NYC HEALTH + HOSPITALS

WHAT WE DO

NYC Health + Hospitals (the System) is the largest municipal health care system in the nation, serving more than one million New Yorkers each year—approximately 65 percent of whom are adults on Medicaid or are uninsured—across over 45 patient care locations in the City's five boroughs. The System provides comprehensive health care services including preventive and primary care, behavioral health care, trauma care, high-risk neonatal and obstetric care, and burn care. The System's 11 acute care hospital sites also serve as major teaching hospitals. In addition, the System includes: MetroPlusHealth, a managed health care insurance provider plan; an Accountable Care Organization that provides Medicare beneficiaries with care coordination and chronic disease management; a Certified Home Health Agency that provides community-based clinical services after a hospital stay; a Health Home that coordinates care for people with chronic conditions and serious mental health conditions; and Correctional Health Services (CHS), which provides care to individuals in custody on Rikers Island.

FOCUS ON EQUITY

NYC Health + Hospitals' mission is to deliver high-quality health care services to all New Yorkers with compassion, dignity, and respect, regardless of income, immigration status, gender identity, or insurance status. In keeping with its mission, NYC Health + Hospitals provides accessible, equitable care to diverse communities, including historically marginalized populations, without exception. More than 70 percent of patients identify as either Black/African American, Hispanic/Latinx, or Asian American Pacific Islander, and an estimated 30 percent of patients have limited English proficiency. The System serves marginalized groups who are more likely to experience poverty and face a disproportionate amount of harmful daily stressors and barriers, which contribute to and exacerbate chronic disease and health inequity.

Systemwide, nearly 70 percent of discharges are patients covered by Medicaid or the Essential Plan—New York States' free or low-cost insurance option for adults with low incomes who do not qualify for Medicaid. The System works to advance health equity by creating models of care that remove barriers for specific populations. The System's Street Health Outreach + Wellness (SHOW) program addresses the needs of diverse populations, with a focus on people experiencing homelessness, by deploying mobile health units across the City to reach underserved individuals. For example, SHOW provides care without pre-scheduled appointments or costs, connecting thousands of New Yorkers to essential services including primary care, wound care, chronic disease management, testing and vaccinations, mental health resources, and housing supports. Additionally, the System's Correctional Health Services (CHS) division provides a full spectrum of high-quality health care to individuals in custody in New York City with dignity and respect. CHS' mission is to diagnose and treat such individuals and to provide support from the first to the last day in jail, ultimately helping patients successfully reenter their communities. NYC Health + Hospitals also continues to expand its MetroPlusHealth plan, offering low- to no-cost health insurance options to eligible New Yorkers.

Finally, to further address equity, an internal advisory group called the Equity and Access Council supports the System's Office of Diversity and Inclusion and develops initiatives that promote equity among both staff and patients. The Council focuses on optimizing care delivery and health outcomes by eliminating racial and social barriers, promoting institutional and structural equity, identifying and reducing health disparities, and continuously improving the health of vulnerable communities. Recognizing the importance of a diverse workforce, the System established the Medical Opportunities for Students and Aspiring Inclusive Clinicians (MOSAIC) program to help underrepresented groups access pathways to join the medical workforce. NYC Health + Hospitals continues to develop recruitment and retention programs to attract staff who reflect the communities it serves.

OUR SERVICES AND GOALS

SERVICE 1 **Provide medical, mental health and substance use services to New York City residents regardless of their ability to pay.**

Goal 1a Expand access to care.

Goal 1b Enhance the sustainability of the Health + Hospitals system.

Goal 1c Maximize quality of care and patient satisfaction.

HOW WE PERFORMED

- The total number of unique patients remained stable, decreasing by less than one percent to 693,940 unique patients in the first four months of Fiscal 2026, from 699,656 unique patients in the first four months of Fiscal 2025. The number of unique patients treated has been generally stable over the last five fiscal years, with modest year-to-year variations, influenced in part by investments in new and expanded services and improved scheduling.

- The number unique of primary care patients increased two percent from the first four months of Fiscal 2025 to 462,108 in the first four months of Fiscal 2026. This is the highest amount recorded since this indicator was first tracked in Fiscal 2015. This is largely due to strengthened care team support, more proactive patient outreach, and better systems, including scheduling tools, that help practices identify where new primary care patients can be seen across the System.

- The number of uninsured patients served decreased by seven percent to 129,277 in the first four months of Fiscal 2026 compared to the same period in Fiscal 2025. As was anticipated, this decrease is primarily driven by an increase in access to health insurance during this period as measures implemented by New York State—such as continuous Medicaid eligibility for children under the age of six and Medicaid eligibility expansion for New Yorkers aged 65 and older regardless of immigration status—moved many previously uninsured patients into formal insurance plans. The number of uninsured patients served includes patients enrolled in NYC Care, the System's health care access program available to patients who are not eligible for, or are unable to afford, health insurance coverage.

- Enrollment in NYC Care decreased 14 percent from the first four months of Fiscal 2025 to the same period in Fiscal 2026, due mainly to the expansion of health insurance eligibility. However, because enrollment in NYC Care requires health insurance screening, the drop may also be due, in part, to increased fear of sharing personal information with government systems, particularly related to immigration status. It is notable that the System has seen patients remain engaged in care even if they do not complete health insurance screening. Still, NYC Care launched an ambitious new campaign in the fall of 2025 to combat stigma and encourage enrollment in NYC Care. NYC Care continues to partner with 23 community-based organizations across the City, including with the New York City Department of Health and Mental Hygiene, to provide outreach, education, and enrollment assistance.

- The number of telehealth visits conducted in the first four months of Fiscal 2026 decreased by six percent compared to the same period in Fiscal 2025, from 145,634 visits to 136,632 visits. This ongoing downward trend reflects a continued stabilization in how patients are distributed between in-clinic visits and telehealth services, indicating that the balance between the two modalities is normalizing over time following the temporary uptick seen during fiscal years of the COVID-19 pandemic.

- The number of completed eConsults decreased 29 percent in the first four months of Fiscal 2026 to 101,334 from 143,464 in the same period of Fiscal 2025. As the initial eConsult pathway is now complemented by additional methods for patients to access specialty consultation, and as a redesigned eConsult pathway—allowing greater utilization of the Systems' specialists—is gradually expanded across services over an ongoing multi-year effort, this downward trend is anticipated to continue until the eConsult redesign is fully implemented.

- The percentage of eligible primary care and obstetrician-gynecologist (OBGYN) patients with a mammogram completed in the last two years reached 72.4 percent in the first four months of Fiscal 2026. Due to changes in the indicator definition, which now reflects the expanded eligible age range for women to receive a mammogram from 40-70 to 40-74 this year, this completion percentage is not directly comparable to the 82.1 percent screened in the first four months of Fiscal 2025. Expansion of breast imaging within the System's network of community clinics is helping to improve screening rates by providing additional capacity for the System. A systemwide breast cancer screening registry and accompanying dashboard have been launched to support primary care, OBGYN, and breast imaging departments in understanding their performance, tracking progress over time, and pulling patient-level data to support targeted outreach and intervention.

- Eligible patients receiving prenatal depression screenings exceeded the System's target of 90 percent with 93.6 percent of patients screened in the first four months of Fiscal 2026. Relatedly, 79.6 percent of eligible patients received postpartum depression screenings in the first four months of Fiscal 2026, 10 percentage points behind the 90 percent target. To improve these screenings metrics, in February 2025, the System launched a peripartum mental health screening program across all facilities. As part of this, patients are screened during their pregnancy (first and third trimesters), after they give birth on the Labor and Delivery unit, and six weeks post-delivery during their follow-up visit. To further maintain and increase screenings, all peripartum patients receive education materials on perinatal health through their After-Visit Summary. The System will continue to monitor all sites during program implementation and will provide ongoing re-education, staff engagement, and follow-up as necessary. Additionally, the System continues to maintain and build a robust referral network to licensed mental health practitioners with a positive screening score.
- The proportion of individuals living with HIV that are retained in HIV primary care was maintained at the System's target level of 85 percent, staying stable at 86.7 percent in the first four months of Fiscal 2026 compared to 86.4 percent in the same period of Fiscal 2025. The HIV retention metric tracks the ability for the System's HIV clinical programs to maintain people living with HIV in care, as measured by regular clinical care within an HIV clinic or from an HIV Specialist.
- The number of calendar days to the third next available new appointment (TNAA) during the first four months of Fiscal 2026 was nine days for adult medicine (a 12-day decrease from the first four months of Fiscal 2025), and 18 days for pediatric medicine (a five-day decrease). While adult TNAA continues to outperform the 14-day target, pediatric TNAA remains behind the ambitious five-day target. Recent enhancements to primary care provider schedules, along with other strengthened mechanisms, have resulted in a shorter TNAA for both adult and pediatric primary care. As the System continues to monitor and improve new appointment wait times, a focused effort is underway to improve pediatric access and connect patients with the earliest available appointments across all facilities.
- The System is committed to prioritizing patients' successful transition to essential resources after discharge. As a result of this commitment, the percentage of follow-up appointments kept within 30 days after behavioral health discharge from a NYC Health + Hospitals facility has improved slightly from 61.8 percent in the first four months of Fiscal 2025 to 62.5 percent in the first four months of Fiscal 2026. This consistent improvement is accomplished by the close collaboration and partnership between the NYC Health + Hospitals Office of Behavioral Health and all of the System's facilities to support systemwide efforts to ensure staff training is centered on workflow practices that help patients keep their follow-up appointments soon after discharge.
- Total correctional health clinical encounters per 100 average daily population of people in custody increased to 3,780 encounters in the first four months of Fiscal 2026 from 3,570 encounters in the first four months of Fiscal 2025. This is due to natural fluctuations in the clinical needs of current patients and operational and environmental factors in the jails, as well as changes in clinical workflows and documentation. Relatedly, correctional health patients with a substance use diagnosis that received jail-based contact increased by three percentage points to 87 percent in the first four months of Fiscal 2026, improving but still slightly behind the 90 percent target.
- The percentage of patients who left the emergency department without being seen decreased to 3.4 percent in the first four months of Fiscal 2026 from 4.3 percent in the first four months of Fiscal 2025. This marks the lowest level seen since Fiscal 2021. This one percentage-point decrease reflects a variety of ongoing improvement efforts, including better patient tracking and flow, faster registration and triage processes, more effective provider and nurse staffing and utilization supported by demand-based staffing models, streamlined radiology protocols, using providers in triage to enable earlier evaluation and treatment, and ongoing work to identify and eliminate any unnecessary lab and radiology testing.
- In the first four months of Fiscal 2026, the net days of revenue for accounts receivable (AR) days improved to 28.0 days, down from 51.0 days in the first four months of Fiscal 2025. Over the past several months, AR days have remained relatively stable. The Systems' facilities continue to actively manage outstanding claims to ensure timely collections from insurance carriers.

- The patient care revenue/expenses percentage increased to 76.6 percent in the first four months of Fiscal 2026 from 73.8 percent in the first four months of Fiscal 2025. Given the System's focus on improving its revenue cycle services, the System continues to outperform its target. This is largely due to implementing better documentation and coding practices, completing successful managed care contracting negotiations, and achieving value-based payment improvements. Tracking this metric helps ensure that the System is being fairly and appropriately reimbursed for the critical services it provides.

- MetroPlusHealth, a subsidiary of NYC Health + Hospitals offering low-cost to no-cost insurance plans, has maintained stable membership with 685,550 members in the first four months of Fiscal 2026 compared to 685,731 in the first four months of Fiscal 2025. Additionally, the MetroPlus Health Plan's medical spend at NYC Health + Hospitals increased to 47.0 percent in the first four months of Fiscal 2026 from 40.4 percent in the first four months of Fiscal 2025.

- The proportion of uninsured patients who are enrolled in insurance or financial assistance through NYC Health + Hospitals' financial counseling services increased to 86 percent in the first four months of Fiscal 2026 from 76 percent the first four months of Fiscal 2025. NYC Health + Hospitals continues to see improvement in the percentage of uninsured patients screened and enrolled in insurance or financial assistance as a result of realigned systemwide staffing levels with patient volumes and enhanced financial counseling workflows.

- The proportion of NYC Health + Hospitals' primary care patients who activate MyChart accounts increased to 86.8 percent in the first four months of Fiscal 2026, nearly four percentage points better than the same period in Fiscal 2025 and reaching a record high since this indicator was first tracked in Fiscal 2022. This increase reflects stable growth atop a highly successful baseline activation rate. In addition to sustained direct engagement with patients at the point of care across facilities, there have been robust efforts in automated text messages encouraging MyChart activation.

- The System's outpatient satisfaction score remained stable at 87.6 percent between the first four months of Fiscal 2025 and the same period of Fiscal 2026. This continues to outperform the target of 85.4 percent in part because of shorter new patient appointments lengths. Inpatient satisfaction scores and post-acute care nursing home satisfaction scores also remained stable at 67.0 percent and 74.1 percent, respectively, over the same comparative periods. Looking ahead, outpatient, inpatient and post-acute scores are expected to improve as the System prioritizes employee experience improvement efforts informed by the 2025 biennial Employee Feedback Survey results released in November 2025.

- The percentage of patients diagnosed with diabetes who have controlled blood sugar reached a new record high, increasing to 70.5 percent in the first four months of Fiscal 2026 from 69.1 percent in the first four months of Fiscal 2025. Targeted data sharing by the System's Office of Population Health—used to support front-line teams in rapidly diagnosing diabetes when patients have two repeat glycated hemoglobin (HbA1c) results of 6.5 percent or higher—has helped reduce diagnostic inertia, leading to more timely diabetes diagnoses and earlier initiation of treatment. The HbA1c testing rate remains historically high. Additionally, targeted outreach efforts to patients with poorly controlled blood sugar, primary care programs like Treat to Target (which prioritizes proactive medical strategies), and support from clinical pharmacists continue to be essential to the diabetes management toolkit for primary care providers.

- At NYC Health + Hospitals, patient safety culture is evaluated through a staff survey conducted every other year. The two most recent surveys were administered in the fall of Fiscal 2024 and the fall of Fiscal 2026. In the survey, staff are asked to rate their work unit's overall patient safety, and the resulting safety grade reflects the share of respondents who select "very good" or "excellent" as their rating. Compared to Fiscal 2024, the System saw a nine percentage-point increase in acute-care safety grades, reaching 64.0 percent in Fiscal 2026. Post-acute care safety grades rose 11 percentage points to 74.0 percent, and ambulatory care safety grades increased by three percentage points to 61.0 percent over the same period. These improvements reflect the System's commitment to a just culture and psychological safety, as it has prioritized workflow improvements, transparent event reporting, and open dialogue between staff and leadership. This increased transparency, paired with meaningful follow-up actions and recognition of safe practices, has strengthened a culture of continuous learning and safety across all NYC Health + Hospitals sites.

- The 21 facility specific Community Advisory Boards (CABs) held 40 meetings in the first four months of Fiscal 2026, mostly consistent with the same period of Fiscal 2025. The Council of Community Advisory Boards—comprising the 21 CAB chairs and serving as a collective body for health advocacy—ensures that facilities receive timely and relevant information from the System and that CAB concerns are elevated appropriately. The Council of CABs held two meetings in the first four months of Fiscal 2026, matching its activity during the same period in Fiscal 2025.

SERVICE 1 Provide medical, mental health and substance use services to New York City residents regardless of their ability to pay.

Goal 1a Expand access to care.

Performance Indicators	Actual			Target		4-Month Actual	
	FY23	FY24	FY25	FY26	FY27	FY25	FY26
★ ✹ Unique patients	1,204,174	1,210,437	1,191,776	⇧	⇧	699,656	693,940
Unique primary care patients (seen in the last 12 months)	427,337	442,736	459,441	*	*	452,220	462,108
★ Uninsured patients served	219,943	249,785	231,368	*	*	139,270	129,277
★ NYC Care enrollment	119,234	143,503	140,222	⇧	⇧	148,525	128,157
Telehealth visits	608,204	541,518	448,174	*	*	145,634	136,632
★ eConsults completed	426,532	437,552	395,090	⇧	⇧	143,464	101,334
★ Eligible women receiving a mammogram screening (%)	78.3%	79.7%	80.8%	80.0%	80.0%	82.1%	72.4%
Eligible patients receiving prenatal depression screenings (%)	NA	86.4%	92.7%	90.0%	90.0%	90.5%	93.6%
Eligible patients receiving postpartum depression screenings (%)	NA	77.2%	79.1%	90.0%	90.0%	79.5%	79.6%
★ HIV patients retained in care (%) (annual)	84.5%	87.3%	87.4%	85.0%	85.0%	86.4%	86.7%
Calendar days to third next available new appointment – Adult medicine	12.0	20.0	13.0	14.0	14.0	21.0	9.0
Calendar days to third next available new appointment – Pediatric medicine	13.0	23.0	17.0	5.0	5.0	23.0	18.0
★ Follow-up appointment kept within 30 days after behavioral health discharge (%)	54.0%	62.0%	65.0%	⇧	⇧	61.8%	62.5%
Total correctional health clinical encounters per 100 average daily population	12,020	10,637	12,437	*	*	3,570	3,780
Correctional health patients with a substance use diagnosis that received jail-based contact (%)	85%	85%	85%	90%	90%	84%	87%

★ Critical Indicator ✹ Equity Indicator "NA" Not Available ⇧⇩ Directional Target * None

Goal 1b Enhance the sustainability of the Health + Hospitals system.

Performance Indicators	Actual			Target		4-Month Actual	
	FY23	FY24	FY25	FY26	FY27	FY25	FY26
Patients who left Emergency Department without being seen (%)	5.0%	5.1%	3.7%	4.0%	4.0%	4.3%	3.4%
★ Net days of revenue for accounts receivable	46.4	64.1	31.8	25.0	25.0	51.0	28.0
Patient care revenue/expenses (%)	73.8%	73.8%	76.9%	75.0%	75.0%	73.8%	76.6%
★ ✹ MetroPlus membership	715,343	715,898	687,587	⇧	⇧	685,731	685,550
★ MetroPlus Health Plan medical spending at Health + Hospitals (%)	43.3%	43.5%	38.4%	⇧	⇧	40.4%	47.0%
Uninsured patients enrolled in insurance or financial assistance (%)	79%	73%	83%	*	*	76%	86%

★ Critical Indicator ✹ Equity Indicator "NA" Not Available ⇧⇩ Directional Target * None

Goal 1c Maximize quality of care and patient satisfaction.

Performance Indicators	Actual			Target		4-Month Actual	
	FY23	FY24	FY25	FY26	FY27	FY25	FY26
MyChart Activations - Primary Care (%)	72.4%	76.6%	84.0%	*	*	83.0%	86.8%
Outpatient satisfaction rate (%)	85.4%	86.4%	88.0%	85.4%	85.4%	87.6%	87.6%
Inpatient satisfaction rate (%)	61.7%	64.7%	65.7%	65.8%	65.8%	67.0%	67.0%
★ Post-acute care satisfaction rate (%)	84.0%	86.5%	89.0%	86.3%	86.3%	74.1%	74.1%
★ Patients diagnosed with diabetes who have appropriately controlled blood sugar (%)	68.8%	68.2%	67.8%	⇧	⇧	69.1%	70.5%
Overall safety grade – Acute care (%)	NA	55.0%	NA	*	*	NA	64.0%
Overall safety grade – Post-acute care (%)	NA	63.0%	NA	*	*	NA	74.0%
Overall safety grade – Ambulatory care (diagnostic & treatment centers) (%)	NA	58.0%	NA	*	*	NA	61.0%
Total System Council of Community Advisory Board meetings held over the year	10	10	10	*	*	2	2
Total facility-specific Community Advisory Board meetings held over the year	190	190	195	*	*	41	40

★ Critical Indicator ✹ Equity Indicator "NA" Not Available ⇧⇩ Directional Target * None

AGENCY-WIDE MANAGEMENT

Performance Indicators	Actual			Target		4-Month Actual	
	FY23	FY24	FY25	FY26	FY27	FY25	FY26
Payout ($000)	$76,625	$59,084	$54,775	*	*	$16,905	$3,483

★ Critical Indicator ✹ Equity Indicator "NA" Not Available ⇧⇩ Directional Target * None

AGENCY RESOURCES

Resource Indicators	Actual			Sept. 2025 MMR Plan	Updated Plan	Plan	4-Month Actual	
	FY23	FY24	FY25	FY26	FY26[1]	FY27[1]	FY25	FY26
Expenditures ($000,000)[2]	$10,878.7	$12,414.4	$13,027.5	$12,092.1	$12,092.1	$12,325.2	$4,650.1	$4,291.8
Revenues ($000,000)	$11,587.9	$13,174.5	$13,677.3	$12,667.1	$12,667.1	$12,851.5	$4,751.2	$4,274.5
Personnel	39,738	43,582	46,256	44,554	46,917	46,917	44,719	46,853
Overtime paid ($000,000)	$215.3	$258.7	$300.9	$219.0	$226.6	$226.6	$101.4	$111.9
Capital commitments ($000,000)	$414.8	$386.0	$293.1	$1,351.9	$1,495.8	$630.7	$60.0	$18.8

[1]February 2026 Financial Plan. [2]Expenditures include all funds "NA" - Not Available

SPENDING AND BUDGET INFORMATION

Where possible, the relationship between an agency's goals and its expenditures and planned resources, by budgetary unit of appropriation (UA), is shown in the 'Applicable MMR Goals' column. Each relationship is not necessarily exhaustive or exclusive. Any one goal may be connected to multiple UAs, and any UA may be connected to multiple goals.

Unit of Appropriation	Expenditures FY25[1] ($000,000)	February 2026 Financial Plan FY26[2] ($000,000)	Applicable MMR Goals[3]
001 - Lump Sum Appropriation (OTPS)[1]	$3,351.1	$2,119.4	All

[1]These figures are limited to the City's contribution and planned contribution respectively. [2]Comprehensive Annual Financial Report (CAFR) for the Fiscal Year ended June 30, 2025. Includes all funds. [3]Includes all funds [4]Refer to goals listed at front of chapter.

NOTEWORTHY CHANGES, ADDITIONS OR DELETIONS

- The indicator 'Eligible women receiving a mammogram screening (%)' in Goal 1a was updated in that the eligible age range for women to receive a mammogram was expanded from 40–70 to 40–74 this year. This means the screening percentage from Fiscal 2026 and onwards is not directly comparable to data Fiscal 2025 and before.
- The Fiscal 2025 figure for 'Payout ($000)' in the Agency-wide Management section was updated from $4,191 to $54,775. Preliminary data for this indicator was sourced from the Law Department for publication in the Fiscal 2025 Mayor's Management Report, while this revised value was provided by the Office of Management and Budget.
- The Fiscal 2026 target for 'Net days of revenue for accounts receivable' in Goal 1b was updated from 28.0 to 25.0 to reflect the System's ability to efficiently collect revenue and meet industry standards.
- The Fiscal 2026 target for 'Patient care revenue/expenses (%)' in Goal 1b was updated from 60.0 to 75.0 percent to better reflect the System's continued success in generating a larger share of patient care revenue as a percentage of its expenses. This target establishes accountability for achieving the performance level necessary to support the System's long-term financial sustainability and reflects the actions taken by the System, including strong revenue cycle performance, to meet this metric.

ADDITIONAL RESOURCES

- For more information on NYC Care, please visit: www.nyccare.nyc

For more information on the agency, please visit: www.nychealthandhospitals.org