



STATE ENVIRONMENTAL QUALITY REVIEW ACT
NEGATIVE DECLARATION
NOTICE OF DETERMINATION OF NON-SIGNIFICANCE

Date: August 4, 2026

Lead Agency: Dormitory Authority of the State of New York
515 Broadway
Albany, New York 12207-2964

Applicant: Northwell Health Obligated Group
2000 Marcus Avenue
New Hyde Park, New York 11042
(Nassau County)

This notice is issued pursuant to the *State Environmental Quality Review Act* (“SEQRA”), codified at Article 8 of the New York Environmental Conservation Law (“ECL”), and its implementing regulations, promulgated at Part 617 of Title 6 of the *New York Codes, Rules and Regulations* (“N.Y.C.R.R.”), which collectively contain the requirements for the *State Environmental Quality Review* (“SEQR”) process.

The Dormitory Authority of the State of New York (“DASNY”), as lead agency, has determined that the Proposed Action described below would not have a significant adverse effect on the environment and a Draft Environmental Impact Statement (“DEIS”) will not be prepared.

Title of Action: *Northwell Health – Long Island Jewish Medical Center
2026 Financing and Construction of the Zucker Hillside Behavioral
Health Pavilion II (Northwell Health Obligated Group’s 2026 Bond
Financing)*
(DASNY’s Hospitals Program)

SEQR Status: Unlisted Action – 6 N.Y.C.R.R. Part 617.2 (an)

Review Type: Coordinated Review

Description of Proposed Action and Proposed Project

Northwell Health Obligated Group (the "Obligated Group") has requested financing from the Dormitory Authority of the State of New York ("DASNY") for its *2026 Financing and Construction of the Zucker Hillside Behavioral Health Pavilion II Project (Northwell Health Obligated Group's 2026 Bond Financing)* (the "Proposed Project"). For the purposes of SEQR, the Proposed Action would involve DASNY's authorization of the issuance of one or more series of fixed and/or variable rate, tax-exempt and/or taxable bonds in an amount not to exceed \$800,000,000 to be sold at one or more times through a negotiated offering and/or a private placement (see DASNY's *Transaction Report – Resolution to Proceed*, dated June 30, 2026, and *Transaction Report Update – Adoption of Documents*, dated July 28, 2026, attached). A portion of the bond proceeds (approximately \$217 million) would be used to finance the Northwell Health Long Island Jewish Medical Center's Zucker Hillside Hospital Behavioral Health Pavilion II Project. The bond proceeds would also be used to fund other various construction, renovation, and modernization projects at Northwell Health facilities in New York City, Westchester County, and Long Island, as described below.

***Long Island Jewish Medical Center – Zucker Hillside Hospital
Behavioral Health Pavilion II Project***

The Proposed Project would involve the construction of a new, approximately 102,000-gross-square-foot ("gsf"), three-story, 68-bed, in-patient psychiatric facility serving adult and geriatric patients at the Long Island Jewish Medical Center's Zucker Hillside Hospital, located at 75-69 263rd Street, Glen Oaks, Queens County, New York.

The Proposed Project would be constructed adjacent to the existing Behavioral Health Pavilion and would comply with all applicable New York State Department of Health ("DOH") and New York State Office of Mental Health ("OMH") codes and regulations, as well as New York City building and life safety code requirements. All building systems, including fire alarm, fire protection, electrical service, emergency electrical service, electrical distribution and lighting, plumbing, information technology, security cameras, access control, and all related furnishings and equipment, would be newly installed. The Proposed Project would also include centralized, stand-alone mechanical systems. The Proposed Project would not include imaging services, medical treatment spaces (other than typical exam rooms), or other specialty services, all of which are provided elsewhere on the Long Island Jewish Medical Center's Zucker Hillside Hospital campus. Parking needs for the Proposed Project would include 168 new parking spots to replace the existing parking lot within the development site.

Other New Money Projects

Proceeds from the proposed bond issuance may also be used to fund various construction, renovation, and modernization projects for certain members of the Obligated Group, including the following projects:

Glen Cove Hospital – 101 St. Andrews Lane, Glen Cove, Nassau County. The bond proceeds would be used for the following:

- Upgrade and replace the existing hospital roof.

Lenox Hill Hospital – 210 East 64th Street, 30 7th Avenue, and 1345 3rd Avenue, Manhattan, New York County. The bond proceeds would be used for the following:

- Upgrade electrical systems, sprinkler systems, and complete various foundation work at the Hospital's 210 East 64th Street location;
- Configure a new Cardiac Catheterization Lab from existing shell space and electrical infrastructure upgrades at the Hospital's 30 7th Avenue location; and
- Build out of a new, approximately 48,736-gsf extension clinic at 1345 3rd Avenue on the Upper East Side of Manhattan (Third Avenue between 76th and 77th streets). The new extension clinic would provide Radiation Oncology, infusions services, imaging, laboratory and pharmacy services to support these functions.

Long Island Jewish Medical Center – 270-05 76th Avenue, New Hyde Park, Nassau County. The bond proceeds would be used for the following:

- Replace existing linear accelerator machine;
- Convert existing space into an Interventional Radiology Lab with new equipment and a new separate control room; and
- Upgrade existing emergency generators and replace existing fire protection system.

Long Island Jewish Medical Center, Forest Hills Hospital – 102-01 66th Road, Forest Hills, Queens County. The bond proceeds would be used for the following:

- Upgrade existing sprinkler system.

Long Island Jewish Medical Center, Valley Stream Hospital – 900 Franklin Avenue, Valley Stream, Nassau County. The bond proceeds would be used for the following:

- Renovate and expand the Emergency Department;
- Renovate and repair the parking garage;
- Complete various structural upgrades including mechanical, electrical, and plumbing; and
- Upgrade and replace the existing hospital roof.

Long Island Jewish Medical Center, Zucker Hillside Hospital – 75-59 263rd Street, Glen Oaks, Queens County. The bond proceeds would be used for the following:

- Renovate existing facility space to accommodate the needs of the Psychiatric Patient Care Program.

John T. Mather Memorial Hospital – 75 North Country Road, Port Jefferson, Suffolk County. The bond proceeds would be used for the following:

- Upgrade and modernize existing emergency generators.

North Shore University Hospital – 221 Jericho Turnpike, Syosset, Nassau County. The bond proceeds would be used for the following:

- Upgrade existing chilled water system; and
- Complete various structural upgrades including mechanical, electrical, and plumbing.

Northern Westchester Hospital – 400 East Main Street, Mount Kisco, Westchester County. The bond proceeds would be used for the following:

- Replace the existing boilers and tanks.

Central Suffolk Hospital d/b/a Peconic Bay Medical Center – 1 Heroes Way, Riverhead, Suffolk County. The bond proceeds would be used for the following:

- Upgrade and modernize existing fire alarm system and electrical distribution system (including a new generator).

Phelps Memorial Hospital Association – 701 North Broadway, Tarrytown, Westchester County. The bond proceeds would be used for the following:

- Upgrade and modernize both of the existing normal and emergency power systems.

South Shore University Hospital – 301 East Main Street, Bay Shore, Suffolk County. The bond proceeds would be used for the following:

- Build out of a four-story, approximately 33,480-gsf building (the “Connector Building”) to provide campus-wide infrastructure connections and improved circulation for patients, staff, and supplies. The building would also offer hospital support functions, a patient waiting area, mechanical connections, shell space, and a new central sterile processing program;
- Renovate existing Electrophysiology Lab with new equipment and infrastructure upgrades; and
- Upgrade and replace air handling unit, chillers, cooling tower, and boilers.

Staten Island University Hospital – 475 Seaview Avenue and 375 Seguire Avenue, Staten Island, Richmond County. The bond proceeds would be used for the following:

- Modernize existing Neonatal Intensive Care Unit;
- Upgrade air handling units, elevators, and emergency power connections; and
- Replace existing Electrophysiology Lab equipment.

Together, these various project elements constitute the “Proposed Project” for purposes of SEQR compliance.

Description of the Institution

Northwell Health, Inc. (“NHI”), together with its member corporations and affiliated entities, constitutes an integrated healthcare delivery system serving the greater metropolitan New York area, and is comprised of 21 hospitals, two long-term care facilities, certified home health care agencies, a hospice network, over 900 ambulatory and physician practice locations, the Feinstein Institute for Medical Research and other entities (collectively referred to as the “System”). With over 90,000 employees, the System is the largest employer and largest health system in New

York State. NHI is the corporate parent of the System. Northwell Inc., (the “Corporation”) is the parent of NHI. Effective May 1, 2025, the Corporation became the sole corporate member of Nuvance Health (“Nuvance”). The Corporation, as the parent of NHI and Nuvance, has the same legal authority over, and responsibilities to, both NHI and Nuvance. NHI and Nuvance report financials separately, and neither is liable for the other’s obligations.

The members of the Obligated Group, each of which is part of the System, include: Long Island Jewish Medical Center, North Shore University Hospital, Glen Cove Hospital, Plainview Hospital, Northwell Health Stern Family Center for Rehabilitation, South Shore University Hospital (formerly Southside Hospital), Huntington Hospital Association, Staten Island Hospital, Lenox Hill Hospital, Mather Hospital, Northern Westchester Hospital, Central Suffolk Hospital d/b/a Peconic Bay Medical Center (“Peconic”), Phelps Hospital, and Northwell Healthcare, Inc. (“HCI”). Mather Hospital, Northern Westchester Hospital, Peconic and Phelps Hospital joined the Obligated Group in 2024.

As noted above, NHI is the corporate parent of the System and is not a member of the Obligated Group. Under NHI is HCI, which is the parent holding company of each of the referenced members of the Obligated Group. HCI is both a member of, and a representative for, the Obligated Group.

Reasons Supporting This Determination

Overview. DASNY completed this environmental review in accordance with the procedures set forth in the *State Environmental Quality Review Act* (“SEQRA”), codified at Article 8 of the *New York Environmental Conservation Law* (“ECL”), and its implementing regulations, promulgated at Part 617 of Title 6 of the *New York Codes, Rules and Regulations* (“N.Y.C.R.R.”), which collectively contain the requirements for the SEQR process. Generally accepted industry standards with respect to environmental analysis methodologies and impact criteria for evaluating the Proposed Project were employed to assess potential impacts.

The Proposed Project was also reviewed in conformance with the *New York State Historic Preservation Act of 1980* (“SHPA”), especially the implementing regulations of Section 14.09 of the *Parks, Recreation and Historic Preservation Law* (“PRHPL”), as well as with the requirements of the Memorandum of Understanding (“MOU”), dated March 18, 1998, between DASNY and the New York State Office of Parks, Recreation and Historic Preservation (“OPRHP”).

Additionally, the Proposed Project was analyzed for consistency with the State of New York *Smart Growth Public Infrastructure Policy Act* (“SGPIPA”), Article 6 of the New York ECL, for a variety of policy areas related to land use and sustainable development. The *Smart Growth Impact Statement Assessment Form* (“SGISAF”) is included with this determination.

SEQRA Determination. Representatives of DASNY reviewed the *Short Environmental Assessment Form* (“SEAF”)—Part 1, dated July 3, 2026, that was prepared for the *Zucker Hillside Hospital Behavioral Health Pavilion II* project by representatives of Northwell Health, and

determined that the project constitutes an Unlisted action pursuant to 6 N.Y.C.R.R. Part 617.2 (an) of the SEQR implementing regulations. On July 3, 2026, DASNY circulated a lead agency request letter, including the SEAF – Part 1 as well as a *Distribution List of Involved Agencies and Interested Parties* to whom the lead agency letter was sent. There being no objection to DASNY assuming SEQR lead agency status, a coordinated review among the involved agencies was initiated.

DASNY representatives reviewed the SEAF – Part 1, including relevant supplemental documentation that analyzed potential environmental impacts associated with the Proposed Project (attached). DASNY subsequently completed an evaluation of the magnitude and importance of project impacts, as detailed in SEAF – Parts 2 and 3 (see attached). **Based on the above, and the additional information set forth below, DASNY as lead agency has analyzed the relevant areas of environmental concern and determined that the Zucker Hillside Hospital Behavioral Health Pavilion II project would not have a significant adverse effect on the environment.**

It has also been determined that the additional Proposed Project components to be funded with the bond proceeds are Type II actions under SEQR as they would involve the following activities:

- *Maintenance or repair involving no substantial changes in an existing structure or facility, which is a Type II action as specifically designated by 6 N.Y.C.R.R. § 617.5(c)(1);*
- *Replacement, rehabilitation or reconstruction of a structure or facility, in kind, on the same site, including upgrading buildings to meet building, energy, or fire codes unless such action meets or exceeds any of the thresholds in Part 617.4, which is a Type II action as specifically designated by 6 N.Y.C.R.R. § 617.5(c)(2);*
- *Refinancing existing debt, which is a Type II action as specifically designated by 6 N.Y.C.R.R. § 617.5(c)(29); and*
- *Purchase or sale of furnishings, equipment, or supplies, including surplus government property, other than the following: land, radioactive material, pesticides, herbicides, or other hazardous materials, which is a Type II action as specifically designated by 6 N.Y.C.R.R. § 617.5(c)(31).*

Type II “actions have been determined not to have significant impact on the environment or are otherwise precluded from environmental review under Environmental Conservation Law, article 8.”¹ Therefore, no further SEQR determination or procedure is required for a Proposed Project identified as Type II.

SHPA Determination. As noted above, the Proposed Project was reviewed in conformance with the SHPA, Section 14.09 of the PRHPL, as well as with the requirements of the MOU between DASNY and OPRHP. OPRHP is an Interested Agency for the purposes of this SEQR review.

According to the New York State Cultural Resources Inventory System (“CRIS”), the Zucker

¹ 6 N.Y.C.R.R. § 617.5(a)

Hillside Hospital campus has no historic designation. There are no cultural resources adjacent to the Project Site that are listed in or eligible for listing in the State and/or National Registers of Historic Places ("S/NR").

The Proposed Project was submitted to OPRHP for review (OPRHP №. 22PR06780) and, in a letter dated September 16, 2022, it was stated there would be no impact on any properties or historic or cultural resources as a result of this project (see attached). It is the opinion of DASNY that the Proposed Project would have no adverse impact on historical or cultural resources in or eligible for inclusion in the S/NR.

SGPIPA Determination. DASNY's Smart Growth Advisory Committee reviewed the *SGISAF* that was prepared in accordance with the *SGPIPA* and found that, to the extent practicable, the Proposed Project would be consistent with and would be generally supportive of the smart growth criteria established by the legislation. The compatibility of the Proposed Project with the criteria of the *SSGPIPA*, Article 6 of the *ECL*, is detailed in the *SGISAF* (see *SEAF Supplemental Report, Attachment A*). In general, the Proposed Project would be in compliance with the relevant State and local public policy initiatives that guide development within the project area.

General Findings. The Proposed Project would help to address the need for additional space for adult and geriatric patients at Zucker Hillside Hospital through the construction of a new, 68-bed facility. Zucker Hillside Hospital is a renowned behavioral health facility and provides treatment for adolescent, adult, geriatric, and women's perinatal psychiatry.

The Proposed Project would relocate 68 of 94 beds from the Morris Lowenstein building to the Behavioral Health Pavilion and serve patients in both locations. There would be no increase in the total number of patients served by both the new and existing buildings. Additionally, the Proposed Project would include new parking facilities with a total of 168 parking spots, 114 of which would be located at the Behavioral Health Pavilion and 54 of which would be located along 263rd Street. The Proposed Project is a permitted use under the New York City Zoning Resolution (i.e., it would be constructed on an "as-of-right" basis).

Potential Impacts. DASNY, as lead agency, has inventoried all potential resources that could be affected by the Proposed Project or action, and assessed the magnitude, duration, likelihood, scale, and context of the Proposed Project and determined that no impact, or a small impact, may occur to the following resources: Land Use, Zoning and Public Policy, Socioeconomics, Community Facilities, Open Space and Recreational Facilities, Cultural Resources, Architectural Design and Visual Resources, Neighborhood Character, Natural Resources, Hazardous Materials, Infrastructure, Solid Waste and Sanitation Services, Use and Conservation of Energy, Transportation, Air Quality, Noise, Construction, and Disadvantaged Communities (see *SEAF Supplemental Report*). No potential negative long-term or cumulative impacts or significant adverse environmental impacts were identified in connection with the Proposed Project.

As identified in the *SEAF – Part 2*, the Proposed Project would result in small, minor impacts on land. Site preparation would consist of localized excavation to establish grade and extents for the Proposed Project, including footings, pavement bases, and utilities. During construction of

the Proposed Project, the ground surface near open excavations would be sloped away to reduce any surface water flowing into excavated areas.

During the construction phase, soil stabilization measures would be implemented to reduce soil movement and potential erosion during construction. Since the Proposed Project is expected to disturb more than one acre of land, the Proposed Project would be subject to New York State Department of Environmental Conservation ("NYSDEC") Stormwater Regulations and would require a *State Pollutant Discharge Elimination System ("SPDES") General Permit for Stormwater Discharges from Construction Activity* from New York State Department of Environmental Conservation ("NYSDEC"). A Stormwater Pollution Prevention Plan ("SWPPP") would be prepared and implemented in accordance with the permit. As such, no significant adverse impacts related to land disturbance would occur as a result of the Proposed Project.

A Phase I Environmental Site Assessment ("ESA") completed in 2022 by VHB identified one Recognized Environmental Condition ("REC") related to the potential presence of former underground storage tanks ("USTs") and recommended additional investigation prior to redevelopment. Any necessary environmental due diligence and site investigations would be completed prior to construction, and any identified environmental conditions would be addressed in accordance with all applicable regulatory requirements. Accordingly, the Proposed Project would not result in significant adverse hazardous materials impacts.

The Proposed Project would be completed in one phase with occupancy anticipated in August 2028. The anticipated construction period is approximately 22 months.

Summary. DASNY has reviewed the Proposed Project using criteria provided in Part 617.7 of SEQRA and has determined that:

- (i) there will be no substantial adverse change in existing air quality, ground or surface water quality or quantity, traffic or noise levels; no substantial increase in solid waste production; and no substantial increase in potential for erosion, flooding, leaching or drainage problems;
- (ii) there will be no removal or destruction of large quantities of vegetation or fauna; no substantial interference with the movement of any resident or migratory fish or wildlife species; no impacts on a significant habitat area; no substantial adverse impacts on a threatened or endangered species of animal or plant, or the habitat of such a species; or other significant adverse impacts to natural resources;
- (iii) there will be no impairment of the environmental characteristics of a Critical Environmental Area as designated pursuant to subdivision 617.14(g) of this Part;
- (iv) there will be no creation of a material conflict with a community's current plans or goals as officially approved or adopted;

- (v) there will be no impairment of the character or quality of important historical, archeological, architectural, or aesthetic resources or of existing community or neighborhood character;
- (vi) there will be no major change in the use of either the quantity or type of energy;
- (vii) there will be no creation of a hazard to human health;
- (viii) there will be no substantial change in the use, or intensity of use, of land including agricultural, open space or recreational resources, or in its capacity to support existing uses;
- (ix) there will be no encouraging or attracting of a large number of people to a place or places for more than a few days, compared to the number of people who would come to such place absent the action;
- (x) there will be no creation of a material demand for other actions that would result in one of the above consequences;
- (xi) there will be no changes in two or more elements of the environment, no one of which has a significant impact on the environment, but when considered together result in a substantial adverse impact on the environment;
- (xii) there will not be two or more related actions undertaken, funded or approved by an agency, none of which has or would have a significant impact on the environment, but when considered cumulatively would meet one or more of the criteria in this subdivision;
- (xiii) there will be no action that may cause or increase a disproportionate pollution burden on a disadvantaged community; and
- (xiv) there will be no other significant adverse environmental impacts.

Based on the above, and the additional information contained herein, DASNY, as lead agency, analyzed the relevant areas of environmental concern and determined that the Proposed Project would not have a significant adverse impact on the environment and a Draft Environmental Impact Statement will not be prepared.

For Further Information:

Contact Person: Matthew A. Stanley, AICP
Director
Office of Environmental Affairs

Address: DASNY
28 Liberty Street, 55th Floor
New York, New York 10005

Telephone: (917) 923-7303

Email: mstanley@dasny.org

Short Environmental Assessment Form

Part 1 - Project Information

Instructions for Completing

Part 1 – Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

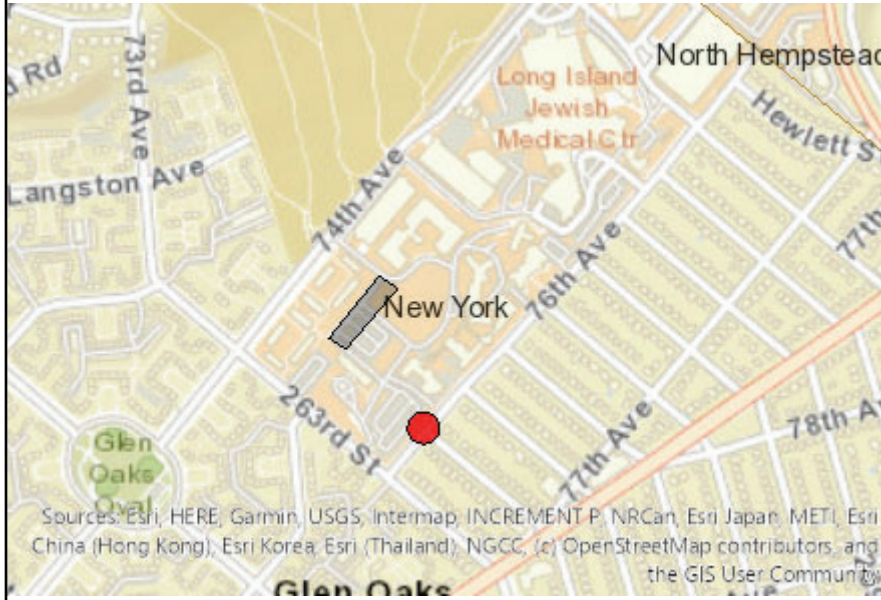
Complete all items in Part 1. You may also provide any additional information you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Part 1 – Project and Sponsor Information			
Name of Action or Project: Northwell Health -- Zucker Hillside Hospital Behavioral Health Pavilion II			
Project Location (describe, and attach a location map): 75-59 263rd Street, Glen Oaks, Queens County, New York (Block 8520, Lot 2)			
Brief Description of Proposed Action: The Proposed Action would involve DASNY's authorization of the issuance of tax-exempt bonds to finance the proposed construction of a new, approximately 102,000-gross-square-foot ("gsf"), three-story, 68 bed in-patient psychiatric facility serving adult and geriatric patients at the Long Island Jewish Medical Center, Zucker Hillside Hospital (the "Proposed Project"). The Proposed Project would comply with all applicable New York State Department of Health ("DOH") and New York State Office of Mental Health ("OMH") codes and regulations, as well as New York City building and life safety code requirements. All building systems, including fire alarm, fire protection, electrical service, emergency electrical service, electrical distribution and lighting, plumbing, information technology, security cameras, access control, and all related furnishings and equipment, would be newly installed. The Proposed Project would also include centralized, stand-alone mechanical systems. The Proposed Project would not include imaging services, medical treatment spaces (other than typical exam rooms), or other specialty services, all of which are provided elsewhere on the Long Island Jewish / Zucker Hillside Hospital campus. Parking needs for the Proposed Project would include 168 new parking spots to replace the existing parking lot within the development site. The Project Site is located immediately west of the Hospital's existing Behavioral Health Pavilion at 75-59 263rd Street (Block 8520, Lot 2), Glen Oaks, Queens County, New York.			
Name of Applicant or Sponsor:		Telephone: (516) 314-8103	
Northwell Health / Alexandra Vigliarolo, RA, AIA		E-Mail: AVigliarolo@northwell.edu	
Address: 600 Community Drive, Suite 202			
City/PO: Manhasset		State: New York	Zip Code: 11030
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation?		NO	YES
If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If No, continue to question 2.		☒	☐
2. Does the proposed action require a permit, approval or funding from any other government Agency?		NO	YES
If Yes, list agency(s) name and permit or approval: Certificate of Need submitted to the NYS Department of Health		☐	☒
3. a. Total acreage of the site of the proposed action?		6.45	acres
b. Total acreage to be physically disturbed?		6.45	acres
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		44	acres
4. Check all land uses that occur on, are adjoining or near the proposed action: ☒ Urban ☐ Rural (non-agriculture) ☐ Industrial ☐ Commercial ☒ Residential (suburban) ☐ Forest ☐ Agriculture ☐ Aquatic ☒ Other(Specify): Hospital ☐ Parkland			

5. Is the proposed action,	NO	YES	N/A
a. A permitted use under the zoning regulations?	☐	☒	☐
b. Consistent with the adopted comprehensive plan?	☐	☒	☐
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO	YES	
	☐	☒	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area?	NO	YES	
If Yes, identify:	☒	☐	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO	YES	
	☒	☐	
b. Are public transportation services available at or near the site of the proposed action?	☐	☒	
c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	☐	☒	
9. Does the proposed action meet or exceed the state energy code requirements?	NO	YES	
If the proposed action will exceed requirements, describe design features and technologies: The new facility would meet state energy code requirements.	☐	☒	
10. Will the proposed action connect to an existing public/private water supply?	NO	YES	
If No, describe method for providing potable water: _____	☐	☒	
11. Will the proposed action connect to existing wastewater utilities?	NO	YES	
If No, describe method for providing wastewater treatment: _____	☐	☒	
12. a. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on the National or State Register of Historic Places, or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places?	NO	YES	
	☒	☐	
b. Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory?	☒	☐	
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency?	NO	YES	
	☒	☐	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?	☒	☐	
If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____			

14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: ☐ Shoreline ☐ Forest ☐ Agricultural/grasslands ☐ Early mid-successional ☐ Wetland ☒ Urban ☐ Suburban		
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered? Peregrine Falcon. The Proposed Project would be constructed in a densely developed area within an area of the site that is currently used as parking. The construction of a new building in this area would not affect plant or animal species, nor would it affect habitat for plant and animal species.	NO	YES
	☐	☒
16. Is the project site located in the 100-year or 500-year flood plain?	NO	YES
	☒	☐
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes, a. Will storm water discharges flow to adjacent properties? b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: The project will tie into the city's storm water system; on-site storm water management will be introduced to minimize runoff.	NO	YES
	☐	☒
	☒	☐
	☐	☒
18. Does the proposed action include construction or other activities that would result in the impoundment of water or other liquids (e.g., retention pond, waste lagoon, dam)? If Yes, explain the purpose and size of the impoundment:	NO	YES
	☒	☐
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe:	NO	YES
	☒	☐
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe:	NO	YES
	☒	☐
21. Is the project located within, or within ½ mile of, a disadvantaged community? If No, could impacts from the project affect a disadvantaged community? If Yes to either question in 21, answer the following question. a. Identify the potential pollution impacts of the project, either direct or indirect, that may occur within the disadvantaged community (e.g., wastewater discharges, air emissions, noise, odors, solid or hazardous waste generation or management):	NO	YES
	☒	☐
	☐	☐
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE Applicant/sponsor/name: <u>Northwell Health, Alexandra Vigliarolo, RA, AIA</u> Date: <u>July 2, 2026</u> Signature: <u>Alexandra Vigliarolo</u> Title: <u>Senior Director, Design & Construction</u>		

Digitally signed by Alexandra Vigliarolo
 DN: C=US, E=avigliarolo@northwell.edu,
 O=Northwell, OU=Northwell, CN=Alexandra Vigliarolo
 Date: 2026.07.02 12:10:48-04'00'



Disclaimer: The EAF Mapper is a screening tool intended to assist project sponsors and reviewing agencies in preparing an environmental assessment form (EAF). Not all questions asked in the EAF are answered by the EAF Mapper. Additional information on any EAF question can be obtained by consulting the EAF Workbooks. Although the EAF Mapper provides the most up-to-date digital data available to DEC, you may also need to contact local or other data sources to confirm data provided by the Mapper or to obtain data not provided by the Mapper.



Part 1 / Question 7 [Critical Environmental Area]	No
Part 1 / Question 12a [National or State Register of Historic Places or State Eligible Sites]	No
Part 1 / Question 12b [Archeological Sites]	No
Part 1 / Question 13a [Wetlands or Other Regulated Waterbodies]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
Part 1 / Question 15 [Threatened or Endangered Animal]	Yes
Part 1 / Question 15 [Threatened or Endangered Animal - Name]	Peregrine Falcon
Part 1 / Question 16 [100 or 500 Year Floodplain]	No
Part 1 / Question 20 [Remediation Site]	No
Part 1 / Question 21 [Disadvantaged Community]	No

Project:

Date:

Short Environmental Assessment Form

Part 2 - Impact Assessment

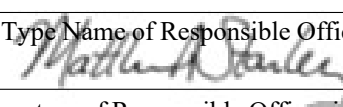
Part 2 is to be completed by the Lead Agency.

Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept “Have my responses been reasonable considering the scale and context of the proposed action?”

	No, or small impact may occur	Moderate to large impact may occur
1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations?	☐	☐
2. Will the proposed action result in a change in the use or intensity of use of land?	☐	☐
3. Will the proposed action impair the character or quality of the existing community?	☐	☐
4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?	☐	☐
5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway?	☐	☐
6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities?	☐	☐
7. Will the proposed action impact existing:	☐	☐
a. public / private water supplies?	☐	☐
b. public / private wastewater treatment utilities?	☐	☐
8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?	☐	☐
9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?	☐	☐
10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?	☐	☐
11. Will the proposed action create a hazard to environmental resources or human health?	☐	☐
12. Is the potentially affected disadvantaged community identified as having comparatively higher burdens or vulnerabilities by the Disadvantaged Community Assessment Tool (https://on.ny.gov/DACAT) ?	☐	☐
13. Will the proposed action cause or increase a pollution burden within a disadvantaged community?	☐	☐

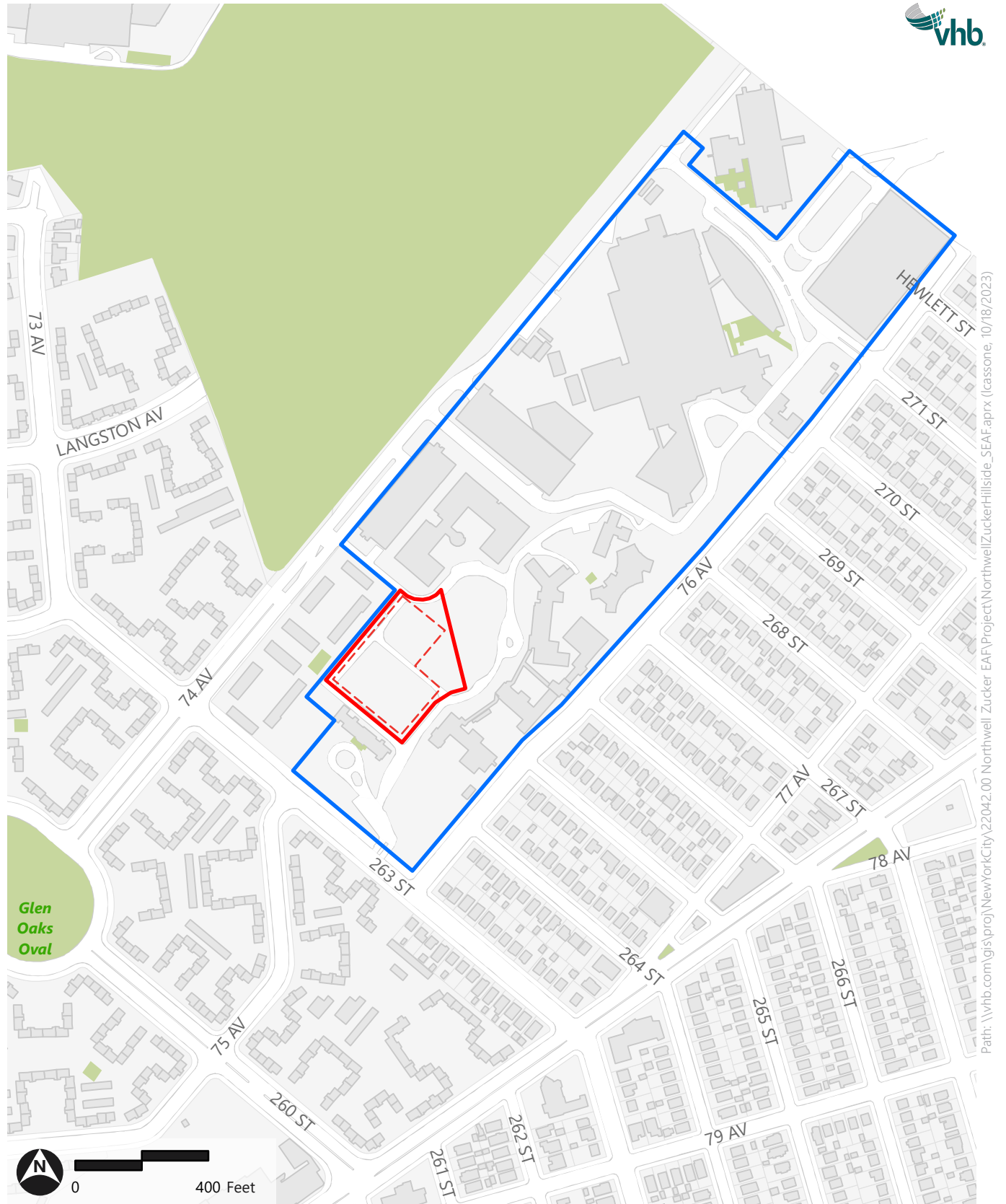
Short Environmental Assessment Form Part 3 Determination of Significance

For every question in Part 2 that was answered “moderate to large impact may occur,” or if there is a need to explain why a particular element of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. Part 3 should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. Part 3 should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

☐ Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.	
☐ Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action will not result in any significant adverse environmental impacts.	
Name of Lead Agency	Date
Print or Type Name of Responsible Officer in Lead Agency 	Title of Responsible Officer in Lead Agency <i>Elisabeth Draper</i>
Signature of Responsible Officer in Lead Agency	Signature of Preparer (if different from Responsible Officer)

Site Location Map

Long Island Jewish Medical Center – Zucker Hillside Hospital Campus SEQRA EAF



- Development Site
- Proposed Development
- Project Area
- Building Footprint
- Open Space

Path: \\vhb.com\gis\proj\NewYorkCity\22042.00 Northwell Zucker EAF\Project\NorthwellZuckerHillside_SEAF.aprx (lcassone, 10/18/2023)



Supplemental Analyses

Additional Technical Information for SEQRA Short EAF

Long Island Jewish Medical Center (LIJMC) – Zucker Hillside Hospital (the applicant) is submitting a Certificate of Need (CON) to the New York State Department of Health (DOH) to facilitate the construction of a new building (the Behavioral Health Pavilion) with approximately 68 beds in the LIJMC – Zucker Hillside Hospital Campus at 270-05 76th Avenue in Queens (Block 8520, Lot 2). The proposed development would relocate 68 of 94 beds from the Morris Lowenstein building to the Behavioral Health Pavilion and serve patients in both locations. There is no increase in the total number of patients served by both the new and existing buildings. Additionally, the proposed project would include new parking facilities with a total of 168 parking spots, 114 of which would be located at the Behavioral Health Pavilion and 54 of which would be located along 263rd Street. The proposed development is a permitted use under the New York City Zoning Resolution (i.e., it would be constructed on an “as-of-right” basis). Other than the CON, no other discretionary approvals are required. The project would be fully financed from LIJMC – Zucker Hillside Hospital’s capital budget.

Provided below are preliminary screening analyses, conducted based on the analysis guidance and methodologies presented in the *2021 City Environmental Quality Review (CEQR) Technical Manual*. This section is provided in order to assess whether further analysis of a given technical area is necessary to determine the potential for significant adverse impacts to the environment in each of the technical areas discussed below. This section provides preliminary screening analyses to determine whether further assessment of a given technical area is necessary.

Land Use, Zoning, and Public Policy

According to the *2021 CEQR Technical Manual*, a land use analysis is warranted for projects that would affect land use or change zoning on a site. Because the proposed development would not affect land use or change zoning, and because the proposed development could be constructed on an as-of-right basis on the existing hospital campus, no further analysis is warranted.

Neighborhood Character

As discussed in the *2021 CEQR Technical Manual*, an analysis of neighborhood character is warranted when a project has the potential to result in significant adverse impacts in any of the following technical areas: land use, zoning, and public policy; socioeconomic conditions; open space; historic and cultural resources; urban design and visual resources; shadows; transportation; or noise. In addition, an assessment may be warranted when there is a combination of moderate effects in these technical areas that, when considered together, may affect the defining elements of neighborhood character. Because the proposed development would not result in significant adverse impacts in these analysis areas, no further analysis is warranted.

Transportation

According to the *2021 CEQR Technical Manual*, detailed transportation analyses may be warranted if a proposed project results in 50 or more vehicle trips and/or 200 or more transit/pedestrian trips during a given peak hour. The proposed development would not result in a change to the number of hospital beds as compared to existing conditions and therefore would not result in a change in vehicle, transit, or pedestrian trips. Therefore, no further analysis is warranted.

Energy

According to the *2021 CEQR Technical Manual*, a detailed assessment of energy impacts is only required for projects that would significantly affect the transmission or generation of energy or that would result in substantial consumption of energy. The proposed development would not affect the transmission or generation of energy. Because the proposed development would not result in a substantial increase of hospital beds over the existing conditions, and because the new facility would be more energy efficient than the two existing hospital buildings, it would not be expected to generate an incremental increase in energy consumption. Therefore, no further analysis is warranted.

Water and Sewer Infrastructure

According to the *2021 CEQR Technical Manual*, a water and sewer infrastructure assessment analyzes whether a proposed action may adversely affect New York City's water distribution or sewer system and, if so, assesses the effects of the action to determine whether the impact is significant.

Water Supply

According to the *CEQR Technical Manual*, a preliminary water supply infrastructure analysis is necessary if the project would result in an exceptionally large demand for water (i.e., over 1 million gallons per day [gpd]), or if the project is located in an area that experiences low water pressure (i.e., areas at the end of the water supply distribution system such as the Rockaway Peninsula and Coney Island). The proposed development would not result in an exceptionally large demand for water, nor is it located in an area that experiences low water pressure. Additionally, the proposed development would replace two existing buildings to be demolished, allowing for potential efficiencies that would result in water savings as compared to existing conditions. Therefore, no further analysis is warranted.

Wastewater and Stormwater

With regard to wastewater and stormwater conveyance, the *2021 CEQR Technical Manual* states that a preliminary infrastructure analysis would be needed if a project that is located in a combined sewer area within Queens would result in incremental development over the No-Action scenario of more than 400 residential units or 150,000 sf of commercial, public facility, and institution and/or community facility space.

The proposed development would not result in a change in hospital beds as compared to the existing conditions. It would not introduce a residential population, nor would it introduce new

commercial, public facility, and institution and/or community facility space. Therefore, no further analysis is warranted.

Historic and Cultural Resources

According to the *CEQR Technical Manual*, a historic and cultural resources assessment is warranted if there is the potential to affect either archaeological or architectural resources; the manual further recommends that a historic resources assessment be prepared if a proposed action would result in any of the following actions: in-ground disturbance; new construction, demolition, or significant physical alteration of any building, structure, or object; the change in scale, visual prominence, or visual context of any building, structure, or object or landscape feature; or the screening or elimination of publicly accessible views, even if no known historic resources are located nearby.

Archaeological resources are physical remains, usually subsurface, of the prehistoric, Native American, and historic periods—such as burials, foundations, artifacts, wells, and privies. Archaeological resources are considered only in those areas where new in-ground disturbance is likely to occur. The proposed project includes construction of a new building on an area of the site that has previously been disturbed (an existing parking lot). Furthermore, in a letter from the New York State Historic Preservation Office (SHPO) dated September 16, 2022, SHPO stated that “no properties, including archaeological and/or historic resources, listed in or eligible for the New York State and National Registers of Historic Places will be impacted by this project.” Therefore, an assessment of archaeological resources is not warranted.

Architectural resources generally include historically important buildings, structures, objects, sites, and districts. Historic and cultural resources include designated New York City Landmarks (NYCLs) and Historic Districts; properties calendared for consideration as NYCLs by the New York City Landmarks Preservation Commission (LPC) or determined eligible for NYCL designation (NYCL-eligible); properties listed on the State and National Register of Historic Places (S/NR) or formally determined eligible for S/NR listing (S/NR-eligible), or properties contained within a S/NR listed or eligible district; properties recommended by the New York State Board for listing on the S/NR; National Historic Landmarks (NHLs); and potential historic resources (i.e., properties not identified by one of the programs listed above, but that appear to meet their eligibility requirements). Based on a review of the NYS Cultural Resource Information System (CRIS), there are no architectural resources on the LIJMC – Zucker Hillside Hospital campus or within a 400-foot radius of the site. In a letter from SHPO dated September 16, 2022, SHPO stated that “no properties, including archaeological and/or historic resources, listed in or eligible for the New York State and National Registers of Historic Places will be impacted by this project.” Therefore, further analysis of historic and cultural resources is not warranted.

Natural Resources

As stated in the *2021 CEQR Technical Manual*, a natural resource is defined as a plant or animal species and any area capable of providing habitat for plant and animal species or capable of functioning to support environmental systems and maintain the City’s environmental balance (e.g., surface and groundwater, wetlands, landscaped areas, gardens, and built structures used by wildlife). An assessment of natural resources is appropriate if a natural resource exists on or near the project site, or if there is a potential for impacts related to stormwater and shadows.

The proposed development would be constructed on an area of the site that is currently used as parking. As such, the construction of a new building in this area would not represent it would not affect plant or animal species, nor would it affect habitat for plant and animal species. Therefore, no further analysis is warranted.

Solid Waste and Sanitation Services

The *2021 CEQR Technical Manual* states that an assessment of solid waste and sanitation services is warranted if an action would have the potential to result in a substantial increase in solid waste production that could overburden available waste management capacity or otherwise be inconsistent with the City's Solid Waste Management Plan (SWMP) or with state policy related to the City's integrated solid waste management system. According to the *2021 CEQR Technical Manual*, actions resulting in substantial waste generation, defined as 50 tons (100,000 pounds) per week or more, warrant additional analysis for effects on solid waste and sanitation services. The proposed development will not result in a substantial incremental increase in waste generation as compared to existing conditions. Therefore, no further analysis is warranted.

Hazardous Materials

According to the *2021 CEQR Technical Manual*, a hazardous materials assessment is conducted when elevated levels of hazardous materials exist on a site, when an action would increase pathways to their exposure, either human or environmental, or when an action would introduce new activities or processes using hazardous materials, thereby increasing the risk of human or environmental exposure. Because the proposed development would involve in-ground disturbance, a Phase I Environmental Site Assessment (ESA) was conducted by VHB. The draft Phase I ESA was issued on October 5, 2022. The Phase I ESA found:

- › One recognized environmental condition (REC) and one vapor encroachment condition for the potential existence of underground storage tanks (USTs) related to the site's former heat sources; and,
- › Several business environmental risks (BERs) related to a tank test failure for a No. 4 fuel oil UST, potential presence of pesticides, arsenic and/or lead related to historic agricultural use, contaminated urban historic fill, and buildings with the potential for asbestos-containing materials and/or lead-based paint.

Additional investigation is recommended to investigate the aforementioned REC. The BERs represent a condition at the Site that may have an environmentally driven impact on the current or planned use of the Site but does not constitute an REC or de minimis condition as defined in the American Society of Testing and Materials (ASTM) E 1527-13, *Standard Practice for Environmental Site Assessments: Phase I Environmental Site Assessment Process* (the Standard).

A review of historic resources including Sanborn maps and aerial photographs indicated five structures were present on the subject property by at least 1953. Supporting documentation regarding the former heating source(s) of the current and former structures was not identified or provided to VHB; therefore, the potential exists for UST(s) to be present at the subject property. To investigate the presence of potential unknown USTs, a geophysical survey across open and accessible areas of the Site using ground penetrating radar (GPR) and electromagnetic (EM) technology is

recommended. Since the potential exists for UST(s) to have been present at the Site and represents a potential source of on-site vapor migration, installation of a vapor barrier membrane below the proposed building foundation slab is recommended. The vapor barrier membrane also serves as a mitigation measure against future potential soil vapor intrusion from off-site sources.



Parks, Recreation, and Historic Preservation

KATHY HOCHUL
Governor

ERIK KULLESEID
Commissioner

September 16, 2022

Nira Rahman
One Penn Plaza
New York, NY 10119

Re: DASNY
Northwell Health Queens Zucker Campus Demolition and New Construction
270-05 76th Avenue, Queens, NY
22PR06780

Dear Nira Rahman:

Thank you for requesting the comments of the Office of Parks, Recreation and Historic Preservation (OPRHP). We have reviewed the project in accordance with the New York State Historic Preservation Act of 1980 (Section 14.09 of the New York Parks, Recreation and Historic Preservation Law). These comments are those of the OPRHP and relate only to Historic/Cultural resources. They do not include potential environmental impacts to New York State Parkland that may be involved in or near your project. Such impacts must be considered as part of the environmental review of the project pursuant to the State Environmental Quality Review Act (New York Environmental Conservation Law Article 8) and its implementing regulations (6 NYCRR Part 617).

Based upon this review, it is the opinion of OPRHP that no properties, including archaeological and/or historic resources, listed in or eligible for the New York State and National Registers of Historic Places will be impacted by this project.

If further correspondence is required regarding this project, please be sure to refer to the OPRHP Project Review (PR) number noted above.

Sincerely,

A handwritten signature in black ink that reads "R. Daniel Mackay".

R. Daniel Mackay

Deputy Commissioner for Historic Preservation
Division for Historic Preservation

SMART GROWTH IMPACT STATEMENT ASSESSMENT FORM

Project Applicant:

Project #:

Project Name:

Program:

Project Location:

Completed by:

Date:

This Smart Growth Impact Statement Assessment Form ("SGISAF") is a tool to assist the applicant and the Dormitory Authority of the State of New York's ("DASNY's") Smart Growth Advisory Committee in deliberations to determine whether a project is consistent with the New York State *Smart Growth Public Infrastructure Policy Act* ("SSGPIPA"), Article 6 of the New York State *Environmental Conservation Law* ("ECL").¹ Not all questions/answers may be relevant or applicable to all projects.

Description of Proposed Action and Proposed Project:

Smart Growth Impact Assessment:

Have any other entities issued a Smart Growth Impact Statement ("SGIS") with regard to this project?	Yes	No
--	------------	-----------

1. Does the project advance or otherwise involve the use of, maintain, or improve existing infrastructure?	Yes	No
--	------------	-----------

2. Is the project located wholly or partially in a **municipal center**,² characterized by any of the following: Check all that apply:

A city or village

Within the boundaries of a generally recognized college, university, hospital or nursing-home campus

Area of concentrated and mixed land use that serves as a center for various activities including, but not limited to:

Central Business Districts

Main Streets / Downtown Areas (e.g., commercial or geographical heart of a city, or downtown/city center)

[Brownfield Opportunity Areas](#)

[Local Waterfront Revitalization Areas \(LWRPs\)](#)

Transit Oriented Development Areas

[Environmental Justice Areas](#)

[Distressed Communities](#)

¹ <https://www.nysenate.gov/legislation/laws/ENV/A6>

² DASNY interprets the term "municipal centers" to include existing, developed institutional campuses such as universities, colleges and hospitals.

3. Is the project located adjacent to municipal centers (please see question 2 above) with clearly defined borders, in an area designated for concentrated development in the future by an adopted comprehensive plan that exhibits strong land use, transportation, infrastructure and economic connections to an existing municipal center?	Yes	No NA
4. Is the project located in an area designated by a municipal or comprehensive plan, and appropriately zoned, as a future municipal center?	Yes	No NA
5. Is the project located wholly or partially in a developed area or an area designated for concentrated infill development in accordance with a municipally approved comprehensive land use plan, a local waterfront revitalization plan, brownfield opportunity area plan or other development plan?	Yes	No NA
6. Does the project preserve and enhance the state's resources, including agricultural lands, forests, surface and groundwater, air quality, recreation and open space, scenic areas, and/or significant historic and archeological resources?	Yes	No NA
7. Does the project foster mixed land uses and compact development, downtown revitalization, brownfield redevelopment, the enhancement of beauty in public spaces, the diversity and affordability of housing in proximity to places of employment, recreation and commercial development and/or the integration of all income and age groups?	Yes	No NA
8. Does the project provide mobility through transportation choices, including improved public transportation and reduced automobile dependency?	Yes	No NA
9. Does the project demonstrate coordination among state, regional, and local planning and governmental officials? ³	Yes	No NA
10. Does the project involve community-based planning and collaboration?	Yes	No NA
11. Is the project consistent with local building and land use codes?	Yes	No NA
12. Does the project promote sustainability by strengthening existing and creating new communities which reduce greenhouse gas emissions and do not compromise the needs of future generations?	Yes	No NA
13. During the development of the project, was there broad-based public involvement? ⁴	Yes	No NA
14. Does the applicant have an ongoing governance structure to sustain the implementation of community planning?	Yes	No NA
15. Does the project mitigate future physical climate risk due to sea level rise, and/or storm surges and/or flooding, based on available data predicting the likelihood of future extreme weather events, including hazard risk analysis data if applicable?	Yes	No NA

³ Demonstration may include *State Environmental Quality Review* ["SEQR"] coordination with involved and interested agencies, district formation, agreements between involved parties, letters of support, State Pollutant Discharge Elimination System ["SPDES"] permit issuance/revision notices, etc.

⁴ Documentation may include *SEQR* coordination with involved and interested agencies, SPDES permit issuance/revision notice, approval of Bond Resolution, formation of district, evidence of public hearings, *Environmental Notice Bulletin* ["ENB"] or other published notices, letters of support, etc.

SMART GROWTH IMPACT STATEMENT ASSESSMENT FORM

DASNY has reviewed the available information regarding this project and finds:

- The project was developed in general consistency with the relevant Smart Growth Criteria.
- The project was not developed in general consistency with the relevant Smart Growth Criteria.
- It was impracticable to develop this project in a manner consistent with the relevant Smart Growth Criteria for the following reasons:

Attestation:

I, President of DASNY/designee of the President of DASNY, hereby attest that the Proposed Project, to the extent practicable, meets the relevant criteria set forth above and that to the extent that it is not practical to meet any relevant criterion, for the reasons given above.



Signature/Date

Matthew A. Stanley, AICP, Director, Office of Environmental Affairs
Print Name and Title



Transaction Report Update – Adoption of Documents Northwell Health Obligated Group – Long Island, New York

July 28, 2026

PROGRAM:

Hospitals

PURPOSE:

New Money

NOT TO EXCEED AMOUNT:

\$800,000,000

NOT TO EXCEED TERM:

30 Years

INTEREST RATE TYPE:

Fixed and/or Variable

BOND TAX STATUS:

Tax-Exempt and/or Taxable

SALE TYPE:

Negotiated Offering and/or
Private Placement

RATINGS: A3/A-/A-**SECURITY:**

One or more Obligations issued
under the MTI which will be
secured by a pledge of gross
receipts of the Obligated Group.

Recent Information

The Resolution to Proceed for this financing was adopted by the Board at the July 8, 2026, Board meeting in an amount not to exceed \$800,000,000. Since that time:

- PACB approval was received on July 22, 2026.
- SEQRA is anticipated to be completed by August 3, 2026.
- TEFRA approval is anticipated by August 20, 2026.

For additional information regarding this financing, please reference the attached “Transaction Report – Resolution to Proceed” dated June 30, 2026.

Recommendation

The Board is being asked to adopt the necessary documents for the Northwell Health Obligated Group financing. Orrick Herrington & Sutcliffe LLP and Holley & Pearson-Farrer LLP, co-bond counsel, will provide the Board with an overview of certain bond document provisions at the August 5, 2026, Board meeting.



Transaction Report – Resolution to Proceed Northwell Health Obligated Group – Long Island, New York

June 30, 2026

PROGRAM:

Hospitals

PURPOSE:

New Money

NOT TO EXCEED AMOUNT:

\$800,000,000

NOT TO EXCEED TERM:

30 Years

INTEREST RATE TYPE:

Fixed and/or Variable

BOND TAX STATUS:

Tax-Exempt and/or Taxable

SALE TYPE:

Negotiated Offering and/or
Private Placement

RATINGS: A3/A-/A-

SECURITY:

One or more Obligations issued under the MTI which will be secured by a pledge of gross receipts of the Obligated Group.

Proposed New Issue Overview

The Board is being asked to adopt a Resolution to Proceed for one or more series of fixed and/or variable rate, tax-exempt and/or taxable bonds in an amount not to exceed \$800,000,000 with maturities not to exceed 30 years to be sold at one or more times through a negotiated offering and/or a private placement.

Financing Team:

- Senior Manager – Jefferies
- Co-Bond Counsel – Orrick Herrington & Sutcliffe LLP and Holley & Pearson-Farrer LLP
- Underwriter's Counsel – Katten Muchin Rosenman LLP

Purpose:

- Financing the costs associated with various construction and renovation projects for certain members of the Northwell Health Obligated Group (\$757.5 million).

Security:

- One or more Obligations issued under the Master Trust Indenture ("MTI") that will secure Northwell Healthcare, Inc.'s ("HCI") payments under the Loan Agreement. Each Obligation will be a joint and several obligation of each member of the Northwell Health Obligated Group. The Obligations securing the Series 2026 Bonds will be secured by a pledge of gross receipts of the Northwell Health Obligated Group.

Description of the Bonds:

- The Bonds are a special obligation of DASNY.
- The Loan Agreement is a general obligation of HCI.
- The Bonds are payable from payments made pursuant to the Loan Agreement and the Obligation. The Obligation is a joint and several obligation of the members of the Northwell Health Obligated Group.

Financing Details:

New Money: The Northwell Health Obligated Group proposes to use bond proceeds and equity to fund various construction, renovation and modernization projects for certain members of the Northwell Health Obligated Group. The Northwell Health Obligated Group is proposing to structure the new money to amortize primarily between 2055 through early 2057, with smaller amounts amortizing between 2048 and 2052, to provide for a more level aggregate debt service profile.

The following list outlines the main components of the various projects and their locations.

Glen Cove Hospital proposes to:

- Upgrade and replace the existing hospital roof.

Long Island Jewish Medical Center proposes to:

- Replace its existing linear accelerator.
- Convert existing space into an Interventional Radiology Lab with new equipment and a new separate control room.
- Upgrade its existing emergency generators and replace its existing fire protection system.

Long Island Jewish Forest Hills Hospital proposes to:

- Upgrade its sprinkler system.

Long Island Jewish Valley Stream Hospital proposes to:

- Renovate and expand its Emergency Department.
- Renovate and repair its parking garage.
- Complete various structural upgrades including mechanical, electrical, and plumbing.
- Upgrade and replace the existing hospital roof.

Long Island Jewish Zucker Hillside Hospital proposes to:

- Construct a new, free standing, three-story, 68-bed inpatient psychiatric facility serving adult and geriatric patients. The Behavioral Health Pavillion II will be immediately west of the existing Behavioral Health Pavillion.
- Renovate existing facility space to accommodate the needs of the Psychiatric Patient Care Program.

North Shore University Hospital proposes to:

- Upgrade its chilled water system.

South Shore University Hospital proposes to:

- Construct a four-story, 33,480 square foot building to provide campus-wide infrastructure connections and improved circulation for patients, staff, and supplies. The building will also offer hospital support functions, a patient waiting area, mechanical connections, shell space, and a new central sterile processing program.
- Renovate its existing Electrophysiology Lab with new equipment and infrastructure upgrades.
- Upgrade and replace its air handling unit, chillers, cooling tower, and boilers.

Staten Island University Hospital proposes to:

- Modernize its existing Neonatal Intensive Care Unit.
- Upgrade its air handling units, elevators, and emergency power connections.
- Replace existing Electrophysiology Lab equipment.

Lenox Hill Hospital proposes to:

- Construct a new extension clinic at on the Upper East Side of Manhattan on Third Avenue between 76th and 77th streets. The clinic will offer Radiation Oncology, infusions services, imaging, laboratory and pharmacy services to support these functions.
- Configure a new Cardiac Catheterization Lab from existing shell space.
- Upgrade its electrical systems, sprinkler systems, and complete various foundation work.

Mather Hospital proposes to:

- Upgrade and modernize its emergency generators.

Central Suffolk Hospital d/b/a Peconic Bay Medical Center proposes to:

- Upgrade and modernize its fire alarm system and electrical distribution system (including a new generator).

Phelps Hospital proposes to:

- Upgrade and modernize both of its existing normal and emergency power systems.

Northern Westchester Hospital proposes to:

- Replace its existing boilers and tanks.

Sources and Uses: The proposed new money financing will require a deposit to the project fund of approximately \$757.5 million. Total costs of issuance, including underwriter's discount, are estimated at approximately \$14.9 million. In order to provide for market fluctuations, a bond issue of an amount not to exceed \$800,000,000 is being requested. Please see below for the estimated Sources and Uses.

<i>Sources of Funds:</i>		Series 2026
Bond Proceeds		
Par Proceeds	\$	745,680,000
Original Issue Premium		26,718,264
<i>Total Sources</i>	\$	772,398,264
<i>Uses of Funds:</i>		
Project Fund Deposits		
New Money	\$	757,482,493
Costs of Issuance and Underwriter's Discount		14,915,771
<i>Total Uses</i>	\$	772,398,264

Approvals

PACB Approval – July 22, 2026*

TEFRA Hearing – July 29, 2026*

SEQR Filing – August 4, 2026*

*Anticipated date

Borrower Overview

Northwell Health, Inc. ("NHI"), together with its member corporations and affiliated entities, constitutes an integrated healthcare delivery system serving the greater metropolitan New York area, and is comprised of 21 hospitals, two long-term care facilities, certified home health care agencies, a hospice network, over 900 ambulatory and physician practice locations, the Feinstein Institute for Medical Research and other entities (collectively referred to as the "System"). With over 90,000 employees, the System is the largest employer and largest health system in New York State. NHI is the corporate parent of the System. Northwell Inc., (the "Corporation") is the parent of NHI. Effective May 1, 2025, the Corporation became the sole corporate member of Nuvance Health ("Nuvance"). The Corporation, as the parent of NHI and Nuvance, has the same legal authority over, and responsibilities to, both NHI and Nuvance. NHI and Nuvance report financials separately, and neither is liable for the others obligations. Please see Attachment I for an organizational chart.

NORTHWELL HEALTH OBLIGATED GROUP: The members of the Northwell Health Obligated Group (the "Obligated Group"), each of which is part of the System, are: Long Island Jewish Medical Center, North Shore University Hospital, Glen Cove Hospital, Plainview Hospital, Northwell Health Stern Family Center for Rehabilitation, South Shore University Hospital (formerly Southside Hospital), Huntington Hospital Association, Staten Island Hospital, Lenox Hill Hospital, Mather Hospital, Northern Westchester Hospital, Central Suffolk Hospital d/b/a Peconic Bay Medical Center ("Peconic"), Phelps Hospital and HCI. Mather Hospital, Northern Westchester Hospital, Peconic and Phelps Hospital joined the Obligated Group in 2024.

As stated, Northwell Health, Inc. is the corporate parent of the System and is not a member of the Obligated Group. Under Northwell Health, Inc. is HCI, which is the parent holding company of each of the referenced members of the Obligated Group. HCI is both a member of, and a representative for, the Obligated Group.

Each member of the Obligated Group is jointly and severally liable to repay all obligations and guarantees issued under the Master Trust Indenture ("MTI"). The MTI assures the parity nature of existing and future indebtedness among Obligated group members and is the principal contract that governs the members of the Obligated Group. The MTI provides the basis under which the Obligated Group incurs and secures debt. The MTI also provides the security and governs the pledging of assets. Each time an Obligated Group member incurs debt or guarantees the debt of a non-obligated group member, the Obligated Group issues an Obligation pursuant to the MTI to secure each member's obligation with respect to repayment.

The following is a brief description of each entity that makes up the Obligated Group:

- Long Island Jewish Medical Center in New Hyde Park, New York has a combined 1,710 certified beds at Long Island Jewish Hospital, a tertiary care hospital; Cohen Children's Medical Center, an acute care children's hospital and Zucker Hillside Hospital, a psychiatric hospital. In addition, it also operates Long Island Jewish Forest Hills, an acute care hospital; Long Island Jewish Valley Stream, an acute care hospital and the Orzac Center for Rehabilitation, a residential healthcare facility.
- North Shore University Hospital has a combined 898 certified beds and operates a tertiary care teaching hospital with two campuses located in Manhasset and Syosset. North Shore University Hospital at Manhasset is a tertiary care teaching hospital. North Shore University Hospital at Syosset is a community hospital.
- Glen Cove Hospital is a 192 certified bed acute care community hospital that is located in northern Nassau County.
- Plainview Hospital is a 204 certified bed acute care, community hospital, serving patients in eastern and central Nassau and western Suffolk Counties.
- Northwell Health Stern Family Center for Rehabilitation (the "Center") is a 256 certified bed skilled nursing facility located on the same campus as North Shore University Hospital at Manhasset, Nassau County. The Center began operations in 1989 and is designed for residents who need skilled nursing and rehabilitation services but whose medical conditions do not require the levels of acute care provided by a hospital.
- South Shore University Hospital is a 335 certified bed tertiary care hospital in Bay Shore, Suffolk County.
- Huntington Hospital Association is a 348 certified bed acute care community hospital located in Huntington, Suffolk County.
- Staten Island University Hospital is a 659 certified bed tertiary care teaching hospital with two main sites located in Richmond County, New York.
- Lenox Hill Hospital is a 634 certified bed tertiary care hospital located on the Upper East Side of Manhattan.
- Mather Hospital, is a 249 certified bed community teaching hospital located in the Port Jefferson, Suffolk County.
- Northern Westchester Hospital, is a 232 certified community hospital located in Mount Kisco, Westchester County.
- Central Suffolk Hospital d/b/a Peconic Bay Medical Center, is a 144 certified bed community hospital located in the Riverhead, Suffolk County.
- Phelps Hospital, is a 218 certified bed community hospital located in Sleepy Hollow, Westchester County.
- Northwell Healthcare, Inc. is the sole member (parent) of each member of the Obligated Group. Northwell Healthcare, Inc. can share or redistribute assets among the member hospitals to meet the needs of each facility. Northwell Healthcare, Inc. is authorized to exercise certain powers on behalf of each other member of the Obligated Group regarding the issuance of debt. Northwell Healthcare, Inc. is both a member of, and representative for, the Obligated Group. The proceeds of the Series 2026 Bonds will be loaned to Northwell Healthcare, Inc.

Governance: The Boards of Trustees of each member of the System, including NHI, HCI and each member of the Obligated Group (excluding Huntington Hospital Association) are identical. Huntington Hospital Association has a Board of Directors with a composition separate from the other members of the Obligated Group, but the directors of Huntington Hospital Association are elected by and can be removed by HCI.

Financing History:

The Obligated Group has six series of bond outstanding totaling approximately \$2.05 billion as of March 31, 2026. The Obligated Group has met all of its obligations on time and in full.



Utilization:

<u>Selected Utilization Statistics</u>						<u>2024</u>	<u>2024</u>
	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2024</u>	<u>2025</u>	<u>Statewide</u>	<u>DASNY</u>
						<u>Median</u>	<u>Median</u>
Licensed Beds (excluding bassinets)	5,246	5,235	6,125	6,095	6,079		
Total Discharges (excluding Nursery)	243,892	243,767	289,495	294,394	296,336		
Total Patient Days (excluding Nursery)	1,428,487	1,448,377	1,667,611	1,667,611	1,663,646		
Total Outpatient Visits	2,613,876	2,680,157	3,355,766	3,481,392	3,597,213		
Full-time equivalent (FTE) employees	49,219	51,269	60,927	62,414	64,244		
Occupancy	74.60%	75.80%	74.59%	74.75%	74.98%	44.80%	81.48%
Average Length of Stay	5.86	5.94	5.76	5.66	5.61	5.21	5.74

- The table above presents the past five years of historical utilization results for the Northwell Health Obligated Group. In recent years, the Average Length of Stay has been between the Statewide and DASNY Medians. The Occupancy Rate, which measures total patient days to total licensed bed days available, was recorded at 74.98% in 2025 and has historically been between the 2024 Statewide and DASNY Medians.
- The members of the Obligated Group operate within a highly competitive health care market, which includes Nassau, Suffolk, Queens, New York, Richmond and Westchester Counties. The demographics of the service area are favorable with an aging population, above average wealth and relatively low unemployment levels. Northwell continues to focus on improved care coordination and patient safety by integrating the continuum of care and increasing the engagement of patients and families. Through prevention and early detection, wellness services, primary, specialty and urgent care and ultimately hospital care and long-term care, Northwell has focused on providing services from the view and needs of the patient.
- Northwell Health, Inc.'s 2025 affiliation with Nuvance expanded its footprint into Dutchess and Putnam Counties, as well as western Connecticut. Nuvance is a healthcare delivery system with seven hospitals and approximately \$3.1 billion in annual revenues. Nuvance is not a member of the Obligated Group, its financial results are reported separately and neither Northwell Health, Inc. or Nuvance are liable for the other's obligations.

<u>Payor Mix (% of revenue)</u>					
	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2024</u>	<u>2025</u>
Medicare	45.0%	45.0%	47.0%	47.0%	48.0%
Medicaid	22.0%	23.0%	22.0%	22.0%	20.0%
Commercial	29.0%	28.0%	27.0%	27.0%	28.0%
Self Pay	1.0%	1.0%	1.0%	1.0%	1.0%
Other	<u>3.0%</u>	<u>3.0%</u>	<u>3.0%</u>	<u>3.0%</u>	<u>3.0%</u>
Total	100.0%	100.0%	100.0%	100.0%	100.0%

- The Obligated Group's historical payor mix is presented above with Medicare constituting the largest portion of gross revenue followed by Commercial and Medicaid.

Operations:

Selected Operating Statistics						2024	2024
	2021	2022	2023	2024	2025	Statewide	DASNY
						Median	Median
Total Operating Revenue	\$ 11,740,022,000	\$ 12,660,237,000	\$ 13,593,783,000	\$ 16,618,440,000	\$ 17,858,300,000		
Total Operating Expenses	11,588,731,000	12,549,679,000	13,337,561,000	16,234,897,000	17,529,905,000		
Operating Income	\$ 151,291,000	\$ 110,558,000	\$ 256,222,000	\$ 383,543,000	\$ 328,395,000		
Total Non Operating Activities	563,867,000	(869,515,000)	644,641,000	571,886,000	594,487,000		
Operating Excess	\$ 715,158,000	\$ (758,957,000)	\$ 900,863,000	\$ 955,429,000	\$ 922,882,000		
Total Other Changes in Unrestricted	231,729,000	4,765,000	258,103,000	(69,563,000)	(560,521,000)		
Change in Unrestricted Net Assets	\$ 946,887,000	\$ (754,192,000)	\$ 1,158,966,000	\$ 885,866,000	\$ 362,361,000		
Operating Margin	1.29%	0.87%	1.88%	2.31%	1.84%	0.86%	3.46%
Excess Margin	5.64%	1.21%	2.81%	4.17%	4.45%	2.02%	4.77%
Net Profit Margin	7.71%	-5.94%	8.45%	5.23%	1.98%	2.49%	5.23%
EBIDA Debt Service Coverage Ratio	4.58	2.71	3.09	4.71	4.33	3.34	4.47

- The above table presents the historical income statement analysis for the Obligated Group for the period 2021 through 2025. During this time period, total operating revenue has grown by \$6.12 billion (52.1%) and has consistently outpaced total operating expenses, resulting in an average operating gain of \$246.0 million. As of December 31, 2025, the members of the Obligated Group represented 89.1% of the total operating revenue of the System.
- Operating revenue growth has been attributed to increases in payment rates and revenue cycle initiatives as well as increases in both inpatient and outpatient volume. On the expense side, management has focused on supply chain initiatives, program consolidation and productivity and efficiency initiatives. Management continues to focus on key strategic investments in patient safety and quality improvement, medical research and education, population health management and ultimately market share growth.
- In 2025, the 1.84% operating margin was between the 2024 Statewide and DASNY Medians and has consistently been positive. This has also been the case for both the Excess Margin and Net Profit Margin. The only exception was in 2022 when unrealized investment losses drove non-operating activities negative.
- The Obligated Group's EBIDA debt service coverage ratio of 4.33 in 2025 was between the 2024 Statewide and DASNY Medians and has averaged 3.88 over the last five years.
- For the three-month period ending March 31, 2026, the Obligated Group recorded a \$170.2 million operating gain on approximately \$4.7 billion in operating revenue.



Balance Sheet:

<u>Selected Balance Sheet Statistics</u>						<u>2024</u>	<u>2024</u>
	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2024</u>	<u>2025</u>	<u>Statewide</u>	<u>DASNY</u>
						<u>Median</u>	<u>Median</u>
Assets:							
Current Assets	\$ 5,824,317,000	\$ 5,313,102,000	\$ 6,041,550,000	\$ 7,625,142,000	\$ 8,156,852,000		
Limited Use Assets	-	-	-	-	-		
Long-Term Assets	<u>10,433,693,000</u>	<u>10,764,674,000</u>	<u>11,534,746,000</u>	<u>14,202,992,000</u>	<u>14,859,247,000</u>		
Total Assets	\$ 16,258,010,000	\$ 16,077,776,000	\$ 17,576,296,000	\$ 21,828,134,000	\$ 23,016,099,000		
Liabilities:							
Current Liabilities	\$ 3,605,377,000	\$ 3,293,130,000	\$ 3,441,159,000	\$ 3,843,721,000	\$ 4,231,777,000		
Long-Term Debt	3,475,733,000	4,140,734,000	4,141,993,000	4,852,587,000	4,730,611,000		
Other Long-Term Liabilities	<u>4,199,531,000</u>	<u>4,397,078,000</u>	<u>4,476,193,000</u>	<u>5,422,397,000</u>	<u>5,873,362,000</u>		
Total Liabilities	\$ 11,280,641,000	\$ 11,830,942,000	\$ 12,059,345,000	\$ 14,118,705,000	\$ 14,835,750,000		
Net Assets:							
Unrestricted	\$ 4,375,159,000	\$ 3,620,967,000	\$ 4,821,640,000	\$ 6,937,909,000	\$ 7,300,270,000		
Temporarily Restricted	602,210,000	625,867,000	695,311,000	771,520,000	880,079,000		
Permanently Restricted	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>		
Total Net Assets	\$ 4,977,369,000	\$ 4,246,834,000	\$ 5,516,951,000	\$ 7,709,429,000	\$ 8,180,349,000		
Current Ratio	1.62	1.61	1.76	1.98	1.93	1.30	1.95
Cushion Ratio	13.67	10.52	10.36	14.29	12.72	7.20	12.42
Days Operating Cash Available	127.18	95.72	106.50	113.62	111.86	47.25	104.23
Cash to Debt	87.53%	64.29%	75.06%	84.72%	91.34%	105.37%	54.52%
Debt to Capitalization	50.59%	57.85%	51.09%	45.30%	43.84%	25.76%	45.30%

- The above table presents the historical balance sheet analysis for the Obligated Group for the period 2021 through 2025. During this time period, total assets have increased by approximately \$6.75 billion while total liabilities have increased by approximately \$3.55 billion. As of December 31, 2025, the Obligated Group represented approximately 93.6% of the System's total assets.
- During the five-year time period shown above, the Obligated Group's current ratio has averaged 1.78 as compared to the 2024 Statewide and DASNY Medians of 1.30 and 1.95, respectively. Another indication of the Obligated Group's financial position is the cushion ratio. This measures the ability to pay debt service from cash and unrestricted board designated funds. In 2025, the cushion ratio stood at 12.72 while the 2024 Statewide and DASNY Medians were 7.20 and 12.42, respectively.
- With the exception of 2022, the Obligated Group has consistently recorded over 100 days of operating cash available and recorded 111.86 days of operating cash available in 2025, as compared to the 2024 Statewide and DASNY Medians of 47.25 and 104.23 days, respectively.
- For fiscal year 2025, the Obligated Group's cash to debt ratio was reported at 91.34%, and the debt to capitalization ratio was reported at 43.84%. Both of these levels were between the 2024 Statewide and DASNY Medians.
- For the three-month period ending March 31, 2026, the Obligated Group reported a current ratio of 1.91 and approximately \$8.1 billion in total net assets. Both of these levels approximated the levels reported for the fiscal year ending December 31, 2025.

Recommendation

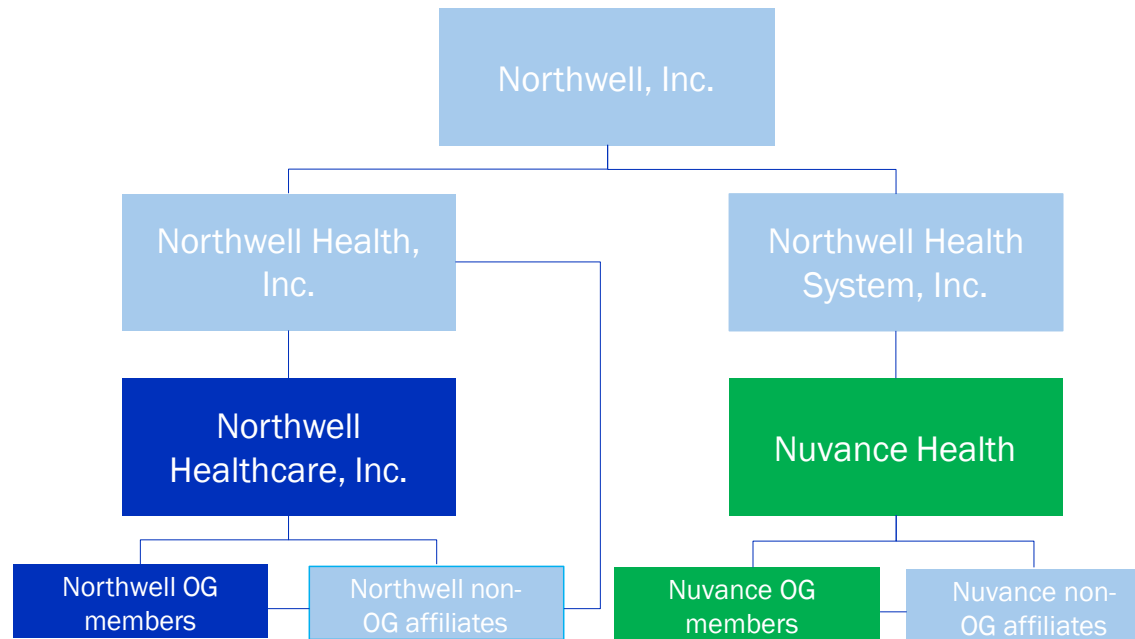
- The Board is being asked to adopt a Resolution to Proceed for one or more series of bonds with terms not to exceed 30 years in an amount not to exceed \$800,000,000 on behalf of Northwell Healthcare, Inc.



This report was prepared solely to assist DASNY in its review and approval of the proposed financing described therein and must not be relied upon by any person for any other purpose. DASNY does not warrant the accuracy of the statements contained in any offering document or any other materials relating to or provided by the Institution in connection with the sale or offering of the Bonds, nor does it directly or indirectly guarantee, endorse or warrant (1) the creditworthiness or credit standing of the Institution, (2) the sufficiency of the security for the Bonds or (3) the value or investment quality of the Bonds.

The Bonds are special limited obligations of DASNY that are secured only by the amounts required to be paid by the Institution pursuant to the Loan Agreement, certain funds established under the Resolution and other property, if any, pledged by the Institution as security for the Bonds.

Northwell/Nuvance Legal Structure



Color key:

Northwell Obligated Group*



Nuvance Obligated Group



Non-Obligated Group



*Certain members of Northwell (collectively referred to herein as, the "Obligated Group") are jointly and severally liable for obligations under bond indentures. The Obligated Group consists of Northwell Healthcare, Inc., North Shore University Hospital, Long Island Jewish Medical Center, Staten Island University Hospital, Lenox Hill Hospital, South Shore University Hospital, Huntington Hospital Association d/b/a Huntington Hospital, Glen Cove Hospital, Plainview Hospital, Northwell Health Stern Family Center for Rehabilitation, Phelps Memorial Hospital Association ("Phelps"), Northern Westchester Hospital Association ("Northern Westchester"), Central Suffolk Hospital d/b/a Peconic Bay Medical Center ("Peconic") and John T. Mather Memorial Hospital of Port Jefferson, New York, Inc. ("Mather"). Phelps, Northern Westchester, Peconic and Mather joined the Obligated Group during 2024.



Department of Health

KATHY HOCHUL
Governor

JAMES V. McDONALD, M.D., M.P.H.
Commissioner

JOHANNE E. MORNE, M.S.
Executive Deputy Commissioner

To: Portia Lee, Managing Director, and Office of Public Finance
New York State Dormitory Authority

From: Kenneth Evans, Deputy Director *KRE*
Division of Health Economics and Provider Assistance

Date: June 30, 2026

Subject: Northwell Health Obligated Group

Introduction:

This memo will serve as the Department of Health's recommendation to the Dormitory Authority of New York (DASNY) related to the adoption of a Resolution to Proceed with the financing for the Northwell Health Obligated Group proposed below.

The Northwell Health Obligated Group is expected to issue one or more series of fixed and/or variable rate, tax-exempt and/or taxable bonds in an amount not-to-exceed \$800M with maturities not-to-exceed 30 years to be sold at one or more times through a negotiated offering and/or a private placement. The proposed purpose of this transaction is for financing the costs associated with various construction and renovation projects for certain members of the Northwell Health Obligated Group (\$757.5M). The Northwell Health Obligated Group is proposing to structure the new money to amortize primarily between the years 2055 through 2057, with smaller amounts amortizing between 2048 and 2052, to provide for a more level aggregate debt service profile.

Background:

Northwell Health, Inc. ("NHI"), together with its member corporations and affiliated entities, constitutes an integrated healthcare delivery system serving Nassau, Suffolk, Queens, New York, Richmond, and Westchester Counties. The system encompasses over 5,800 certified beds, 4,500 doctors, 14,200 credentialed physicians, 18,500 nurses, and 3,300 physician partners within its network. Further, the system is comprised of 21 hospitals, two (2) long-term care facilities, certified home health care agencies, trauma centers, a hospice network, and nearly 800 outpatient facilities. NHI is the corporate parent of Northwell Health. Northwell Inc. is the parent of NHI. Effective May 1, 2025, Northwell Inc became the sole corporate member of Nuvance Health.

The members of the Northwell Health Obligated Group ("Obligated Group"), each of which is part of the System, are: Long Island Jewish Medical Center, North Shore University Hospital, Glen Cove Hospital, Plainview Hospital, Northwell Health Stern Family Center for Rehabilitation, South Shore University Hospital (formerly Southside Hospital), Huntington Hospital Association, Staten Island Hospital, Lenox Hill Hospital, Mather Hospital, Northern Westchester Hospital,

Central Suffolk Hospital d/b/a Peconic Bay Medical Center (“Peconic”), Phelps Hospital and HCI. Mather Hospital, Northern Westchester Hospital, Peconic and Phelps Hospital joined the Obligated Group in 2024. HCI is the sole member (parent) and established Article 28 co-operator of each of the above referenced members of the Obligated Group, and therefore is authorized to exercise certain powers on behalf of each member. HCI is both a member of and a representative for the Obligated Group. NHI is not a member of the Obligated Group but is the ultimate parent of each member of the Obligated Group.

The following is a brief description of each entity that makes up the Obligated Group:

- **Long Island Jewish Medical Center** in New Hyde Park, New York has a combined 1,710 certified beds at Long Island Jewish Hospital, a tertiary care hospital; Cohen Children’s Medical Center, an acute care children’s hospital and Zucker Hillside Hospital, a psychiatric hospital. In addition, it also operates Long Island Jewish Forest Hills, an acute care hospital; Long Island Jewish Valley Stream, an acute care hospital and the Orzac Center for Rehabilitation, a residential healthcare facility.
- **North Shore University Hospital** has a combined 889 certified beds and operates a tertiary care teaching hospital with two campuses located in Manhasset and Syosset. North Shore University Hospital at Manhasset is a tertiary care teaching hospital. North Shore University Hospital at Syosset is a community hospital.
- **Glen Cove Hospital** is a 192 certified bed acute care community hospital located in northern Nassau County.
- **Plainview Hospital** is a 204 certified bed acute care, community hospital, serving patients in eastern and central Nassau and western Suffolk Counties.
- **Northwell Health Stern Family Center for Rehabilitation** is a 256 certified bed skilled nursing facility located on the same campus as North Shore University Hospital at Manhasset, Nassau County.
- **South Shore University Hospital** is a 335 certified bed tertiary care hospital in Bay Shore, Suffolk County.
- **Huntington Hospital Association** is a 348 certified bed acute care community hospital in Huntington, Suffolk County.
- **Staten Island University Hospital** is a 659 certified bed tertiary care teaching hospital with two main sites in Richmond County, New York.
- **Lenox Hill Hospital** is a 634 certified bed tertiary care hospital on the Upper East Side of Manhattan.
- **Mather Hospital**, a 249 certified bed community teaching hospital in Port Jefferson, Suffolk County.
- **Northern Westchester Hospital**, a 232 certified community hospital in Mount Kisco, Westchester County.
- **Central Suffolk Hospital d/b/a Peconic Bay Medical Center**, a 144 certified bed community hospital in Riverhead, Suffolk County.
- **Phelps Hospital**, a 218 certified bed community hospital in Sleepy Hollow, Westchester County.
- **Northwell Healthcare, Inc.** is the sole member (parent) of each member of the Obligated Group. Northwell Healthcare, Inc. can share or redistribute assets among the member hospitals to meet the needs of each facility. Northwell Healthcare, Inc. is authorized to exercise certain powers on behalf of each other member of the Obligated

Group regarding the issuance of debt. Northwell Healthcare, Inc. is both a member of, and representative for, the Obligated Group. The proceeds of the Series 2026 Bonds will be loaned to Northwell Healthcare, Inc.

Proposed Financing:

The Northwell Health Obligated Group proposes to use bond proceeds and equity to fund various construction, renovation and modernization projects for certain members of the Northwell Health Obligated Group. The Northwell Health Obligated Group is proposing to structure the new money to amortize primarily between the years 2055 through 2057, with smaller amounts amortizing between 2048 and 2052, to provide for a more level aggregate debt service profile.

Sources and Uses:

The proposed new money financing will require a deposit to the project fund not-to-exceed \$757.5M. The total costs of issuance, including underwriter's discount, are estimated at approximately \$14.9M. To provide for market fluctuations, a bond issue of an amount not-to-exceed \$800M is being requested. Please see below for the estimated Sources and Uses.

<u>Sources:</u>	<u>Series 2026</u>
Bond Proceeds	
Par Proceeds	\$745,680,000
Original Issue Premium	<u>26,718,264</u>
Total Sources	\$772,398,264
<u>Uses:</u>	
Project Fund Deposits	
New Money	\$757,482,493
Cost of Issuance & Underwriter's Discount	<u>14,915,771</u>
Total Uses	\$772,398,264

Project Description:

Below is a brief summary of the projects (CONs and Notifications) included in this transaction:

Glen Cove Hospital:

- Upgrade and replace the existing hospital roof.

Long Island Jewish Medical Center (CON 232153 & Notice 4825):

- Replace its existing linear accelerator.
- Convert existing space into an Interventional Radiology Lab with new equipment and a new separate control room.
- Upgrade its existing emergency generators and replace its existing fire protection system.

Long Island Jewish Forest Hills Hospital:

- Upgrade its sprinkler system.

Long Island Jewish Valley Stream Hospital (CON 172298 & Notice 3537):

- Renovate and expand its Emergency Department.
- Renovate and repair its parking garage.

- Complete various structural upgrades including mechanical, electrical, and plumbing.
- Upgrade and replace the existing hospital roof.

Long Island Jewish Zucker Hillside Hospital (241095 & 242024):

- Construct a new, free standing, three-story, 68-bed inpatient psychiatric facility serving adult and geriatric patients. The Behavioral Health Pavillion II will be immediately west of the existing Behavioral Health Pavillion.
- Renovate existing facility space to accommodate the needs of the Psychiatric Patient Care Program.

North Shore University Hospital (Notice 4828):

- Upgrade its chilled water system.

South Shore University Hospital (Notice 4475, 4811, 5152):

- Construct a four-story, 33,480 square foot building to provide campus-wide infrastructure connections and improved circulation for patients, staff, and materials. The building will also offer hospital support functions, a patient waiting area, mechanical connections, shell space, and a new central sterile processing program.
- Renovate its existing Electrophysiology Lab with new equipment and infrastructure upgrades.
- Upgrade and replace its air handling unit, chillers, cooling tower, and boilers.

Staten Island University Hospital (CON 221114 & Notices 4472, 4779, 4793):

- Modernize its existing Neonatal Intensive Care Unit.
- Upgrade its air handling units, elevators, and emergency power connections.
- Replace existing Electrophysiology Lab equipment.
- One-for-one ionization equipment replacement.

Lenox Hill Hospital (CON 192093 & 261051 and Notices 4752, 4578):

- Construct a new extension clinic on the Upper East Side of Manhattan on Third Avenue between 76th and 77th streets. The clinic will offer Radiation Oncology, infusions services, imaging, laboratory and pharmacy services to support these functions.
- Configure a new Cardiac Catheterization Lab from existing shell space.
- Upgrade its electrical systems, sprinkler systems, and complete various foundation work.

Mather Hospital:

- Upgrade and modernize its emergency generators.

Central Suffolk Hospital d/b/a Peconic Bay Medical Center:

- Upgrade and modernize its fire alarm system and electrical distribution system (including a new generator).

Phelps Hospital (Notice 3445):

- Upgrade and modernize both of its existing normal and emergency power systems.

Northern Westchester Hospital:

Replace its existing boilers and tanks.

Recommendation:

The Department of Health recommends approval to DASNY on the adoption of a Resolution to Proceed for the proposed Northwell Health Obligated Group financing in an amount not to exceed \$800M. The proposed financing plan provides an acceptable debt structure and foundation by which the Northwell Health Obligated Group can implement its construction, renovation, and modernization projects. The Department supports this financing, and the expected positive impact of Northwell Health Obligated Group has on the health care delivery

system for the communities it serves. As a condition of this approval, it is expected that all DOH Regulations and Laws will be satisfied prior to closing under Article 28-B of the Public Health Law including any outstanding contingencies will be satisfied before the issuing of the Preliminary Offering Statement (POS).