DATA SHARING AGREEMENT BETWEEN
THE NEW YORK CITY DEPARTMENT OF SOCIAL SERVICES/
HUMAN RESOURCES ADMINISTRATION,
THE NEW YORK CITY DEPARTMENT OF HEALTH AND MENTAL HYGIENE, AND
THE CITY UNIVERSITY OF NEW YORK

THIS DATA SHARING AGREEMENT ("Agreement"), effective as of _December 18_, 20_19_ ("Effective Date"), between the City of New York ("the City") acting through the Department of Social Services ("DSS")/ Human Resources Administration ("HRA"), with offices at 150 Greenwich Street, New York, NY 10007; the New York City Department of Health and Mental Hygiene ("DOHMH"), having its principal office located at 42-09 28 Street, Queens, New York 11101; and The City University of New York ("CUNY") with offices at 55 West 125th St 10027 (collectively "the Parties").

WITNESSETH:

WHEREAS, DOHMH's mission is to protect and promote the health of New York City and to that end it performs all functions and operations that relate to the health of the people of the City; and

WHEREAS, HRA provides a wide range of social services and programs aimed at assisting individuals and families in achieving and sustaining their maximum degree of self-sufficiency and HRA's HIV/AIDS Services Administration ("HASA") assists individuals living with AIDS or HIV illness to live healthier, more independent lives; and

WHEREAS, HRA, through HASA, has initiated three pilot projects for Permanent Supportive Housing, Transitional Supportive Housing, and Commercial Single-Room Occupancy Housing wherein HASA will implement a differentiated service delivery with the aim of improving client experience and efficiency (the "HASA Pilot"); and

WHEREAS, HRA seeks an evaluation of the HASA Pilot (the "HASA Pilot Evaluation") and CUNY is a university which has agreed to conduct the HASA Pilot Evaluation through its researchers and in conjunction with DOHMH; and

WHEREAS, the Parties wish to enter into an agreement to set forth the conditions under which the Parties will exchange data for the purposes of conducting the HASA Pilot Evaluation as set forth herein;

NOW, THEREFORE, the Parties hereto agree as follows:

ARTICLE 1. TERM

The term of this Agreement shall be from September 1, 2019 through May 31, 2024 unless sooner terminated or modified as provided herein. The Parties may renew this Agreement for an additional term of up to one (1) year upon mutual written agreement.

ARTICLE 2. DATA SHARING SPECIFICATIONS

A.   PURPOSE

HASA, in collaboration with community partners, has developed a three-year pilot program that incorporates differentiated service delivery, a patient-centered approach to HIV prevention and care, into (1) Permanent Supportive Housing ("PSH"), (2) Transitional Supportive Housing ("TSH"), and (3) Commercial Single-Room Occupancy Housing ("CSRO") systems. The goal is to improve efficiency and optimize the experience of HASA clients who move through the PSH, TSH, and CSRO systems and specifically to improve housing and HIV viral suppression (medical) outcomes amongst clients in the pilot program versus standard practice. HRA seeks an evaluation of the HASA Pilot for fidelity, effectiveness, and potential replication throughout the HASA system and DOHMH and CUNY have agreed to undertake this evaluation. This Agreement will provide for the sharing of data from HRA to DOHMH, and at DOHMH with CUNY staff, for a collaborative evaluation of the HASA Pilot between HRA, DOHMH and CUNY as detailed below. The purpose of this agreement is solely to exchange information in order to implement the evaluation plans of the HASA housing pilot projects approved by DSS/HRA, DOHMH, and CUNY.

B.   DATASHARING SPECIFICATIONS

i.   HRA currently shares with DOHMH, on a quarterly basis, the HASA data elements in Table A below from two files (client and address history); the variables are subject to change. DOHMH matches these data with information in its HIV Surveillance Registry (currently, "eHARS") and adds new and updated results from the match to a HASA-eHARS master match file. Reports are generated using this file and linked data such as HIV-related laboratory test results from eHARS. These reports are used to inform the provision of medical and support services to low-income New Yorkers with HIV, and to monitor and improve their engagement in medical care and viral suppression.

TABLE A

Client File
Report start and end dates
Social Security Number
Full Name

Any other name used by Client (Alias)
Date of Birth
Gender
Race
Any addresses on file
City
State
Zip
Any phone numbers on file
Medicaid or CIN enrolled
Case Number
WMS Site Code and name
Emergency Contact Name and phone
HASA Case Worker Name and phone number
Recertification Date
Last Visit Date
Housing Type and sub-type
Date Accepted to HASA Program
Is a homemaker
Is receiving home care
Is receiving SSI or SSDI
Is receiving Substance Abuse Services
Date and Reason Client Closed in HASA
HIV diagnosis of the client
HASA Web Client and Case ID indicators
Relationship of Client with Primary Client (for clients who are not primary client)
Healthix Consent- whether provided and date signed
Address History File
Report Start and End Dates
Social Security Number
Client Full Name
Date of Birth
Facility Name (if Any)
Any addresses on file
City
State
Zip
Address Start and End Dates
Housing Types and sub-types

HASA Web Case ID Indicator

ii. Under this MOU, HRA will create pilot-specific data files, containing data on both HASA pilot and non-pilot clients. In these pilot-specific data files, HRA will share the same Table A data elements with DOHMH for the additional purpose of evaluating the HASA Pilot as stated in Article 2 (A) above. In addition to the elements in Table A above, the pilot-specific client files will also include the following data elements listed in Table B below, where applicable. The data elements will likely be contained within multiple files (e.g. separate files for pilot and non-pilot clients). HRA will transfer such data file(s) with Table A and Table B data elements to DOHMH on a quarterly basis for evaluation purposes as stated above in Article 2(A).

TABLE B

Pilot Client Indicator (Pilot client or non-pilot client)
Healthix Consent- whether provided and date signed
Client and Case ID
Caseworker Total Caseload (by Caseworker ID)
Pilot Enrollment and Disenrollment Date(s)
Housing Type(s)
Housing start and end date(s)
Caseworker Home Visits Conducted (occurrence and dates)
Housing Outcomes (Where Applicable)
Answers to Pilot Specific Assessment Questions (Where Applicable)
Provider Type
HASA site name
HASA site location
Any addresses on file

iii. DOHMH will receive the identified HRA data in Table A and match these data with eHARS data elements, per standard matching procedures. This match result between HASA client ID and eHARS unique identifier will be used to electronically link the data in the Table B records with eHARS. As a result of the data match, DOHMH will create one or more datasets in preparation for analysis, including parts of Tables A and B and eHARS. The dataset(s) will include general HASA variables, pilot-related variables, housing-related outcomes based on HASA data, and variables from HIV surveillance / eHARS including HIV-related laboratory test dates and results, HIV diagnosis date, demographics, and transmission risk category. The dataset(s) will be shared with CUNY staff onsite at DOHMH for the sole purposes of analysis to implement the HASA pilot evaluation plans. The Director of DOHMH's HIV Epidemiology and Field Services Program has approved specific CUNY staff to view line-level data from the registry at
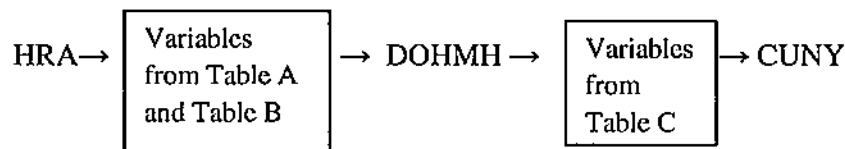
4

DOHMH. The analytic dataset(s) will _not_ include personal identifiers of HASA Client ID or Case Number, name, SSN, or address. The data will likely be contained within several datasets, because some of the elements are repeated and others are not. No line-level dataset that includes HIV registry data will be sent offsite from DOHMH or otherwise shared with any other staff external to DOHMH other than those approved for the purpose of this evaluation project to view such datasets. These analytic dataset(s) to be used by DOHMH and CUNY staff at DOHMH will contain the following data elements:

TABLE C

Definition	Source
Client indicator (number randomly assigned in place of HASA Client ID)	DOHMH will create
Quarter(s) of HASA data transmission to DOHMH	HASA client file
Date of Birth	HASA client file
Gender	HASA client file
Race	HASA client file
City	HASA client file
State	HASA client file
Zip	HASA client file
Welfare Management System (WMS; one of HRA's data management systems) Site code and name	HASA client file
Recertification Date	HASA client file
Last Visit Date	HASA client file
Housing Type and sub-type	HASA client file
Date Accepted to HASA Program	HASA client file
Is a homemaker	HASA client file
Is receiving home care	HASA client file
Is receiving SSI or SSD	HASA client file
Date and Reason Client Closed in HASA	HASA client file
HIV diagnosis of the client	HASA client file
Relationship of Client with Primary Client (for clients who are not primary client)	HASA client file
Healthix Consent- whether provided and date signed	HASA client file
Address Start and End Dates	HASA address file
Housing Type and sub-type	HASA address file
Pilot Client Indicator (Pilot client or non-pilot client)	HASA pilot file
Indication of which pilot(s) the person was in: PSH, TSRO, or CSRO	HASA pilot file
Pilot case manager indicator	HASA pilot file

Successful home visits made as initial and maintenance of Pilot case	HASA pilot file
Other successful visits such as check delivery, furniture purchase, etc.	HASA pilot file
Housing Outcomes (Where Applicable)	HASA pilot file
Answers to Pilot Specific Assessment Questions (Where Applicable)	HASA pilot file
Pilot enrollment and disenrollment date(s)	HASA pilot file
How many times assigned to Pilot Worker	HASA pilot file
How many days Client was under Pilot Worker (s)	HASA pilot file
How many times clients placed in Pilot Facility	HASA pilot file
How many days in total spent in Pilot Facility	HASA pilot file
Aggregates of the variables above, as needed (e.g. Average number of facilities per caseworker)	HASA pilot file
eHARS unique identifier	eHARS
First known HIV/AIDS diagnosis date	eHARS
Viral load quantities in the year prior to and time since HASA enrollment	eHARS
CD4 counts in the year prior to and time since HASA enrollment	eHARS
Dates of viral loads and CD4 tests in the year prior to and time since HASA enrollment	eHARS
Sex at birth	eHARS
Race/ethnicity	eHARS
Age at HIV diagnosis	eHARS
Country of Birth	eHARS
Transmission Risk	eHARS
Year of diagnosis	eHARS
Zip code or UHF at enrollment	eHARS

iv. In sum, the flow of information shall be that HRA shares the variables in Tables A and B with DOHMH who will then match and de-identify the data to create a dataset for analysis including any of the variables in Table C:

HRA → [Variables from Table A and Table B] → DOHMH → [Variables from Table C] → CUNY

The data elements from Tables A, B, and C (the "Data") may be shared in a file format and/or a structure that is different than as appears in the tables herein.

v. CUNY researchers and DOHMH will use the matched HASA-eHARS de-identified datasets to evaluate the HASA Pilot by comparing viral load suppression and favorable housing outcomes within persons enrolled in the pilot, and between them and persons who are not enrolled in the pilot, assessing the effect of pilot exposure on pilot effectiveness and outcomes, and identifying correlates of viral suppression and favorable housing outcomes among pilot enrollees.

vi. CUNY, in conjunction with DOHMH, will develop aggregate-level progress reports on an approximately annual basis which will include general statements about pilot status and general details about fidelity/process indicators and care status but will not include details based on live surveillance data transmitted from DOHMH and imported to HASAWeb. Additionally, CUNY, in conjunction with DOHMH will develop approximately two impact reports over the course of the HASA Pilot Evaluation and will share both the aforementioned progress reports and impact reports with HRA. Progress reports and impact reports will be reviewed by the DOHMH Housing Services Unit and HIV Epidemiology and Field Services Program prior to release outside DOHMH. Pilot progress reports will describe in a general manner available data and updates on pilot status, fidelity, and outcomes. The first impact report will include details on the primary viral load suppression outcome measure and the transition to independent living from the PSH pilot, the transition to permanent housing from the TSH pilot, and the transition to transitional or permanent supportive housing from the CSRO pilot. The second impact report will use enrollments reported through the end of the pilot and will examine primary and secondary outcomes and details from the three major aims detailed in subsection (v) above. Any publication, release, or distribution of information hereunder is subject to the confidentiality provisions in Article 4.

vii. The Parties shall share electronic files via an encrypted file through a Secure File Transfer Protocol (SFTP) account. The data shall remain in the encrypted file during the transfer and while it is received and held by the Parties. It is anticipated that the transfer of encrypted files related to the pilot will be limited to transmission by DSS/HRA of data to DOHMH.

viii. Any additional HASA Pilot data collection tools that might be developed after MOU execution (e.g., a formal qualitative data collection instrument, any changes in the general categories of data elements requested) must be reviewed and approved by DSS/HRA (both HASA and the DSS Office of Evaluation and Research), DOHMH and CUNY before implementation.

ARTICLE 3. LEGAL BASIS FOR DISCLOSURE

A. Pursuant to Section 136 of the New York State Social Services Law and Part 357 of the implementing regulations, public assistance records and information relating to a person receiving public assistance may be disclosed by a public welfare official to another agency or person when the disclosure is reasonably related to the purposes of the public welfare program and the function of the inquiring agency, the confidential character of the information will be maintained, and the information will not be used for commercial or political purposes.

B. The implementing regulations provide enumerated legal exceptions to confidentiality that permit the disclosure of public assistance information, under limited circumstances. In accordance with 18 NYCRR §357.2(a), HRA may disclose confidential public assistance data in the absence of individual consent, to another agency or person HRA has determined is legally entitled to this data, for purposes directly connected with the administration of public assistance. According to federal regulation 45 CFR §205.50(a)(1)(i)(A), purposes directly connected with the administration of public assistance include providing services for applicants and recipients. Here, HRA may disclose public assistance information to DOHMH and CUNY, through DOHMH, for the HASA Pilot Evaluation so that HRA may determine whether HASA clients would benefit from the implementation of the Pilot Program throughout the HASA system, thereby providing improved services for public assistance recipients.

C. Pursuant to New York Public Health Law §2782(6) and regulations at 10 NYCRR §63.5(e), confidential information which may reasonably identify an individual as having HIV or AIDS may be disclosed by a social services provider to authorized agents of a governmental agency when the entity providing social services is regulated, supervised, or monitored by the governmental agency and when access is reasonably necessary for regulation, supervision, monitoring, administration or provision of services.

D. Pursuant to New York City Administrative Code §23-1202, identifying information, defined as information obtained by the City that may be used on its own or with other information to identify or locate an individual, may be disclosed if the Agency Privacy Officer (APO) has determined that such disclosure furthers the purpose or mission of the agency and/or has approved in advance such disclosure as routine. Disclosure of identifying information as outlined in Section 2(B) furthers HRA's purpose of effective Pilot and program evaluation. Additionally, disclosures of identifying information to local agencies, including DOHMH, for oversight purposes have been approved as routine based on the following designation made by the DSS APO: Agency Regulatory Implementation and Oversight—Oversight/Investigations/Reporting.

ARTICLE 4. CONFIDENTALITY

A. All information obtained, learned, developed, or filed in connection with this Agreement, including data contained in official HRA or DOHMH files or records, shall be held

confidential pursuant to the provisions of all applicable federal, state, and local laws and codes, and shall not be disclosed to any persons, organization, agency, or other entity except as authorized or required by applicable law, rule or regulation promulgated by a governmental authority having jurisdiction or as authorized under this Agreement.

B. All of the reports, information or data furnished to, or prepared, assembled, or developed by use of the data or reports, or used in any other way by either party under this Agreement are to be held confidential, and the same shall not be made available to any individual or organization without the prior written approval by the disclosing party except as authorized or required by applicable law, rule or regulation promulgated by a governmental authority having jurisdiction or as authorized under this Agreement.

C. All data shared by HRA shall include a conspicuous warning against improper re-disclosure, which shall state as follows:

> "THIS INFORMATION HAS BEEN DISCLOSED FROM CONFIDENTIAL RECORDS WHICH ARE PROTECTED BY STATE LAW. STATE LAW PROHIBITS YOU FROM MAKING ANY FURTHER DISCLOSURE OF THIS INFORMATION WITHOUT THE SPECIFIC WRITTEN CONSENT OF THE PERSON TO WHOM IT PERTAINS, OR AS OTHERWISE PERMITTED BY LAW. ANY UNAUTHORIZED FURTHER DISCLOSURE BY YOU THAT IS IN VIOLATION OF STATE LAW MAY RESULT IN A FINE OR JAIL SENTENCE OR BOTH. A GENERAL AUTHORIZATION FOR THE RELEASE OF MEDICAL OR OTHER INFORMATION IS NOT SUFFICIENT AUTHORIZATION FOR FURTHER DISCLOSURE OF THIS INFORMATION."

D. The Parties agree to use and ensure the use of appropriate safeguards to prevent misuse or unauthorized disclosure of any confidential information, and to implement administrative, physical, and technical safeguards that reasonably and appropriately protect and secure the confidentiality, integrity, and availability of any electronic or hard copy individually identifiable information that it creates, receives, maintains, or transmits pursuant to this Agreement including, but not limited to storing the Data in secure access-restricted files; using only computers, laptops and or mobile devices approved or issued by the Receiving Party, as defined below, ("Devices") to access, process, transmit, or store the Data; and password protecting all Devices that will be used to access, process, transmit or store the Data.

E. Access to the Data will be restricted to DOHMH and CUNY (individually "Receiving Party," collectively "Receiving Parties") and Receiving Parties' employees, agents and/or contractors required to use the Data to perform the functions of this Agreement that are set forth herein, and so designated by Receiving Parties as authorized users. The Parties agree that they will instruct any employees, contractors, subcontractors, agents, or other authorized users with access to confidential information in furtherance of this Agreement to maintain the confidentiality of any and all information required to be kept confidential by this Agreement in a manner no less stringent than the confidentiality obligations contained in this Agreement.

F. CUNY and DOHMH shall obtain written (e-mail) consent from HRA before publishing, submitting for publication, distributing, or releasing, in whole or in part, any findings or analysis derived from, or based upon, in whole or in part, the data shared pursuant to this Agreement. All public releases regarding the HASA Pilot Evaluation, its progress and its findings, including but not limited to press releases, advocacy statements, academic publications (including peer reviewed journal articles), conference presentations, and letters, shall be released only with prior written (e-mail) consent of HRA. HRA, DOHMH, and CUNY agree that HRA may choose to be included as author on any document submitted by CUNY or its research team or DOHMH for publication as a result of the HASA Pilot Evaluation. Similarly, DOHMH will be made aware of and involved in publications from the evaluation of the pilot. If approval cannot be obtained within 60 days, any public releases will be accompanied by a disclaimer that views are not necessarily shared by the other parties.

G. The Receiving Parties shall not reveal any individually identifiable information received pursuant to this Agreement, such as a person's first or last name, date of birth, or any other identifying information, in any draft or final publication.

H. The provisions of this Article shall remain in full force and effect following termination of, or cessation of, the services required by this Agreement.

ARTICLE 5. EFFECT OF UNAUTHORIZED DISCLOSURE

A. Receiving Parties agree to report, in writing, any data security incident of which a Receiving Party becomes aware. A data security incident includes any unauthorized or inadvertent use or disclosure of confidential or protected data not provided for by this Agreement, or any breach of unsecured protected data.

i. In the event of any unauthorized disclosure of confidential data, the Receiving Party shall immediately commence an investigation to determine the scope of the disclosure and mitigate any possible resulting damages, including immediately informing the Affected Party, the party disclosing said confidential information hereunder, following discovery of such incident. The Receiving Party shall ensure that a proper record of such unauthorized or inadvertent use or disclosure is kept and provide a written incident report, within forty-eight (48) hours after the incident is discovered, that details the circumstances surrounding the unauthorized disclosure, the date of the use or disclosure, a brief description of the information used or disclosed, any remedial measures taken to retrieve or otherwise repossess such information or other measures to mitigate the use or disclosure of such information, and the names and addresses of the affected individuals involved, if known. A breach is considered discovered on the first day on which the Receiving Party, its contractors, subcontractors or any agent thereof, knows or should have known of such breach.

ii. In the event of a data breach, the Receiving Party is required to notify the affected individuals within a reasonable amount of time, but no later than sixty (60) calendar days after the discovery of the breach or earlier if so required by law, except where a law enforcement official determines that a notification would impede a criminal investigation or cause damage to national security. Notification shall be in a form and format prescribed by Affected Party and shall meet the requirements of applicable local, state and federal law. The Receiving Party, CUNY or DOHMH as appropriate where responsible for the breach, shall be responsible for all costs associated with providing notification to all affected individuals when notification is required by law.

B. The Receiving Parties recognize that irreparable harm may result to Affected Party, and to the business of the City, in the event of any breach by a Receiving Party of any of the covenants and assurances contained in this Agreement. In the event of a breach of any of the covenants and assurances contained herein, the Affected Party shall be entitled to seek immediate injunctive relief restraining the Receiving Parties, their contractors, subcontractors or agents thereof, from any continued violation, including but not limited to termination of access to any client data, as well as such further relief as may be granted by a court of competent jurisdiction.

C. A breach of this Article shall constitute a material breach of this Agreement for which the Affected Party may terminate this Agreement as indicated herein. If for any reason term of this Agreement is violated, all Affected Party data shall be either destroyed or returned, unless otherwise authorized by the Affected Party.

ARTICLE 6. LIABILITY FOR DAMAGES

A. In no event will the City be liable for any use or disclosure of the Data by CUNY, its employees, agents, and/or contractors, or for any claims, damages, losses, or liabilities, of whatsoever kind or nature, which may arise out of or in connection with the use or disclosure of the Data by CUNY, its employees, agents, and/or contractors.

B. CUNY agrees to the extent permitted by law to be responsible for its own acts in conducting the project that result in damages.

C. In the event of an unauthorized disclosure of Data by CUNY, as determined by a court of competent jurisdiction, in addition to any other obligations and/or liabilities pursuant to this Agreement, CUNY shall reimburse the City for any administrative fines, penalties or awards assessed against the City by a regulatory authority and the reasonable and substantiated costs related to providing notifications to affected individuals as required by law.

ARTICLE 7. NOTICES AND COMMUNICATION

All notices and requests hereunder by either party shall be delivered in writing, and except as otherwise specified in this Agreement, shall be delivered by hand or sent via Registered or Certified Mail, Return Receipt Requested, or by overnight mail, Express Mail or other overnight delivery service that provides a receipt to the sender, and directed to the address of the Parties as follows:

If to DSS/HRA:

Attn: Kinsey Dinan
NYC Department of Social Services/Office of Evaluation and Research
150 Greenwich Street, 42nd Floor
New York, NY 10007

If to DOHMH:

Attn: Ellen Wiewel
NYC Department of Health and Mental Hygiene / Division of Disease Control / Housing Services Unit
42-09 28th Street
Long Island City, NY 11101

If to CUNY:

Attn: Denis Nash
CUNY Institute for Implementation Science in Population Health
55 West 125th St, 6th floor
New York, NY 10027
646-543-2407

ARTICLE 8. TERMINATION

Any party may terminate this Agreement upon thirty (30) days prior written notice to the representative of the other Parties.

ARTICLE 9. MODIFICATION

This Agreement may be modified upon mutual agreement among the Parties set forth in writing and signed on behalf of each of the Parties. It may not be modified orally.

ARTICLE 10. ENTIRE AGREEMENT

This Agreement contains all the terms and conditions agreed upon by the Parties hereto, and no other agreement, oral or otherwise, regarding the subject matter of this Agreement shall be deemed to exist or to bind any of the Parties hereto, or to vary any of the terms contained herein.

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IN WITNESS WHEREOF, the Parties have executed this Agreement on the dates appearing below their respective signatures.

THE NEW YORK CITY DEPARTMENT OF HEALTH AND MENTAL HYGIENE

BY: _____

NAME: Demetre Darikalaker

TITLE: Deputy Commissioner

DATE: 11/22/19

DN   The City University of New York

~~THE NEW YORK CITY DEPARTMENT OF SOCIAL SERVICES/ HUMAN RESOURCES ADMINISTRATION~~

State of New York
County of Kings

On the 6th day of Dec, 2019, before me personally appeared ____ Denis Nash ____ personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her capacity, and that by his/her signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.

BY: D. Nash

NAME: Denis Nash

TITLE: Professor

DATE: 12/6/19

DN
The New York City Department of Social Services/ Human Resources Administration

~~THE CITY UNIVERSITY OF NEW YORK~~

BY: _____

NAME: _____

TITLE: _____

DATE: 11/4/19

SAMUEL JOSEPH GARCIA
NOTARY PUBLIC STATE OF NEW YORK
Registration No. 01GA6382579
Qualified in Kings County
Commission Exp October 29, 2022

A C K N O W L E D G E M E N T S:

STATE OF NEW YORK)
:ss:
COUNTY OF NEW YORK)

On this _18_ day of _December_ 20_19_, before me personally came _____

Vincent Pullo, to me known and known to me to be _ACCO_ _____ of

THE NEW YORK CITY DEPARTMENT OF SOCIAL SERVICES/HUMAN

RESOURCES ADMINISTRATION, the person described in and who is duly authorized to

execute the foregoing instrument on behalf of the Commissioner, and he/she acknowledged to

me that he/she executed the same for the purpose therein mentioned.

JOEL FEUER
Notary Public, State of New York
No. 01FE6046621
Qualified in Kings County
Commission Expires August 14, 20_22_

NOTARY PUBLIC

STATE OF NEW YORK   )
:ss:
COUNTY OF NEW YORK)

On this _22nd_ day of _November_ 20_19_, before me personally came

Demetre Daskalakis, to me known, who, being by me duly sworn, did

depose and say that she/he is the _Deputy Commissioner_ of **THE**

NEW YORK CITY DEPARTMENT OF HEALTH AND MENTAL HYGIENE, the person

described in and who is duly authorized to execute the foregoing instrument, and acknowledged

that she/he executed the same for the purposes therein mentioned.

NOTARY PUBLIC

STATE OF NEW YORK)
Kings :ss:
COUNTY OF NEW YORK)

On this __6th__ day of __December__ 20_19_, before me personally came

__Denis Nash__, to me known, who, being by me duly sworn, did

depose and say that she/he is the __Professor__ of **THE**

CITY UNIVERSITY OF NEW YORK, the person described in and who is duly authorized to

execute the foregoing instrument, and acknowledged that she/he executed the same for the

purposes therein mentioned.

_____
NOTARY PUBLIC