TECHNICAL MEMORANDUM 002
CITY COUNCIL MODIFICATION
LENOX HILL HOSPITAL REDEVELOPMENT

CEQR No. 23DCP079M

ULURP Nos.: C250151ZMM, N250152ZRM, C250153ZSM, N250155ZCM, N250154ZAM

August 12, 2025

A. INTRODUCTION

The Lenox Hill Hospital Redevelopment Project (the Proposed Project) is the subject of a Uniform Land Use Review Procedure (ULURP) application currently under consideration by the New York City Council. On June 20, 2025, a Final Environmental Impact Statement (FEIS) was completed for the project, and a Notice of Completion was issued.

Since completion of the FEIS, the City Council has proposed changes to the Proposed Project that would result in a modification to Envelope 1 as analyzed in the FEIS (the "Modified Project"). The ULURP application would be modified as follows:

- The maximum height of the new building fronting on Lexington Avenue would be reduced from 436 feet as analyzed in the FEIS for Envelope 1 to 370 feet. The height of the portion of the building fronting on East 76th Street beginning 180 feet west of Lexington Avenue (referred to as the "midblock" in the FEIS) would not exceed 235 feet. Permitted obstructions would be allowed.
- The three curb cuts along East 77th Street would be reduced to a single curb cut.
- The zoning text amendment creating proposed Section 74-904 would be modified to require at least 95% of the floor area be used for hospital purposes as a condition for pursuing a special permit. As noted, the special permit being requested by Lenox does not allow for residential use.

In addition to the City Council modifications, the Applicant is making the following modifications to the Proposed Project:

- Lenox Hill Hospital would use modular construction and/or other technologies and would modify construction phasing to reduce the duration of on-site construction activities by approximately one (1) year, from the current schedule of six years of exterior and three years of interior construction or a total of nine (9) years to eight (8) years.
- The ambulance bay for 6 ambulances on East 77th Street in the Proposed Project would be replaced by a through-block driveway (entry on East 77th Street and exit on East 76th Street) in the Modified Project. There would be six ambulance parking spaces and two ambulette spaces along the driveway inside the modified hospital building.
- The proposed separate entrance to the Mother-Baby wing of the hospital would be relocated from Park Avenue to East 77th Street.

This Technical Memorandum has been prepared to examine whether the Modified Project would result in any significant adverse environmental impacts not previously identified and addressed in the FEIS and concludes that the Modified Project would not result in any new or different significant adverse impacts not already identified.

B. BACKGROUND

The FEIS considered the potential for proposed land use actions in support of Lenox Hill Hospital Redevelopment to have significant adverse environmental impacts. It assessed the effects of a series of discretionary actions from the City Planning Commission (CPC), including a zoning map amendment to rezone from a C1-8X district to a C1-9 district and from an R8B district to a C1-8 district; zoning text amendments; special permits; and a zoning authorization (collectively, the Proposed Actions). In addition, a Chairperson's certification of a transit easement volume pursuant to ZR Section 66-21 (a non-discretionary, ministerial action through the CPC) was sought. The Proposed Project would also require a

revocable consent from the New York City Department of Transportation (DOT) and any other permits required for the proposed tunnel under East 77th Street, and a Certificate of Need from the New York State Department of Health (NYSDOH). The Applicant may seek tax-exempt financing of project costs through the Dormitory Authority of the State of New York.

The Proposed Actions would allow the enlargement and modernization of the existing LHH and the creation of a purpose-built hospital complex (the Proposed Project) to address critical infrastructure challenges and space needs. The Proposed Project would permit LHH to meet current standards of healthcare delivery, including single-bedded patient rooms, as well as address projected future needs for an expanded emergency department (ED), new and larger state-of-the-art surgical suites (ORs), and other essential clinical and support spaces.

Two building envelopes were analyzed in the FEIS, each of which would accommodate the Proposed Project's program (see **Appendix A**, "FEIS Figures"). Envelope 1 would include a new approximately 771,000-gross-square-foot (gsf) building on Lexington Avenue and 56,000 gsf of additions to the existing hospital. Under Envelope 1, the portion of the new hospital building within 180 feet of Lexington Avenue would rise to a total height of up to 436 feet, inclusive of screened mechanical bulkheads (see FEIS Figure 1-6a). This portion of the new hospital building would contain eight floors of patient rooms and several mechanical floors. Under Envelope 1, the portion of the new hospital building at the midblock (180 feet west of Lexington Avenue) could rise to a height of approximately 210 feet, consistent with the highest floors currently existing in the midblock portion of Projected Development Site 1.

Envelope 2 would include a new approximately 867,000-gsf building and 8,000 gsf of additions to the existing hospital. Under Envelope 2, the new hospital building would be reduced in height along the Lexington Avenue frontage, but the midblock portion would be taller than under Envelope 1 (see FEIS Figure 1-6b). In particular, the portion of the new hospital building within 180 feet of Lexington Avenue would be shorter than Envelope 1 by 41 feet, to a total height of up to 395 feet, inclusive of screened mechanical bulkheads. Under Envelope 2, there would be six floors of patient rooms above the podium (the approximately 195-foot-tall base of the building), in addition to mechanical floors. To accommodate the hospital's programmatic needs, the midblock would be taller than under Envelope 1, rising to a height of 360 feet.

With the existing buildings to remain, the overall gross floor area of the Proposed Project on Projected Development Site 1 would be approximately 1.4 million gsf with either Envelope 1 or Envelope 2 (see **Table 1**). As analyzed in the FEIS, the program, project population (staff, patients, visitors), site access (see FEIS Figure 1-3), zoning actions, and construction duration would be the same for both Envelope 1 and Envelope 2 (see **Table 2**).

The FEIS also considered the as-of-right development of 111-115 East 77th Street between Lexington and Park Avenues (Block 1412, Lots 9, 10, and 11) (Projected Development Site 1a) as part of the Proposed Project. Projected Development Site 1a would be redeveloped with an approximately 46,000-gsf, six-story, 75-foot-tall building to house hospital support functions. It would be connected to Projected Development Site 1 by a utility tunnel under East 77th Street.

The FEIS assessed a 2036 Build Year for the Proposed Project.

Table 1
FEIS—Development Program Summary

Components	Existing/No Action Condition	With Action Condition (Envelope 1)	With Action Condition (Envelope 2)	Increment (Envelope 1)	Increment (Envelope 2)
Projected Development Site 1/ Hospital Block (gsf)	781,500	1,398,000	1,390,000	616,500	608,500
Projected Development Site 1/ Hospital Block (beds)	450	475	475	25	25
Projected Development Site 1a/ East 77th Street Site (gsf)	23,200	46,000	46,000	22,800	22,800
Project Site Total (gsf)	**804,700**	**1,444,000**	**1,436,000**	**639,300**	**631,300**

Notes: gsf = gross square feet; Square footages shown are approximate and include mechanical/utility space and below-grade space.
Source: Northwell/LHH

Table 2
Project Population—Typical Average Weekday Daily Persons

Population	Existing	No Action	With Action	Project Increment
Projected Development Site 1 (Hospital Block)				
Staff*	**2,990**	**2,733**	**3,070**	**337**
Inpatient	*2,558*	*2,582*	*2,930*	*348*
Ambulatory	*432*	*151*	*140*	*-11*
Patients	**1,262**	**612**	**633**	**21**
*Inpatient***	*450*	*450*	*475*	*25*
Ambulatory	*812*	*162*	*158*	*-4*
Visitors	**2,191**	**1,247**	**1,298**	**51**
*Inpatient***	*1,013*	*1,012*	*1,069*	*57*
Ambulatory	*1,178*	*235*	*229*	*-6*
Projected Development Site 1a (East 77th Street Site)				
Staff*	**108**	**108**	**110**	**2**
Inpatient	*33*	*33*	*35*	*2*
Ambulatory	*75*	*75*	*75*	*0*
Patients	**4**	**4**	**0**	**-4**
Inpatient	*0*	*0*	*0*	*0*
Ambulatory	*4*	*4*	*0*	*-4*
Visitors	**6**	**6**	**0**	**-6**
Inpatient	*0*	*0*	*0*	*0*
Ambulatory	*6*	*6*	*0*	*-6*
Total – Projected Development Sites 1 and 1a				
Staff*	**3,098**	**2,841**	**3,180**	**339**
Inpatient	*2,591*	*2,615*	*2,965*	*350*
Ambulatory	*507*	*226*	*215*	*-11*
Patients	**1,266**	**616**	**633**	**17**
*Inpatient***	*450*	*450*	*475*	*25*
Ambulatory	*816*	*166*	*158*	*-8*
Visitors	**2,197**	**1,253**	**1,298**	**45**
*Inpatient***	*1,013*	*1,012*	*1,069*	*57*
Ambulatory	*1,184*	*241*	*229*	*-12*

Note: * Staff includes physicians (employed and voluntary), nurses, other clinical, administrative, and building operations employees, students, and volunteers.
** The daily inpatients and inpatient visitors for existing, No Action, and With Action conservatively reflect a higher occupancy rate than the hospital experiences most days. The hospital typically operates at an approximately 75 percent occupancy rate, but that rate is exceeded on an approximately weekly basis; this trend is expected to continue in the No Action and With Action conditions. By assuming the same occupancy rate in the No Action and With Action conditions and analyzing the hospital at 100 percent occupancy for purposes of developing the RWCDS, the analysis conservatively overestimates the Proposed Project's potential impacts.

The analysis of the impacts of the Proposed Project presented in the FEIS encompassed Envelope 1 and Envelope 2. Because the program, project population (staff, patients, visitors), site access, zoning actions, and construction duration would be the same for both Envelope 1 and Envelope 2, no differences in impacts were identified for most CEQR technical areas, including Land Use, Zoning, and Public Policy, Community Facilities and Services, Historic and Cultural Resources, Hazardous Materials, Water and Sewer Infrastructure, Transportation, Greenhouse Gas Emissions and Climate Change, and Noise. In other technical areas such as Shadows, Urban Design and Visual Resources, Air Quality, and Construction, both Envelope 1 and Envelope 2 were analyzed.

Based on the analyses presented in the FEIS, the Proposed Project with either Envelope 1 or Envelope 2 would cause significant adverse shadow impacts to the trees and plantings in the publicly accessible Eighth Church of Christ, Scientist garden located across the street from Projected Development Site 1 and abutting Projected Development Site 1a. Construction of the Proposed Project with either Envelope 1 or Envelope 2 would result in temporary significant adverse construction noise impacts.

An (E) Designation (E-777) would codify restrictions related to hazardous materials, air quality and noise; and a Restrictive Declaration would codify Project Components Related to the Environment (PCREs) and mitigation measures related to shadows, and construction-related air quality and noise.

C. DESCRIPTION OF PROJECT MODIFICATIONS

Modifications to the Proposed Project incorporated in the revised ULURP drawings are identified below and shown in **Figures 1 and 2.** A summary of the Modified Project's program is shown in **Table 3**. The Modified Project would result in the same Project Population as analyzed in the FEIS and shown in **Table 2**, above.

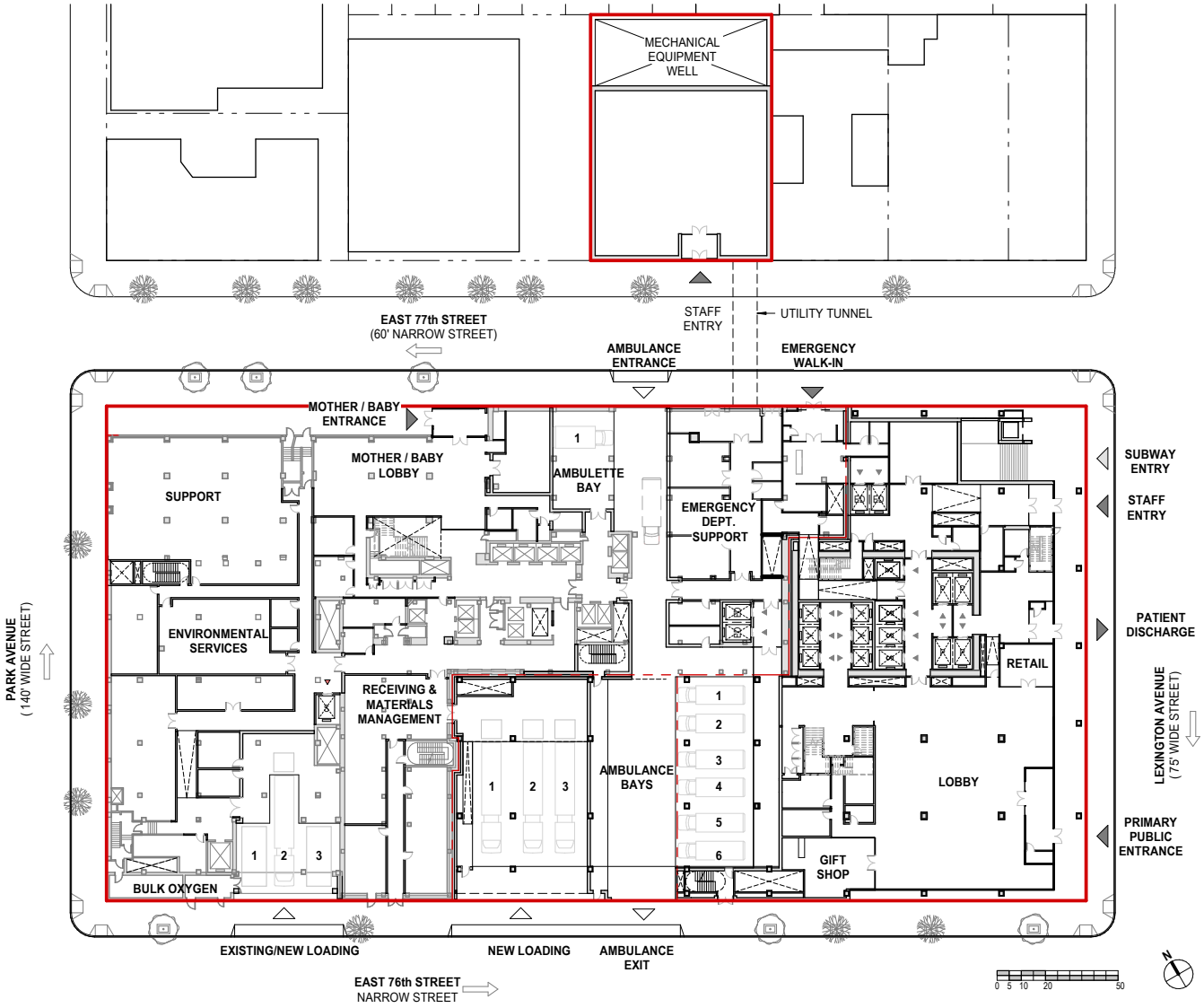
Table 3
FEIS vs. Modified Project—Development Program Summary

Components	FEIS					Technical Memo	
	Existing/No Action Condition	With Action Condition (Envelope 1)	With Action Condition (Envelope 2)	Increment (Envelope 1)	Increment (Envelope 2)	With Action Condition (Modified Project)	Increment (Modified Project)
Projected Development Site 1/ Hospital Block (gsf)	781,500	1,398,000	1,390,000	616,500	608,500	1,367,560	586,060
Projected Development Site 1/ Hospital Block (beds)	450	475	475	25	25	475	25
Projected Development Site 1a/ East 77th Street Site (gsf)	23,200	46,000	46,000	22,800	22,800	46,000	22,800
Project Site Total (gsf)	**804,700**	**1,444,000**	**1,436,000**	**639,300**	**631,300**	**1,413,560**	**608,860**

Notes: gsf = gross square feet; Square footages shown are approximate and include mechanical/utility space and below-grade space.
Source: Northwell/LHH

ACCESS CHANGES

- A drive through the block from East 77th Street to East 76th Street would provide internal access for six ambulances replacing the six-ambulance bay off East 77th Street shown in the FEIS (see **Figure 1)**. The drive would be approximately **175** feet west of Lexington Avenue. Ambulances would enter from East 77th Street and exit on East 76th Street. Parking spaces for six ambulances and two ambulettes would be provided within the building. The series of new curb cuts for the ambulance bay in the FEIS on East 77th Street would be reduced to a single curb cut for the drive through.
- The number of loading bays on East 76th Street would be reduced from seven (five truck plus two compactor bays) to six (four truck plus two compactor bays) and all would be perpendicular to the street. The new curb cut for the truck bays on East 76th Street shown in the FEIS would not be increased in length but would also serve the ambulance drive through exit.



Source: Ennead Architects

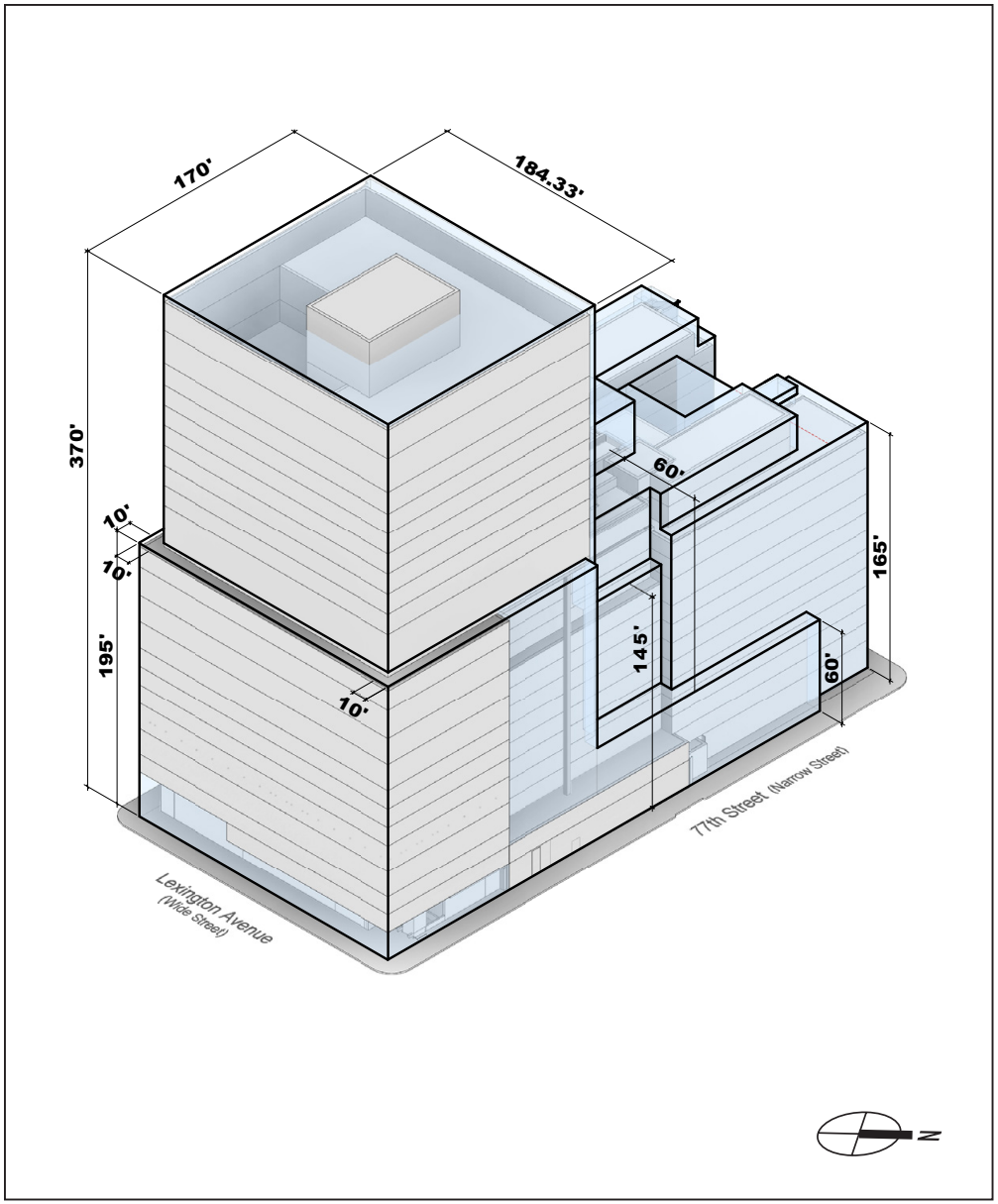
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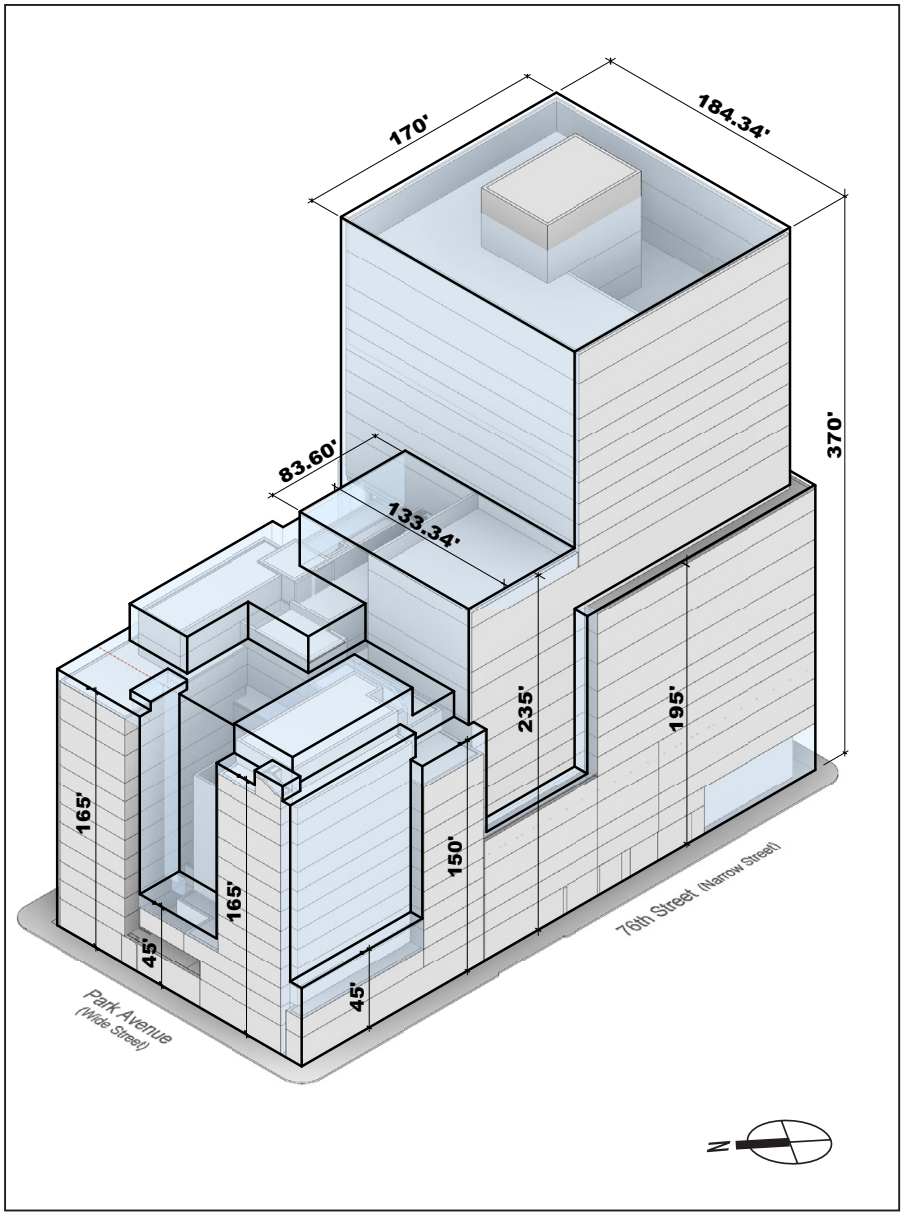
Modified Project - Ground Floor Plan

LENOX HILL HOSPITAL REDEVELOPMENT

Figure 1

8.8.25





Source: Ennead Architects

NOTE: FOR ILLUSTRATIVE PURPOSES ONLY

Maximum Zoning Envelope

Modified Project - Maximum Zoning Envelope

LENOX HILL HOSPITAL REDEVELOPMENT

Figure 2

- The Mother-Baby Hospital entrance would be moved from Park Avenue to East 77th Street approximately where the main hospital entrance exists today.
- The Emergency Department walk-in entrance would be relocated from Lexington Avenue to East 77th Street, while the staff entrance would be relocated from East 77th Street to Lexington Avenue.

HEIGHT AND FLOOR AREA REDUCTIONS

- As compared to the Envelope 1 building at 436 feet and the Envelope 2 building at 395 feet, the height of the Modified Project on Lexington Avenue would be reduced to 370 feet; the height of the building at the midblock 180 feet west of Lexington Avenue would be 235 feet, which is taller than the Envelope 1 building but shorter than the Envelope 2 building (see **Figure 2)**. To achieve this reduction, some of the bulk of the Envelope 1 building would be shifted from Lexington Avenue to the midblock increasing the floor plate size and allowing a reduction in the number of total new hospital floors. The floor-to-floor heights on the patient bed floors would also be reduced from 16 feet to 14.25 feet.
- The overall gross floor area of the Modified Project would be reduced from 1,444,000 square feet in Envelope 1 (or 1,436,000 square feet Envelope 2) to 1,413,560 square feet consisting of 825,012 square feet in the new hospital building, 518,595 square feet in the existing hospital to remain and 23,954 square feet of additions to the existing hospital.

The Modified Project would provide the same number of single-bedded rooms (475), the same number of operating suites (30) and the same number of emergency room positions (48) as those described for Envelopes 1 and 2 and analyzed in the FEIS. The population (staff, patients, and visitors) for the Modified Project would be the same as analyzed in the FEIS (see **Table 2**, above).

It is anticipated that with the reduction in the size and the use of modular construction and/or other technologies, as well as modifications to construction phasing, the Modified Project would allow construction to be completed one year sooner than was analyzed in the FEIS. In addition, a task force will be convened to facilitate communication with the local community regarding construction schedule as well as responses by Lenox Hill Hospital to concerns or questions that arise during the project.

Due to the one-year reduction in overall construction (from nine years to eight years), the Build year for the Modified Project would be 2035, compared to 2036 for the Proposed Project analyzed in the FEIS.

PROPOSED ACTIONS

The zoning text amendment creating proposed Section 74-904 will be modified to require at least 95% of the floor area be used for hospital purposes as a condition for pursuing a special permit. As noted, the special permit being requested by the Applicant does not allow for residential use. No other changes to the Proposed Actions described in the FEIS are anticipated.

D. POTENTIAL ENVIRONMENTAL EFFECTS OF THE MODIFIED PROJECT

The FEIS examined a full range of potential environmental impacts and concluded that the Proposed Project with either Envelope 1 or Envelope 2 would result in significant adverse shadows impacts and temporary construction noise impacts. No other significant adverse impacts were identified in the FEIS. The Modified Project would not affect the conclusions of the previously completed City Environmental Quality Review (CEQR) analyses .

SHADOWS

The FEIS concluded that the Proposed Project with either Envelope 1 or Envelope 2 would cast new shadows on the publicly accessible Eighth Church of Christ, Scientist garden located across the street from Projected Development Site 1 and abutting Projected Development Site 1a, in the spring, summer, and fall, causing significant adverse impacts to the trees and plantings in the garden. Compared with the Envelope 1 massing analyzed in the FEIS, the Modified Project would be approximately 66 feet shorter on Lexington Avenue and approximately 25 feet taller on the midblock portion 180 feet west of Lexington Avenue.

An analysis was conducted to assess the shadow effects of the Modified Project. Overall, with the Modified Project, incremental shadows on the church garden would be the same in duration on all representative dates as compared to the Proposed Project in the FEIS, and the coverage of the incremental shadow would

be the same or very similar on the dates representing fall, winter, and early spring. In the late spring and summer, the increment with the Modified Project would be somewhat smaller in size during an approximately one hour period in midday, compared to the Proposed Project. However, the reduction in incremental shadow coverage in these months would not be substantial enough to change the conclusion of the FEIS. Thus, the Modified Project would not result in any new significant adverse shadow impacts not previously identified in the FEIS.

TRANSPORTATION

The FEIS concluded that neither Envelope 1 nor Envelope 2 would warrant detailed analysis of any transportation systems because the transportation screening assessment found that the Proposed Project would not exceed any CEQR thresholds warranting a detailed analysis. The incremental increase in person and vehicle trips would fall below the CEQR Level 1 thresholds for traffic, transit (subway and bus), and pedestrians; therefore, detailed traffic, transit, and pedestrian analyses are not warranted. As described above, the Modified Project would provide the same number of single-bedded rooms, the same number of operating suites and the same number of emergency room positions as those described for Envelopes 1 and 2 and analyzed in the FEIS. The population (staff, patients, and visitors) for the Modified Project would be the same as analyzed in the FEIS. As a result, the Modified Project also does not warrant detailed analysis of any transportation systems.

The FEIS assumed ambulances would access the Project Site on East 77th Street using a series of curb cuts serving six ambulance bays. Under that configuration, ambulances would proceed westbound down East 77th Street from Lexington Avenue to the curb cuts, reverse into the bays, and after delivering or picking up patients, pull head-first back into westbound traffic to continue down East 77th Street to Park Avenue. The Modified Project would reconfigure the east 77th Street curb cuts analyzed in the FEIS (see **Figure 1** and **Appendix A**).

The Modified Project would provide a through-block driveway for ambulances and ambulettes, as shown in **Figure 1**. The through-block driveway would be one-way southbound from East 77th Street to East 76th Street. Under the configuration of the Modified Project, ambulances would proceed westbound down East 77th Street from Lexington Avenue to the single curb cut, pull head-first into the driveway, and after delivering or picking up patients, pull head-first into eastbound traffic on East 76th Street. There would be no net change in the number of ambulances generated by the Proposed Project when comparing the FEIS ambulance bay configuration to the Modified Project through-block driveway configuration. There would be net decreases in ambulance trips on westbound East 77th Street between the through-block driveway and Park Avenue and net increases in ambulance trips on eastbound East 76th Street between the through-block driveway and Lexington Avenue, but no net change in trips in the surrounding area. The through-block driveway would improve traffic flow on westbound East 77th Street by eliminating the need for ambulances to back into one of the six ambulance bays described in the FEIS, since it would allow ambulances to enter directly into the driveway, and by directing ambulances to exit onto East 76th Street. However, as described above, the ambulances exiting onto East 76th Street under the Modified Project would not affect the conclusions of the transportation screening assessment.

The Mother-Baby entrance proposed under the FEIS would be relocated from the east side of Park Avenue to the south side of East 77th Street (see **Figure 1**). In comparison to the existing numbers of trips on both street frontages under the FEIS, this would slightly reduce the number of vehicular and pedestrian trips along Park Avenue and slightly increase the number of vehicular and pedestrian trips along East 77th Street.

The Emergency Department entrance proposed under the FEIS would be relocated from the west curb of Lexington Avenue to the south curb of East 77th Street (see **Figure 1**). In comparison to the existing numbers of trips on both street frontages under the FEIS, this would slightly reduce the number of vehicular and pedestrian trips along Lexington Avenue and slightly increase the number of vehicular and pedestrian trips along East 77th Street.

The Staff entrance proposed under the FEIS would be relocated from the south curb of East 77th Street to the west curb of Lexington Avenue (see **Figure 1**). In comparison to the existing numbers of trips on both street frontages under the FEIS, this would slightly reduce the number of vehicular and pedestrian trips

along East 77th Street and slightly increase the number of vehicular and pedestrian trips along Lexington Avenue.

Overall, the ground floor vehicular and pedestrian access modifications of the Modified Project would not result in any significant adverse impacts as compared to the Proposed Project.

AIR QUALITY

As described above, the ground floor vehicular modifications of the Modified Project would not result in any significant adverse transportation impacts as compared to the Proposed Project. Therefore, like the Proposed Project, and the Modified Project would not have a significant adverse impact on air quality from mobile sources.

Consistent with the Proposed Project, no fossil-fuel-fired heating and hot water equipment would be utilized for space heating or domestic hot water needs with the Modified Project. The same restrictions specified for the Proposed Project would be required through an Air Quality (E) Designation (E-777) that would be placed on the Modified Project. In addition, to ensure that there is no potential for significant adverse air quality impacts from potential kitchen equipment for the Modified Project, the same restrictions specified for the Proposed Project would be required through an Air Quality (E) Designation (E-777) that would be placed on the Modified Project.

CONSTRUCTION

As described above, the Applicant would use modular construction and/or other technologies to reduce the duration of on-site construction activities by approximately one (1) year, from the current schedule of nine (9) years to eight (8) years. Neither the Proposed Project nor the Modified Project would result in significant adverse construction impacts with respect to vibration, land use and neighborhood character, socioeconomic conditions, community facilities, open space, historic and cultural resources, hazardous materials, and water and sewer infrastructure.

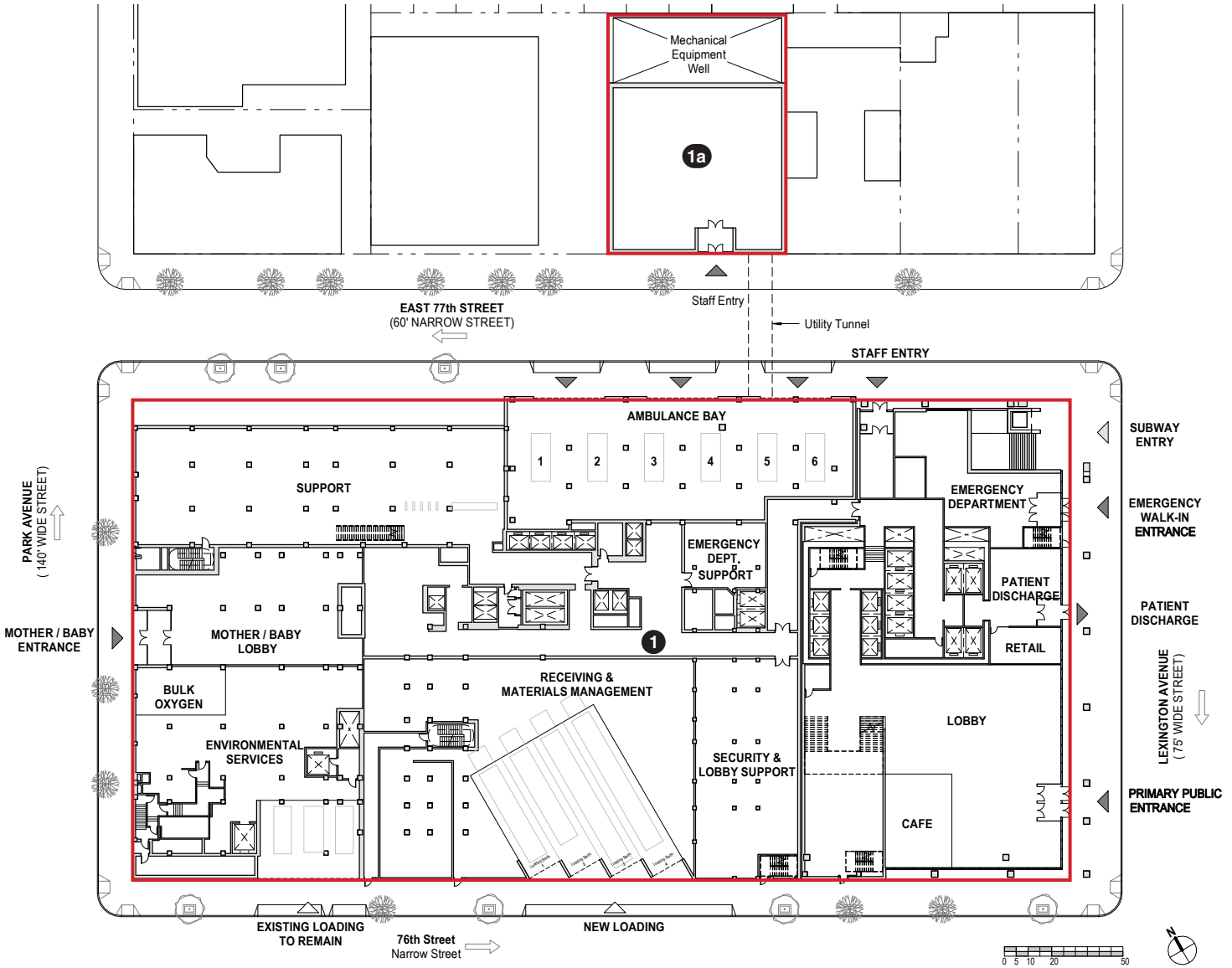
The FEIS concluded that neither Envelope 1 nor Envelope 2 would result in significant adverse transportation impacts during construction. The reduced construction schedule would not result in an increase in the daily construction worker or truck activity during the peak quarter, which is the basis for the detailed transportation impact analyses. Therefore, the same conclusions of the FEIS under the Proposed Project would occur under the Modified Project. The Modified Project would not result in significant adverse impacts to transportation from the construction of the Modified Project.

A detailed modeling analysis was conducted to assess the construction air quality effects of the Modified Project. With the implementation of the same robust emissions reduction program as identified in the FEIS, which includes the use of ultra-low sulfur diesel (ULSD) fuel, dust suppression measures, idling restrictions, diesel equipment reduction, and best available tailpipe reduction technologies, particulate matter ($PM_{2.5}$ and PM_{10}), annual average nitrogen dioxide (NO_2), and carbon monoxide (CO) concentrations would be below their corresponding *de minimis* thresholds or National Air Quality Ambient Standards (NAAQS). Therefore, as with the Proposed Project presented in the FEIS, the Modified Project would not result in significant adverse construction air quality impacts.

The proximity of construction activity to surrounding receptors would not change under the Modified Project, nor would the types and number of construction noise sources. Therefore, as with the Proposed Project, the Modified Project is anticipated to result in significant adverse noise impacts during the construction period. However, since the overall construction duration would be reduced by a year under the Modified Project, the construction noise impacts at some locations may occur over a shorter period as compared to the Proposed Project. Overall, the Modified Project would not result in new significant adverse construction noise impacts beyond those identified in Envelopes 1 and 2 of the Proposed Project as disclosed in the FEIS.

APPENDIX A
FEIS FIGURES

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Source: Ennead Architects

NOTE: FOR ILLUSTRATIVE PURPOSES ONLY

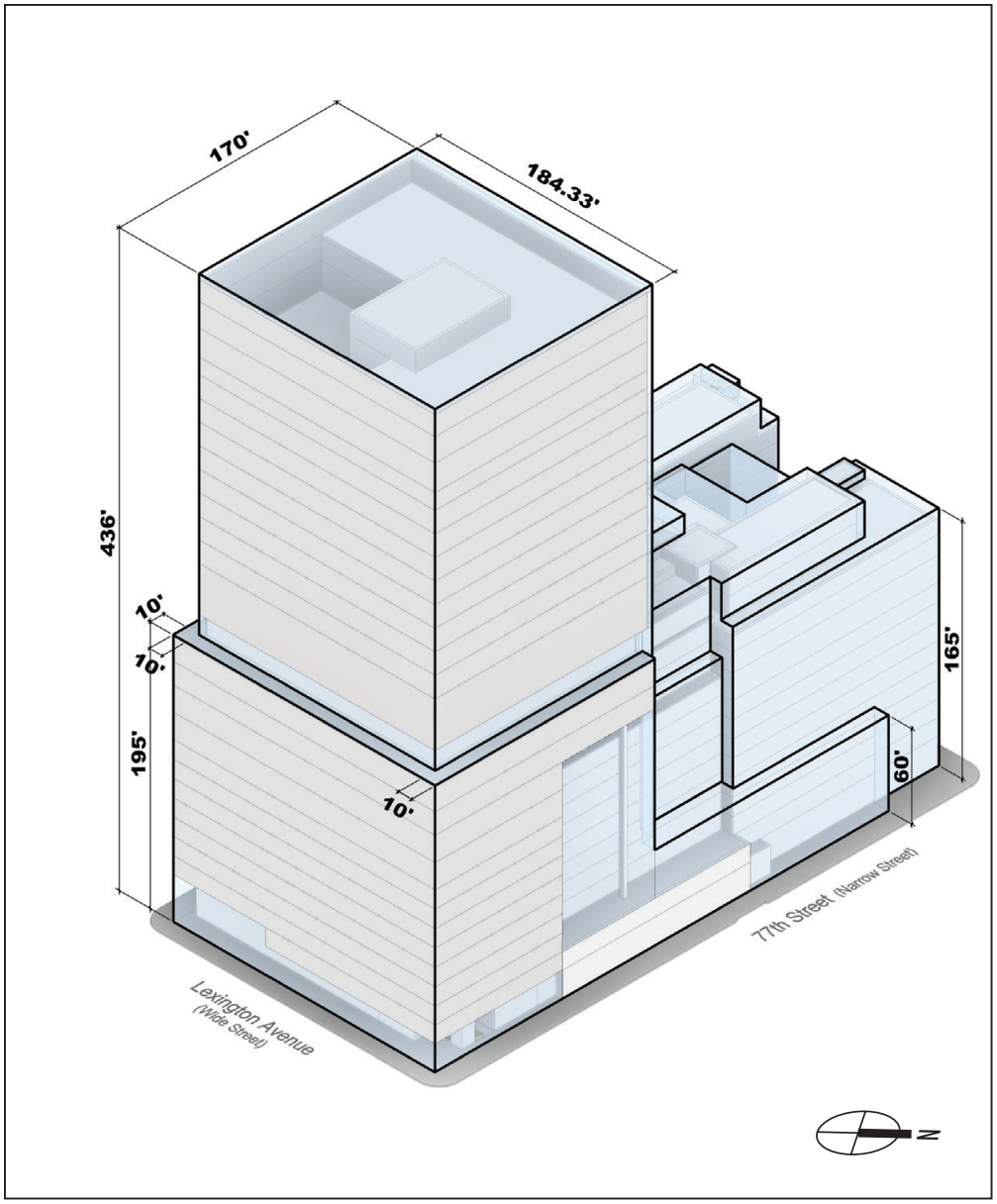
1 *Projected Development Site*

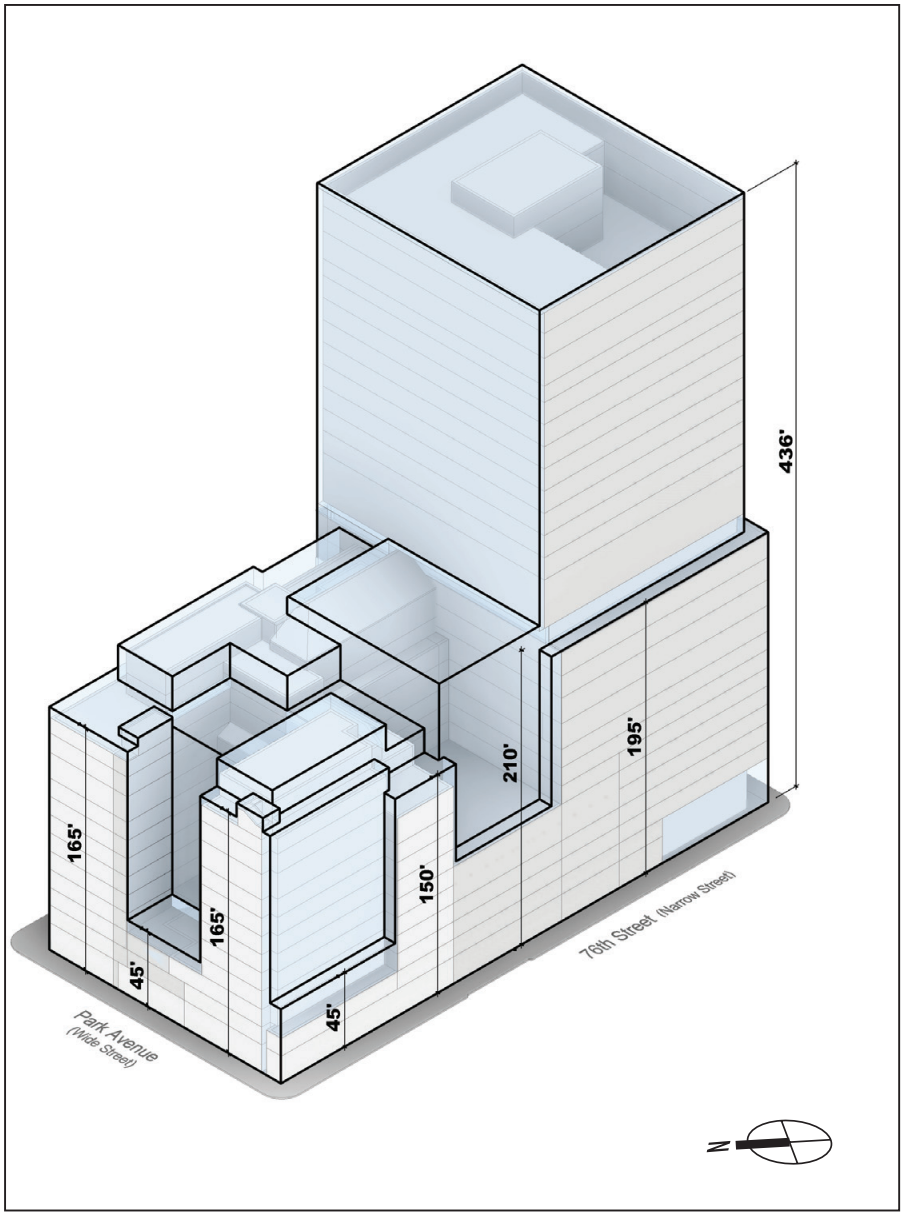
Proposed Ground Floor Plan—(Envelope 1 and Envelope 2)

LENOX HILL HOSPITAL REDEVELOPMENT

Figure 1-3

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Source: Ennead Architects

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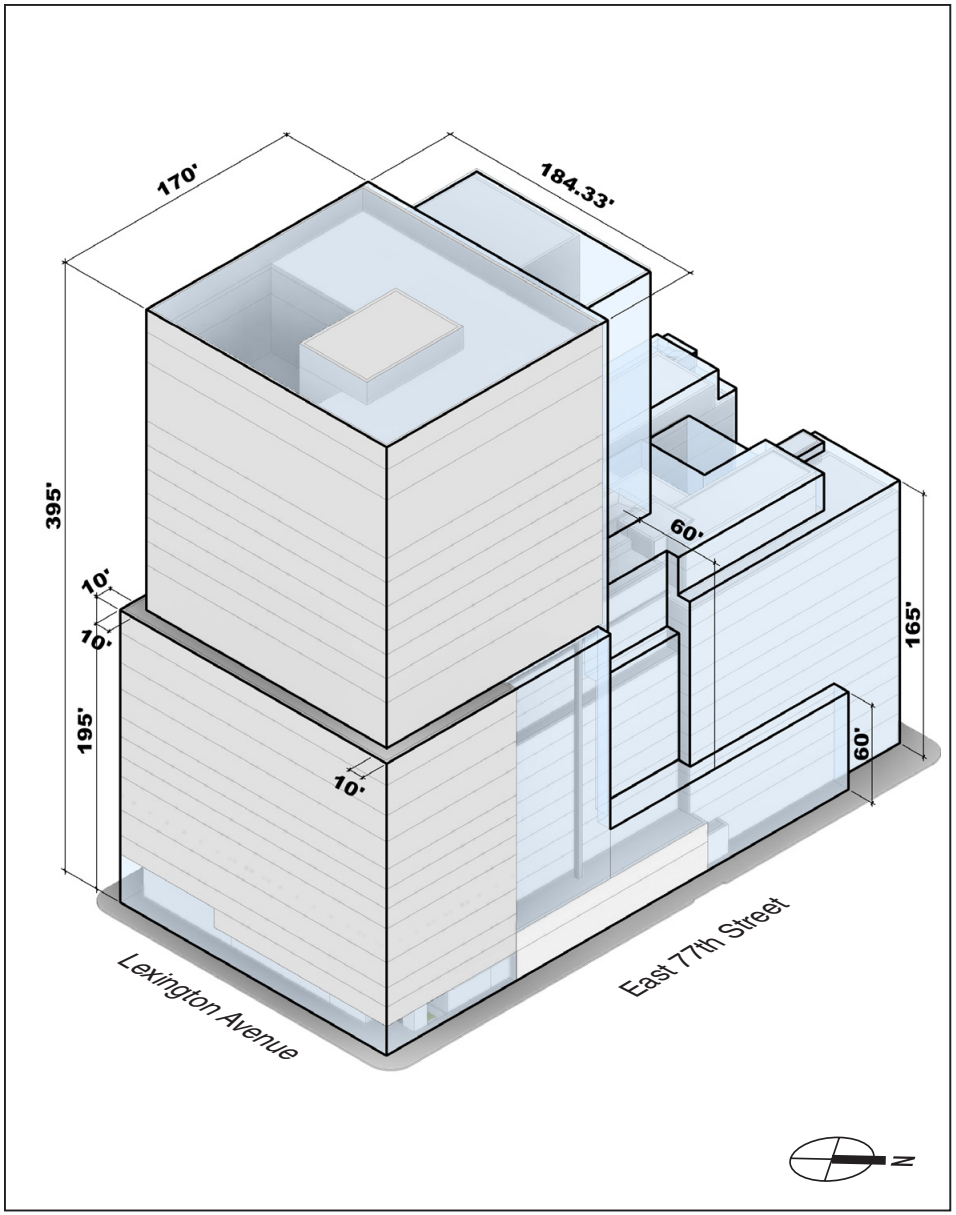
Maximum Zoning Envelope

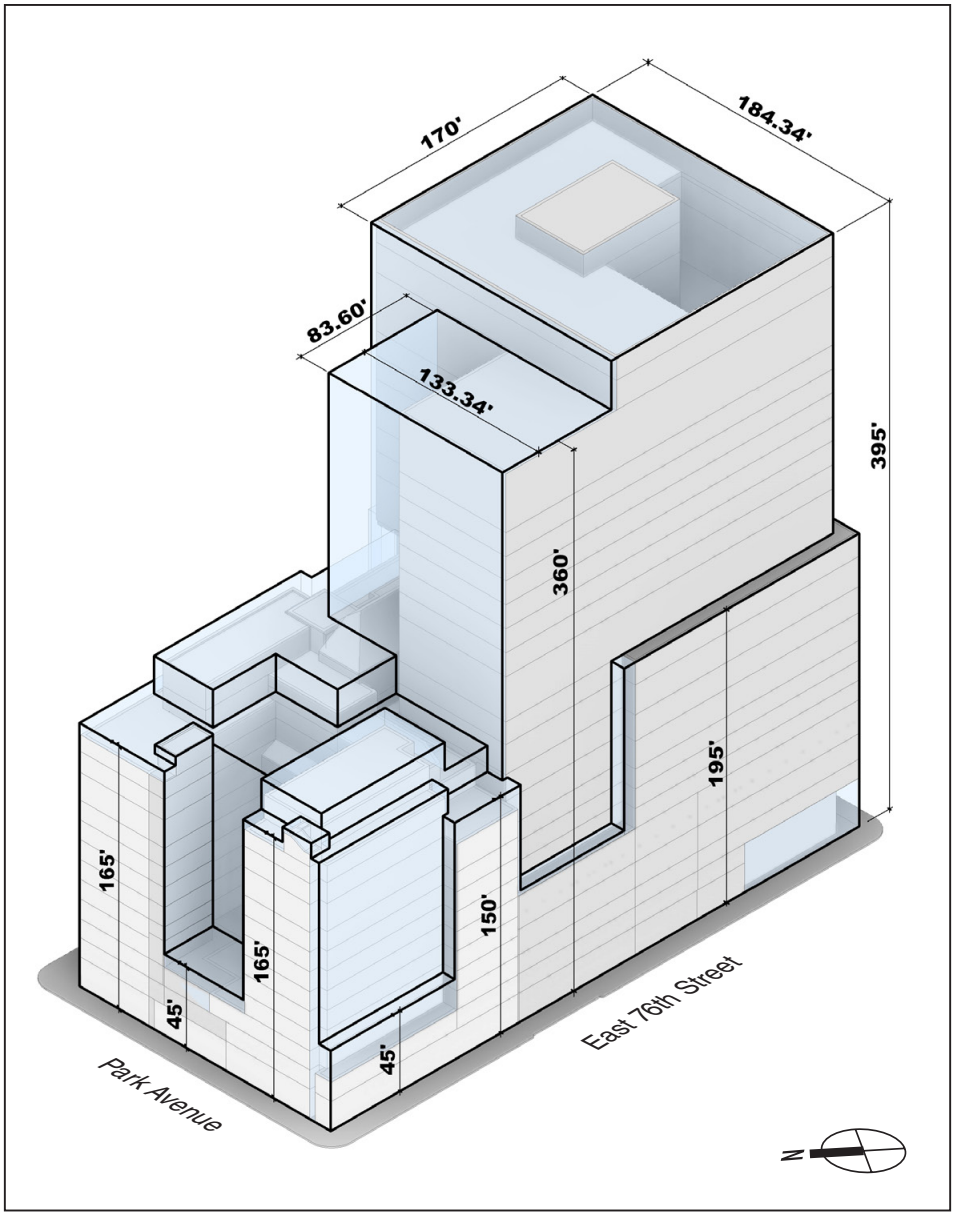
Proposed Maximum Zoning Envelope 1

LENOX HILL HOSPITAL REDEVELOPMENT

Figure 1-6a

8.9.24





Source: Ennead Architects

NOTE: FOR ILLUSTRATIVE PURPOSES ONLY

Maximum Zoning Envelope

Proposed Maximum Zoning Envelope 2

LENOX HILL HOSPITAL REDEVELOPMENT

Figure 1-6b