinoids to minors in Suffolk County (Schneiderman), whatever that may be.

D.P.O. VILORIA-FISHER:
Motion to table.

CHAIRPERSON BROWNING:
Motion to table, public hearing, Legislator Viloria-Fisher. I'll second. All in favor? Opposed? Abstentions? ***It's tabled (VOTE: 5-0-0-0).***

1364-10 - Authorizing the County Executive to apply for Federally Qualified Health Center status as a public entity with Look-A-Like status (County Executive). I think, Janet, you can come up on this? Yes.

DEPUTY COMMISSIONER DEMARZO:
Good afternoon. Thank you for the opportunity to speak on the resolution regarding the first steps in a Federally Qualified Health Center process. I can answer questions, we could speak generally to what the bill does.

CHAIRPERSON BROWNING:
You know, Mary came up with -- had some concerns and I think you may have made note of some of her questions and concerns, maybe you could start with addressing those.

DEPUTY COMMISSIONER DEMARZO:
As many of you know, we did a presentation, John Snow Consultant Anne Keehn came to present to the committee, and prior to that the Legislature had passed the Financial Review Committee to look at options for the health center system.

The option that was looked at by the committee and recommended and which was presented to the full Legislature was creating what's called a public entity model under the Federally Qualified Health Center. There was the recommendation that we go forward with this because it allows us to become a Federally Qualified Health Center, receive Federal dollars that heretofore were not available to us, but allows the County to keep a significant amount of control in the process. Not full control as we have now because we'll have a co-applicant board primarily made up of consumers of health care services from our health centers.

At the committee meeting or the full Legislative Special Meeting, a number of questions were raised about the governance and operations and level of control, which we felt that really needed to be given -- you needed to be given the details. The resolution that we drafted and is before you today for consideration allows us to begin the process of putting those details into an agreement for your consideration. We believe that the Public Entity Board will how allow us to continue the current structure whereby two of our centers are with County employees and the others are with contracts with hospitals. Our consultants have told us that we would have procurement authority and ability to put that into our agreement with the co-applicant board. So we don't see the -- we don't believe that that concern is real and that's what we would put in the co-applicant agreement.

So today's resolution which is before you would let us begin that process, but would allow the Legislature and the County Executive to maintain control over that process whereby we would appoint the members jointly, the County Executive and the County Legislature and the Commissioner of Health, develop an agreement which clearly sets forth the authority of each party, the County and the co-applicant board and then bring that back to you for approval. Without that approval, an application for Federally Qualified Health Center status cannot proceed. We are asking that we move on this so that we can begin the process, because one of the questions you asked last time was how does health care reform impact this process. The Federal Government put $11 billion in the Health Care Act for Federally Qualified Health Centers. We have been advised HERSA is going to put a lot of that money at the front-end of the process and there will be the most ever available for new service points beginning in October, they'll open it up with the beginning of the Federal Fiscal Year.

So we'd like the opportunity to begin the process. The County employees would stay as County employees. The partnerships we have with hospitals would be able to be maintained.

LEG. KENNEDY:
I have a question.

CHAIRPERSON BROWNING:
Okay, I'm sorry. I know you did have some questions.

LEG. KENNEDY:
Thank you, Madam Chair. My question is -- it was going to be almost like a procedural one. I see that the resolution was amended; when was it, last Friday I guess?

MR. PERILLIE:
No, two days ago.

DEPUTY COMMISSIONER DEMARZO:
It has been amended twice.

LEG. KENNEDY:
Monday, Tuesday? I don't know, whenever it was.

DEPUTY COMMISSIONER DEMARZO:
It was amended twice, and the latest version is from Monday.

LEG. KENNEDY:
Okay. So in a nutshell then, Janet, what are the changes?

CHIEF DEPUTY COMMISSIONER DEMARZO:
Well, the --

CHAIRPERSON BROWNING:
Well, the makeup of the appointments for the board, the co-applicant board, I didn't like the makeup. I spoke with Ken Cornell and said I'd like to see it more of a 50/50.

LEG. KENNEDY:
Okay.

CHAIRPERSON BROWNING:
Where 50 part -- 50% of it with the Legislature to make the appointments and the other 50% from the County Executive.

LEG. KENNEDY:
And my read, my quick read is that it's nine appointments on the Executive side and six in the Leg; is that about where we're at?

CHAIRPERSON BROWNING:
It's closer to 50/50 than what it was.

(*Laughter*)

DEPUTY COMMISSIONER DEMARZO:
Well, there's appointments by the Legislature and by the County Executive and the Commissioner of Health.

LEG. KENNEDY:
Yes.

DEPUTY COMMISSIONER DEMARZO:
So the Legislature on the consumer side, there's two appointments by the Presiding Officer, one appointment by the Minority Leader, three appointments by the County Executive, and then the Commissioner of Health has two appointments.

LEG. KENNEDY:
I saw the presentation last time when John Snow was here, and actually I thought they did a pretty good job. The 150,000 is to further retain them, if I recall. What they did is they did just a preliminary overview for us, or have they actually commenced part of the process?

DEPUTY COMMISSIONER DEMARZO:
John Snow is going to continue as more of the program and application consultant. In addition to that, there's a lot of legal processes that need to occur. The co-applicant board has to get 501(C)3 status. We need to develop that agreement, which is what we'll bring back to you, that clearly lays out the responsibilities of the co-applicant board and those powers held by the public entity which is Suffolk County. We'd also have to use the Counsel to create the rules for the board to operation, how many committees and so forth. So that is what the legal -- we would get legal Counsel.

LEG. KENNEDY:
So we're hiring attorneys at 150 grand, is that it; is that the idea?

DEPUTY COMMISSIONER DEMARZO:
The idea is, you know, $150,000 would be set aside, what the exact dollar amount is would be less, you know, up to that amount.

LEG. KENNEDY:
And was there any conversation with the County Attorney's Office as to whether or not any of this could be done in-house?

DEPUTY COMMISSIONER DEMARZO:
The County -- we've talked to Nassau County who has already sent their FQHC application in to Washington and there's a real expertise involved in this. The County Attorney's Office has also met with firms. There's a real expertise in the process, I believe that there may be a mix in oversight, but there is a need. And the $150,000, you know, we have gotten a variety of estimates from different groups. Nassau County did have a significant amount of money for legal services.

LEG. KENNEDY:
Well, my recollection is, as a matter of fact, I think the County Executive has in another resolution the potential for 7.5 million to be realized by getting or achieving FQHC status? So it doesn't sound like an unreasonable amount of money to expend for that.

The board composition; I guess I'm going to turn that back to yourself, Madam Chair. I mean, the board -- my recollection with the board was that the board really was going to be the primary -- they were -- they were a board that had very comprehensive responsibilities and duties; is that correct?

MR. FREAS:
The board's a real governing body for an FQHC.

LEG. KENNEDY:
Okay. So then the budget that's associated for the operation of that particular clinic, will that be a budget that is implemented or operated or prepared or submitted by this operating group?

MR. FREAS:
I believe that would be something to be clarified within the bylaws in the operating -- operating laws or operating rules of the 501(C)3. This is the concern that Mr. D'Amaro raised in the --

LEG. KENNEDY:
I recall, yes.

MR. FREAS:
-- during the Snow presentation. I think there can be, from talking to Snow and some of the other folks even when I was with the department, that there can be sufficient safeguards to keep the -- to keep the budgetary authority well within the County's purview.

LEG. KENNEDY:
Well, Doctor, I would appreciate you jumping in on this. My thoughts here are twofold. We apparently allocate money for clinic operations in a variety of different ways. We have very detailed submission off of MLK, or for that matter, South Brookhaven, but then when we look at Dolan, I believe it's almost as if it's just a lump sum that's dumped into the facility and they implement for a range of services, I guess, that we expect to have delivered from them. Where to go? Where to go?

COMMISSIONER TOMARKEN:
Maybe I can just add something.

LEG. KENNEDY:
What's your sense, doctor?

COMMISSIONER TOMARKEN:
The public entity -- which is, in this configuration, the County -- can state what its limit of financial support will be, and the co-applicant board cannot force you to provide more funds than you deem necessary. That's -- so ultimately you have the last say in the amount of money that is allocated for these services.

LEG. KENNEDY:
Well, let me -- let's stay on that point for a second, Doctor, because here's where I'm really -- you know, sometimes they say it's time to, you know, get to the essence and get down to the dicker.

Very shortly we're going to go through a budget process. And your Chief Deputy knows them well; as a matter of fact, she's lived them for a good long time. And we go back and forth and we get to a point where the Exec proposes and then the Legislature reviews and we make some deletions, we make some additions and the Exec looks at that, he may accept, he may veto, and ultimately we have a budget that's adopted and off we go into 2011.

So let's say for this first test case, you know, we get a budget of a thousand dollars that's ultimately agreed upon there. My concern is are we then going to have a board that's going to operate in a different fashion than from what we give them? Because we've got, you know, some difference as

to the governance. We really are taking our responsibilities and we're removing a very significant aspect of what we do.

COMMISSIONER TOMARKEN:
But in the agreement, you can outline in explicit detail what services you want provided down to number of hours that you want to have a dental clinic or whatever it is that you want provided for the clientele. So you do have the agreement plus the limit on the amount of funds you are required to -- or you choose to allocate for the --

LEG. KENNEDY:
Will we have that agreement come back before us?

COMMISSIONER TOMARKEN:
Absolutely.

DEPUTY COMMISSIONER DEMARZO:
The second RESOLVED clause clearly lays out that the agreement will be subject to both County Executive and County Legislative approval, and it was put in to make decision points along the way because we do think that the details will be in the agreement.

LEG. KENNEDY:
Okay.

CHAIRPERSON BROWNING:
Let me ask you another question. And I know we had a conversation with Mr. Dayhill and, you know, currently we have a number of different hospitals working with our health centers. In my district, I have the Shirley one with Brookhaven and Patchogue has the Brookhaven Hospital, you know, you have Good Samaritan, you have the Dolan. One of my concerns is I want to continue to see Brookhaven operate and Shirley and Patchogue. I don't want to see the changes. I've said it before; if it's not broke, don't fix it. This is really about getting the Federal money. Can this board make a decision to go to one hospital or -- do you know what I'm saying? Could they decide, "Okay, we want one hospital to operate all the facilities." Can that board make that decision without our say, or is that something else that we can do?

COMMISSIONER TOMARKEN:
You could. Theoretically it's probably possible, but I think it's highly, highly unlikely for a variety of technical reasons in terms of being able to handle the whole network. But you could put in the agreement that it will require County approval to make any changes to current hospital contracts or something along those lines. So again, the devil is in the details. And in that agreement you can put whatever safeguards you want to make yourself comfortable and secure the issues that are important to you.

CHAIRPERSON BROWNING:
Okay. Craig, do you have any -- I know you're very familiar with the FQHC's, so that's why I'm just curious. I know you've got some experience with it. Are you -- can you comment; no?

MR. FREAS:
I agree with Dr. Tomarken, that theoretically you could award a single contract. But I think, again, it's in the bylaws, if you say, "Well, if you want to change the contractual relationship, then you have to go -- it would have to receive approval of the Legislature or go through the budget process." More or less like they would right now. I mean, we could change the hospitals if we like, but these are -- all of them are multi-million dollar contracts and would require the approval of the Legislature to effect that kind of change?

CHAIRPERSON BROWNING:
And I know Mary had asked a question, I think you were concerned about all of the health centers

being grouped together on the FQHC?

MS. FINNIN:
Going as one unified, right.

CHAIRPERSON BROWNING:
Do you want to come up and put it on the record again? And I think maybe Janet can respond to that again.

MS. FINNIN:
I believe, I don't have the wording in front of me, that when the presentation was made, it used, I think, the word unified, a proposal for a unified application, so it would include the eight health centers. Did not include Dolan because we don't operate Dolan.
So it would include -- and that is different from the language in this resolution. This resolution just talks about FQHC but not a unified model which would include all eight health centers.

CHAIRPERSON BROWNING:
Can you answer that?

DEPUTY COMMISSIONER DEMARZO:
We do plan to keep the center network in place. There may be some financial benefits to not putting the whole network in at once and that keeping some as an FQHC look-alike and some moving to full FQHC status may have a benefit where we can get additional dollars to add them on to the network process or network of FQHC. We could go for the whole FQHC as a network, we wanted to look at the options as the Federal government comes forth with their announcement of the new dollars. Consultants have told us that we could get $650,000 or more each time we add a center to the network. So we are looking to keep the center system together, whether as a whole FQHC all at once or to move individually to see if we can maximize reimbursement, and of course in consultation with the two, with the County Executive and the County Legislature.

CHAIRPERSON BROWNING:
Everybody's good, nobody else? No more questions? Did we have a motion on that? Mary, you have an issue? I'll let you come on back up again.

MS. FINNIN:
I think what was just said is different from the recommendation that came from the committee about the unified proposal. And that was one of the questions, could you have multiple FQHC's in Suffolk County? Could Huntington, through Dolan, have a separate one? We know that Long Island Jewish, the North Shore Corporation, is already looking at different kinds of things. I think that one of the criteria is you have to have -- at least one of the health centers has to be in --

CHAIRPERSON BROWNING:
In an underserved, yeah.

MS. FINNIN:
-- a poverty area or however they call it. The only one that I know that meets that at the present time is the Shirley-Patchogue Center. But if -- if I understood what was said during the hearing, as long as one of the health centers meets that criteria, to approach it as a unified group it would cover all eight health centers and then the benefit would be unified and the Article 28. We wouldn't be chopping up the County into different kinds of non-profit groups providing services in different places.

COMMISSIONER TOMARKEN:
No, I think that is true, that if we have one medically under-serviced area, MUA, which we do, that that can serve for the entire network. What I think we're trying to get across is that it would be one network, but there may be groups or facilities in different formats some. May be look-alikes, some

may be full FQHC's, partly because we want to see how it works and not jump in too prematurely, plus there are significant financial advantages to adding ones one-at-a-time, or a few at a time, because $650,000 is available for each one that you add. So there's a bit of a strategy from a financial perspective as well as an implementation point of view.

CHAIRPERSON BROWNING:
Okay. I think that's all the questions. Okay. So I'll make a motion to approve.

LEG. EDDINGTON:
Second.

CHAIRPERSON BROWNING:
We have a second, Legislator Eddington. All in favor? Opposed? Abstentions? ***Approved (VOTE: 5-0-0-0).***

And I think we are done, so I'll make a motion to adjourn.

LEG. KENNEDY:
Second.

CHAIRPERSON BROWNING:
Second, Legislator Kennedy. We are adjourned.

(*The meeting was adjourned at 4:31 PM*)

{ } - Denotes Spelled Phonetically