

Memo

DATE: November 16, 2020

SUBJECT: Legal Requirements for the City's Reimbursement of Equipment Projects that Consist of Major Medical Equipment Systems

Funding Recipient hospitals that seek reimbursement for major medical Equipment System(s) from New York City (the "City"), acting by and through its Department of Design and Construction (hereinafter referred to as "DDC" or the "Agency"), need to provide the Agency with a signed letter from a duly authorized representative of the hospital (i.e., either a hospital doctor or knowledgeable professional that will utilize the medical equipment) that affirmatively states that the Equipment System purchase will comply with the capital eligibility requirements of the City Comptroller's Directive 10 ("Directive 10").

Section 6.1 of Directive 10 delineates the requirements for "Equipment Systems," and specifically states that:

"To be capital eligible, an equipment system must be composed of a group of related elements working together The elements are considered related if they are mutually dependent upon each other, and physically connected or connected through a wireless network."

Accordingly, Funding Recipients that seek reimbursement from DDC for major medical Equipment System(s) must provide the following factual representations to the Agency:

- That the intended purchase consists of an "Equipment System," which means that the elements of the equipment system are "mutually dependent upon each other" and that all items are either "physically connected" or "connected through a wireless network";
- The useful life of the Equipment System is at least five (5) years;
- That the Equipment System contains no consumable or disposables items; and
- That the Equipment System contains no spare parts or supplies.

NOTE: The letter should be: on hospital letterhead, in a narrative format (not in a bullet points) and addressed to the assigned DDC Project Manager – Non-Profit Reimbursement Program. See the following page for a template letter.

If you should have any questions and/or concerns, please contact the DDC Project Manager assigned to your organization's equipment project. Thank you.

Major Medical Systems Letter
(Template letter for Non-Profit Reimbursement Program Awards)¹

[Note: This letter must be placed on your organization's official letterhead.]

[Insert Date]

Attn.: [Insert Name of Agency Project Manager]
NYC Department of Design + Construction
30-30 Thomson Avenue, Law Division, 4th Floor
Long Island City, NY 11101

Re: Major Medical Systems Letter: [Insert Project ID and Description of the Award]

Dear [Insert Name of Agency Project Manager]:

[Insert Organization's Name and Department] is requesting to purchase [Insert Description, Make, and Model of the Equipment] ("Equipment System").

This Equipment System is comprised of a group of related elements and/or components, which are mutually dependent upon each other and are [physically connected] or [connected through a wireless network]². The Equipment System contains no consumable or disposable items, spare parts or supplies. The useful life of the Equipment System is at least 5 years.

If you should have any questions about the Equipment System, please contact [Insert name, contact number, and email of appropriate representative of your organization who knows the technical details of the Equipment System.]

[Handwritten Signature of Authorized Representative]

[Printed Name]

[Title]

[Date of signature]

¹ Please remove all bracketed references and footnotes in the final version of your letter.

² Please select the applicable statement.