

MOUNT SINAI HEALTH SYSTEM

Mount Sinai Brooklyn | Mount Sinai-Union Square



COMMUNITY SERVICE PLAN

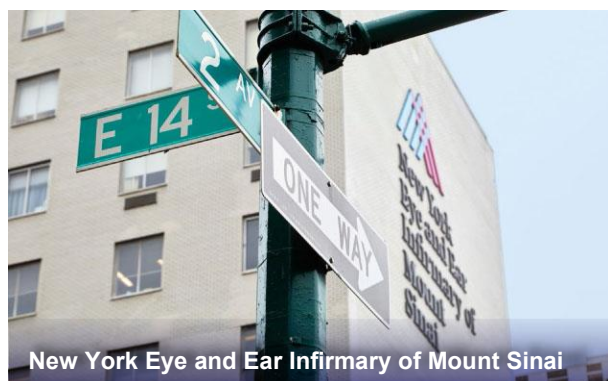
2025–2027



The Mount Sinai Hospital



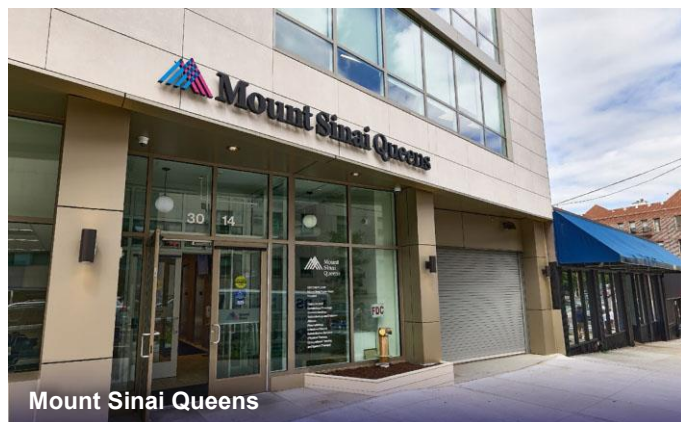
Mount Sinai Morningside



New York Eye and Ear Infirmary of Mount Sinai



Mount Sinai West



Mount Sinai Queens



Mount Sinai Brooklyn

Counties covered: Bronx, Kings, New York, Queens, Richmond

Mount Sinai Brooklyn

3201 Kings Highway
Brooklyn, NY 11234

The Mount Sinai Hospital

Gustave L. Levy Place
New York, NY 10029

Mount Sinai Morningside

1111 Amsterdam Avenue
New York, NY 10025

Mount Sinai Queens

25-10 30th Avenue
Astoria, NY 11102

Mount Sinai West

1000 Tenth Avenue
New York, NY 10019

New York Eye and Ear Infirmary of Mount Sinai

310 East 14th Street
New York, NY 10003

Counties covered: Bronx, Kings, New York, Queens, and Richmond

Community Service Plan 2025–2027

Community Health Needs Assessment (CHNA) – Completed December, 2023
CHNA Implementation Strategy – Completed Mid 2024 and Adopted May 24, 2024,
by Governing Boards of:

Mount Sinai Brooklyn

The Mount Sinai Hospital

Mount Sinai Morningside and Mount Sinai West

New York Eye and Ear Infirmary of Mount Sinai

Participating Local Health Department

The report is supplemented with information provided by the New York City Department of Health and Mental Hygiene and the New York State Department of Health.

Entity completing assessment and plan

Entities Completing Community Health Needs Assessment and Implementation Strategy:

Mount Sinai Health System with the assistance of Verité Healthcare Consulting LLC.

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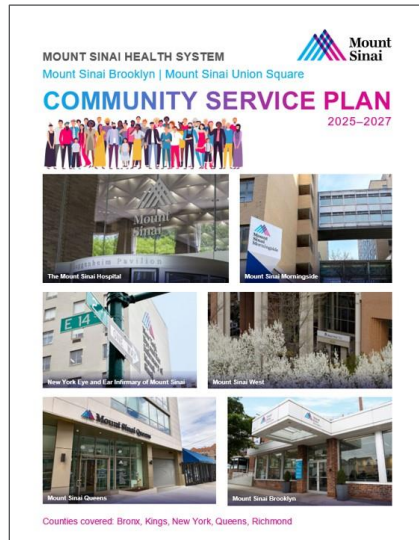
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December 31, 2025

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WHAT'S NEW ABOUT THE 2025–2030 NEW YORK STATE PREVENTION AGENDA

NYS DOH Proposal...



The 2025–2030 Prevention Agenda adopts a broad perspective, emphasizing factors that influence health beyond traditional health outcomes, prevention strategies, medical care, and public health systems. The Prevention Agenda outlines 24 key priorities to address health conditions, behaviors, and systemic issues such as poverty, education, housing, and access to quality health care. Addressing these issues is crucial for reducing health disparities.

The priorities are grouped into five domains based on Healthy People 2030's Social Determinants of Health framework:

1. Economic Stability
2. Social and Community Context
3. Neighborhood and Built Environment
4. Health Care Access and Quality
5. Education Access and Quality

By targeting the root causes of health inequities, the Prevention Agenda promotes cross-sector collaboration, community engagement, and integrated planning to advance equity statewide.

In alignment with these priorities, the Mount Sinai Health System reaffirms its commitment to improving community well-being across the New York City metropolitan region. In the wake of the COVID-19 pandemic, the Health System has focused on rebuilding safe, equitable, and meaningful partnerships that redefine access to care.

The Community Health Needs Assessment (CHNA), and accompanying Implementation Strategy/Community Service Plan, reflects a unified, system-wide approach across the Mount Sinai Health System's hospital campuses:

- Mount Sinai Brooklyn
- The Mount Sinai Hospital
- Mount Sinai Queens
- Mount Sinai Morningside
- Mount Sinai West
- New York Eye and Ear Infirmary of Mount Sinai





PREVENTION AGENDA PRIORITIES AND DISPARITIES

Developing Objectives, Interventions, and Action Plan

Alignment with Prevention Agenda

Recognizing overlapping service areas, Mount Sinai developed its Community Health Needs Assessment (CHNA) and Implementation Strategy by collaboratively identifying shared priorities and empowering internal teams and external partners to advance equity, particularly for medically underserved populations. Grounded in the CHNA and a comprehensive assets assessment and aligned with the New York State Prevention Agenda and NYC public health goals, the Health System has identified the following three priorities on which to align initiatives:

- Primary Prevention, Substance Misuse, and Overdose Prevention
- Preventive Services for Chronic Disease Prevention and Control
- Preventive Services for Healthy Children

Through targeted, evidence-based programs, Mount Sinai continues to invest in education, innovation, and research to transform health care delivery and ensure its mission to serve diverse communities remains sustainable and impactful. Details about initiatives of The Mount Sinai Health System that align with Prevention Agenda during 2025–2027 are discussed below.

Action 1 – Primary Prevention, Substance Misuse, and Overdose Prevention

Domain 2: Social and Community Context

Substance use, misuse, and overdose mortality are persistent public health challenges in NYS and have lasting negative social, medical, and economic outcomes across the life span.

Priority 4: Primary Prevention, Substance Misuse, and Overdose Prevention

Goal: Reduce substance use, misuse, and overdose and/or associated harms.

Objective 4.10: Increase the number of naloxone kits distributed from 397,620 to 596,430.

i. Actions and Impact:

The REACH (Respectful and Equitable Access to Comprehensive Health Care) Program provides trauma-informed, harm-reduction-based care for individuals affected by substance use, and those living with hepatitis C. Its goal is to reduce overdose and related harms through compassionate, accessible services, including patient navigators to help reduce barriers and coordinate care. REACH offers overdose response training, naloxone distribution, and office-based buprenorphine treatment, available in-person and virtually.

Mount Sinai Behavioral Health Center (Downtown) aligns with the Social and Community Context domain, emphasizing social connectedness, reducing isolation, and addressing behavioral health needs within a community setting. The Mount Sinai Behavioral Health Center integrates mental health, substance use treatment, and primary care services to treat the whole person, offering programs such as Partial Hospitalization (PHP), Intensive Outpatient (OIP), and crisis stabilization services.

Mount Sinai West delivers comprehensive outpatient addiction care through the Addiction Institute and the REACH Program. Services include Medication-Assisted Treatment (MAT) with methadone, buprenorphine, and naltrexone, plus counseling, intensive outpatient programs, and specialized therapy groups. Distinct programs include Behavioral Health Express Care for walk-in evaluations, PHP for severe cases, and initiatives such as the Crystal Clear Project for LGBTQ+ individuals and a women's addiction clinic. REACH enhances care with overdose response training, naloxone distribution, and office-based buprenorphine treatment, delivered through a harm reduction approach in both in-person and virtual formats.





Mount Sinai Morningside offers similar outpatient addiction services through the Addiction Institute, integrated with its Comprehensive Assessment Center for streamlined psychiatric and addiction intake. It provides MAT, counseling, and intensive outpatient programs, with a strong focus on psychiatric integration and family-centered care. The site features Child & Family Services for adolescents and families affected by substance use. REACH mirrors West's harm reduction offerings, including overdose response training, naloxone kits, and office-based buprenorphine treatment, supporting individuals who do not require inpatient detox but need ongoing care for opioid use disorder and overdose prevention.

- ii. **Geographic Focus:** The geographic focus for these actions is the five counties that comprise New York City.
- iii. **Resource Commitment:**
 - Direct support from programs and activities
 - Indirect and in-kind support
 - Health professions education
 - Health care services
 - Mental health services
 - Subsidized health services
 - Services to Medicaid enrollees
 - Community health improvement activities
- iv. **Participant Roles:** Mount Sinai will facilitate clinical interventions of healthcare professionals and encourage community members to participate in initiatives.
- v. **Health Equity:** This initiative will improve access to community members who have systematically experienced greater obstacles to health based on their racial or ethnic group; religion; socioeconomic status; age; mental health; cognitive, sensory, or physical disability; sexual orientation; geographic location; or other characteristics historically linked to discrimination or exclusion.

Action 2 – Preventive Services for Chronic Disease Prevention and Control

Domain 4: Health Care Access and Quality

Goal: Reduce disparities in access and quality of evidence-based preventive and diagnostic services for chronic diseases.

Priority 3: Preventive Services for Chronic Disease Prevention and Control

Chronic diseases – such as **heart disease, stroke, cancer, diabetes, and obesity**, are the leading causes of disability and death in New York State, accounting for 6 out of 10 deaths. Most are preventable and linked to modifiable risk factors such as poor nutrition, physical inactivity, tobacco use, and excessive alcohol consumption. These conditions reduce quality of life, burden communities, and drive health care cost.

Goal: Reduce disparities in access and quality of evidence-based preventive and diagnostic services for chronic diseases.

Objectives:

- **30.0:** Increase the percentage of adults aged 35 years and older who had a test for high blood sugar in the past year from 78.1% to 82.4%.
- **32.0:** Increase the percentage of adults aged 18 years and older with hypertension who are currently taking medication to manage their high blood pressure from 77.0% to 81.7%.





i. **Actions and Impact:**

Diabetes Prevention and Management Program provides community-based screenings, education, and individualized care plans to prevent complications. The Mount Sinai Clinical Diabetes Institute provides comprehensive, patient-centered care for people with type 1, type 2, gestational diabetes, and related disorders. It is recognized as a leader in diabetes treatment and prevention, with more American Diabetes Association-certified Centers of Excellence than any other Health System in the New York City metro area. Free diabetes education classes are offered to patients, family members, and caregivers. Classes are led by Certified Diabetes Care and Education Specialists (CDCES) and offered virtually and in-person, and nutrition counseling is available.

High Blood Pressure Management Initiative focuses on early detection and intervention in community settings. Blood pressure screenings are offered at local community events, health fairs, clinics, and outreach sites. The program emphasizes lifestyle changes, medication adherence, and ongoing support, particularly for populations disproportionately affected by hypertension.

Heart Disease Prevention Services includes blood pressure, cholesterol and glucose screenings, and risk assessment and lifestyle counseling and modification support includes education on healthy eating, physical activity, stress management, smoking cessation, and reducing alcohol use.

Mount Sinai Cancer Screening Programs include:

Mount Sinai Mammovan

- Provides 3D digital mammography for women age 40+ across NYC
- Focuses on underserved communities to reduce barriers to care
- Screenings are free or low-cost; appointments via 844-EZMAMMO
- Goal: Early breast cancer detection and improved access

Mount Sinai Robert F. Smith Mobile Prostate Cancer Screening Unit

- Offers PSA testing and micro-ultrasound imaging for men ages 45–79
- Prioritizes high-risk groups, including Black men
- Services are free with follow-up care at Mount Sinai
- Goal: Early detection and reducing disparities in prostate cancer outcomes

ii. **Geographic Focus:** The geographic focus for these actions is the five counties that comprise New York City.

iii. **Resource Commitment:**

- Direct support from programs and activities
- Indirect and in-kind support
- Health professions education
- Health care services
- Mental health services
- Subsidized health services
- Services to Medicaid enrollees
- Community health improvement activities

iv. **Participant Roles:** Mount Sinai will facilitate clinical interventions of healthcare professionals and encourage community members to participate in initiatives.

v. **Health Equity:** This initiative will improve access to community members who have systematically experienced greater obstacles to health based on their racial or ethnic group; religion; socioeconomic status;





age; mental health; cognitive, sensory, or physical disability; sexual orientation; geographic location; or other characteristics historically linked to discrimination or exclusion.

Action 3 – Preventive Services for Healthy Children

Priority 5: Preventive Services for Healthy Children

Preventive services for children, including immunizations and health care screenings (including lead testing, hearing, and vision), are an important way to ensure they get the care and support they need to stay healthy.

Goal: Increase utilization of evidence-based preventive services for children.

Objective 5.0: Increase the percentage of infants who received diagnostic hearing test after failing their newborn hearing screening at 3 months of age from 23.4 percent to 23.4 percent.

Program: The Ear Institute of NYEE supports early identification and intervention of pediatric hearing loss. It offers a comprehensive, hospital-based model that integrates a full spectrum of pediatric hearing specialists under one roof, ensuring coordinated, family-centered care. As a mandated participant in the New York Early Hearing Detection and Intervention Information System (NYEHDI-IS), the program conducts universal newborn hearing screenings aligned with national benchmarks.

Action 4 – Access Preventive Services Flu Vaccines

Priority 5: Access Preventive Services Flu Vaccines

Flu vaccines help prevent illness, hospitalization, and death by boosting immunity against evolving flu strains. Annual vaccination protects individuals and vulnerable groups, easing the burden on the health care system.

Goal: Improve vaccination rates.

Objective: Increase the percentage of adults receiving annual flu vaccinations, particularly in high-risk underserved populations 10% by December 2028.

i. **Actions and Impact:**

Program: The Karpas Health Education and Community Outreach team offers annual flu vaccination clinics throughout Brooklyn and Manhattan, focusing on underserved neighborhoods. Influenza (flu) is a contagious disease that circulates every year and can be especially severe for individuals with chronic medical conditions. Providing flu vaccinations helps reduce infections and prevents serious complications among high-risk populations. These clinics are strategically located in areas with limited healthcare access and serve high-risk populations. The Karpas Center team partners with local organizations, senior centers, and community hubs to host events. By offering free vaccinations, multilingual education, and engaging trusted community leaders, the program increases vaccine uptake and protects vulnerable populations from flu-related complications.

ii. **Geographic Focus:** The geographic focus for these actions is the five counties that comprise New York City.

iii. **Resource Commitment:**

- Direct support from programs and activities
- Indirect and in-kind support
- Health professions education
- Health care services
- Mental health services
- Subsidized health services
- Services to Medicaid enrollees
- Community health improvement activities





- iv. **Participant Roles:** Mount Sinai will facilitate clinical interventions of healthcare professionals and encourage community members to participate in initiatives.
- v. **Health Equity:** This initiative will improve access to community members who have systematically experienced greater obstacles to health based on their racial or ethnic group; religion; socioeconomic status; age; mental health; cognitive, sensory, or physical disability; sexual orientation; geographic location; or other characteristics historically linked to discrimination or exclusion.

DATA REVIEW SUMMARY

Primary Data

The 2023 Community Health Needs Assessment (CHNA) employed a comprehensive, multi-source methodology to identify and evaluate community health priorities. Data collection occurred from September to November 2023 and included structured interviews with community stakeholders and public health experts.

Secondary Data

- Gathered from national, state, and local health departments.
- Included public health priorities, health disparities, Community Health Improvement Plans (CHIPs), ZIP code- and neighborhood-level statistics.

Hospital Utilization Data

- Analyzed patient care patterns and charity care metrics.
- Used to define each hospital's Community Benefit Service Areas (CBSAs).

Community Input Sessions

- Conducted through 15 facilitated discussions with 40 diverse stakeholders.
- Focused on health and wellness, access to care, and social determinants of health.

This multifaceted approach provided a well-rounded understanding of critical health issues across the communities served. A complete list of data sources is available in the “Data and Analysis” section of the full 2023 CHNA report, accessible on each hospital's website.

PARTNERS, PARTNER ROLES, AND COMMUNITY ENGAGEMENT

Partnerships and community engagement were central to the CHNA process. The Health System collaborated with community residents, service providers, and public health experts to identify shared health concerns and community strengths. Each hospital contributed its unique expertise to help shape and prioritize focus areas aligned with its organizational capabilities.

This collaborative approach not only supports Mount Sinai's internal initiatives but also empowers other organizations to develop and implement their own strategies. The Health System maintains a robust network of affiliations with governing bodies, schools, faith-based institutions, social service agencies, and community members. These partnerships are vital to advancing Mount Sinai's mission to expand access to quality care—particularly for medically underserved populations—and to promote health equity across all communities served.





EVIDENCE-BASED INTERVENTIONS AND STRATEGIES

The Mount Sinai Health System applies evidence-based best practices to improve health care services and outcomes across its communities. All interventions are guided by current research, clinical standards, and national benchmarks, such as Healthy People 2030. Programs are regularly evaluated for effectiveness, equity, and alignment with community needs.

Each hospital develops Community Service Plan (CSP) initiatives by leveraging internal resources and collaborating with external partners. Activities are co-designed and sustained with community-based organizations and internal departments. By combining Mount Sinai's clinical expertise with the strengths of its community partners, the Health System continues to advance health equity in meaningful and measurable ways.

PROGRESS AND EVALUATION

Over the next three years, hospitals within the Health System will implement strategies aligned with identified priority areas, translating plans into targeted programs and interventions. Each hospital will conduct annual evaluations to assess key metrics, program outcomes, and community feedback. These evaluations support continuous improvements by guiding mid-adjustments and informing future expansion or replications. Progress reports will highlight achievements, challenges, and factors influencing success.





OUR MISSION



Our Mission

Why we exist; why the world will be different because we are here

The mission of the Mount Sinai Health System is to provide compassionate patient care with seamless coordination and to advance medicine through unrivaled education, research, and outreach in the many diverse communities we serve.

Vision

Who we want to become; what we want to achieve or create

The Mount Sinai Health System's vision is to continue to grow and challenge convention through our pioneering spirit, scientific advancements, forward-thinking leadership, and collaborative approach to providing exceptional patient care in the many unique communities we serve.

Core Values

Safety: We protect our patients and our colleagues from harm.

Equity: We create a diverse and inclusive environment for our patients, students, and colleagues, free from bias, racism, and favoritism, to foster optimal care and just opportunities based on one's individual needs and abilities.

Agility: We are flexible and quick to adapt to changes.

Creativity: We identify and develop forward-thinking approaches to challenge conventions, solve problems, and push the boundaries of medicine.

Empathy: We demonstrate a deep understanding of our colleagues, our patients, and their loved ones through inclusion, compassion, respect, and caring.

Teamwork: We are better together by including the diverse perspectives of each team member to achieve outcomes far superior to those any individual could achieve alone.





MOUNT SINAI HEALTH SYSTEM



As one of the largest health care providers in the New York City region, the Mount Sinai Health System continually seeks ways to improve the health of our community residents. To support this effort, we conduct a comprehensive assessment every three years to better understand the health concerns and challenges faced by those we serve.

The Mount Sinai Health System Community Health Needs Assessment (CHNA) represents a collaborative effort among our facilities and external organizations to identify community health needs and develop strategic responses. This document outlines our plan to address these needs over the three-year period.

Our CHNA follows a systematic approach, bringing together hospitals and individuals representing a diverse cross-section of the community. These communities reflect the hospitals' patient populations and are geographically proximate to the facilities within the Mount Sinai Health System. While the communities are not contiguous, they share common characteristics, including the presence of community-based organizations, areas of poverty within otherwise affluent neighborhoods, and diverse populations.

The Health System has developed an Implementation Strategy/Community Service Plan to serve as a roadmap for the next three years. This plan will guide our resource investments and position us to reduce health care inequities more effectively and innovatively. As an academic medical center, the Icahn School of Medicine at Mount Sinai holds a vital social responsibility to generate and disseminate knowledge that advances health and health care delivery, while also providing essential services to underserved populations.

At Mount Sinai, we are deeply committed to addressing health disparities and promoting equity. The CHNA provides critical insights into the health concerns affecting our communities and informs our strategies to meet these needs.

Through the Implementation Strategy/Community Service Plan, the Mount Sinai Health System reaffirms its dedication to improving community health outcomes. By leveraging our academic expertise, clinical excellence, and strong partnerships, we aim to create sustainable, equitable solutions that address the root causes of health disparities and foster healthier communities across New York City.





MOUNT SINAI AT-A-GLANCE



The Mount Sinai Health System is an integrated health care system providing exceptional medical care to our local and global communities.

Encompassing the Icahn School of Medicine at Mount Sinai, the Mount Sinai Phillips School of Nursing, and seven hospital campuses in the New York City metropolitan area, as well as a large, regional ambulatory footprint, Mount Sinai is internationally acclaimed for its excellence in research, patient care, and education across a range of specialties.

The Health System's hospital campuses include Mount Sinai Brooklyn, The Mount Sinai Hospital, Mount Sinai Morningside, Mount Sinai Queens, Mount Sinai West, New York Eye and Ear Infirmary of Mount Sinai, and Mount Sinai South Nassau.

The Mount Sinai Health System is designed to increase efficiencies and economies of scale; improve quality and outcomes; and expand access to advanced primary, specialty, and ambulatory care services throughout a wide clinical network. The Health System includes more than 9,000 physicians, including general practitioners and specialists, and 11 freestanding joint-venture centers.

The Health System also features a robust and continually expanding network of multispecialty services, including more than 400 ambulatory practices located throughout the five boroughs of New York City, Westchester, and Long Island. With an extraordinary array of resources for the provision of compassionate, state-of-the-art care, the Mount Sinai Health System is poised to identify and respond to the health-related needs of the diverse populations we serve.





Awards and Accreditations



The Mount Sinai Health System strives to provide the best possible care to our patients. Our steadfast commitment and efforts to the communities we serve are regularly recognized by national publications and organizations that rank the country's top doctors and health care facilities each year.

Accreditation

The Mount Sinai Health System is proud to hold several accreditations, including the following:

Magnet Accreditation

Three Mount Sinai Health System hospitals have received renewed national recognition for excellence in nursing from the [American Nurses Credentialing Center's \(ANCC\) Magnet Recognition Program®](#). The Mount Sinai Hospital achieved Magnet® designation for the fifth consecutive time. Mount Sinai Queens and Mount Sinai South Nassau were recognized for the third time.

Awards

Mount Sinai is honored to receive several prestigious awards, including:

Newsweek World's Best Hospitals 2025

The Mount Sinai Hospital was ranked by *Newsweek*/Statista as No. 19 in the world, No. 7 nationally, No. 1 in New York State, and No. 1 in New York City on its The World's Best Hospitals 2025 list.

Newsweek World's Best Specialized Hospitals 2025

The Mount Sinai Hospital has earned positions in the fifth edition of the World's Best Specialized Hospitals 2025 list by *Newsweek*. This recognition identifies and honors the best hospitals around the globe in several specialties.





***Newsweek* World's Best Smart Hospitals 2025**

The Mount Sinai Hospital ranks No. 1 among full-service hospitals in New York City and No. 6 in the United States by *Newsweek* on its World's Best Smart Hospitals 2025 rankings. Mount Sinai Morningside was also among the top ranked in "World's Best Smart Hospitals" (No. 3 among New York City full-service hospitals).

***U.S. News & World Report* Best Hospitals**

The Mount Sinai Hospital is listed on the *U.S. News & World Report*® "Best Hospitals Honor Roll" for 2025-26 for the 10th consecutive year. The Honor Roll commends the country's top 20 hospitals, out of approximately 4,500 evaluated by *U.S. News & World Report*.

The Mount Sinai Hospital received the top 20 rankings in the following specialties: Cancer, Cardiology, Heart and Vascular Surgery, Diabetes & Endocrinology, Gastroenterology & GI Surgery, Geriatrics, Neurology/Neurosurgery, Obstetrics & Gynecology, Orthopedics, and Urology.

Mount Sinai Venture Named to *Fast Company*'s Annual List of the World's Most Innovative Companies for 2021

Kantaro Biosciences, LLC, a joint venture with RenalytixAI, was named to Fast Company's prestigious annual list of the "World's Most Innovative Companies" for 2021 and ranked first in the Joint Ventures category. Mount Sinai launched Kantaro in May 2020 to develop and scale production and distribution of a test kit to measure the presence and precise levels of COVID-19 antibodies.





COVID-19 FIVE YEARS LATER: REFLECTING, LEARNING, ADVANCING



In early 2020, Mount Sinai treated the first COVID-19 patient. Shortly after that, New York State declared a state of emergency, and COVID-19 cases started to rise. Mount Sinai staff are coming together to share their experiences of overcoming the pandemic in a lookback video titled “COVID-19 Five Years Later: Reflecting, Learning, Advancing.”

“We stood at the edge of the worst health care crisis in modern memory,” said David L. Reich, MD, President and Chief Operating Officer of The Mount Sinai Hospital, who narrates the video. “And no one knew. Over the next eight weeks, more than 18,000 New Yorkers would die of COVID-19—one every five minutes, more than 350 every day.”

A timeline takes us through those challenging times, featuring the resilience of front-line staff in the face of what seemed like a never-ending flow of patients, while ICU beds filled up. The video, too, takes us through how scientists and researchers were working nonstop to understand the virus, and coming up with several ways to treat and test for COVID-19.

Five years since the pandemic was officially declared, the Mount Sinai Health System is able to reflect on what it achieved and learned.





Addressing Social Determinants of Health: How Nurses Make a Difference



Social determinants of health (SDOH)—such as housing, food security, income, and access to care—often influence patient outcomes more than medical treatment. Nurses are uniquely positioned to identify these barriers and take action to ensure safe, successful transitions from hospital to home.

Esther Moas Pandey, DNP, MS, RN, Vice President of Care Transitions at Mount Sinai Health System, exemplifies this hands-on approach. Her work centers on what happens after discharge—when patients face real-world challenges that can derail recovery.

What Was Done for Patients

- **SDOH Screening at Discharge:** Nurses assessed patients for risks like food insecurity, housing instability, and transportation gaps before leaving the hospital.
- **Barrier Removal:** When a patient lacked transportation for follow-up care, the team arranged rides and coordinated home health visits.
- **Medication Access:** For patients unable to afford prescriptions, nurses connected them with pharmacy assistance programs and community resources.
- **Home Safety Checks:** Nurses ensured patients returning home had safe environments—addressing issues like lack of heat or mobility hazards.
- **Community Linkages:** Patients were referred to local food pantries, housing support services, and social workers to stabilize conditions that affect health.

Impact

These interventions reduced readmissions, improved patient satisfaction, and supported recovery in vulnerable populations. By addressing SDOH during care transitions, nurses helped patients achieve better health outcomes beyond the hospital walls.





INSTITUTE FOR HEALTH EQUITY RESEARCH

Message From the Directors



Lynn Richardson, MD

Carol Horowitz, MD, MPH

Our Drive

Uniting Communities, Transforming Health

At the Institute for Health Equity Research at the Icahn School of Medicine at Mount Sinai, we take a unique, collaborative approach to promoting health equity. Our multidisciplinary team goes beyond research to actively engage with the communities we serve. We partner directly with patients, grassroots organizations, policymakers, and industry leaders to understand health issues from all perspectives. Our community partnerships ensure that people most impacted by inequities can make their voices heard.

By bringing together cross-sector collaborators, we tackle systemic problems from multiple angles to find innovative solutions. We then translate discoveries into policy changes, new practices, and scalable initiatives that create lasting impact. Our mission is to provide compassionate patient care with seamless coordination and to advance medicine through unrivaled education, research, and outreach in the diverse communities we serve.

From Research to Real-World Solutions

Health equity means that everyone should have access to the resources needed to be healthy: nutritious food, stable housing, safe places to play and exercise, quality education, fair-paying jobs, clean air and water, quality health care, and freedom from exploitation and racism. Progress toward health equity requires understanding and addressing the many causes of health and health care disparities.

The Institute for Health Equity Research at the Icahn School of Medicine at Mount Sinai was established to study and address health issues affecting at-risk communities, including those who are non-white, low-income, immigrant, uninsured, and LGBTQ+, across all ages, genders, and abilities. Our researchers examine how systems have disproportionately and unjustly impacted these groups through inequitable policies and practices that lead to excess illness, suffering, and death. We work collaboratively with a broad network of patients, providers, payers, policymakers, and industry leaders to produce discoveries that translate into sustainable, scalable initiatives. These initiatives influence real-world policy, systems, and environments. Through our research and partnerships, we continue to build and implement innovative, durable solutions to achieve health equity.





MOUNT SINAI BROOKLYN



Mount Sinai Brooklyn, an acute-care community hospital located in Midwood, has undergone numerous renovations and upgrades over the past decade to expand its scope of services. The latest advancements include a completely redesigned Intensive Care Unit, a new 128-slice CT scanner, MRI services, new digital mammography equipment, and a state-of-the-art radiology suite. The Emergency Department also serves as a major hub of activity and a vital community resource.

The hospital enjoys an excellent reputation in specialties such as cardiac care, geriatric care, gastroenterology, general surgery, gynecology, and orthopedics.

Mount Sinai Brooklyn is thrilled to announce that, under the supervision of Vaad Hakashrus of Flatbush, our kitchen and related facilities are now fully kosher for all patients and staff. Additionally, Mount Sinai Brooklyn has installed a Shabbos elevator and now hosts a highly active and vibrant Bikur Cholim, with a dedicated room.

As always, we remain committed to serving the members of our community, and we look forward to providing exceptional care.

For more information on programs and services at Mount Sinai Brooklyn, visit:

<https://www.mountsinai.org/locations/brooklyn/about/community>





MOUNT SINAI-UNION SQUARE



Mount Sinai-Union Square offers innovative, high-quality health care for individuals and families. As part of the Mount Sinai Health System, it provides access to seven hospitals, the Icahn School of Medicine at Mount Sinai, and a wide range of specialized care. Our new Urgent Care Center is open 365 days a year with extended weekdays hours—no appointment is needed.

Located in the vibrant Union Square neighborhood, known for its rich history, Greenmarket, and transportation hub, Mount Sinai-Union Square is ideally situated to serve the diverse needs of our community. We offer more than 30 medical practices, including pediatric and primary care, cardiology, oncology, and urology, supported by advanced diagnostic technology and radiation oncology treatments. An on-site pharmacy adds to the convenience.

Our physicians specialize in disease prevention, health maintenance, patient education, and the evaluation and treatment of both acute and chronic conditions. We also provide preoperative consultations and coordinated care through a team-based approach.

With our presence in Union Square, we are fulfilling our commitment to expand access to quality health care. We make it easy for you to build trusted relationships with Mount Sinai doctors—right in your neighborhood.

For more information on programs and services at Mount Sinai-Union Square, visit:

<https://www.mountsinai.org/locations/union-square/about>





MOUNT SINAI BROOKLYN AND MOUNT SINAI-UNION SQUARE

Definition of "Community Assessed"

Hospitals and health care systems define the community served as those individuals residing within its Community Benefit Service Area (CBSA) and include all residents in a defined geographic area surrounding the hospital and does not exclude low-income or underserved populations. The hospital's patient population includes all who receive care without regard to insurance coverage or eligibility for assistance.



Sources: Caliper Multitude (2023) and the Mount Sinai Health System

The Mount Sinai Health System serves a diverse population with a range of health care needs. The community served by Mount Sinai Brooklyn and Mount Sinai-Union Square (formerly Mount Sinai Beth Israel Hospital) spans 42 ZIP codes. Mount Sinai Brooklyn is in the borough of Brooklyn, while Mount Sinai-Union Square is situated on the Lower East Side of Manhattan.

For this assessment, the community is divided into neighborhoods as defined by the New York City Department of Health and Mental Hygiene (NYCDOHMH) and New York State Department of Health (NYSDOH). Ten of the 42 neighborhoods fall within the Community Benefit Service Areas (CBSAs) of Mount Sinai Brooklyn and Mount Sinai-Union Square. Mount Sinai-Union Square serves Manhattan's downtown area, including Greenwich Village, Gramercy Park and the Flatiron District, extending south of 34th Street into Lower Manhattan.

In 2021, the estimated population of this community was approximately 1.8 million. This community definition is supported by the geographic origins of discharges from Mount Sinai Brooklyn.

In 2022, the community accounted for 68 percent of the hospital's inpatient discharges..





REGULATORY REQUIREMENTS

Federal law mandates that tax-exempt hospital facilities conduct a CHNA every three years and adopt an Implementation Strategy to address significant community health needs. This regulation is outlined in section 501(r)(3) of the Internal Revenue Code. To comply, each hospital must:

- Define the community it serves.
- Assess the health needs of that community.
- Solicit and incorporate input from individuals representing the broad interests of the community, including those with public health expertise.
- Document the CHNA in a written report approved by an authorized governing body of the hospital.
- Make the CHNA report publicly available via the hospital's website.

The CHNA report must include:

- A description of the community and the criteria used to define it.
- A summary of the methodology used to assess health needs.
- A prioritized list of identified health needs.
- An evaluation of the impact of actions taken since the previous CHNA.

Hospitals must also report details of their CHNA process and community benefits activities on IRS Form 990, Schedule H. According to IRS guidance, community benefits are defined as programs or activities that:

- Provide treatment or promote health and healing in response to identified community needs.
- Improve access to health services.
- Enhance public health.
- Advance general health knowledge.
- Relieve government burden in efforts to improve public health.

CHNA aims to identify significant health needs within specific geographic areas and populations by addressing the following key questions:

- **Who** in the community is most vulnerable in terms of health status or access to care?
- **What** are the unique health challenges and barriers to care?
- **Where** do these individuals live?
- **Why** are these problems present?

METHODOLOGY, DATA SOURCES, AND DATA COLLECTION METHODS

The CHNA process incorporated a range of data sources—including quantitative secondary data, hospital utilization data, and qualitative community input—to provide a comprehensive understanding of health needs and priorities across Mount Sinai's service areas. This approach engaged a diverse group of internal and external stakeholders throughout the assessment.

Primary Data:

- From September to December 2023, the Health System engaged key informants through video conferences, in-person meetings, and phone interviews.





- Fifteen sessions were conducted with 40 individuals from diverse organizations, including public health experts, local health departments, and representatives serving low-income, minority, and underserved populations.
- A structured discussion guide was used to explore community health issues, including social, behavioral, and environmental determinants.

Secondary Data:

- Sources: National, state, and local health data, including public health priorities, health disparities, community health improvement plans, and county- ZIP codes, and neighborhood-level statistics.

Hospital Utilization Data:

- Patient care utilization and charity care data, used as a proxy for economic status, helped define each hospital's Community Benefit Service Areas (CBSAs).

Analysis and Prioritization:

- Data were analyzed to identify prevalent health issues, disparities, and emerging trends.
- Health needs were prioritized based on severity, population impact, and feasibility of intervention.

The findings were compiled with recommendations for addressing the identified needs. This methodology ensures a thorough understanding of community health challenges and supports the development of effective, equity-focused strategies by the Mount Sinai Health System.

COLLABORATING HOSPITALS

Six hospitals within the Mount Sinai Health System collaborated on data sharing and strategy development for the Community Health Needs Assessment (CHNA). Participating hospitals included:

- Mount Sinai Brooklyn
- The Mount Sinai Hospital
- Mount Sinai Queens
- Mount Sinai Morningside
- Mount Sinai West
- New York Eye and Ear Infirmary of Mount Sinai (NYEE)

This coordinated approach ensured a comprehensive understanding of community health needs across the diverse neighborhoods served by the Health System, promoting equity in health planning and resource allocation.

INFORMATION GAPS

This CHNA uses multiple data sources and community input collected between April and December 2023. Key limitations include:

- Limited Geographic Detail: Many datasets are only available at the county level, preventing ZIP code or census tract analysis.
- Outdated Data: Some indicators, such as mortality rates, reflect prior years (e.g., 2017) and do not capture recent policy or economic changes.
- Variability Across Assessments: Differences in data sources, geographic scope, and prioritization methods may lead to inconsistent findings compared to other assessments.





COMMUNITY ADVISORY BOARDS

The Mount Sinai Health System's hospitals have Community Advisory Boards (CABs) that support the Health System in advancing its goals related to community and governmental issues. These boards help communicate the Health System's strategies to the community and ensure that its programs reflect the needs and perspectives of the populations it serves.

CABs also contribute to the development of best practices for community-based initiatives. Each hospital's CAB includes both consumer and provider members, representing a diverse mix of community voices and institutional expertise.

COMMUNITY ENGAGEMENT SUMMARY

In September 2023, two community engagement sessions were conducted during the Mount Sinai West Health Fair and the Community Flu Shot Health Fair. Informal, in-person conversations were held with 112 attendees. These brief interviews were designed to encourage broad participation and gather insights on community health concerns.

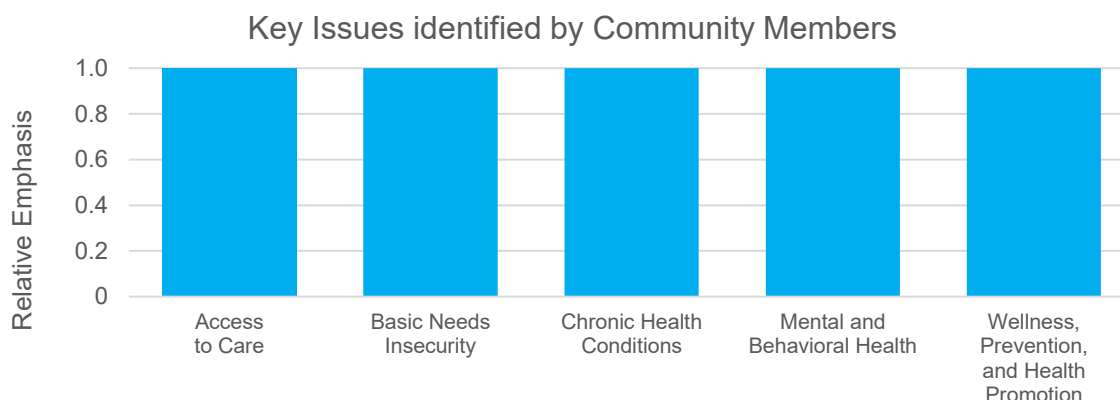
ORGANIZATIONS THAT PROVIDED COMMUNITY INPUT

Asphalt Green	Assembly District 68
Catholic Charities Brooklyn and Queens	Charles B. Wang Community Health Center
Concrete Safaris	Carver Houses Tenant Association
East Harlem Community Health Council	Manhattan Community Board No. 4
Manhattan Community Board No. 3	Mount Sinai Beth Israel – Staff
New York City Department of Health and Mental Hygiene	Mount Sinai Health System – Administrative Staff
The Mount Sinai Hospital Community Advisory Board	Mount Sinai Queens Community Advisory Board
Mount Sinai Queens – Staff	Mount Sinai Morningside – Staff
New York Common Pantry	Mount Sinai Brooklyn – Staff
Educational Alliance	Community Board No. 3
Organization that chose to remain anonymous	





Key Issues Identified by Community Members



The key issues were identified through informal interview sessions with 112 community members during two engagement sessions held in September 2023. These sessions, conducted alongside health fairs at Mount Sinai West, provided valuable insights into the health-related challenges and priorities of local residents.

Access to Care

- Residents face challenges navigating the health care system due to language barriers, lack of insurance, and restrictive insurance policies. Accessing specialty care is often hindered by transportation issues. Pregnant women with substance use disorders and unmet basic needs face particular difficulties in obtaining maternal health services.

Basic Needs Insecurity

- Food and housing insecurity are prevalent. These challenges contribute to stress and unhealthy behaviors, such as long commutes that negatively impact overall well-being.

Chronic Health Conditions

- Cardiovascular disease and obesity are among the most common chronic conditions affecting the community.

Mental and Behavioral Health

- Access to mental health services is limited by cost, insurance issues, and availability. Early detection of mental health concerns in children could be improved through increased parental education. Mental health issues are often linked with substance use disorders and are especially common among individuals experiencing homelessness.

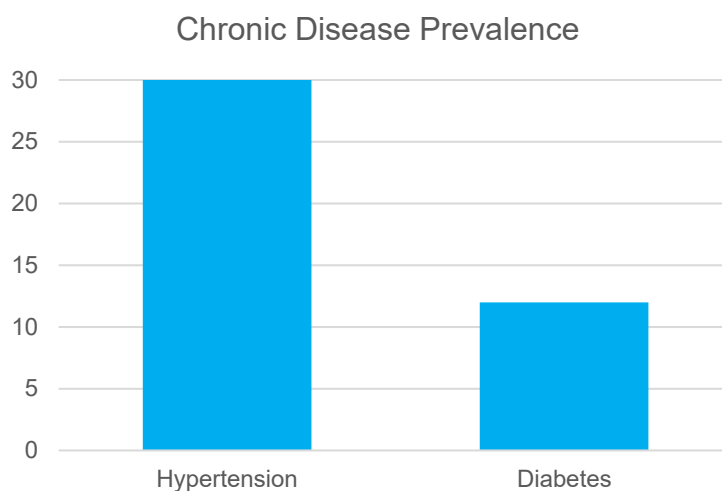
Wellness, Prevention, and Health Promotion

High food costs limit access to nutritious options. Limited access to medications contributes to increased emergency room visits and hospital readmissions. These findings highlight critical areas of concern that impact the health and well-being of the community. Addressing these issues—particularly access to care, basic needs insecurity, and mental health—will be essential in shaping responsive and equitable health initiatives moving forward.

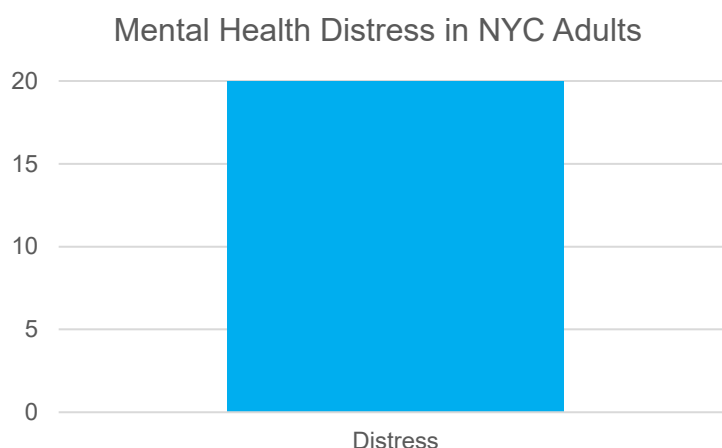




RELEVANT HEALTH INDICATORS – QUANTITATIVE HIGHLIGHTS, CHNA DATA

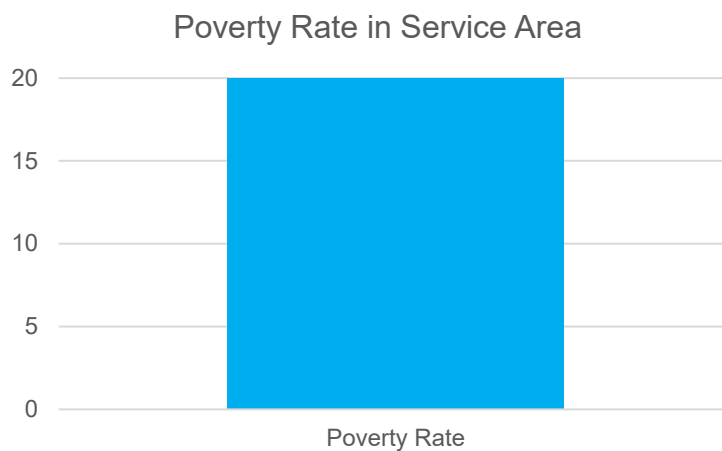


Hypertension affects 30 percent, and diabetes affects 12 percent of adults in the community, with higher rates in low-income and minority populations—highlighting the need for targeted education and screening programs.

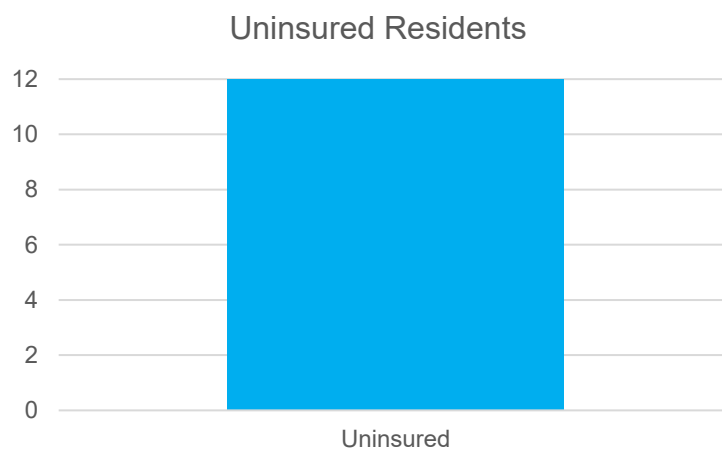


More than 20 percent of adults in NYC report frequent mental health distress, underscoring the need for expanded culturally competent mental health services, especially for youth and seniors.

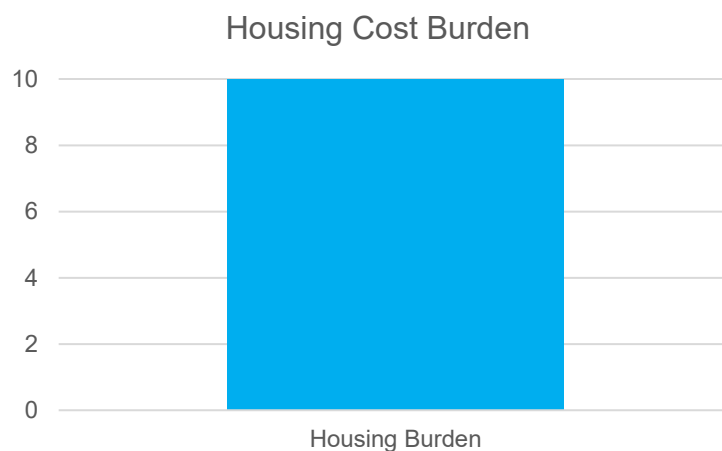




With poverty rates ranging from 15 percent to 25 percent in high-need neighborhoods, economic insecurity remains a major driver of health.



Approximately 12 percent of residents are uninsured, with higher rates among immigrants and non-English speakers, creating significant barriers to accessing care.



More than 10 percent of households spend more than half their income on housing, contributing to stress, instability, and poor health outcomes.





HEALTH CHALLENGES AND ASSOCIATED RISK FACTORS SUMMARY

The Mount Sinai Health System's 2023 CHNA provides a comprehensive overview of the health status of communities across New York City. This assessment identifies key health challenges, risk factors, and disparities, and informs strategic priorities aimed at advancing health equity and improving outcomes for underserved populations.

New York City communities continue to face evolving public health challenges shaped by the lingering effects of the COVID-19 pandemic, rising rates of chronic and behavioral health conditions, and persistent social and economic inequities. Marginalized populations are disproportionately impacted, with limited access to care, essential services, and safe living environments. These conditions contribute to significant variations in health outcomes across racial, ethnic, geographic, and socioeconomic lines, underscoring the need for coordinated, community-driven responses.

Contributing Causes of Health Challenges

Chronic Disease Burden

- High rates of diabetes, heart disease, obesity, stroke, and cancer.
- Require sustained, targeted prevention and management strategies.

Mental & Behavioral Health

- Increased demand for accessible services and stigma reduction.
- Need to reduce stigma and improve outcomes through community-based support.

Substance Use Disorder

- Rising impact of substance use across communities.
- Need for effective prevention and treatment programs.

Prenatal and Maternal Health

- Limited access to quality prenatal care, especially in underserved areas.
- Critical for improving maternal and infant health outcomes.

Access to Care

- Barriers include limited primary care access, provider shortages, and insurance gaps.
- Financial hardship and lack of coverage hinder timely treatment.

Social Drivers of Health

- Housing insecurity, food insecurity, and homelessness are major contributors to poor health.
- Environmental hazards and socioeconomic/cultural barriers exacerbate health risks.

HEALTH DISPARITIES

- The CHNA identified a range of health challenges that disproportionately affect specific populations within the Mount Sinai Health System's service areas. These disparities are evident across racial and ethnic groups, geographic locations, socioeconomic status, and access to care.
- **Racial and ethnic disparities** persist in chronic disease prevalence, mental health outcomes, and maternal and infant health. Black and Latino populations experience higher rates of diabetes, hypertension, and asthma, as well as increased barriers to mental health services. These disparities are often compounded by systemic inequities and historical underinvestment in communities of color.





- **Geographic disparities** are also prominent, with residents in certain neighborhoods facing limited access to health care facilities, healthy food options, and safe housing. ZIP code-level data reveal stark differences in life expectancy and disease burden, even within short distances.
- **Socioeconomic disparities** further exacerbate health outcomes. Individuals with lower income and educational attainment are more likely to experience food insecurity, housing instability, and limited access to preventive care. These social determinants of health significantly influence the ability to maintain wellness and manage chronic conditions.
- **Access-to-care disparities** remain a critical concern. Underserved populations often face challenges such as lack of insurance, language barriers, transportation difficulties, and provider shortages. These barriers hinder timely and effective treatment, contributing to poorer health outcomes.

Addressing these disparities requires a multifaceted approach that integrates culturally responsive care, community partnerships, and targeted interventions. The CHNA findings underscore the importance of equity-driven strategies to reduce health gaps and promote well-being across all communities served by the Mount Sinai Health System.

COMMUNITY ASSETS AND RESOURCES

The Mount Sinai Health System takes a collaborative approach to advancing health equity and expanding access to quality care. Through partnerships with governing bodies, schools, faith-based organizations, social service agencies, and community residents, the Health System hospitals support both internal initiatives and empowers external partners to implement impactful strategies.

Key Programs and Resources

- **Health professional education** supports more than 160 residency and fellowship programs to address current and future needs in chronic disease and mental health care.
- **Medicaid participation** provides inpatient and outpatient services through New York State Medicaid. Social workers assist patients in applying for coverage.
- **Subsidized health services** offer essential inpatient and outpatient services that operate at a financial loss to ensure continued access for underserved populations. This includes support for affiliated primary care practices and other Mount Sinai entities.
- **Comprehensive health care services** provide patients with access to a full spectrum of clinical specialties across hospital campuses, outpatient centers, and physician practices. Digital tools like MyMountSinai® and MyChart enhance care coordination and patient engagement.
- **Department of Health Education** provides community-based health education, training, and capacity-building programs in collaboration with schools, senior centers, and nonprofits.
- **Clinical trials** provide access to advanced treatment options.
- **Expand availability** of mobile screening programs.
- **Provide materials in multiple languages** and increase multilingual staff health providers.
- **Center for Spirituality and Health** offers compassionate spiritual care and support through chaplain services, education, research, and outreach.

MAJOR COMMUNITY HEALTH NEEDS IDENTIFIED – SUMMARY

The Mount Sinai Health System's 2023 CHNA identified several priority health needs affecting New York City communities. These priorities were determined through a comprehensive review of primary and secondary data, including structured interviews with public health experts and community representatives.





Health and Wellness Priorities

- Chronic Disease Prevention and Management: Addressing conditions such as diabetes, heart disease, obesity, stroke, and cancer.
- Mental and Behavioral Health: Expanding access to mental health services and behavior support.
- Substance Use Disorder: Enhancing prevention strategies and treatment options for substance use disorders.

Access to Care and Services

- Health Insurance Coverage: Increasing enrollment and access to affordable health insurance.
- Financial Assistance: Providing support for individuals facing economic barriers to care services.
- Health Care Provider Availability: Expanding the health care workforce to meet community needs.
- Primary Care Access: Improving availability and accessibility of primary care services.

Social Determinants of Health

- Food Insecurity: Addressing hunger and access to nutritious food.
- Safe and Affordable Housing: Promoting stable and healthy living environments.
- Socioeconomic Challenges: Tackling poverty, unemployment, and education disparities.
- Cultural and Linguistic Barriers: Ensuring culturally competent care and language access.
- Homelessness: Supporting housing stability and services for unhoused individuals.
- Environmental Health Factors: Mitigating exposure to environmental hazards impacting health.

Mental Health Access & Status

- Mount Sinai Department of Psychiatry: Inpatient, outpatient, and emergency psychiatric care for all ages.
- Mount Sinai Harlem Health Center: Child, adolescent, and adult outpatient mental health services.
- Mount Sinai Adolescent Health Center: Free, integrated mental health and primary care for youth aged 10 to 26.
- Behavioral Health Network: Multidisciplinary team across the Health System.

Primary Health Care Access

- Primary Care Clinics: Located throughout Manhattan and Queens.
- Medicaid Enrollment Assistance: Social workers help patients apply for Medicaid.
- Subsidized Health Services: Financial support for essential services.
- Residency & Fellowship Programs: Focused on primary care, family medicine, internal medicine.

Chronic Diseases & Lifestyle

- Community Health Improvement Activities: Health screenings, health fairs, and education.
- Health Education Department: Programming on chronic disease prevention and management.
- Nutrition and Wellness Programs: Especially through the Adolescent Health Center.

Socioeconomic & Cultural Barriers

- Department of Health Education: Culturally competent education and training.
- Public Health and Racial Justice Program: Empowers teenage girls of color.
- Multilingual Services: Address linguistic barriers in care delivery.

Substance Use Disorder

- Integrated Behavioral Health Services: Including substance use treatment.
- Psychiatric Consultation Services: For patients with co-occurring disorders.
- Specialized Fellowships: Focus on psychosis and major mental illness.





PRIORITIZATION METHODS

Description of Prioritization Process: Certain community health needs were determined to be “significant” if there was negative variance from benchmarks or the need was identified by multiple key informants. A significant need was identified as a priority if it was identified as problematic in at least two of the following three data sources:

1. **Secondary Data** - The most recently available secondary data regarding the community’s health;
2. **NYC and NYS Health Departments** - Take Care New York 2024, the New York City Department of Health and Mental Hygiene’s “blueprint for advancing health equity” and/or the New York State Prevention Agenda 2019-2024; and
3. **Community Engagement** - Input from the key informants who participated in the interview process.

JUSTIFICATION FOR UNADDRESSED HEALTH NEEDS

The Mount Sinai Health System is committed to serving its community by leveraging institutional, expertise, and organizational strength to deliver a broad spectrum of community benefits programs. However, no single entity can address every health need. In alignment with IRS guidelines, Mount Sinai may choose not to directly address certain needs due to:

- Limited resources, Alignment with organizational expertise
- Assigned priority level, Availability of effective interventions
- Existing efforts by other hospitals or community organizations

After evaluating significant needs identified in the CHNA using IRS criteria, Mount Sinai determined the following will not be addressed through direct interventions:

- Aging Population
- Poverty, Financial Hardship, and Basic Needs Insecurity
- Homelessness
- Navigating a Changing Health Care Provider Environment
- Environmental Determinants of Health





MOUNT SINAI BROOKLYN



Community Service Plan 2025–2027

2024 – CHNA Implementation Strategy, Completed Mid 2024

**Adopted by Mount Sinai Brooklyn Governing Board on
May 15, 2024**

A complete Implementation Strategy/Community Service Plan report is available electronically on the Mount Sinai Brooklyn website at: <https://www.mountsinai.org/locations/brooklyn/about/community>





This section outlines Mount Sinai Health System's Community Service Plan (CSP) and Implementation Strategy to improve community health by addressing priorities identified through the CHNA process. The CSP incorporated a wide range of primary and secondary data sources, including structured interviews with individuals representing diverse community interests and public health expertise, as well as assessments and studies from other organizations.

Mount Sinai has a longstanding commitment to serving its communities and dedicating significant resources to community benefit activities. Over the next three years, the Health System will continue this commitment by addressing key health needs identified in the CHNA.

To determine which needs to address, the Health System applied the following criteria:

- Availability of resources to address the need.
- Organizational expertise or competencies.
- Priority level assigned to the need.
- Availability of effective interventions.
- Extent to which other hospitals or community organizations are addressing the issue.

Based on these criteria, the Health System selected the following domains and priorities to guide its efforts during the 2025-2027 period:

Action 1 – Primary Prevention, Substance Misuse, and Overdose Prevention

Domain 2: Social and Community Context

Priority 4: Primary Prevention, Substance Misuse, and Overdose Prevention

Goal: Reduce substance use, misuse, overdose, and/or associated harms.

Objective 4.10: Increase the number of naloxone kits distributed from 401,856 to 602,784.

Program: The REACH (Respectful and Equitable Access to Comprehensive Healthcare) Program

The REACH (Respectful and Equitable Access to Comprehensive Health Care) Program provides trauma-informed, harm-reduction-based care for individuals affected by substance use, and those living with hepatitis C. Its goal is to reduce overdose and related harms through compassionate, accessible services, including patient navigators to help reduce barriers and coordinate care. REACH offers overdose response training, naloxone distribution, and office-based buprenorphine treatment, available in-person and virtually. Services include:

- Office-based buprenorphine treatment
- Stigma-free risk reduction counseling
- HCV treatment
- Overdose response training
- Psychosocial assessments and support groups
- Patient navigators play a key role in guiding individuals through the complex health care system, helping to eliminate barriers to care. REACH also conducts community HCV education and testing

Actions:

- Weekly harm reduction group sessions foster peer support and reduce stigma.
- Free naloxone kits and education for community organizations and residents.
- Overdose prevention education and naloxone distribution by trained providers.
- Integration of harm reduction services into Mount Sinai's behavioral health and substance use programs.





Impacts:

- Expanded access to harm reduction services for vulnerable populations
- Increased community awareness and preparedness for overdose response
- Reduced stigma through peer-led support groups
- Improved linkage to care for individuals with HCV and opioid use disorder
- Enhanced coordination between health care providers and community organizations
- Contributed to nearly 50 percent increase in statewide naloxone distribution

Geographic Focus: The geographic focus for these actions is the five counties that comprise New York City.

Resource Commitment:

- Direct support from programs and activities
- Indirect and in-kind support
- Health professions education
- Health care services
- Mental health services
- Subsidized health services
- Services to Medicaid enrollees
- Community health improvement activities

Participant Roles: Mount Sinai will facilitate clinical interventions of healthcare professionals and encourage community members to participate in initiatives.

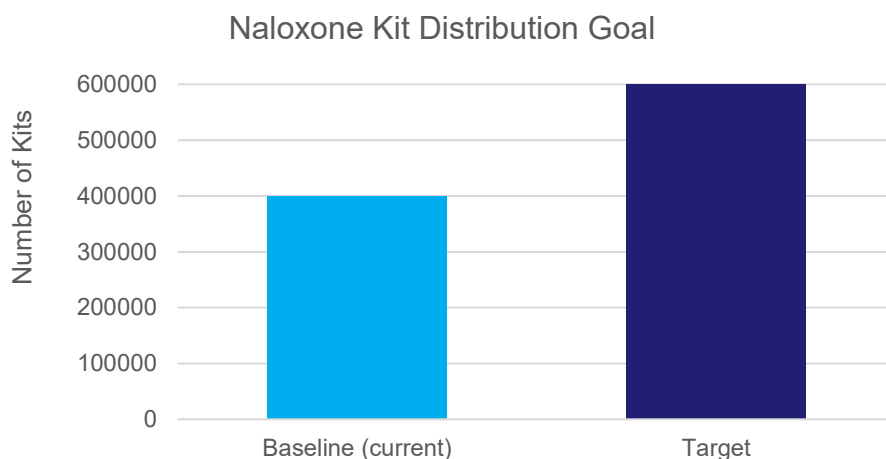
Health Equity:

- Serving individuals marginalized due to substance use or HCV status.
- Supporting individuals transitioning from incarceration.
- Building trust in the health care systems among populations in underserved communities.
- Integrating primary care with behavioral health and social support services.

Family Measures:

- Number of naloxone take-home kits distributed
- Number of overdose training sessions delivered
- Number of patient referrals from:
 - Community-based organizations
 - Emergency departments
 - Hospitals
 - Substance use treatment programs





Action 2 – Primary Prevention, Substance Misuse, and Overdose Prevention

Priority 4: Primary Prevention, Substance Misuse, and Overdose Prevention

Goal: Reduce substance use, misuse, overdose, and/or associated harms.

Objective 4.10: Increase the number of naloxone kits distributed from 401,856 to 602,784.

Program: Mount Sinai Behavioral Health Center (Downtown)

Mount Sinai Behavioral Health Center (Downtown) aligns with the Social and Community Context domain, emphasizing social connectedness, reducing isolation, and addressing behavioral health needs within a community setting. The Mount Sinai Behavioral Health Center integrates mental health, substance use treatment, and primary care services to treat the whole person, offering programs such as Partial Hospitalization (PHP), Intensive Outpatient (OIP), and crisis stabilization services. Core programs include:

- Crisis Residence Beds – short-term care for acute behavioral crises
- Partial Hospitalization Program – intensive daytime treatment
- Intensive Outpatient Program – structured therapy multiple times per week
- Outpatient Therapy & Medication Management
- Integrated Primary Care Services
- Behavioral Health Express Care – walk-in evaluations and referrals





Actions:

- Integrated behavioral and physical health treatment
- Crisis stabilization and transitional care
- Medication management and psychotherapy
- Walk-in access for urgent behavioral health needs
- Coordination with Mount Sinai's broader health system

Impacts:

- Centralized access to behavioral health services
- Improved outcomes through integrated, multidisciplinary care
- Strengthen community resilience and reduce stigma

Geographic Focus: The geographic focus for these actions is the five counties that comprise New York City.

Resource Commitment:

- Direct support from programs and activities
- Indirect and in-kind support
- Health professions education
- Health care services
- Mental health services
- Subsidized health services
- Services to Medicaid enrollees
- Community health improvement activities

Participant Roles: Mount Sinai will facilitate clinical interventions of healthcare professionals and encourage community members to participate in initiatives.

Health Equity:

- Lack of integrated behavioral health needs
- Limited access in underserved communities
- High rates of substance misuse and mental illness

Family Measures:

- Percentage of patients with family involvement in care plans
- Number of caregiver support sessions
- Improvement in family functioning using validated tools

Program: Mount Sinai West

At Mount Sinai West, we provide comprehensive, high-quality psychiatry and behavioral health services that can empower you to change your life. Our goal in the Department of Psychiatry and Behavioral Health is to meet the mental health needs of our community, especially those facing social and economic challenges, in a safe and healing environment. Our exceptional psychiatrists and psychologists are known for their empathy and sensitivity and will guide you from diagnosis to post-treatment life.

Actions:

- Outpatient and partial hospitalization care
- Specialized Intervention Programs
- Addiction and Substance Use Treatment





Impacts:

- Centralized access to addiction and behavioral health services
- Improved outcomes through integrated, multidisciplinary care
- Strengthen community resilience and reduce stigma

Geographic Focus: The geographic focus for these actions is the five counties that comprise New York City.

Resource Commitment:

- Direct support from programs and activities
- Indirect and in-kind support
- Health professions education
- Health care services
- Mental health services
- Subsidized health services
- Services to Medicaid enrollees
- Community health improvement activities

Participant Roles: Mount Sinai will facilitate clinical interventions of healthcare professionals and encourage community members to participate in initiatives.

Health Equity:

- Lack of integrated behavioral health needs
- Limited access for underserved communities
- High rate of substance misuse

Family Measures:

- Percentage of patients with family involvement in care plans
- Number of caregiver support sessions
- Improvement in family functioning using validated tools

Program: Mount Sinai Morningside

Mount Sinai Morningside offers comprehensive outpatient mental health service using the latest diagnostic and treatment approaches. Therapy is available one-on-one and in group settings. Our therapists practice a variety of techniques, including psychodynamic, cognitive behavioral, dialectical behavioral, motivational, and supportive therapy. We treat adults, couples, families, groups, adolescents, and children. The Addiction Institute of Mount Sinai supports individuals over 18 struggling with drugs or alcohol issues. The team partners with patients and their support networks to ensure health, safety, and growth throughout the entire treatment journey.

Actions:

- Adult Outpatient Services
- Support for adolescents and families

Impacts:

- Streamlined intake through Comprehensive Assessment Center for faster access
- Improved outcomes through integration and family-centered care

Geographic Focus: The geographic focus for these actions is the five counties that comprise New York City.





Resource Commitment:

- Direct support from programs and activities
- Indirect and in-kind support
- Health professions education
- Health care services
- Mental health services
- Subsidized health services
- Services to Medicaid enrollees
- Community health improvement activities

Participant Roles: Mount Sinai will facilitate clinical interventions of healthcare professionals and encourage community members to participate in initiatives.

Health Equity:

- Lack of integrated behavior health needs
- High rate of substance misuse
- Limited access for underserved communities

Family Measures:

- Percentage of patients with family participation in treatment plans
- Number of caregiver support sessions
- Improvement in family functioning using validated tools

Action 3

Domain 4: Healthcare Access and Quality

Priority 3: Preventive Services for Chronic Disease Prevention and Control

Goal: Reduce disparities in access and quality of evidence-based preventive and diagnostic services for chronic diseases.

Objectives:

- **30.0:** Increase the percentage of adults aged 35 years and older who had a test for high blood sugar in the past year from 78.1% to 82.4%.
- **32.0:** Increase the percentage of adults aged 18 years and older with hypertension who are currently taking medication to manage their high blood pressure from 77.0% to 81.7%.

Action: Diabetes Prevention and Management Program provides community-based screenings, education, and individualized care plans to prevent complications. The Mount Sinai Clinical Diabetes Institute provides comprehensive, patient-centered care for people with type 1, type 2, gestational diabetes, and related disorders. It is recognized as a leader in diabetes treatment and prevention, with more American Diabetes Association- certified Centers of Excellence than any other Health System in the New York City metro area. Free diabetes education classes are offered to patients, family members, and caregivers. Classes are led by Certified Diabetes Care and Education Specialists (CDCES) and offered virtually and in-person, and nutrition counseling is available.





Interventions:

- Education Classes: Free sessions for patients, families, and caregivers led by Certified Diabetes Care and Education Specialists (CDCES)
- Health Education Workshops on nutrition, physical activity, medication management, and stress reduction.
- Peer Support Groups: Facilitated groups to encourage shared learning and emotional support.

Impacts:

- Increased early detection and prevention of diabetes complications
- Improved patient self-management and adherence to care plans
- Enhanced family engagement in diabetes care and education
- Reduction in hospitalizations and emergency visits related to uncontrolled diabetes
- Strengthened community health literacy and access to certified diabetes education

Geographic Focus: The geographic focus for these actions is the five counties that comprise New York City.

Resource Commitment:

- Direct support from programs and activities
- Indirect and in-kind support
- Health professions education
- Health care services
- Mental health services
- Subsidized health services
- Services to Medicaid enrollees
- Community health improvement activities

Participant Roles: Mount Sinai will facilitate clinical interventions of healthcare professionals and encourage community members to participate in initiatives.

Health Equity:

- Limited access to diabetes education and preventive care in underserved communities
- High prevalence of diabetes-related complications among low-income populations
- Barriers due to language, health literacy, and cultural factors

Family Measures:

- Percentage of patients with family participation in education sessions
- Number of caregiver-focused classes and resources provided

Program/Initiative:

High Blood Pressure Management Initiative focuses on early detection and intervention in community settings. Blood pressure screenings are offered at local community events, health fairs, clinics, and outreach sites. The program emphasizes lifestyle changes, medication adherence, and ongoing support, particularly for populations disproportionately affected by hypertension. During National Blood Pressure Month, Mount Sinai hosts free blood pressure checks, along with educational materials on hypertension prevention and management at our Health System hospitals. **Karpas Health Information Center** - free monthly blood pressure screening events as part of its community outreach and wellness programs. Health educators check your blood pressure and explain what your numbers mean. The program is designed for community members, seniors, staff, and parents, and is often hosted at other affiliated locations.





Actions:

- Community Screenings: Blood pressure checks at health fairs, clinics, and outreach sites
- Lifestyle Changes Modifications: Nutrition, physical activity, and stress management guidance
- Medication Adherence Support
- Ongoing Monitoring: Regular check-ins and referrals for high-risk individuals

Impacts:

- Increased early detection of hypertension through community outreach
- Improved blood pressure control rates among program participants
- Enhanced patient adherence to medication and lifestyle changes
- Reduction in emergency visits and hospitalizations related to uncontrolled hypertension
- Strengthened community awareness and engagement in cardiovascular health

Geographic Focus: The geographic focus for these actions is the five counties that comprise New York City.

Resource Commitment:

- Direct support from programs and activities
- Indirect and in-kind support
- Health professions education
- Health care services
- Mental health services
- Subsidized health services
- Services to Medicaid enrollees
- Community health improvement activities

Participant Roles: Mount Sinai will facilitate clinical interventions of healthcare professionals and encourage community members to participate in initiatives.

Health Equity:

- High prevalence of uncontrolled hypertension in underserved and minority communities
- Limited access to preventive care and screenings
- Barriers due to health literacy and socioeconomic challenges
- Increased risk of cardiovascular complications among vulnerable populations

Family Measures:

- Percentage of patients with family participation in lifestyle education sessions
- Number of caregiver-focused hypertension education resources provided

Heart Disease Prevention Services includes blood pressure, cholesterol and glucose screenings, and risk assessment and lifestyle counseling and modification support includes education on healthy eating, physical activity, stress management, smoking cessation and reducing alcohol use.

Actions:

- Screenings: Blood pressure, cholesterol, and glucose checks
- Risk Assessment: Cardiovascular risk evaluation for early detection
- Lifestyle Counseling & Support:
 - Healthy eating and nutrition education





- Physical activity guidance
- Stress management techniques
- Smoking cessation programs
- Alcohol use reduction strategies

Impacts:

- Increased early detection of cardiovascular risk factors through community screenings
- Improved patient adherence to lifestyle modifications and risk reduction strategies
- Enhanced family engagement in heart-healthy behaviors
- Reduction in hospitalizations and emergency visits related to heart disease
- Strengthened community awareness and prevention of cardiovascular disease

Geographic Focus: The geographic focus for these actions is the five counties that comprise New York City.

Resource Commitment:

- Direct support from programs and activities
- Indirect and in-kind support
- Health professions education
- Health care services
- Mental health services
- Subsidized health services
- Services to Medicaid enrollees
- Community health improvement activities

Participant Roles: Mount Sinai will facilitate clinical interventions of healthcare professionals and encourage community members to participate in initiatives.

Health Equity:

- High prevalence of cardiovascular disease in underserved and minority communities
- Limited access to preventive screenings and lifestyle counseling
- Barriers due to health literacy, cultural factors, and socioeconomic challenges
- Increased risk among populations with comorbid conditions (e.g., diabetes, hypertension)

Family Measures:

- Percentage of patients with family participation in lifestyle counseling sessions
- Number of family-focused education resources provided

Mount Sinai Cancer Screening Programs includes:

Mount Sinai Mammovan

- Provides 3D digital mammography for women age 40+ across NYC
- Focuses on underserved communities to reduce barriers to care
- Screenings are free or low-cost; appointments via 844-EZMAMMO
- Early breast cancer detection and improved access





Actions:

- Mobile Screening Services: 3D digital mammography for women age 40+
- Community Outreach: Visits to neighborhoods across NYC, focusing on underserved areas
- Affordable Access: Free or low-cost screenings; easy scheduling via 844-EZMAMMO
- Guidance on breast health and follow-up care

Program Impacts:

- Increased early detection of breast cancer through mobile outreach
- Improved screening rates among women in high-risk, underserved communities
- Reduced disparities in access to preventive care
- Strengthened community engagement and awareness of breast health

Geographic Focus: The geographic focus for these actions is the five counties that comprise New York City.

Resource Commitment:

- Direct support from programs and activities
- Indirect and in-kind support
- Health professions education
- Health care services
- Mental health services
- Subsidized health services
- Services to Medicaid enrollees
- Community health improvement activities

Participant Roles: Mount Sinai will facilitate clinical interventions of healthcare professionals and encourage community members to participate in initiatives.

Health Equity

- Limited access to breast cancer screening in underserved and minority communities
- Financial barriers preventing preventive care
- Geographic and transportation challenges for women in remote or low-resource areas
- Health literacy gaps regarding early detection and breast health

Family Measures:

- Percentage of patients reporting family support during screening and follow-up
- Number of educational resources provided to families about breast and/or prostate health

Mount Sinai Robert F. Smith Mobile Prostate Cancer Screening Unit

- Offers PSA testing and micro-ultrasound imaging for men ages 45–79
- Prioritizes high-risk groups, including Black men
- Services are free with follow-up care at Mount Sinai
- Goal: Early detection and reducing disparities in prostate cancer outcomes





Action 4

Priority 5: Preventative Services Healthy Children

Goal: Increase utilization of evidence-based preventive services for children.

Objective 5.1: Increase the percentage of infants who received diagnostic hearing test after failing their newborn hearing screening at 3 months of age from 15.6% to 23.4%.

Program: The Ear Institute of New York Eye and Ear (NYEE) of Mount Sinai

The Ear Institute of NYEE supports early identification and intervention of pediatric hearing loss. It offers a comprehensive, hospital-based model that integrates a full spectrum of pediatric hearing specialists under one roof, ensuring coordinated, family-centered care. As a mandated participant in the New York Early Hearing Detection and Intervention Information System (NYEHDI-IS), the program conducts universal newborn hearing screenings aligned with national benchmarks.

Actions:

- Integration with NYEHDI-IS ensures timely reporting, tracking, and follow-up for infants needing diagnostic and intervention services.
- Active outreach and coordination reduce loss to follow-up, a common challenge in pediatric hearing programs.

Program Impacts:

- Timely diagnosis and intervention lead to improved language, social, and academic outcomes.
- Strengthened follow-up systems enhance continuity of care and reduce gaps in early childhood hearing services.

Geographic Focus: The geographic focus for these actions is the five counties that comprise New York City.

Resource Commitment:

- Direct support from programs and activities
- Indirect and in-kind support
- Health professions education
- Health care services
- Mental health services
- Subsidized health services
- Services to Medicaid enrollees
- Community health improvement activities

Participant Roles: Mount Sinai will facilitate clinical interventions of healthcare professionals and encourage community members to participate in initiatives.

Health Equity:

- The program improves access to diagnostic services for infants in unserved communities.
- Family-centered care and multilingual support help overcome cultural and language barriers.

Family Measures:

- Percentage of families receiving follow-up support after initial screening and diagnosis.
- Number of families connected to early intervention services within recommended timeframe.
- Reduction in loss to follow-up rates, indicating improved engagement and tracking.
- Improved parental understanding of hearing health and intervention options through education and counseling.





Action 5

Priority 5: Preventive Services (Flu Vaccination Clinic)

Goal: Improve vaccination rates.

Objective 5: Improve the age-adjusted influenza (flu) immunization rates of New Yorkers aged 65 and older by 10 percent to 76 percent.

Program: Flu Vaccination Clinics

Mount Sinai's Flu Vaccination Clinics enhance access to seasonal flu vaccines in underserved communities, helping to prevent illness and reduce health disparities. These clinics are strategically located in neighborhoods with limited health care access and are often hosted in partnership with local organizations, schools, and community centers. By offering free or low-cost vaccinations, providing multilingual education, and engaging trusted community leaders, the program increases vaccine uptake and protects vulnerable populations from flu-related complications.

Actions:

- Host community-based vaccination clinics
- Implement standing orders for influenza vaccination in healthcare settings
- Public education and outreach
- Reduce financial and logistical barriers
- Target high-risk populations

Program Impacts:

- Improved vaccination coverage, especially in high-risk and underserved populations.
- Fewer flu-related hospitalizations, ER visits, and complications.
- Health Equity Advancements.
- Enhanced trust and engagement with preventive health services in historically underserved areas.

Geographic Focus: The geographic focus for these actions is the five counties that comprise New York City.

Resource Commitment:

- Direct support from programs and activities
- Indirect and in-kind support
- Health professions education
- Health care services
- Mental health services
- Subsidized health services
- Services to Medicaid enrollees
- Community health improvement activities

Participant Roles: Mount Sinai will facilitate clinical interventions of healthcare professionals and encourage community members to participate in initiatives.

Health Equity:

- Age and chronic conditions
- Reduces flu-related illness and complications in underserved communities
- Eases the burden on emergency and inpatient services during flu season
- Language and health literacy

Family Measures:

- Number of vaccination clinics.
- Number of flu vaccinations and information materials provided.





PROGRAMS AND INITIATIVES FOR THE AGING POPULATION

Mount Sinai Hospital ranked No. 1 in Geriatrics nationwide for five consecutive years by U.S. News & World Report®.

Mount Sinai offers outpatient primary care and consultations for older adults, including comprehensive assessments of physical, psychosocial, and functional health. Our expertise includes memory loss, balance issues, incontinence, sensory impairments, and neurological conditions such as Alzheimer's disease, other dementias, and Parkinson's disease. Through a range of community-based programs, we help older adults maintain independence, manage chronic conditions, and achieve the highest possible quality of life. These initiatives combine clinical excellence with compassionate, person-centered care tailored to the unique needs of aging individuals and their families. We are committed to supporting patients and their loved ones in navigating aging with dignity, autonomy, and optimal well-being. Community programs include:

Martha Stewart Centers for Living

The Martha Stewart Centers for Living offer high-quality primary care for older adults at two locations: The Mount Sinai Hospital (Upper East Side) and Mount Sinai–Union Square (Downtown Manhattan). Services include interdisciplinary care, wellness programs, caregiver support, and access to specialists. The centers promote active aging and coordinate care through teams of geriatricians, palliative care specialists, nurses, social workers, and medical assistants.

Mount Sinai Visiting Doctors Program

The Mount Sinai Visiting Doctors Program is one of the nation's largest academic home-visit programs. In 2024, clinicians made more than 6,000 home visits to more than 1,000 homebound patients, delivering high-quality, compassionate care to individuals with complex medical needs. Since 1995, the program has provided patient-centered care through a multidisciplinary team of physicians, nurses, social workers, administrative staff, and community health workers. It improves quality of life, reduces hospitalizations, and supports aging in place. The program also advances education and research. Each year, hundreds of medical trainees gain firsthand experience in community-based care, while ongoing research informs national discussions on aging, chronic illness, and health equity.

Palliative Care at Home

Mount Sinai's Palliative Care at Home provides an added layer of support for patients living with serious illness, their families, and their health care providers. This care focuses on improving quality of life through expert symptom management. Patients continue their current treatment plans and maintain relationships with their managing clinicians, while receiving additional social, emotional, and physical support.

Age-Friendly Health System Initiative

Mount Sinai Morningside and other sites within the Mount Sinai Health System have been recognized by the Institute for Healthcare Improvement (IHI) as Age-Friendly Health Systems for their commitment to high-quality care for older adults. This designation is based on the implementation of the 4Ms Framework: What Matters, which ensures care aligns with each patient's goals and preferences; Medications, which promotes safe and effective use tailored to older adults; Mentation, which addresses cognitive health including dementia, depression, and delirium; and Mobility, which supports safe movement and independence. The program enhances patient outcomes and quality of life by integrating evidence-based, person-centered practices across clinical settings.





Neighborhood Health Centers and Programs

Mount Sinai addresses the **Social Determinants of Health (SDOH)** through strategic clinical expansion, community partnerships, and targeted outreach across all five boroughs. These initiatives improve access to care, education, housing, nutrition, and social support, and are led by departments across the Health System and academic institutions. Capital improvements further reflect our commitment to enhancing the environments where expert care is delivered, ensuring services are accessible, equitable, and responsive to community needs.

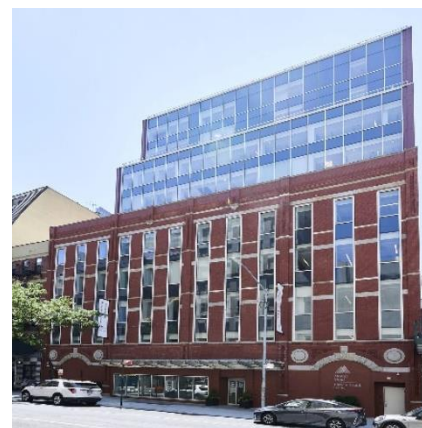


East Harlem Health Outreach Partnership (EHHOP)

East Harlem Health Outreach Program (EHHOP) is a student-run, physician-supervised free clinic operated by the Icahn School of Medicine at Mount Sinai that provides confidential, high-quality care at no cost to uninsured adults in East Harlem. The program integrates clinical services with social support, education, and advocacy to address multiple SDOH. EHHOP is a cornerstone initiative that reflects Mount Sinai's commitment to health equity and community partnership.

Program Impacts:

- Expanded access to free, high-quality care for uninsured and low-income residents
- Reduction in health disparities through culturally and linguistically responsive services
- Improved chronic disease management via integrated medical and social support
- Medical education and leadership development for future health care professionals
- Strengthened community engagement through outreach and advocacy



Mount Sinai-Harlem Health Center

Mount Sinai-Harlem Health Center is a multispecialty facility offering inclusive, equitable, and high-quality care. Services include primary care, mental health care, and specialty services such as ophthalmology, podiatry, orthopedics, cardiology, and gastroenterology. The Mount Sinai Institute for Advanced Medicine is now located within





the center, serving patients with specialized needs. Outpatient mental health services are provided for children, adolescents, and adults, including intensive outpatient programs. A specialty pharmacy is also available to patients and the community. The center serves a diverse population from pediatrics to geriatrics, with staff who reflect the community and collaborate with local providers to expand reach.

Program Impacts:

- Improved access to care with a focus on health equity and community integration
- Expanded mental health and specialty services
- Increased pharmacy access in a convenient community-based location

Institute for Advanced Medicine

The Institute for Advanced Medicine (IAM) operates four clinics providing comprehensive prevention, care, and treatment services to diverse populations, including individuals living with HIV, those on HIV prevention medication, formerly incarcerated persons, and transgender and gender-diverse individuals. IAM has strengthened outreach, linkage, and retention strategies to improve access and quality of life. In 2024, IAM served more than 18,000 individuals through the Jack Martin Fund Clinic, Peter Krueger Clinic, Samuels Clinic, and Mount Sinai Comprehensive Health Program–Downtown.

Program Impacts:

- Expanded access to integrated, person-centered care
- Improved health outcomes for vulnerable and marginalized populations
- Strengthened retention in care through targeted outreach and support

Mount Sinai Adolescent Health Center



The Mount Sinai Adolescent Health Center (MSAHC) is one of the largest adolescent-specific health care centers in the United States, providing free comprehensive care to more than 12,000 youth annually. Services include sexual and reproductive health, mental health, nutrition, legal aid, and health education. The multidisciplinary team is specially trained to work with adolescents, offering confidential care and support. In addition to its main site on East 94th Street, MSAHC operates six school-based health clinics across Manhattan, bringing comprehensive care directly to students in their educational environments. These clinics reduce missed school days, improve access to care, and serve as gateways to broader services offered by MSAHC.

School-Based Clinic Locations:

1. Julia Richman Education Complex – 317 East 67th Street, New York, NY 10065
2. Manhattan Center for Science and Mathematics – 280 Pleasant Avenue, New York, NY 10029
3. Humanities Educational Campus – 351 West 18th Street, New York, NY 10011
4. Martin Luther King Jr. High School Campus – 122 Amsterdam Avenue, New York, NY 10023





5. Philip Randolph Campus High School – 443 West 135th Street, New York, NY 10031
6. Brandeis Campus High School – 145 West 84th Street, New York, NY 10024

Program Impacts:

- Increased access to free, confidential care for underserved youth
- Improved mental health outcomes through integrated behavioral health services
- Reduced teen pregnancy and STI rates via comprehensive reproductive health education
- Enhanced school engagement through on-site health services
- Empowered youth with knowledge and tools for lifelong wellness

Mount Sinai Behavioral Health Center – Downtown



The Mount Sinai Behavioral Health Center aligns with the Social and Community Context domain of the Prevention Agenda. It emphasizes improving social connectedness, reducing isolation, and addressing behavioral health needs within community settings. The Center integrates mental health, substance use, and primary care services to treat the whole person through a coordinated, multidisciplinary approach. The Center serves as a centralized hub for behavioral health services, offering walk-in access, crisis stabilization, and outpatient care. It is designed to reduce barriers to treatment, especially for underserved populations, and to promote continuity of care across service lines.

Program Impacts:

- Centralized access to behavioral health services
- Improved outcomes via integrated, multidisciplinary care
- Strengthened community resilience and reduced stigma

Mount Sinai Cancer Outreach Programs and Initiatives

Mount Sinai Tisch Cancer Center ranked No. 6 nationally for Cancer by U.S. News & World Report® (2025–26).

The Mount Sinai Tisch Cancer Center delivers centralized, multidisciplinary cancer care through a team of more than 250 specialists. Services include advanced diagnostics, personalized treatment plans, and access to innovative therapies such as immunotherapy. The center emphasizes rapid response following diagnosis, integrates research into care, and collaborates with primary care providers to ensure holistic treatment. Free community outreach programs educate the public on cancer prevention, health care careers, and patient support.





Women's Health Programs at the Mount Sinai Health System

Mount Sinai's Center of Excellence for Breast Cancer offers comprehensive, integrated care across all stages of breast health—from screening and diagnosis to treatment, follow-up, and access to clinical trials. The center emphasizes personalized care, advanced diagnostics, and holistic support services. As part of a full-service hospital, it ensures seamless coordination and compassionate care. The team also contributes to education and research to advance breast cancer treatment.

Mount Sinai Mammovan (Mobile Mammography Program)



In 2024, the Mammovan program celebrated its 1,000th breast cancer screening event across New York City. Since its launch, it has provided more than 10,000 screenings, helping detect breast cancer early and save lives. The program targets women aged 40 and older who have not had a mammogram in the past year and are asymptomatic. It operates in partnership with community organizations to deliver culturally sensitive education and support, offering on-site 3D mammography and removing barriers such as cost, transportation, and lack of local facilities.

Program Impacts:

- Reaches diverse neighborhoods across New York City
- Reduces disparities in breast cancer screening access
- Builds trust through culturally sensitive outreach
- Promotes early detection and preventive care





Dubin Breast Center of The Tisch Cancer Institute



The Dubin Breast Center of The Tisch Cancer Institute offers comprehensive care for every phase of breast health in a serene, state-of-the-art facility. As part of one of the nation's top-ranked hospitals, Dubin provides integrated services including breast imaging, pathology, surgery (with minimally invasive and reconstructive options), medical and radiation oncology, and post-treatment support. Specialized programs such as the High-Risk Program, Survivorship Program, and Cold Cap Therapy enhance Dubin's personalized approach. Patients benefit from coordinated appointments, referrals, and follow-up care, as well as access to emerging therapies through clinical trials. Support services include psychosocial counseling, nutrition guidance, couples therapy, smoking cessation, and stress and weight management. A multidisciplinary team ensures seamless, holistic care that addresses both medical and emotional needs.

Program Impacts:

- Integrated, personalized care
- Reduced treatment-related stress
- Support for long-term survivorship

Breast Health Program at Mount Sinai Queens

Breast Health Program at Mount Sinai Queens provides free breast cancer education, screenings, and navigation services to uninsured and underinsured residents. In 2024–2025, the program reached more than 150 individuals through culturally sensitive outreach and partnerships with local nonprofits. More than 75 free mammograms and clinical breast exams were conducted, with 80 percent of diagnosed cases detected early. Follow-up care was coordinated for 75 percent of those requiring further evaluation. Plans include expanding screening capacity, offering bilingual materials, and hosting the annual Breast Cancer Awareness event.

Program Impacts:

- Closed gaps in access to breast cancer screening and care
- Enabled women to receive their first mammogram
- Increased health awareness and confidence in navigating care
- Strengthened health equity through education and outreach

Mount Sinai–Union Square Breast Cancer Program

Mount Sinai–Union Square Breast Cancer Program offers comprehensive outpatient cancer services, including surgery, infusion therapy, imaging, radiation, and access to clinical trials. The program provides personalized support services such as genetic counseling, patient support groups, stress reduction classes, and health and beauty workshops. It ensures continuity of care from diagnosis through treatment and follow-up, with a focus on emotional and psychosocial support.





Program Impacts:

- Improved patient outcomes through integrated, timely care
- Increased access to clinical trials and advanced therapies
- Enhanced emotional and psychosocial support for patients
- High patient satisfaction and adherence to treatment plans
- Seamless integration across the Mount Sinai Health System

Esperanza y Vida (Hope and Life) and the Witness Project of Harlem™

The **Esperanza y Vida (Hope and Life)** and the **Witness Project of Harlem™** programs provide information to Latino and African American women about breast and cervical cancer prevention and early detection.

Women's Cancer Program at The Blavatnik Family Chelsea Medical Center at Mount Sinai

Women's Cancer Program at The Blavatnik Family Chelsea Medical Center at Mount Sinai offers world-class outpatient breast cancer care in a welcoming, boutique-like setting. Located conveniently near home or work, the Center provides a range of diagnostic services—from clinical breast exams to advanced imaging and biopsies—to ensure accurate diagnoses. Patients diagnosed with breast cancer receive personalized treatment plans developed by a multidisciplinary team of specialists.

Program Impacts:

- Increased access to high-quality, outpatient breast cancer care
- Enhanced patient comfort through a supportive, non-hospital environment
- Timely and accurate diagnosis using advanced imaging and procedures
- Personalized treatment plan by a team of specialists
- Strengthened patient engagement and continuity of care

Cancer Care at Mount Sinai Morningside

Cancer Care at Mount Sinai Morningside provides high-quality, comprehensive cancer care with a focus on preserving patients' quality of life. Key programs include:

- **Breast Cancer Program:** Offers medical oncology, chemotherapy, and surgery through a multidisciplinary team of surgeons, radiologists, plastic surgeons, and genetic counselors.
- **Gynecological Cancer Care:** Delivers minimally invasive procedures, chemotherapy, and radiation therapy for gynecologic cancers and precancers.
- **Lung and Thoracic Cancer Care:** Provides advanced treatments and symptom management from diagnosis through post-treatment.

The Center emphasizes a patient-centered approach, guiding individuals through every stage of their cancer journey.

Program Impacts:

- Improved patient outcomes
- Enhanced quality of life
- Personalized, compassionate care
- Comprehensive support
- Continuity of care across treatment stages





Cancer Care at Mount Sinai West

Cancer Care at Mount Sinai West offers nationally recognized oncology programs and innovative cancer research. The hospital provides multidisciplinary care across medical, surgical, and radiation oncology, supported by specialists including pathologists, plastic surgeons, nutritionists, and social workers. Patients are actively engaged in their treatment and have access to advanced therapies and clinical trials. The program treats a wide range of cancers, including:

- Brain tumors
- Breast cancer
- Chronic lymphocytic leukemia
- Colon and rectal cancer
- Gynecologic cancer
- Head and neck cancer
- Lung and thoracic cancer
- Lymphoma
- Pancreatic cancer

Program Impacts:

- Access to innovative treatments and clinical trials
- Multidisciplinary collaboration for comprehensive care
- Empowered patient involvement in treatment decisions
- Whole-person support including nutrition and psychosocial services

Center of Excellence for Cancer Support Services

Cancer impacts not only the body but also the mind and spirit. A diagnosis and treatment can cause significant distress for patients and their families. The Mount Sinai Health System offers comprehensive support services to help patients manage physical symptoms, emotional challenges, and spiritual concerns. Our goal is to help patients maintain a positive outlook and overall well-being.

In addition to cancer-specific physicians, our Cancer Support Services team includes social workers, psychiatrists, dietitians, chaplains, and child life therapists. We treat each patient as a whole person, recognizing that individual needs may evolve over time. Together with patients and their loved ones, we assess concerns and create personalized care plans to support coping and healing. Support programs are available across the Mount Sinai Health System. On-site social workers and oncology care team members can assist in accessing these services.

Program Impacts:

- Enhanced emotional and psychosocial support
- Improved coping and resilience
- Increased access to holistic services
- Strengthened well-being throughout the cancer journey





Men's Health Programs at the Mount Sinai Health System

Mount Sinai's Men's Health Programs, led by the Department of Urology, offer comprehensive care for prostate disorders, sexual dysfunction, urinary issues, and male reproductive health. Services are available at The Mount Sinai Hospital and affiliated clinics—some locations offer specialized care such as integrative medicine and a sports-themed resource center.

Core Services:

- **Prostate Health:** Treatment for benign prostatic hyperplasia (BPH), prostate cancer risk profiling, and other prostate conditions
- **Male Sexual Health:** Management of erectile dysfunction, low testosterone, and related concerns
- **Urinary Health:** Care for incontinence, urinary tract infections, and bladder stones
- **Reproductive Health:** Diagnosis and treatment of male infertility

Specialized Programs & Resources:

- **Integrative Urology and Wellness Program:** Combines traditional urology with wellness therapies for holistic care
- **Sports-Themed Resource Center:** In partnership with Man Cave Health, offers a relaxed, sports-themed environment for prostate health education
- **Male Hormone Disorder Specialists:** Located in the Endocrinology department, addresses hormonal issues including diabetes and thyroid disorders
- **HIV and STI Services:** The Samuels Clinic at the Institute for Advanced Medicine provides screening, education, and long-acting PrEP injections

Program Impacts:

- Expanded access to specialized men's health services across multiple locations
- Improved management of prostate, sexual, urinary, and reproductive health conditions
- Strengthened patient engagement through integrative and culturally relevant care models
- Enhanced health equity via targeted outreach and services for underserved populations
- Fostered holistic wellness through programs combining traditional medicine with lifestyle support
- Increased awareness and prevention of HIV and STIs through accessible education and PrEP services

Mount Sinai Robert F. Smith Mobile Prostate Cancer Screening Unit

Launched in 2022, this mobile unit addresses disparities in prostate cancer outcomes, particularly among Black men and underserved populations. It offers free screenings using advanced diagnostics—micro-ultrasound, PSA testing, and genomic profiling—and refers patients with abnormal results to Mount Sinai's Center of Excellence for timely follow-up care. By early 2025, more than 9,000 individuals had been screened.



Program Impacts:

- Builds trust through partnerships with faith-based and cultural organizations
- Reduces barriers to care, including cost, transportation, and time constraints
- Strengthens collaboration between health systems and community organizations
- Empowered patient involvement in treatment decisions
- Whole-person support including nutrition and psychosocial services





Cancer Supportive Service Programs

Cancer Supportive Service Programs provides a range of programs to meet the physical, emotional, spiritual, and practical needs of patients and their families throughout the cancer journey. Below is an overview of the key supportive services available.

- **Social Work & Counseling:** Emotional support and practical assistance with transportation, insurance, and care coordination.
- **Nutrition Services:** Personalized dietary guidance to manage treatment-related nutrition challenges.
- **Spiritual Care:** Support for patients of all faiths through chaplain-led counseling and rituals.
- **Psychiatry & Psychotherapy:** Mental health care including therapy and medication management for anxiety, depression, and sleep issues.
- **Child Life Services:** Support for children coping with a loved one's cancer diagnosis through education and emotional care.
- **Music Therapy:** Therapeutic music sessions to reduce stress and anxiety and enhance well-being.
- **Integrative Medicine:** Wellness therapies such as yoga, acupuncture, massage, and meditation to complement medical treatment.
- **Palliative Care:** Symptom management and support for patients with advanced cancer, including end-of-life planning.
- **Cardio-Oncology:** Specialized care for heart health during and after cancer treatment.
- **Oncology Physical Therapy:** Rehabilitation services to address fatigue, mobility issues, and treatment side effects.
- **Support Groups & Wellness Events:** Group activities like yoga, journaling, and meditation to foster community and healing.

Mount Sinai Clinical Diabetes Institute

*Ranked **among the top 20** in the nation for Diabetes & Endocrinology by U.S. News & World Report® (2025–26)*



The Mount Sinai Clinical Diabetes Institute provides expert, patient-centered care for type 1, type 2, and gestational diabetes and related conditions. As a leader in the New York City metro area for ADA-certified Centers of Excellence, it is the only regional health system offering the artificial pancreas for type 1 diabetes. A multidisciplinary team—including physicians, dietitians, nurse practitioners, and certified diabetes educators—develops personalized treatment plans using advanced technology, research, and education to reduce complications and improve quality of life. The Mount Sinai Health System offers a variety of diabetes classes and support groups that are open to the community. Key offerings include:





Diabetes Classes & Support Groups at Mount Sinai

- Free diabetes education classes are offered at the Mount Sinai Diabetes Center led by a certified diabetes care and education specialist.
- Classes are open to patients, caregivers, and family members, and are available both in-person and virtually.
- Diabetes and Pregnancy Program specializes in education and support for women with gestational diabetes.
- Integrated care from OB/GYN and endocrine specialists is provided.

Mount Sinai Diabetes Center hosts free virtual diabetes classes for the public at multiple locations:

- The Mount Sinai Hospital (Uptown Manhattan)
- Mount Sinai Brooklyn
- Mount Sinai Queens
- Mount Sinai West
- Mount Sinai Morningside
- New York Eye and Ear Infirmary of Mount Sinai

Mount Sinai's Cardiovascular Programs

*Mount Sinai Fuster Heart Hospital is **ranked No 2 nationally** for Cardiology, Heart, and Vascular Surgery by U.S. News & World Report® (2025–26).*

Each February, in recognition of American Heart Month, Mount Sinai Health System hosts community programs to promote cardiovascular health, chronic disease management, and mental wellness. Key initiatives include the **Go Red Heart Health Fairs** offering free screenings and education, adaptive fitness classes for individuals with mobility challenges. These initiatives reflect Mount Sinai's commitment to reducing health disparities and improving access to care across New York City.

Go Red for Women's Health - February is "American Heart Month". Every year, Mount Sinai Heart celebrates by participating in the American Heart Association's Go Red for Women campaign, designed to raise awareness of heart disease among women. Our nurses, work with other departments in the Mount Sinai Health System to organize and host a "Go Red for Women" Community Heart Health Fair with free screenings.



Cardiovascular Disease Prevention Programs

Cardiovascular Disease Prevention Program focus on lifestyle modification, risk factor screening, and personalized treatment plans for individuals at risk or with existing heart disease.

Program Impacts:

- Increased early detection of cardiovascular risk factors.
- Improved patient adherence to lifestyle changes and medication.
- Reduction in hospital readmissions for chronic heart conditions.





Diagnostic and Preventive Medicine Program offers full-day health assessments including cardiovascular, pulmonary, endocrine, and neuromuscular evaluations.

Program Impacts:

- Timely referrals for specialty care and interventions.
- Improved patient outcomes through early preventive strategies.

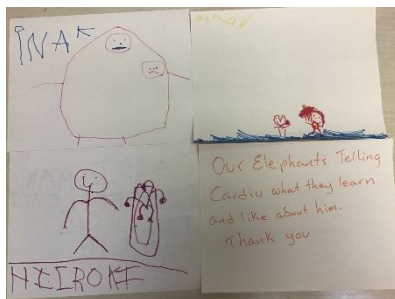
Community-Based Heart Care at Mount Sinai Brooklyn offers localized cardiovascular services including preventive screenings, outpatient cardiology, and chronic disease management.

Cardiovascular Ambulatory Center at Mount Sinai West offers outpatient services including cardiology consultations, echocardiograms, stress echocardiograms, electrocardiograms (EKG).

Program Impacts:

- Increased access to care in underserved communities.
- Higher rates of blood pressure and cholesterol control.
- Strengthened community trust and engagement in heart health initiatives.

The Five Boroughs Project



Also known as the Children's Project, this initiative – led by renowned cardiologist Dr. Valentín Fuster at Mount Sinai Fuster Heart Hospital – promotes heart-healthy habits among children in New York City public schools. The program consists of a four-month educational curriculum for children and their caregivers that emphasizes the importance of healthy eating habits and physical activity. Dr. Fuster and his colleagues assess participants' knowledge, behaviors, and social determinants of health, to better understand how behavior, environment, and genetics can lead to heart disease. By implementing healthy habits early in life, the Five Borough Project encourages the development of long-lasting healthy behaviors in children for the prevention of cardiovascular disease.

Program Impacts:

- **Early prevention of cardiovascular disease** instills heart-healthy habits in children during formative years, reducing long-term risk of cardiovascular conditions.





- **Improved health literacy** enhances understanding of nutrition, physical activity, and cardiovascular health among children and caregivers.
- **Behavioral change** encourages sustained lifestyle changes through interactive education and family engagement.
- **Community engagement** strengthens caregiver involvement and community support for child health initiatives.

Mount Sinai Stroke Centers



Stroke is the fourth leading cause of death in the United States, and the leading cause of long-term disability. It occurs when blood flow to the brain is interrupted, causing brain cells to die within minutes. Immediate medical attention is critical to reduce disability and improve recovery. Mount Sinai Stroke Centers provide comprehensive, evidence-based care for stroke patients, including rapid diagnosis, advanced interventions, and rehabilitation services. Mount Sinai uses **tele-stroke technology**, a 24/7 video system that connects patients and emergency physicians with an off-site neurologist. This ensures rapid diagnosis, timely intervention, and improved outcomes. The program also offers **stroke support groups** for survivors and caregivers, creating a safe environment to share experiences, learn, and find emotional support.

Program Impacts:

- Faster access to stroke specialists.
- Improved treatment times and patient outcomes.
- Increased emotional and social support for survivors and caregivers.

Department of Health Education at Mount Sinai

Department of Health Education at Mount Sinai strengthens health literacy and promotes community wellness through capacity building and youth development initiatives. It supports Mount Sinai colleagues in improving patient communication and develops inclusive, accessible patient-facing materials. Community-based education is delivered through partnerships with schools, senior centers, and nonprofits. The Bridge UP Health Program empowers youth ages 15-18 to engage in public health, civic advocacy, and health justice through interactive learning.

Program Impacts:

- Empowered thousands of youths, families, and older adults with critical health knowledge
- Strengthened health literacy across inpatient, outpatient, and emergency settings
- Promoted healthier communities through education on mental health, reproductive health, and chronic disease prevention





Sexual Assault and Violence Intervention Program

Sexual Assault and Violence Intervention (SAVI) Program provides free, trauma-informed services to survivors of sexual assault and violence, with a focus on women and girls who face barriers to care. Since its inception, SAVI has prioritized survivor-centered support shaped by the lived experiences of survivors and their families. Services include crisis intervention, psychotherapy, counseling, legal advocacy, and group therapy—all offered confidentially and at no cost.

Program Impacts:

- Immediate crisis intervention in hospital emergency rooms.
- Ongoing support through counseling and psychotherapy.
- Free, confidential individual and group therapy for survivors and their loved ones.
- Legal advocacy to help survivors navigate the criminal justice system.

LGBT Health at the Mount Sinai Health System



Mount Sinai Health System is committed to meeting the health care needs of the lesbian, gay, bisexual, and transgender (LGBT) community with respect and compassion. We provide a wide range of health, referral, and educational services that promote best LGBT health outcomes and access to care.

Our mission is to ensure that our LGBT patients can access quality healthcare in a welcoming, supportive, affirming, and safe environment. What we offer:

- Advocacy for LGBT health
- Comprehensive transgender health services
- Information and referrals
- Outreach and patient health education
- Primary care, specialty care and hospital care

Social Work Services

Across the Mount Sinai Health System, social work services are available on every inpatient unit and in outpatient locations. Our social workers, are integral members of the health care team, helping patients and families during what can be a challenging time. Our social workers assist with discharge planning, collaborate with the care team, and address needs during and after hospitalization. Services include information and referrals to outside providers, short-term counseling, and crisis intervention services, and advocacy for patients and families.





Center for Spirituality and Health

The Center for Spirituality and Health partners with faith-based and community organizations to improve the health of the communities we serve. We recognize the role of faith and religion in medical decision-making, and the influence of faith-based leaders in promoting the health. We believe a healthy congregation balances body, mind, and spirit. Through the Health through Early Awareness and Learning (HEAL) Project, we provide health screenings, education, and early detection programs to support community wellness.

Digital Health Since COVID-19

Since the pandemic, digital health has rapidly expanded, making health care more accessible and personalized. Key tools include:

- **Telemedicine:** Enables remote consultations with doctors.
- **Mobile health apps:** Help users track health and manage conditions.
- **Wearables:** Monitor metrics like heart rate and promote healthy habits.
- **Generative AI:** Assists in medical imaging, drug discovery, and personalized treatment planning.

These technologies empower patients to take a more active role in their care and support personalized medicine through data and AI.

Challenges:

Despite the benefits, several challenges remain:

- Privacy concerns around health data
- Unclear regulations
- Unequal access, especially for older adults and low-income populations

Nonetheless, digital health continues to improve care delivery, enhance efficiency, and promote equity in health care.

Mount Sinai Health System: Telemedicine & Digital Health Tools



The Mount Sinai Health System offers a range of digital health tools designed to improve access, convenience, and equity in care.

Telemedicine Services

Virtual Urgent Care

- Accessible via the MyMountSinai app or online.
- Designed for non-emergency issues like flu, mild COVID-19, or minor injuries.
- Patients can start a video visit, share symptoms, and receive prescriptions.





Virtual Primary Care

- Enables scheduling of wellness exams and preventive care visits.
- Offers digital reminders and streamlined follow-up steps.
- Staff are available to answer questions and manage care remotely.

FINANCIAL ASSISTANCE, AND BILLING AND COLLECTIONS POLICY

Mount Sinai Health System hospitals recognize that many of our patients may be unable to access quality health care services without financial assistance because of the economic impact of the COVID-19 pandemic.

The Financial Assistance and Billing and Collections Policy for Mount Sinai Health System hospitals enables each hospital to uphold its mission, while carefully taking into consideration the ability of the patient to pay. The policy is applied in a fair and consistent manner for emergency medical care and other medically necessary care rendered in our hospitals by providers who are directly employed by or contracted by Icahn School of Medicine at Mount Sinai.

The policy, as well as the application for financial assistance is available online in English, Spanish, Chinese, Haitian Creole, Polish, and Russian. A uniform financial assistance policy across hospital facilities and providers and robust social services can help low-income patients manage treatment plans. A uniform financial assistance policy across hospital facilities and providers and robust social services can help low-income patients manage treatment while remaining in their homes.

Consultant Qualifications

Verité Healthcare Consulting, LLC (Verité) was founded in 2006 and is in Arlington, Virginia. The firm serves clients throughout the United States as a resource that helps health care providers conduct Community Health Needs Assessments and develop implementation strategies to address significant health needs. Verité has conducted more than 150 needs assessments for hospitals, health systems, and community partnerships nationally since 2010. The firm also helps hospitals, hospital associations, and policy makers with community benefit reporting, program infrastructure, compliance, and community benefit-related policy and guidelines development. Verité is a recognized national thought leader in community benefit and CHNAs. More information on the firm and its qualifications can be found at www.VeriteConsulting.com.

Plan Dissemination

Mount Sinai Health System's CHNA Implementation Strategy and Community Service Plan is posted on each hospital's website listed below.

Mount Sinai-Union Square - <https://www.mountsinai.org/locations/union-square/about>

Mount Sinai Brooklyn - <https://www.mountsinai.org/locations/brooklyn/about/community>

The Mount Sinai Hospital - <https://www.mountsinai.org/locations/mount-sinai/about/community>

Mount Sinai Queens - <https://www.mountsinai.org/locations/queens/about/community>

Mount Sinai Morningside - <https://www.mountsinai.org/locations/Morningside/about/community>

Mount Sinai West - <https://www.mountsinai.org/locations/west/about>

New York Eye and Ear Infirmary of Mount Sinai - <https://www.nyee.edu/about/community>

