

## COVID-19 FRONTLINE REPORT

A Conversation with  
East Orange General  
Hospital President and  
CEO Paige Dworak

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### *Inside:*

- CIANJ Members Help Healthcare Heroes
- Managing Cash Flow During a Pandemic
- Brownfield Cleanup and Remediation

Cancer Care  
During COVID-19  
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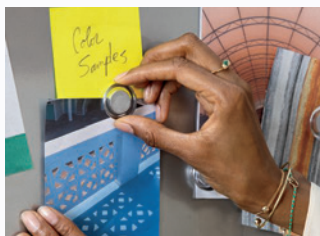
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COMMERCE (SSN 0745-077X) is published monthly for a subscription price of \$35.00 a year by Commerce and Industry Association of New Jersey, 365 West Passaic Street, Suite 490, Rochelle Park, New Jersey 07662, (201) 368-2100, Web site: [www.commercemagnj.com](http://www.commercemagnj.com). Postage Paid at South Hackensack, New Jersey and additional mailing offices. Postmaster: Send address changes to above address.



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# CIANJ Members and Fabulous Foods Help New Jersey's Healthcare Heroes

"As a proactive business organization, it was difficult to watch this virus devastate the lives and businesses of so many of us in New Jersey," says Richard Abramson, a member of Cole Schotz P.C., who chairs the CIANJ board.

By Anthony Russo  
President, CIANJ

Associations are defined by the strength of the collaborations and connections among the members. At CIANJ, we are very proud of the overwhelming response our members made to a special call for action

that shows the depth of their commitment.

We asked for contributions to bring meals to the hero healthcare workers fighting to help people suffering from COVID-19. In less than two weeks, members contributed \$5,850 to provide 380 meals to workers at member hospitals.

"As a proactive business organization, it was difficult to watch this virus devastate the lives and businesses of so many of us in New Jersey," says Richard Abramson, a member of Cole Schotz P.C., who chairs the CIANJ board. "We called our friend and member, Fred Luberto of Fabulous Foods and came up with a plan to help in some way by providing special meals for our frontline healthcare heroes."

Carefully boxed assortments of sandwiches and delicious chicken entrees, pasta, and meatballs, eggplant parmigiana, and even comfort food like mac n' cheese and chicken fingers were prepared by Fabulous Foods of Moonachie. CEO Fred Luberto had only recently recovered from the virus himself and was eager to help. He rounded up the donations himself to bring a total of 500 meals.

"It's very rewarding to be able to do something like this," Luberto said. Even before CIANJ started its drive, Luberto decided his catering business would make a difference. While recovering at home and watching television news, "I saw all these wonderful people on the frontlines knocking themselves out and I said 'we've got to send a whole bunch of meals to them to help,'" Luberto recalled.

When he partnered with CIANJ, he included notes from the donors, like The ELM Group of Princeton, that wanted the healthcare workers to "please accept these meals as a small token

of our gratitude and appreciation for your hard work and dedication in fighting the coronavirus. Thank you for taking care of our friends and families and remember to take some time to care for yourself!"

*"We called our friend and member, Fred Luberto of Fabulous Foods and came up with a plan to help in some way by providing special meals for our frontline healthcare heroes."*

Valley Hospital in Ridgewood received the 75 meals donated by The ELM Group. "Seeing the happy and relieved faces of staff who received pre-prepared meals both in the hospital units as well as on their way home from work is a

clear sign that our service and our staff has been welcomed and appreciated! I am sure that when this crisis is over, they will remember how Valley's supportive community has helped in so many ways," wrote David J. Bohan, vice president and chief development officer at the Valley Hospital Foundation in a note to Fabulous Foods.

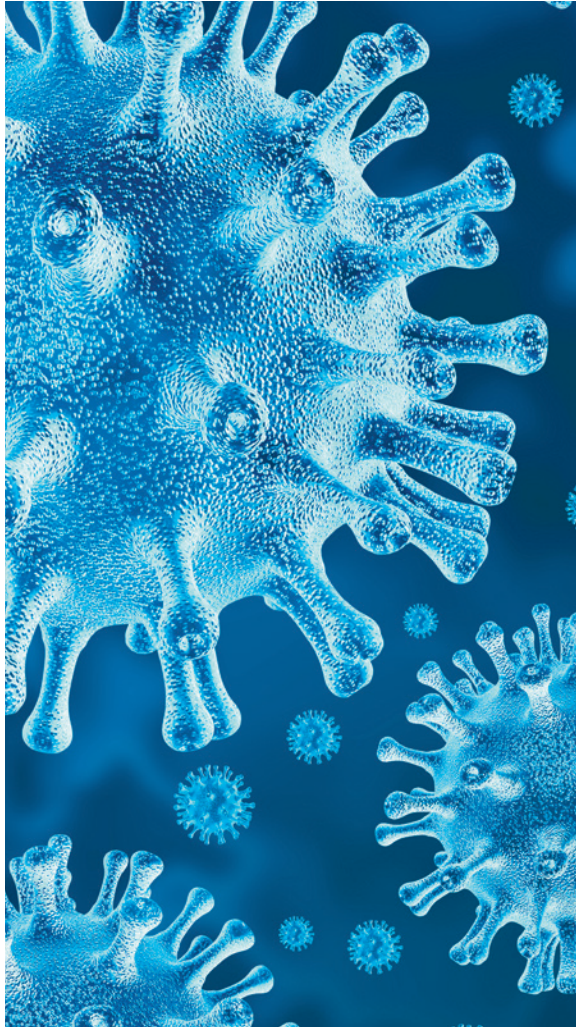
CIANJ asked Fabulous Foods to contact all its members hospitals to arrange meal deliveries. In addition to Valley, they included Bergen New Bridge Medical Center, Chilton Memorial Hospital, East Orange General Hospital, Englewood Hospital and Medical Center, Hackensack University Medical Center and Holy Name Medical Center.

The other CIANJ members who donated included Cole Schotz P.C.; The Creamer Family Foundation; Lakeland Bank; LPS Industries; Newmark Associates; CRE LLC; Palmer & Cay; Piro, Zinna, Cifelli, Paris & Genitempo, LLC; Techminds Group LLC; Withum; X-Solutions Consulting Services LLC; and a personal contribution from Katherine Zech of PKF O'Connor Davies LLP.

*Continued On Page 8*



Members contributed \$5,850 to provide 380 meals to workers at member hospitals, and Fabulous Foods CEO Fred Luberto rounded up the donations himself to bring a total of 500 meals.



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## President's View



Richard Abramson, a member of Cole Schotz P.C., who chairs the CIANJ board

*Continued From Page 6*

When asked, the donors invariably said they contributed because they felt compelled. Many had personal motivations too, like Ray Shupak of Techminds, whose son is a doctor and Joe Imperato Jr. of XSolutions, whose mother and wife are both nurses. Bernie Leone of Withum said so many of his family and friends work at Hackensack University Medical Center, he immediately wanted to contribute. Leone was particularly struck by stories from a cousin who was reassigned from radiology to the morgue at the height of the surge. “Every step of the way, there’s



Meals for Bergen New Bridge Medical Center in Paramus



Meals for Hackensack University Medical Center in Hackensack

unbelievable amounts of pressure (for healthcare workers),” Leone said. “This is just a small token of appreciation.”

It was a simple decision for Todd Galante of Piro, Zinna, Cifelli, Paris & Genitempo, LLC. “In times of crisis, you’ve got to come together and do all you can to help.”

Mani Subrahmanyam of Techminds said: “These frontline workers are helping so many with their lives at risk. This is the least we could. So, we did. It’s nothing and never enough for what they have been doing in this pandemic.”

Madeleine Robinson, president of LPS Industries, said seeing the devastation the virus

causes in human suffering and economic loss of jobs “as a business owner, it just rips your heart out.” She considers herself fortunate that her manufacturing plant can keep its doors open and fully staffed. “This is my little way of trying to be supportive.”

When CIANJ organized the meal drive, Imperato said he felt more inclined to give because the business association was enveloping all its members in the outreach. He said: “It felt right to do something local, in our area and touching other members. It made me feel more in touch with the CIANJ member base.” 🍷







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# Lessons Learned: Hackensack Meridian Health CEO Robert C. Garrett, FACHE

"We have expanded our capacity to safely and effectively care for COVID-19 patients," said Garrett.

By Diane C. Walsh  
Contributing Editor

**R**obert C. Garrett, FACHE, CEO of the state's largest healthcare system, Hackensack Meridian Health, said the COVID-19 pandemic will have lasting and dramatic effects on the healthcare industry in New Jersey. His forecast was delivered during an online, CIANJ Virtual Event in May, sponsored by Guardian Data Destruction.

Hackensack Meridian operates 17 hospitals across New Jersey, stretching from Bergen to Ocean counties. Its staff numbers more than 35,000 employees and 7,200 physicians.

He also predicted the future of primary care will rely more heavily on technology and there will be greater alignment between health systems and private doctors' groups. The growth of health systems is a consequence of the shuttering of many smaller practices that could not withstand the financial pressures of the pandemic, Garrett said.

The changes in primary care were foretold in the way telehealth skyrocketed among all age groups. Data collected showed that 50

percent of all medical group visits were done via telehealth. Garrett predicted the remote workforce would stay in place even after the crisis abates and business reopens.

Public-private partnerships are also likely to increase, he said, pointing to the work being done at Hackensack Meridian Health's Center for Discovery and Innovations. At the CDI, under the direction of David Perlin, its chief scientific officer, the center developed a new diagnostic test for COVID-19. It was a "game-changer," Garrett said, because results were obtained much quicker, enabling New Jersey's healthcare providers to react more decisively.

The pandemic also brought more "agility and speed" to healthcare and Garrett expects this situation to continue. For example, he said the U.S. Food and Drug Administration (FDA) quickly approved a plasma infusion treatment that proved effective.

Hackensack Meridian Health began tracking the virus early in January by monitoring what was occurring in the Wuhan province in China, where it originated. The healthcare system also established a command center early on to provide daily communications to its board and



Robert C. Garrett, FACHE, CEO, Hackensack Meridian Health

medical staff. Hackensack Meridian Health used the lessons learned as an Ebola site to ready for the COVID-19 crisis, according to the CEO.

As New Jersey emerged from the peak of the pandemic in April, Garrett said he was eager to see elective surgery resume and people return to healthcare facilities. He understands their ambivalence, but commented "even in a pandemic, cancer still exists."

To allay the public's trepidation, he said Hackensack Meridian Health put in place extensive cleaning and disinfecting procedures. Universal masking will continue and there will be temperature-checking at all facilities, as well as extensive testing. The healthcare system is offering a consulting service to advise businesses and the private sector on the safest ways to reopen.

"I'm a big proponent of business reopening," but New Jersey is "doing it the right way" to slowly lift the quarantine restrictions, Garrett said. "The fear was if we went too fast, there is no doubt the incidents would increase and sadly there would be more hospitalizations and deaths." ❦



As New Jersey emerged from the peak of the pandemic in April, Garrett said he was eager to see elective surgery resume and people return to healthcare facilities. He is pictured attending the discharge of Hackensack University Medical Center's 1,000th coronavirus patient.

*Diane C. Walsh is Executive Vice President of Communications and Programs for the Commerce and Industry Association of New Jersey.*



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# A Conversation with East Orange General Hospital President and CEO Paige Dworak

"At the end of this storm, a beautiful rainbow will appear, and one day we will look back and remember the purest beauty that we have ever seen... the beauty of humanity and a family of healthcare providers banding together to serve at the world's most vulnerable time."

Dworak raised her hand when Gov. Phil Murphy asked for help in creating additional beds for COVID-19 patients.

By Diane C. Walsh  
*Contributing Editor*

**E**ast Orange General Hospital's primary mission is to serve East Orange—a four-square-mile, densely populated city of 64,000 where 20 percent of the people live in poverty.

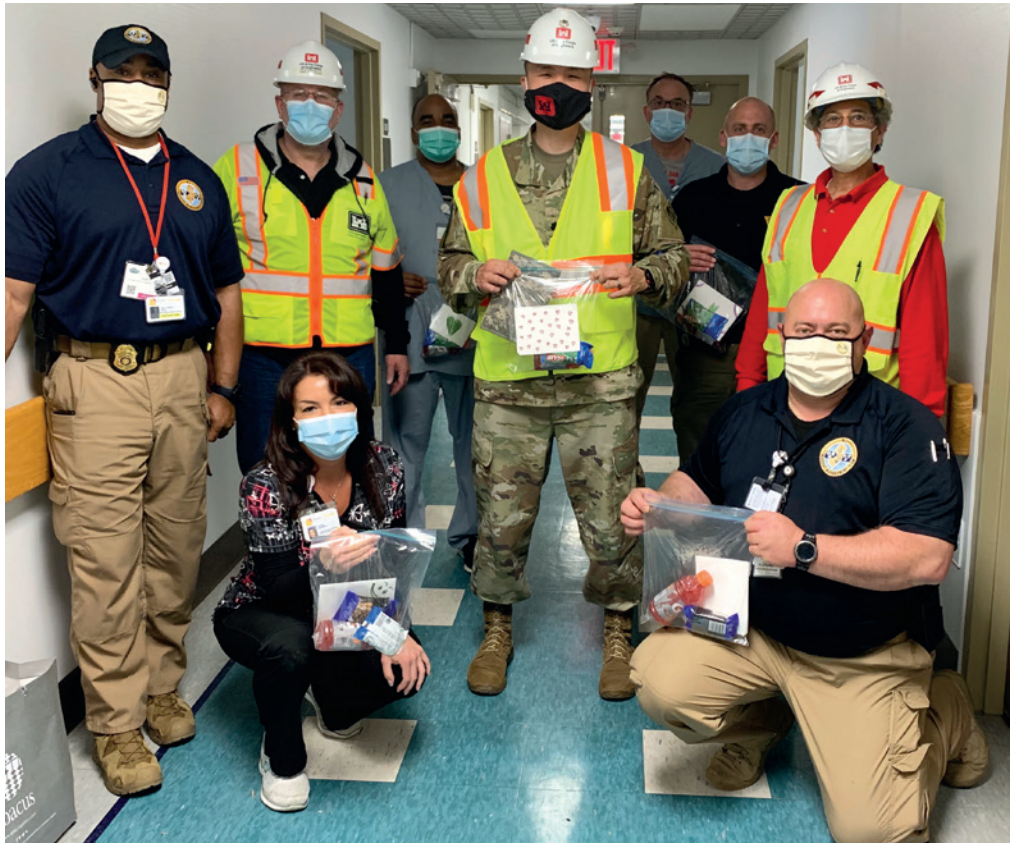
Yet, despite all the challenges confronting a healthcare provider in a struggling urban center, Paige Dworak, the President and CEO of the 211-bed hospital, raised her hand when Gov. Phil

Murphy asked for help in creating additional beds for COVID-19 patients. New Jersey was among the hardest hit in the pandemic—second only to New York—and the governor was bracing for the onslaught of patients.

Dworak said within 45 hours, a six-story, medical arts building on the hospital's campus was evacuated. She turned it over to the U.S. Army Corps of Engineers, which brought in teams of subcontractors to convert it into a 250-bed hospital facility.



East Orange General Hospital President and CEO, Paige Dworak



U.S. Army Corps of Engineers; New Jersey State Police; State Office of Emergency Management; and East Orange General Hospital leadership

"The U.S. Army Corps of Engineers was given two weeks to complete the new hospital build, but in 12 days they got it done," she said.

The massive project was overseen by the New Jersey Department of Health, and the New Jersey National Guard was tapped to set up all the beds and ready the equipment. It opened early in May, giving the state options for handling patients now or later, if there is a second wave of the virus.

"We are very grateful to the leadership and staff at East Orange General Hospital for stepping up to help expand hospital bed capacity during this COVID-19 pandemic," said New Jersey Department of Health Commissioner Judith Persichilli. "The transformation of this former physical therapy rehabilitation center gives it the ability to serve as a skilled nursing facility and expand care options with additional beds."

*Continued On Page 13*





The New Jersey National Guard arrives to assist with setting up the newly built hospital area for COVID-19 patients.

*Continued From Page 12*

Gov. Murphy toured the facility with Dworak when it was under construction. Born and raised in Edison, Dworak is a fellow of the American College of Healthcare Executives. In 2017 she was named President and CEO of the hospital. She is pleased to have forged a partnership with

the state. “It feels good to be here... to truly serve and make a difference,” she said.

She is especially proud of her 900 employees. “It’s not easy coming to work every day, knowing your life is on the line and still coming back.” They were fortunate to have had enough PPE—the personal protective masks, gloves and

gowns—to safeguard themselves as they cared for the sick, Dworak added.

The hospital’s parent organization, Prospect Medical, which owns and operates 20 hospitals and more than 165 clinics and outpatient centers across the country, kept supplies coming, she explained.

At the peak of the crisis in April, most of the beds were filled with COVID-19 patients. It’s unprecedented, but for Dworak “what it really is, is sad. However, at the end of this storm, a beautiful rainbow will appear, and one day we will look back and remember the purest beauty that we have ever seen... the beauty of humanity, and a family of healthcare providers banding together to serve at the world’s most vulnerable time.”

The East Orange community suffered a high death rate because many people had underlying conditions, such as diabetes, hypertension and heart problems, and they lacked healthcare prior to the pandemic, making them particularly vulnerable to the virus.

“We’re really proud in these challenging times we stepped up to the plate,” Dworak said. “We’re hoping and praying the road ahead is easier but, if not, we’re ready.” 🌈

*Diane C. Walsh is Executive Vice President of Communications and Programs for the Commerce and Industry Association of New Jersey.*





# Cancer Care During COVID-19: Compassion, Enhanced Safety Protocols and Telehealth

Limiting exposure to the virus is a priority, especially for patients with pre-existing conditions such as cancer.

Compiled by Miles Z. Epstein  
Editor, COMMERCE

**A**s if COVID-19 wasn't challenging enough, cancer care remains an important part of healthcare and a key, life-saving practice area for New Jersey's top hospitals. With enhanced safety protocols, treatments continued using virtual, telehealth consultations and follow-up exams and in-person visits, when absolutely necessary. Limiting exposure to the virus is a priority, especially for patients with pre-existing conditions such as cancer. Here's how cancer care has continued during COVID-19.



**Atlantic Health System Cancer Care**  
By Eric Whitman, M.D.,  
Medical Director

Atlantic Health System hospitals remain open and staffed for the care of our cancer patients. With enhanced safety protocols in place, we continue to see patients for infusion therapy, radiation oncology, cancer surgery, imaging and other needs focused on diagnosing and treating cancer. Our phase 1-3 clinical trials, including our NCORP trials, are all open and we continue to open and enroll patients in new trials. When appropriate, we encourage follow-up visits through telehealth. For some patients on oral chemotherapies or immunotherapies, we can mail medications directly to their homes. Extra precautions for the safety of our patients and staff include prohibiting visitors during outpatient and inpatient treatment. Our cancer center team members can meet patients at the door if physical or other support is needed. For patients and employees, temperature checks and hand sanitizing are performed as they enter the building. Facemasks are required and social distancing is maintained. If a patient prefers to wear gloves, we provide them. Our staff wash their hands and disinfect exam rooms and high-touch surfaces, such as doorknobs, clipboards and light switches between each patient. Atlan-

tic Health System continues to follow safety recommendations from the American College of Surgeons and other professional organizations.



**Hackensack Meridian Health, John Theurer Cancer Center**  
By Andre Goy, M.D.,  
Chairman and Executive Director;  
Lymphoma Division Chief;  
Physician-in-Chief of the Hackensack Meridian Health Oncology Care Transformation Service

During the COVID-19 pandemic, the team at John Theurer Cancer Center at Hackensack University Medical Center is doing all we can to ensure people can continue their cancer care, while taking extra steps to ensure everyone's safety. Adhering to cancer treatments is vital to achieve the best outcomes. Patients in active treatment can still come in to receive their care, such as chemotherapy or radiation therapy, with additional precautions. Only one entrance is open at the John Theurer Cancer Center, and everyone who enters is screened for symptoms, including temperature taken and is required to wear a mask. All staff members also wear masks. No visitors are permitted, with the exception of caretakers of people with cancer in unique situations, who are also screened and wear

masks. Patients who arrive with COVID-19 symptoms are directed to an isolated elevator, met by a COVID-19-designated team, tested for the infection and connected with a COVID-19 medical oncologist who works with the rest of their care team. Patients not in active treatment who have follow-up visits may still be able to have needed imaging exams. Other follow-up visits may be rescheduled or conducted by virtual visit.



**Holy Name Medical Center, Holy Name Health**  
By Jean T. Jordan,  
VP, Oncology Services,  
Sister Patricia Lynch Cancer Center

Throughout the COVID-19 pandemic, we continued to treat our patients with compassionate, state-of-the-art cancer care utilizing all necessary precautions, including PPE and social distancing in waiting and treatment areas, and expanding telemedicine services. Because cancer treatment is specific to each individual, our physicians provided care, as they do at all times, based on each person's unique medical condition. Typically, physicians met with new patients in person, and performed long-term follow-up telemedicine visits. Treat-

*Continued On Page 16*



CAR T-CELL THERAPY

HYPERTHERMIC INTRAPERITONEAL CHEMOTHERAPY

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**NCI**

Community Oncology  
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*Continued From Page 14*

ment decisions were made with patients' input about proceeding with treatment in the most appropriate way. We evaluated each one's needs to determine if the risk outweighed the benefits, offering patients the option of postponing. We conducted chemotherapy and infusion therapy according to the guidelines of the National

Comprehensive Cancer Network, which might include changing drugs and/or spreading out treatments, but not halting or delaying them. As COVID-19 cases subsided and we began to adopt a "new normal," our physicians returned to performing procedures for patients whose medical conditions could not wait. The Breast Center—which had been open for imminent di-

agnostic testing and procedures—began scheduling screening mammograms. In May, we started offering screening colonoscopies and elective endoscopies. During the past few months, we focused on treating those with cancer safely and expeditiously as we have always done.



### **Jefferson Health New Jersey**

By Ana Maria Lopez, M.D.,  
MPH, MACP, Chief of Cancer  
Services, Professor and Vice Chair,  
Medical Oncology, Sidney Kimmel  
Medical College

The Sidney Kimmel Cancer Center-Washington Township knows that as we shelter-in-place during the current COVID-19 crisis, cancer does not. Our highly trained, multi-disciplinary teams are compassionately caring for patients with cancer or at high-risk for cancer. Our services are timely, guideline-based, and include cancer clinical trials. The Sidney Kimmel Cancer Center in Washington Township has nimbly incorporated telehealth visits, social spacing and comprehensive COVID-19 prevention strategies, while maintaining appropriate on-site, in-person care—all with the best interest of the patient in mind. We stand with our Jefferson Health New Jersey cancer patients and their families during this pandemic, and beyond.

*Continued On Page 18*



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## Healthcare

Continued From Page 16



### **RWJBarnabas Health, Rutgers Cancer Institute of New Jersey**

By Andrew M. Evens, D.O.,  
MSc, FACP,  
Associate Director for Clinical  
Services, Medical Director,  
Oncology Service Line

We have taken a multitude of precautions in the evaluation and treatment of cancer patients during the pandemic in order to ensure the safety of our patients and the staff who treat them. This includes a thorough and thoughtful testing policy that incorporates examination of potential asymptomatic carriers of the SARS-CoV-2 virus. There are some treatments and

procedures that have been delayed, while many outpatient and inpatient cancer treatments have been carefully continued throughout the pandemic. Following an assessment and consultation, we ultimately aim to do whatever is in the best interest of each individual patient. In addition, we have greatly expanded our oncology telemedicine program at Rutgers Cancer Institute of New Jersey and throughout all RWJBarnabas Health Cancer Centers and programs. This was built upon a pre-existing program that was engineered to provide expert opinion for cancer patients while they remain close to home. We now are able to provide audiovisual telemedicine visits for established patients, as well as new patients/consults with cancer providers of all subtypes and specialties (e.g., medical oncologists, surgical oncologists, radiation oncologists, supportive care, other).



in-person and virtual (telemedicine) consults to new patients. Virtual visits limit exposure for patients who need to come into the Cancer Center for their two-week follow-up visit after completion of radiation. With other visits, patients are offered the choice of in-person or telehealth visits. Other radiation-related services that continue include simulations and high dose radiation. Saint Peter's Infusion Center also continues to provide treatment, not only to cancer patients, but to individuals with a variety of diseases and conditions. Services include blood transfusion, chemotherapy, VIG, IV antibiotics, gastroenterology

Continued On Page 20



### **Saint Peter's University Hospital**

By Gopal Desai, M.D.,  
Chair, Radiation Oncology

Saint Peter's Cancer Center has remained open during the pandemic, providing services to all patients, including Radiation Oncology, which treats current and newly diagnosed cancer patients. Radiation Oncology offers both

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- Eye or head injury
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- Seizure
- Broken bone or dislocated joint
- Severe cut or pain
- Other unusual symptoms

Seek help immediately.

During the COVID-19 pandemic, individuals with health emergencies are staying away from ERs from fear of being infected. Rest assured, Saint Peter's University Hospital's ER has separate treatment areas and teams to care for people with positive or suspected COVID-19.

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*Continued From Page 18*

medication, rheumatology infusions, iron and hydration. Patients are screened before a consultation appointment is given. Upon arrival, they are required to complete a screening form which is reviewed by a nurse. All patients and employees must submit to temperature checks and are required to wear a mask once inside the building. Social distancing is practiced in all waiting areas and chairs have been removed when necessary to ensure that patients are always sitting six feet apart.



**Trinitas Regional Medical Center, Trinitas Comprehensive Cancer Center**  
By Barry S. Levinson, M.D.,  
*Medical Director*

People who are actively undergoing treatment for their cancer continue to come to Trinitas Comprehensive Cancer Center in spite of the pandemic. Therefore, our responsibility is to ensure that our patients are as safe as possible from the moment they enter and throughout their stay in the building. One major change we have made is the use of videoconferencing for follow-up appointments. We also teleconference with our peers so we may continue discussing the best ways to treat our patients. Each week, our oncologists' videoconference with their colleagues throughout the state through the

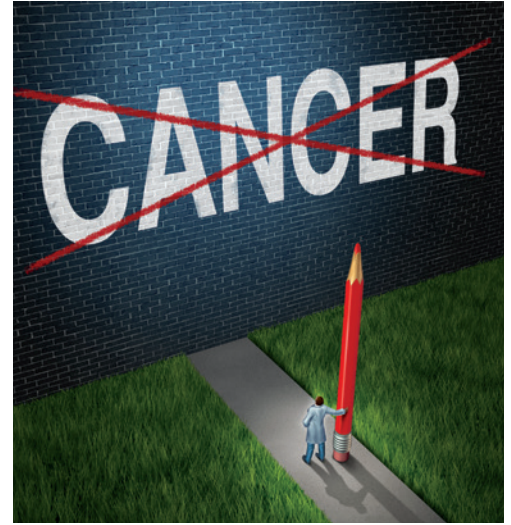
Rutgers/Cancer Institute of New Jersey to discuss best practices. Another change is we have become very active in COVID-related clinical research. For instance, we joined a study to determine the effectiveness of the investigational antiviral drug Remdesivir for emergency use on critically ill patients on ventilators. We launched a study involving stem cell therapy just last week, and we are also participating in a Mayo Clinic trial that is using plasma from patients who have survived COVID. Yet another study is looking at the effectiveness of a drug typically used to treat rheumatoid arthritis. It's rewarding to use our robust expertise in clinical trials to now help patients with COVID.



**Valley-Mount Sinai Comprehensive Cancer Care**  
By Eleonora Teplinsky, M.D.,  
*Head, Breast Medical Oncology*

The rapid spread of COVID-19, the need to allocate the majority of healthcare resources to fight the pandemic, and the critical importance of social distancing and self-quarantine to flatten the curve resulted in a significant shift in the treatment of patients with cancer. Each patient's treatment plan was individually assessed by the healthcare team and care prioritized, adjusted and optimized with the goal of balancing the need and benefit of treatment with the

risks to the patient and potential adverse effects that would require increased interaction with the healthcare system. The majority of cancer surgeries were postponed, patients' imaging tests were canceled, and most non-urgent visits were converted to telemedicine visits. We are incredibly grateful to our patients for taking these changes in stride during this unprecedented time of much fear and anxiety. Ultimately, this adaptability and flexibility has allowed us to continue to strive toward our most important goal, which is always our patients' well-being and safety. 🩺

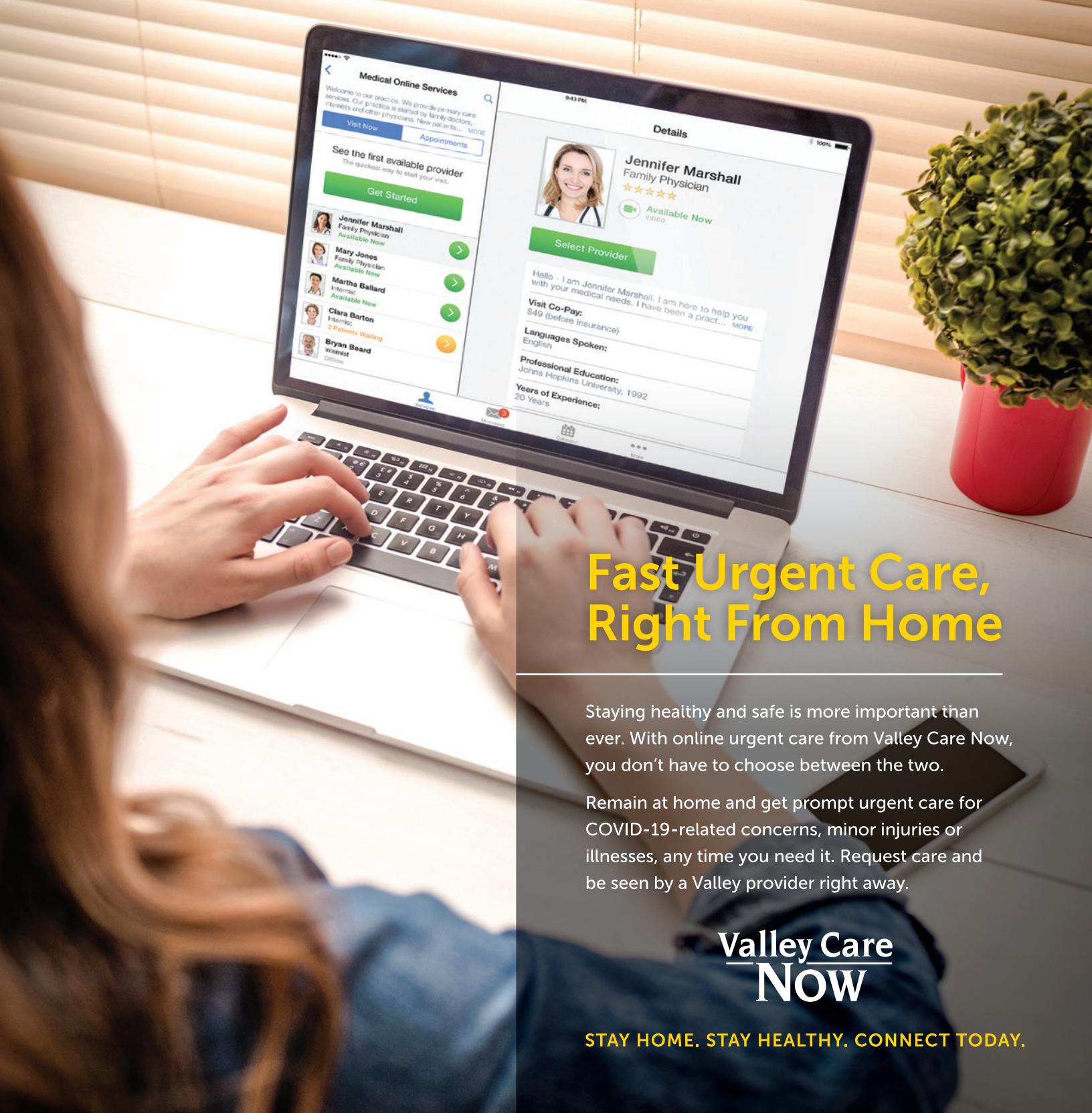


**“By working with NJIT, we were able to get access to faculty with deep knowledge in areas critical to our mission, and to the newest equipment and techniques without having to make large initial capital investments. Most importantly, we gained early access to future talent.”**

**- Robert Cohen**  
CTO & VP of R&D at Stryker







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# Managing Cash Flow During a Pandemic

Smart strategies for accounts receivables, bank loans, insurance and inventory management have never been more important.

Compiled by Miles Z. Epstein  
Editor, COMMERCE

COVID-19's contagious and deadly appearance made businesses and customers virtually disappear, with most offices closed and most people taking refuge from the virus in their homes. It was as if a switch turned off the economy. The consequences for cash flow have been and remain significant. Here are some recommendations for dealing with this situation using smart strategies and proper decisions.



**Citrin Cooperman**  
By Michael Napolitano,  
CPA, Partner

Business owners understand that cash flow sustains their business. In the past, a financial crisis gave them time to plan accordingly. What happens when cash flow disappears overnight? The pandemic shut off cash flow overnight for many businesses, forcing them to take drastic measures. At the same time, other businesses are trying to manage accounts receivables to get their cash due. Cash business, like restaurants or retailers, can negotiate with vendors to only pay for current purchases and work out terms for old balances, once the economy opens up—and reach out



to non-essential vendors to discuss payment terms that begin when the economy can open. Renters should negotiate with property owners to postpone two to three months of rent until the end of the lease. In addition, banks offer loan payment deferrals for any outstanding debts. Businesses that are open but experiencing a slowdown in payments should stay in contact with customers; assess their ability to pay and establish short-term payment terms that accommodate them, while sustaining cash flow; take credit card payments; and discount older receivables. If using funding from the Paycheck Protection Plan, be certain you comply with SBA rules as you use the funds over the eight-week period.



**CohnReznick LLP**  
By Kevin Clancy, CPA, J.D.,  
CIRA, CFF; Global Director,  
Restructuring and Dispute  
Resolution Practice;  
CohnReznick Advisory

Companies are trying to maintain cash flow in the face of devastating revenue declines brought on by the COVID-19 pandemic. Here are some recommendations to help get you through these difficult times. Focus on your income statement. For businesses that primarily rely upon physical locations to service customers, online sales can be a lifesaver. Consider leveraging platforms like Amazon. Look to your balance sheet to create liquidity. Monetizing account receivables takes creativity. Offer discounts to customers who pay early and encourage payment using credit cards. Return excess inventory and supplies. These steps can provide immediate cash infusions, reduce accounts payable and minimize storage costs. Reducing your receivables and inventory may improve your borrowing capacity and the availability of funds within your credit line. Discuss rent abatements or deferrals with your landlords. Contact your vendors to discuss more-favorable credit terms for existing debts and future purchases. If you have bank loans, lenders are accommodating their customers amid current circumstances. Request a forbearance or interest-only payments until things get back to some semblance of normal. See if you qualify for government loans and grants. Also, review your insurance policies as you may be able to file a business interruption claim.



**Grant Thornton**  
By Bryan Merrigan,  
CPA, Office Manager Partner,  
Metropark, Iselin

Cash is king—and getting an immediate return on daily cash needs is critical to survival. Businesses should review their forecasted revenues and spending to get a handle on their cash runways. They should also relentlessly control costs—doing things like reviewing variable costs and monitoring cost-reduction activities. Un-

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# Trinitas Regional Medical Center

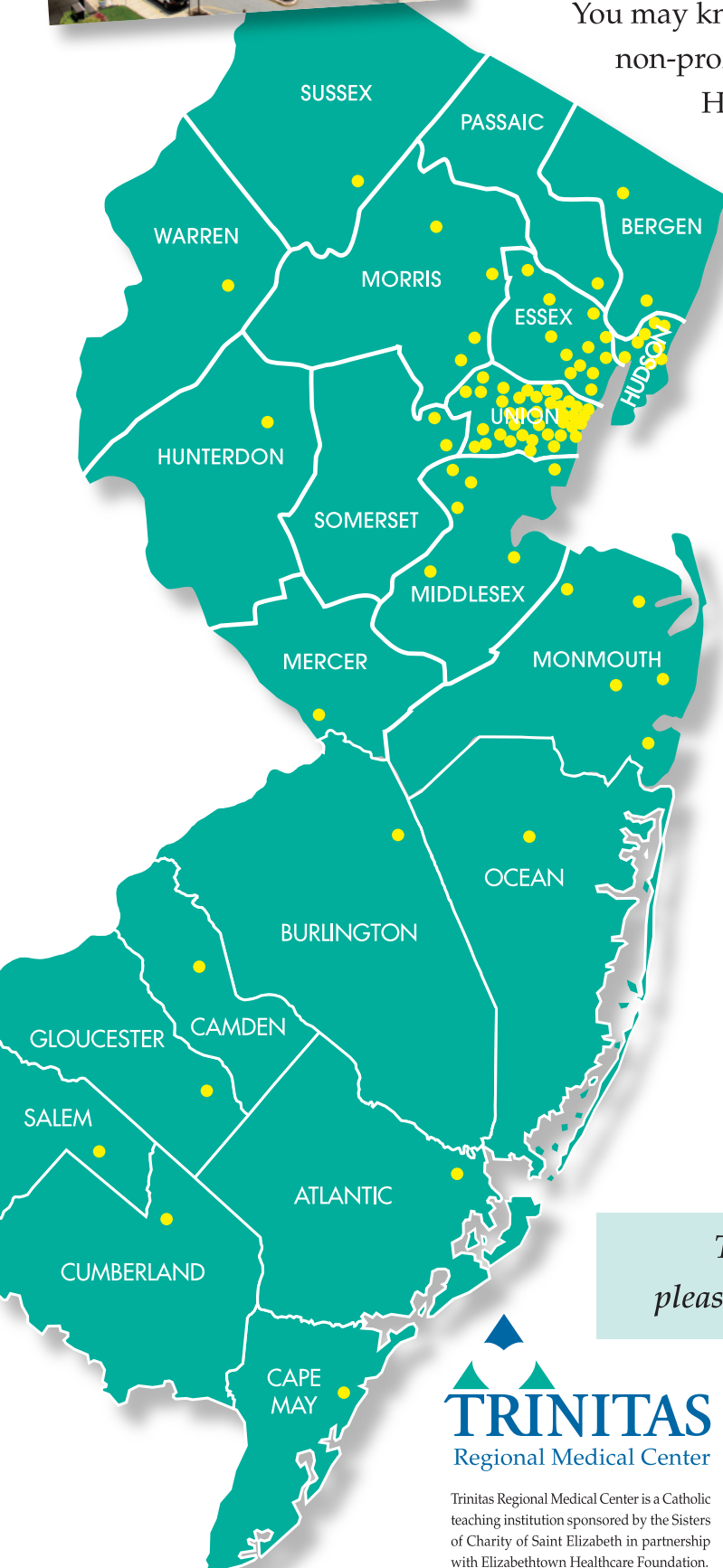
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- We offer the **Trinitas Comprehensive Cancer Center**
- We offer **4 dialysis locations** – and our facility in Linden was awarded 5 Stars for Quality by CMS
- We offer a **Diagnostic Imaging Center**
- We offer an **expanded sleep center** in Homewood Suites by Hilton - Cranford
- The **Trinitas Health Foundation** provides millions of dollars in support of Trinitas
- Our service area includes **Newark Liberty Airport** and the **Port of Elizabeth**
- Our **Emergency Department** was enlarged and modernized as part of an \$18.7 million project, and was named after hospital CEO Gary S. Horan
- We offer **elective and emergency angioplasty**
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- We acquired the **Bayonne Community Mental Health Center** in 2018

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## Accounting

*Continued From Page 22*

Understanding the pressure points in your supply chain and how it will impact the cash cycle is critical. Businesses should also bear in mind that their customers may have less purchasing power and lower creditworthiness, while they themselves could see reduced product availability from suppliers, all of which could create

a drain on liquidity. Moreover, they should remember that borrowers will be facing tighter credit terms. Finally, they should communicate early and often with lenders, be very clear on your current position, strategy and request. Your current lender will likely be the fastest source of additional liquidity. The simple truth is that it is essential to develop an overall strat-

egy that balances cost-cutting initiatives with reduced revenues and provides additional liquidity. It's a difficult balancing act at the best of times, but now it's an even more complex problem to solve.



**Klatzkin**

By John Blake,  
CPA, MBA, Partner

For business owners that are maintaining operations or who have experienced decreased business due to the COVID-19 pandemic, collecting on accounts receivable is key. During this time, business owners should shift their focus from the profit and loss statement to the balance sheet to maximize cash flows. Business owners want to minimize inventory, accounts payable and receivables. On the receivable side, business owners should make sure that they are getting the basics right. They should make sure that they are sending out invoices accurately on a timely basis and have a policy in place to follow up if the invoices haven't been paid in 30 days. Perhaps to expedite payment, business owners can offer discounting solutions for customers who can pay more quickly. Further, an aggressive and expensive tactic would be to factor receivables for a quick cash flow infusion. On the payable side, busi-

*Continued On Page 26*



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## Accounting

*Continued From Page 24*

ness owners should immediately try to reduce variable costs. They should think about the expenses they can survive without and cut those first. They can also work with suppliers to agree on payment terms on invoices that the company may owe. Finally, inventory management is crucial. Have on hand what is necessary, but keep in mind that supply chains are most likely interrupted by the pandemic as well.

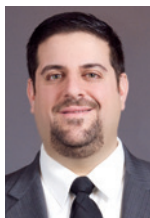


### **Mazars USA LLP**

By Jason Pourakis,  
CPA, Partner

Mazars USA is focusing on a maximum of 13 weeks of cash flow, to be readdressed and reestablished after each 13-week period. This is essential to be agile and respond to this constantly changing crisis. Cash Flow analysis should be a simplistic approach of cash inflows and cash outflows. The one constant is the revenue (or reduction of revenue) that you must model your expenses against. When analyzing the expenses, the expense should be further broken out between essential payments and non-essential payments. As the cash flow is modeled out, we are advising clients to request extension of pay terms on debt, deferral of insurances for trucks or plants not in operation, and complete-

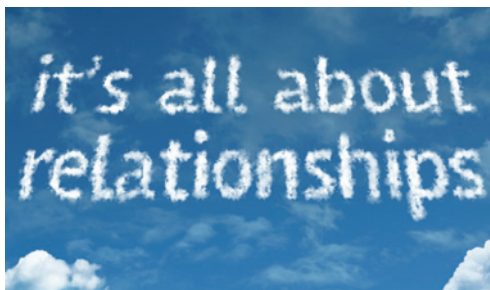
ly scrubbing through the P&L to stop or greatly reduce services that are non-essential in order to be successful coming out of COVID.



### **MSPC**

By Michael J. Halkias,  
CPA, Partner

Many companies have experienced a double whammy during the crisis of tighter credit terms from vendors and slower payments from customers. Although every company is different, some general advice applies to everyone: review vendor relationships; be upfront with your bankers; proactively seek out aid from governmental programs for which you qualify; defer unnecessary expenditures; and reassess credit terms offered to clients. The only element of cash flow that a company can truly



control is cash disbursements. Although some try to improve cash by delaying payments on overdue invoices, it is often a better strategy to negotiate discounts for prompt payment. It may even be more beneficial to pay on delivery if you are able to receive enough of a discount or preferential delivery terms.



### **Withum**

By William R. Hagaman, Jr.,  
CPA, CGMA,  
Managing Partner, CEO

During these uncertain times, we are advising clients on ways to manage through the disruption of normal business activity. Actionable recommendations to address immediately cash-flow issues include an intentional effort to conserve cash by cutting or delaying non-essential expenses such as travel, entertainment and (some) marketing. Plan for varying lengths of time of reduced revenue flow and speak with your bank about increasing lines of credit to use as a safety net during a time of cash-crunch. Related to supply chain interruption, look for alternate sourcing beyond your current vendors if they are unable to deliver goods at this time. Also look to extend payment terms with vendors, only done with transparent discussions between both parties. 



## Medical Grants for Children

The UnitedHealthcare Children's Foundation (UHCCF) is a 501(c)(3) charity that provides medical grants, up to \$5,000, to children who have medical needs not covered, or not fully covered, by a commercial health insurance plan. Grants help families pay for medical services and equipment such as physical, occupational and speech therapy, counseling services, surgeries, prescriptions, wheelchairs, orthotics, eyeglasses and hearing aids.

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# The NJEDA Receives a USEPA Grant for Brownfield Cleanup and Redevelopment

“Supporting communities as they work to clean up and revitalize contaminated properties is crucial for creating vibrant cities and neighborhoods and stimulating economic growth,” says NJEDA Chief Executive Officer Tim Sullivan.

Governor Murphy identified brownfield remediation and redevelopment as an important component of smart planning that will allow New Jersey to meet its goals for economic growth.

Compiled by John Joseph Parker  
Contributing Editor

**T**he New Jersey Economic Development Authority (NJEDA) says it will receive an \$800,000 United States Environmental Protection Agency (USEPA) Revolving Loan Fund (RLF) Brownfields grant.

“This federal funding will help transform neglected and contaminated properties into community resources and will have a profound impact on people living in Camden, Jersey City and across the state,” says Senator Cory Booker. “Now more than ever, it is critical that we take action to address hazards to public health.”

The NJEDA can use this funding to capitalize a revolving loan fund or to provide subaward grants to communities, developers and non-profits carrying out cleanup and redevelopment activities at brownfield sites. The USEPA also awarded grants to the cities of Camden and Jersey City and the nonprofit Cooper’s Ferry Partnership. In total, the agency provided nearly \$2.1 million to support brownfield remediation in New Jersey.



U.S. Senator Cory Booker

“Supporting communities as they work to clean up and revitalize contaminated properties is crucial for creating vibrant cities and neighborhoods and stimulating economic growth,” says NJEDA Chief Executive Officer Tim Sullivan. “The USEPA RLF funding will allow us to provide more comprehensive and effective support for communities and organizations working to return contaminated properties to productive use. This is always valuable, but it will have a particularly significant impact now, when resources are stretched thin everywhere due to COVID-19.”

***“This federal funding will help transform neglected and contaminated properties into community resources and will have a profound impact on people living in Camden, Jersey City and across the state,” says Senator Cory Booker.***

Governor Murphy identified brownfield remediation and redevelopment as an important component of smart planning that will allow New Jersey to meet its goals for economic growth, minimize the environmental impacts posed by former industrial properties and help communities become more sustainable and resilient. To facilitate brownfields redevelopment, Governor Murphy has proposed a new set of programs, including a remediation and redevelopment tax credit, as well as an enhanced brownfields loan program through the NJEDA.

In addition to these proposed programs, in March 2019 the NJEDA and the New Jersey Department of Environmental Protection (NJDEP) entered into an MOU to expand the Communi-



NJEDA Chief Executive Officer Tim Sullivan

ty Collaborative Initiative (CCI), a program that embeds NJDEP staff in targeted communities to help them navigate complex environmental stressors and set a pathway for successful remediation and redevelopment. The CCI currently operates in 12 communities around New Jersey: Bayonne, Camden, Perth Amboy, Trenton, Bridgeton, Jersey City, Millville, Newark, Paterson, Paulsboro, Salem City and Vineland.

While the USEPA RLF grant will be used to provide low-interest loans and sub-grants to support brownfield cleanup and redevelopment throughout the state, the NJEDA’s RLF program will target the 12 CCI communities, which have high instances of brownfields, poverty, health disparities and need for revitalization. Funds will go toward revitalizing vacant and abandoned properties to provide community assets, such as housing, recreation and open space, health facilities and commerce opportunities. As borrowers repay these loans, the fund will re-lend that money to other borrowers, providing an ongoing source of capital for community improvement projects.

*Continued On Page 30*



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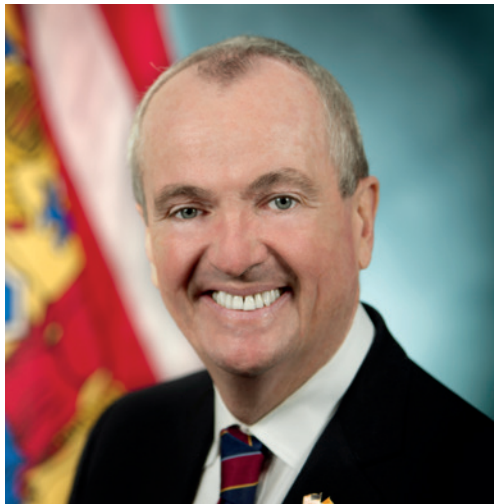
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## Environmental Business



NJ Governor Phil Murphy

*Continued From Page 28*

“Economic development and environmental protection go hand in hand,” explains NJDEP Commissioner Catherine R. McCabe. “This grant award will spark community revitalization, strengthening our communities and our ecosystems at the same time. New Jersey’s Community Collaborative Initiative, which started in Camden, is a valuable example of how funding redevelopment creates economic activity and I’m pleased that the NJDEP and the NJEDA

can replicate that model in cities throughout the state.”

The USEPA also awarded \$500,000 Brownfields Cleanup Grants to the Cities of Camden and Jersey City to support the cleanup and re-

vitalization of the Borden Chemical manufacturing facility in Camden and the Mill Creek industrial site in Jersey City. The agency also awarded \$299,451 to Cooper’s Ferry Partner-

*Continued On Page 32*



Environmental sampling at brownfield site



Foundation recommendations for warehouse development



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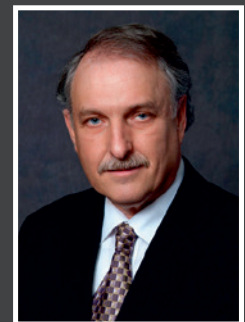
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## Environmental Business




NJDEP Commissioner Catherine R. McCabe

*Continued From Page 30*

ship Inc. to identify sites for assessment in the North Camden neighborhood, assess those sites for hazardous substances, complete clean-up and reuse plans, and carry out community outreach activities.

A brownfield is a property for which the expansion, redevelopment or reuse may be complicated by the presence or potential presence of a hazardous substance, pollutant

***“This grant award will spark community revitalization, strengthening our communities and our ecosystems,” explains NJDEP Commissioner Catherine R. McCabe.***

or contaminant. There are estimated to be more than 450,000 brownfields in the United States. The USEPA’s Brownfields Program began in 1995 and has provided nearly \$1.6 billion in brownfield grants to assess and clean up contaminated properties and return blighted properties to productive reuse. To date, brownfields investments have leveraged more than \$31 billion in cleanup and redevelopment. Over the years, the relatively small investment of federal funding, from both public and private sources, leveraged more than 160,000 jobs. 

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