AGENDA

 INFORMATION TECHNOLOGY COMMITTEE
 Meeting Date: February 7, 2022

 Time:
 11:00 AM

 Location:
 VIRTUAL - 50 Water St Rm 1515

CALL TO ORDER

MR. PEÑA-MORA

ADOPTION OF MINUTES

September 20, 2021

CHIEF INFORMATION OFFICER REPORT

DR. MENDEZ

DR. MENDEZ & APOORVA KARIA

ACTION ITEM

RESOLUTION

Authorizing New York City Health and Hospitals Corporation (the "System") to execute agreements with each of the following: Momentum Resource Solutions, LLC; DynTek Services, Inc.; GCOM Software LLC; Experis US Inc.; Siri InfoSolutions Inc.; Integrated Resources, Inc.; Kforce, Inc.; Stellar Services, Inc.; Spruce Technology Inc.; The CJS Solutions Group, LLC dba The HCI Group; TEKsystems, Inc.; 314e Corporation; Gevity Consulting US LLC; OST, Inc.; W3, LLC dba Healthcare IT Leaders, LLC (the "Vendors") for the provision of Information Technology Supplemental Staffing Services as requested by the System. The agreements shall be for an initial term of three years with two one-year options to renew solely exercisable by the System and with a total amount over the combined five-year term not to exceed \$283,000,000.

VENDEX: 9 Approved / 6 Pending **EEO:** 9 Approved / 6 Pending

OLD BUSINESS

NEW BUSINESS

ADJOURNMENT

NEW YORK CITY HEALTH + HOSPITALS

MINUTES

Meeting Date: September 20, 2021

INFORMATION TECHNOLOGY COMMITTEE

ATTENDEES

COMMITTEE MEMBERS

Feniosky Pena-Mora, Chair Dr. Mitchell Katz Jose Pagan, BOD IT Committee member Barbara Lowe, BOD IT Committee member Scott French, BOD IT Committee member

NYC HEALTH + HOSPITALS CENTRAL OFFICE STAFF:

Dr. Kim Mendez, SVP/Corporate CIO Dr. Michael Bouton, Corporate CMIO Jeff Lutz, Chief Technology Officer Soma Bhaduri, Chief Information Security Officer Apoorva Karia, Corporate Director EITS Fiscal Affairs Sean Koenig, Chief Application Officer INFORMATION TECHNOLOGY COMMITTEE - September 20, 2021

AS REPORTED BY: Feniosky Peña-Mora

COMMITTEE MEMBERS PRESENT: Feniosky Peña-Mora, José A. Pagán, Barbara Lowe, Dr. Mitchell Katz, Scott French

Mr. Feniosky Peña-Mora, Chair of the Committee, called the September 20th meeting of the Information Technology (IT) to order at 11:00 A.M.

Mr. Feniosky-Peña-Mora proposed a motion to adopt the minutes of the Information Technology Committee meeting held on April 12th.

Upon motion made and duly seconded the minutes of the April 12, 2021 Joint Medical & Professional Affairs / Information Technology Committee meeting was unanimously approved.

Mr. Feniosky Peña-Mora turned the meeting over to Dr. Kim Mendez, Senior Vice President and Corporate Chief Information Office to carry on agenda, she was joined by Soma Bhaduri, Chief Information Security Officer, Mr. Sean Koenig, Chief Applications Officer, Mr. Jeff Lutz, Chief Technology Officer, Apoorva Karia, Corporate Sr. Director EITS Fiscal Affairs and Dr. Michael Bouton, Chief Medical Information Officer.

Dr. Mendez presented high level targeted updated. One of the updates was to an overview of the alignment of EITS goals with system strategic pillars. She noted that goals with asterisks are also on the Board of Directors strategic dashboard. Mr. Feniosky Peña-Mora asked and suggested that the culture of safety pillar could also be aligned with EITS' continuous quality improvement and H20 Effective Use goals. These updates will be added and presented at the next EITS BOD meeting.

Dr. Mendez presented a summary of the Health Information Technology (HIT) prioritized projects highlighting the current status if the projects.

Dr. Mendez provided an overview of EITS' ongoing COVID-19 support inclusive of surge space, rapid onboarding and Epic training as needed, ongoing support of Test and Trace program as well as the H + H vaccination program.

Dr. Bouton shared the MyChart patient activation is 71 percent, which is top 10 percent nationally. This works well due to the partnership with IT, clinical staff, and registration staff. Dr. Bouton showed Biomed device integration 2021 tracking, highlighting how this initiative saves time for the nursing staff ad provides physician most up to date information. Dr. Bouton provided an update and pivot of devices to be integrated related to clinical demand, as well as the ordering of more ventilators. Dr, Bouton explained that the overall goal is to get more timely information into the system and have less manual effort, for accuracy and efficiency.

Dr. Bouton went on to present the H20 Effective Use (Quality & Outcomes) update. He focused on the Epic (vendor) Honor Roll and Gold Star recognition program. These programs provide a glidepath to follow to adopt features in Epic that other healthcare systems have found effective. These programs are national standardized (dynamic) benchmarks that we can compare ourselves to.

Mr. Jose Pagan stated he was very impressed with the work especially on MyChart. Jose asked is IT was thinking of assessing the racial data. Dr. Bouton provided a response on the possible next steps. Mr. Feniosky Peña-Mora asked if it would be of value to add how it is performing against goal in terms of percentage. Dr. Mendez and EITS team will include additional information in the next EITS BOD presentation.

Mr. Jose Pagan asked to be more specific to get a percentage for effective use of EPIC EHR. Dr. Bouton will expand on the Epic Honor Roll and Gold Star data elements in the future.

Mr. Feniosky Peña-Mora asked about the lower than 60 percent MyChart activation rates in a couple of our facilities and what can be done to achieve higher rates. Dr. Bouton spoke about the MyChart governance group for each specific site and elaborated on options to have more targeted work. Dr. Mendez also responded saying the next IT Board of Directors Committee meeting there will be a deep dive of the numbers. Mr. Jose Pagan asked for a discussion on what My Chart features we haven't we looked at, to get a sense of what are the variants to getting there.

Mr. Feniosky Peña-Mora asked if the Epic gold stars were related to benchmarking such as we use for MyChart. Dr. Bouton responded how it is similar. Dr. Mendez responded on how the gold star is dynamic and how it is continually being updated by Epic (the vendor). Mr. Feniosky Peña-Mora is there a way to know the average for other systems for comparison. Dr. Bouton provided a comparative summary.

Ms. Barbara Lowe ask if the data was useful for managing the workforce specifically for the nurses and doctors. If the person in the division will have an idea on what is happening shift to shift and getting the right people in there.

Dr. Mendez provided an overview of the Clarivia scheduling application being used for nursing staffing across the enterprise. There was also a discussion on how PeopleSoft ELM is leveraged and that nurse training has new modules in such areas as trauma and stroke that support the credentialing of the Stroke and Trauma Centers. Jose added thoughts on aligning quality and staffing data.

Mr. Koenig responded that we have the ability, it just has to be prioritized on the project list to send acuity data and census data to the scheduling system. EITS is awaiting the finalization of the longterm enterprise nurse scheduling system by the Office of Patient Centered Care to begin next steps.

Mr. Lutz presented an update on the data center migration initiative. He highlighted the current preparation phases for data migration. Jeff explained there will be about 22 move waves starting February 2022 and that we are still in the early phases of build out. He discussed we are receiving our maps where equipment will be housed inclusive of the caging as well as putting the power into plat.

Mr. Peña-Mora asked if the percentage of overall completion can be added next time. Mr. Lutz assured that can added. Mr. Peña-Mora asked for a better representation for quarter 3 for future looking.

Ms. Soma Bhaduri then presented on cyber security best practices. She focused on the reduction of compromising emails through phishing attempts. Soma also discussed that multifactor authenticate (MFA) has been issued to all of our sites, all personal email sites have been restricted from being accessed in the Health and Hospitals network, we are currently in the dynamic password implementation phase to reduce compromise by potential hackers. Soma also described how we are improving our security posture by checking appropriate role-based access by the workforce to conduct day to day responsibilities. SailPoint Identity IQ is being prioritized and rolled out with a planned completion date by end of 2021. Ms. Bhaduri shared the four phases to completion.

Mr. Feniosky Peña-Mora asked if there is education in terms of individuals can try to gather information on employees to harm the system. Ms. Bhaduri said we have quarterly phishing exercising; our number have improved greatly from the past.

Mr. Feniosky Peña-Mora would like to have additional security education.

Mr. Koenig presented a targeted update on clinical applications that the system is moving forward with. He highlighted Omni Cell and our partnership with supply chain and pharmacy. The Omni Cell Project is replacing out of date PYXUS system with omni cell devices and deploying in a phased approach to all sites. Sean also highlighted that we are up to date with Epic and Cerner upgrades and quarterly patches. Our next upgrade will be in November 2021. Another project being worked on is Willow Ambulatory Pharmacy, this will enhance quality, which integrates the prescribing experience with the dispensing experience. Patients will be able to check in MyChart to see if their prescription is ready. Providers will also know if their patients are picking up their prescriptions. We will be able to send out claims and bring in revenue and not just offer it to fee scale patients. In closing Mr. Koenig summarized the new HCLL blood bank project and stated HCLL blood bank is 80 percent complete and should be completed by early 2022.



Information Technology Committee Meeting

February 7, 2022

Enterprise Information Technology Update

Kim Keziah Mendez, Senior Vice President- Corporate Chief Information Officer



Aligning NYC H + H Information Technology Goals

- Data Management (Quality & Outcomes)
 - Data and Analytics (DnA) ongoing developments: website, Platform , Enterprise Data Warehouse, etc.
 - UMPI
 - Legacy IT Systems/Data strategy
- Infrastructure Enhancement (Financial Sustainability)
 - Data Center migration*
 - Telecommunication improve experience & tracking
- Accelerated Digital Transformation (Quality & Outcomes/ Access to Care)
 - Telehealth Expansion
 - Enhanced Patient Monitoring
 - Biomed Device Integration*
- H2O Effective Use (Care Experience/ Quality & Outcomes / Culture of Safety / Social & Racial Equity)
 - MyChart Utilization*
 - Leveraging Epic to support social & racial equity in care
 - Expansion and Improvement of Epic Modules, Epic Thrive Educational Program
- CQI (Quality & Outcomes/Culture of Safety)
 - IT Ecosystems / Landscape Diagrams- Qtrly Updates
 - Mock Downtime & BCA validation
 - Leverage Service Now as a single platform for Service Management (Demands/Requests, Ticket/Event Mgmt, Device Tracking, Application Inventory Tracking, etc.)
 - Security & Risk Management best practices

* Denotes BOD Strategic dashboard metric

FAMILY & COMMUNITY VISION To be a fully integrated equitable health system that enables all New Yorkers to live their healthiest lives.

PATIENT.

MISSION

To deliver high quality health services with compassion, dignity, and respect to all, without exception

ICARE: Integrity, Compassion, Accountability, Respect and Excellence

STRATEGIC PILLARS



CULTURE OF SAFETY

ACCESS

TO CARE

SOCIAL AND RACIAL EQUITY

Agenda

- Introductions
- EITS Targeted End of Year 2021 Updates
 - Clinical Informatics
 - Bio Medical Device Integration
 - Effective Use of Epic EHR: Epic Gold Star & Honor Roll benchmarks
 - MyChart : Activation , utilization and support
 - Data Center Migration
 - Clinical & Revenue Cycle Applications- Accomplishments & Next Steps
 - COI: Enterprise Support Services
- EITS Team Achievements / Recognition
- **Q** & A



Accelerated Digital Transformation (Quality & Outcomes)

Device Type	2020 Non- Integrated	2021 Stretch Goal (original)	Revised Goal
Anesthesia Machine	8	8	59
Capnography Device	448	260	50
Cardiac Monitor	1,043	265	641
Dialysis Machine	238	225	255
Vital Signs Monitors	3,347	1,400	175
Telemetry	204	177	235
Ventilator	437	225	285
Total:	5,725	2,560	1,700

Biomed Integration & Upgrade Progress Tracking CY Q4 2022: 116% Completion (additional devices added (Quality & Outcomes)

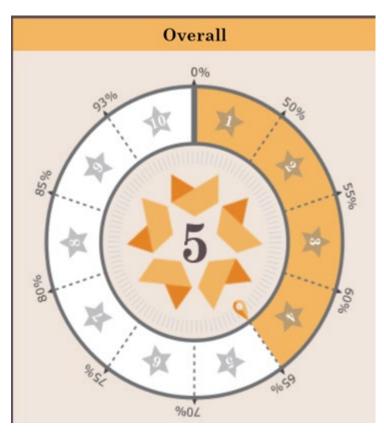
Biomed Device Integration 2021 Tracking

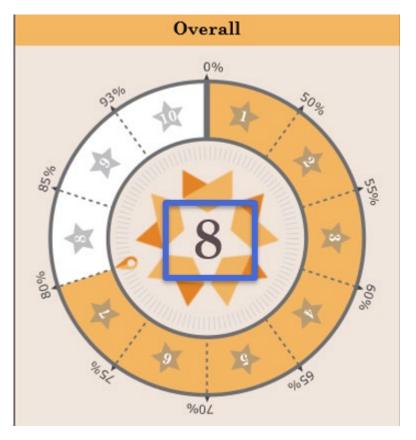


H20 (Epic) Effective Use (Quality & Outcomes)

Starting January 2021

As of December 2021



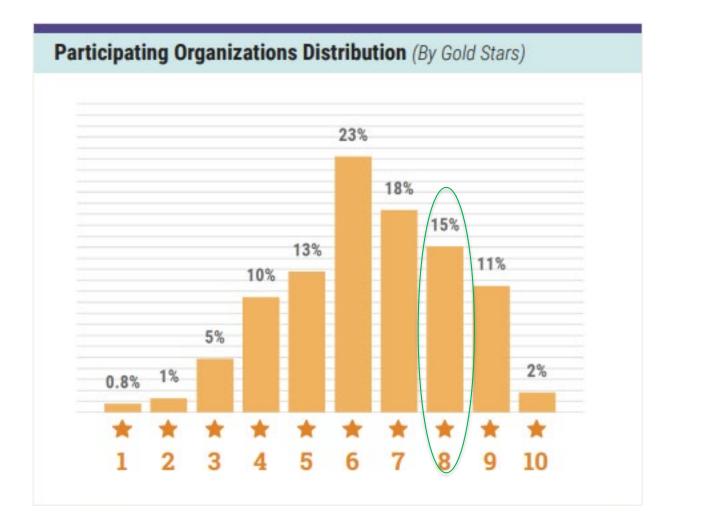


H+H has completed **490** items. **H+H is now at tier 8!**



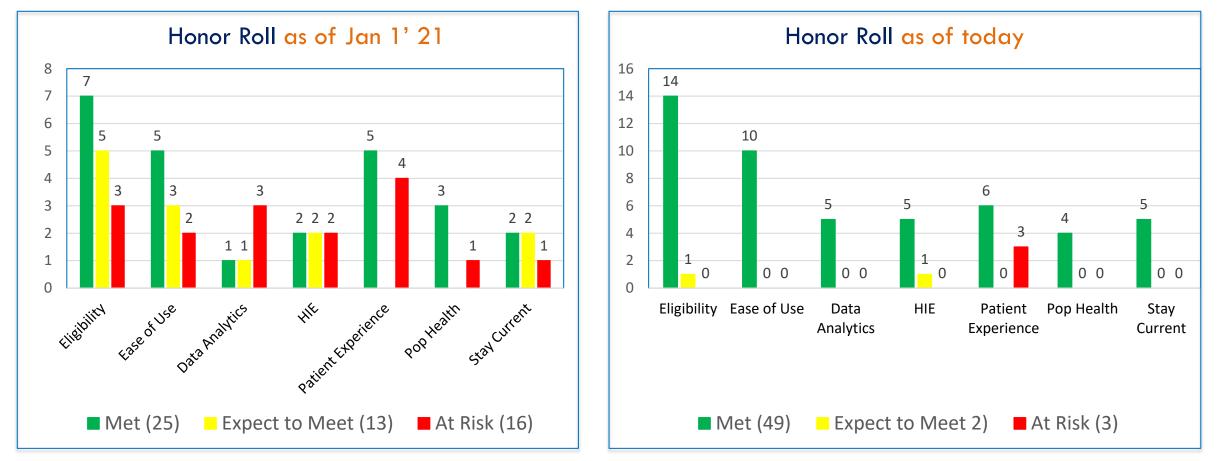
H2O Effective Use (Quality & Outcomes)

National EPIC customer's Gold Star Levels





Honor Roll



H+H is expecting to achieve honor roll by meeting criteria for the following components: Eligibility, Ease of Use, Data Analytics, HIE, Pop Health and Stay Current.

Honor Roll

Achieved

- Express Lanes to ease documentation at vaccine clinics
- Outside lab result in Chart Review
- 35 Physician Builders trained
- Benchmarking H+H against other EPIC customers
- Large increase in records exchanged with other health systems
- Streamlined external referrals

At Risk

- Fast Pass- Patient can get a text message when an earlier appointment is available
- Hello Patient- Patient can complete registration on phone and let staff know they have arrived
- Patient Message Handling-
 - A top priority of the MyChart Steering Committee in 2022
 - 7 site MyChart Committees made this their PI project

Care Experience: My Chart Patient Portal Activation CY 2021 Goal: 75% September 2021: 72%

The average activation rate of Safety Net Systems is 44%, all Epic customers is 50%.





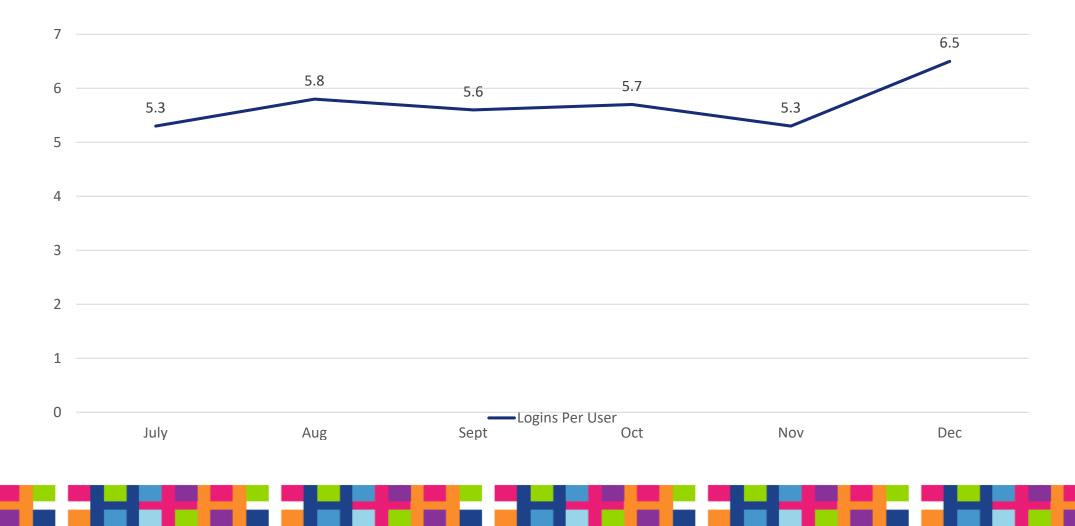


Displays the percentage of patients seen in the last 12 months that are MyChart active. Data is current as of the last day of the previous month. (December 2020 to December 2021)



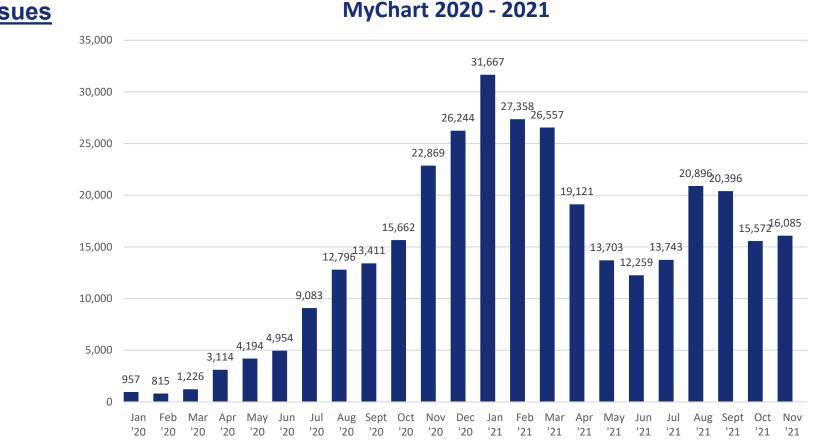
H2O Effective Use Care Experience

Logins Per User



Care Experience

IT Patient Support by Enterprise Support Services



MyChart

Volume of MyChart requests and issues2020 average monthly requests/issues:9,6102021 average monthly requests/issues:19,760

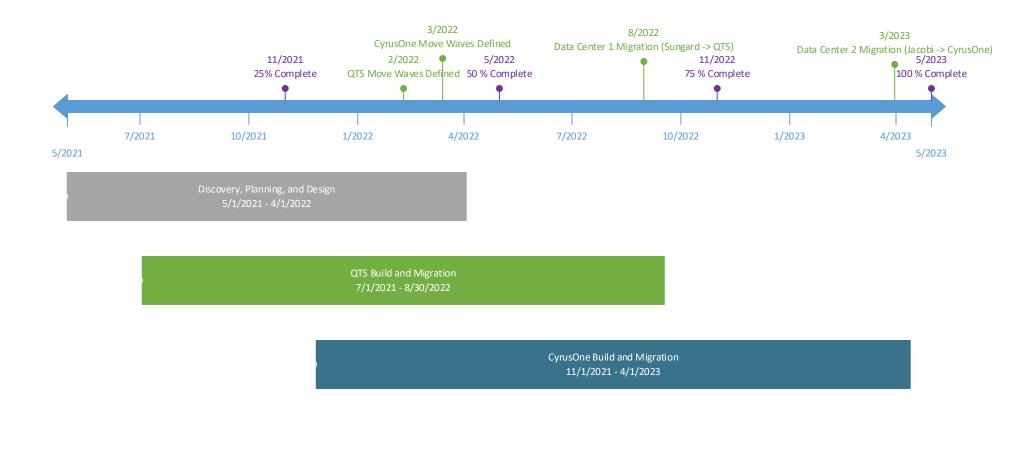
Data Center Migration CY21Q4 :October- December 2021 (Financial Sustainability & Quality)

- Enterprise Data Center Migration : Project Timeline 5/2021-5/2023
- As of December 2021, overall project progress remains on target at 25% completion.
- Enterprise Data Center Migration remains on target (100%) for CY21Q4 established milestones. Key accomplishments include:
 - Initial Network connectivity test and Security Certification completed
 - Aligned Virtana Discovery and ServiceNow Configuration Management Database (CMDB)
 - Completed two rounds of reviews on proposed Move Waves
 - Identified Core Applications and Services that are pre-requisites for move waves

Data Center Migration Update

NYC

HEALTH + HOSPITALS



Clinical and Revenue Cycle Applications Accomplishments

Continued support of COVID vaccine and testing sites

OSPITALS

- Receipt of Covid result alerts for H+H Patients tested in Non Epic Organization via Healthix
- Implemented eHealth Exchange connection with Social Security Administration to provide patients with faster approval for disability, releasing 2,631 records generating \$39,465 in revenue
- Decision support to reduce unnecessary/repeat lab orders improving patient experience and driving savings
- Implemented Qpath Ultrasound to all acute facilities, allowing ordering and resulting for ED and ICU
- Standardized to Hill-Rom Nurse Call systems at Coney, Harlem, Jacobi, Kings, NCB, and Seaview
- Launched Thrive training program, including prep course for visits from The Joint Commission

Clinical and Revenue Cycle Applications Upcoming Initiatives

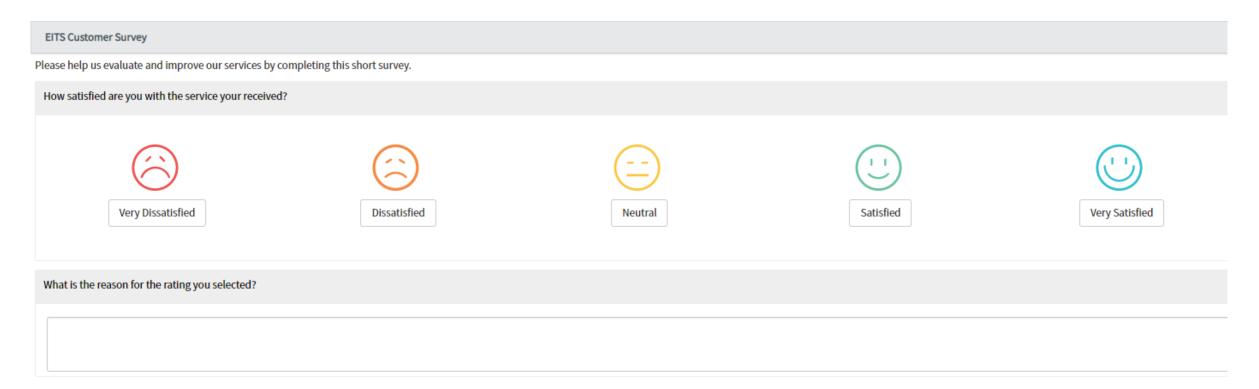
- Reducing Readmissions Using a Comprehensive Cross Discipline approach
- Blood Bank HCLL upgrade with instrument automation to an Enterprise standard
- Transition from Pyxis to Omnicell devices

SPITAIS

- Interface EMG and EEG devices to Epic
- Rollout spot vital sign devices integration with Epic, for vital signs to be taken and transmitted wirelessly
- Implement Wisdom, Epic's dental module
- Implement Willow Ambulatory, Epic's retail pharmacy module
- Expand learning team to include MyAM, Dragon, Omnicell, Careport, Hunter Ambulance, and more

Enterprise Support Services

EITS Customer Survey (preview)





Enterprise Support Services Customer Surveys:

- Since April 27th, a total of 205,845 survey requests have been sent to customers based on tickets resolved by ESD.
- ESD has received 10,601 survey responses, a 5.15% response rate.
- Breakdown of the survey responses:
 - Very Satisfied: 8,489
 - Satisfied: 1,393
 - Neutral: 279
 - Dissatisfied: 179
 - Very Dissatisfied: 271
- Overall Customer Satisfaction (CSAT Score):



EITS Team Recognitions

- NYC H + H Nursing Informatics Council 9th Annual Conference on Oct 29, 2021
- Metropolitan Hospital EITS Team Department of the Month November 2021
- NYC H + H Amazing Team recognition : EITS Clinical Applications Training Team
- EITS Team members volunteer for temporary reassignments
- Freeda George, Sr. Director IT wins Bahamas trip in NYC H + H Prize Giveaway for vaccinated staff.
- James Carr, IT Sr. Director, (Marine veteran, MGySgt Carr) is being recognized on Crain's Notable Veteran Executive list in the November 8th issue. <u>https://dvidshub.net/r/2uzy4z</u>



NYC H+H 9th Annual Nursing Informatics Conference: A Focus on 2022







Metropolitan Hospital EITS Team



NYC H+H Amazing Team: EITS Clinical Application Training Team



Enterprise IT Services Staff Volunteered to Take on Temporary New Roles During the Pandemic

Dozens of EITS clinical staff members volunteered to be temporarily reassigned to different roles across our health system, supporting local efforts during this unprecedented pandemic.

Two members of the EITS/H₂O (Epic) team, Zhanna Michael (left) and Neal DeLuna (right), supporting vaccination efforts at NYC Health + Hospitals/Elmhurst



Freeda George, Sr. Director CIS Winner of Bahamas trip Prize Giveaway to vaccinated staff!





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Thank You!



AppendixMyChart Activation Over Time

Site	January 21	December 21
Jacobi	47%	62%
Woodhull	46%	58%
Harlem	42%	56%
Lincoln	62%	69%
Queens	56%	68%

RESOLUTION

Authorizing New York City Health and Hospitals Corporation (the "System") to execute agreements with each of the following: Momentum Resource Solutions, LLC; DynTek Services, Inc.; GCOM Software LLC; Experis US Inc.; Siri InfoSolutions Inc.; Integrated Resources, Inc.; Kforce, Inc.; Stellar Services, Inc.; Spruce Technology Inc.; The CJS Solutions Group, LLC dba The HCI Group; TEKsystems, Inc.; 314e Corporation; Gevity Consulting US LLC; OST, Inc.; W3, LLC dba Healthcare IT Leaders, LLC (the "Vendors") for the provision of Information Technology Supplemental Staffing Services as requested by the System. The agreements shall be for an initial term of three years with two one-year options to renew solely exercisable by the System and with a total amount over the combined five-year term not to exceed \$283,000,000.

WHEREAS, an application to issue a request for proposals was presented before the Contract Review Committee at its August 31, 2021 meeting and was approved by its approval letter dated August 31, 2021; and

WHEREAS, after the Office of Supply Chain Services issued a request for proposals, fifteen vendors awarded contract; and

WHEREAS, the proposing vendors, Momentum Resource Solution, LLC; DynTek Services Inc.; Kforce, Inc.; The CJS Solutions Group, LLC dba The HCI Group; TEKsystems, Inc.; and Gevity Consulting US LLC are the incumbents and

WHEREAS, under the proposed agreements the Vendors will provide comprehensive Information Technology Supplemental Staffing Services that include as-needed labor for a wide array of technology expertise; and

WHEREAS, the proposed agreements for these services will be managed by Senior Vice President of EITS, Corporate Chief Information Officer

NOW THEREFORE BE IT:

RESOLVED, that New York City Health and Hospitals Corporation be and hereby is authorized to execute agreements with each of the following: Momentum Resource Solutions, LLC; DynTek Services, Inc.; GCOM Software LLC; Experis US Inc.; Siri InfoSolutions Inc.; Integrated Resources, Inc.; Kforce, Inc.; Stellar Services, Inc.; Spruce Technology Inc.; The CJS Solutions Group, LLC dba The HCI Group; TEKsystems, Inc.; 314e Corporation; Gevity Consulting US LLC; OST, Inc.; W3, LLC dba Healthcare IT Leaders, LLC for the provision of Information Technology Supplemental Staffing Services as requested by the System. The agreements shall be for an initial term of three years with two one-year options to renew solely exercisable by the System and with total amount over the combined five-year term not to exceed \$283,000,000.

EXECUTIVE SUMMARY RESOLUTION TO AUTHORIZE CONTRACT WITH EACH OF THE FOLLOWING: MOMENTUM RESOURCE SOLUTIONS, LLC; DYNTEK SERVICES, INC,; GCOM SOFTWARE LLC; EXPERIS US INC.; SIRI INFOSOLUTIONS INC.; INTEGRATED RESOURCES, INC.; KFORCE, INC.; STELLAR SERVICES, INC.; SPRUCE TECHNOLOGY INC.; THE CJS SOLUTIONS GROUP, LLC DBA THE HCI GROUP; TEKSYSTEMS, INC.; 314E CORPORATION; GEVITY CONSULTING US LLC; OST, INC.; W3, LLC DBA HEALTHCARE IT LEADERS, LLC FOR THE PROVISION OF INFORMATION TECHNOLOGY SUPPLEMENTAL STAFFING SERVICES

- **BACKGROUND:** The purpose of the proposed agreements are the selected vendors to provide Information Technology Supplemental Staffing Services on behalf of the System. Vendors will be assigned work by the EITS Administration and managed by the Senior Vice President of EITS, Corporate Chief Information Officer;
- **PROCUREMENT:** The System issued a Request for Proposals on September 17, 2021. A mandatory pre-proposers conference was held on September 23, 2021, which fifty-nine prospective vendors attended. Forty-three proposals were received and fifteen vendors were selected for contract. The Contract Review Committee approved the application to enter into the contracts on January 25, 2022.
- **BUDGET:** The cost of the proposed agreements will not exceed \$283,000,000.00 over the full five-year term.
- **TERM:** The term of the proposed agreements is three years with two one-year options to renew solely exercisable by the System.
- **MWBE**: The Vendors have a 30% or more MWBE subcontracting goal.



IT Supplemental Staffing Services

Request to Enter into Contracts Information Technology Committee February 7, 2022

Kim Mendez Senior Vice President / Corporate Chief Information Officer Apoorva Karia, AVP, EITS Administration

NYC HEALTH+ HOSPITALS Background / Current State

- The current 17 Requirement Contracts for IT Supplemental Staffing will expire on June 30 2022. NYC Health + Hospitals' EITS conducted a RFP to identify vendors that will provide competitive pricing and have the expertise in providing sufficient well-performing supplemental staff with the requisite technical skill and expertise in healthcare information systems
- EITS conducted a detailed analysis of the workflows and processes provided by the System's Managed Service Provider. Due to the nature of the funding sources, EITS has to comply with the reporting requirements for external entities including the City and the State. This would require a custom design with potentially adding manual and/or duplicate efforts as well as additional staffing resources. After careful due diligence and internal review with stakeholders (HR, OLA, Supply Chain), EITS decided to not move forward with transitioning to the system's MSP.



NYC HEALTH + HOSPITALS Benefits of Supplemental Staffing Contracts

These contracts will allow NYC Health + Hospitals to achieve flexibility to quickly align with changing technologies and respond to new business needs in a cost effective manner.

- Vendors will provide as-needed labor for a wide array of technology expertise needs
- Payment will be based on actual services performed pursuant to a work order (SOW) signed by Health + Hospitals and the vendor
- Vendors will be required to comply with H+H on-boarding and off-boarding workflows
- The use of supplemental staffing is more cost effective based upon the short/medium term needs of NYC H+H as compared to filling full time positions that will not be needed long term
- There is no requirement of a minimum payment to the vendors if we do not use the contracts

HEALTH + HOSPITALS Overview of Procurement

RFP Summary				
M/WBE Status	# Invited	# Responded	# Meeting Goal	# Requesting Waiver
M/WBE	17	8	n/a	n/a
Non-M/WBE	24	15	13	0

> 09/17/21: RFP posted on City Record, sent directly to 41 vendors

> 09/23/21: Pre-proposal conference held, 59 vendors attended

> 11/15/21: Proposal deadline, 43 proposals received

12/27/21: Evaluation Committee completed scoring sheets and submitted to Supply Chain for tabulation

01/20/22: Evaluation Committee confirmed vendors selected for contract pool

43 vendor proposals received; top 15 vendors selected for contract pool

- Momentum Resource Solutions, LLC
- DynTek Services, Inc.
- GCOM Software LLC
- Experis US Inc.
- Siri InfoSolutions Inc.
- Integrated Resources, Inc.
- Kforce, Inc.
- Stellar Services, Inc.
- Spruce Technology Inc.
- The CJS Solutions Group, LLC dba The HCI Group
- TEKsystems, Inc.
- 314e Corporation
- Gevity Consulting US LLC
- OST, Inc.
- W3, LLC dba Healthcare IT leaders, LLC

NYC HEALTH + HOSPITALS Vendor Pool Background

- Each vendor selected has more than five years of experience providing healthcare staffing services and annual sales of at least \$5,000,000
- While each vendor has varying core competencies, all are able to meet the specified staffing needs of EITS with an approved M/WBE utilization plan or certificate
- All rates were measured against industry standard and current baseline rates to ensure competitiveness; vendors demonstrated competency in IT project strategy and delivery
- Evaluation committee reviewed vendor performance for incumbents; reference checks successful

RFP Criteria

Minimum criteria:

- MWBE Utilization Plan, Waiver, or MWBE Certification
- Prior experience in large Healthcare IT business greater than 5 years
- Minimum annual revenue of \$5M
- Ability to fill specific roles through subcontracting with MWBE vendors (*mini-solicitation process to be outlined in the RFP*)

Substantive Criteria

- Experience/Resources/Past Performance 30%
- Cost
 Organizational capability
 20%
- Organizational capability
- MWBE 20%

- Evaluation Committee:
 - Clinical Information Systems
 - Enterprise Infrastructure
 - Business Applications
 - Quality & Safety
 - Enterprise Support Services
 - HR Administration
 - EITS Administration



Vendor Diversity

Vendor Name	Utilization Plan or Diversity Status	Subcontractor	Service	
Momentum Resource Solutions LLC	(NYC M/WBE Cert Pending)	N/A		
DynTek Services Inc.	35%	ST Consulting, Hittora, AMR Networks	Supplemental Staffing	
GCOM Software LLC	30%	Innovee Consulting, Ellit Groups	Supplemental Staffing	
Experis US Inc.	30%	Tetrus Corp	Supplemental Staffing	
Siri InfoSolutions Inc.	NYC MBE	N/A		
Integrated Resources Inc.	NYS MBE	N/A		
Kforce Inc.	30%	K Systems LLC, RS Management	Supplemental Staffing	
Stellar Services Inc.	NYC/NYS MBE	N/A		
Spruce Technology Inc.	NYC/NYS MBE	N/A		
The CJS Solutions Group LLC dba The HCl Group	30%	First Match	Supplemental Staffing	
TEKsystems Inc.	30%	Technumen Inc., GeekSoft LLC, SVAM International	Supplemental Staffing	
314e Corporation	NYC MBE	N/A		
Gevity Consulting US LLC	30%	Fair Pattern, Wellstone Group	Supplemental Staffing	
OST Inc.	30%	eSense Inc, Crescens Inc, Neotecra	Supplemental Staffing	
W3, LLC dba Healthcare IT Leaders LLC	30%	B2B Strategies, Intellect Resources	Supplemental Staffing	

NYC HEALTH+ HOSPITALS Vendor Diversity Management

- EITS and the Vendor Diversity Team worked closely to develop this RFP and considered how best to structure the scope of work in order to maximize M/WBE participation.
 - Based on historical contract performance between diverse and non-diverse vendors there was no clear division for a closed pool solicitation opportunity while still ensuring high quality, timely fulfillment of these critical needs.
 - There is, however, high M/WBE availability and capacity. Accordingly M/WBE was weighted at 20% of the RFP's quantitative score, whereas 10% is the standard weighting.
 - Additionally, in the RFP we noted that "NYC Health + Hospitals is committed to vendor diversity participation and may in its sole discretion manage the solicitation process among the awarded pool of vendors to aid M/WBE participation.", thereby allowing maximum flexibility in the award of work.

Management of M/WBE performance:

EITS and the Vendor Diversity Team will work closely to ensure compliance with each vendor's M/WBE Goals, as well as ensure meaningful participation of M/WBEs directly contracted. The overall goal is to ensure at least an overall 30% M/WBE Utilization among the pool of vendors.

Management tools:

- Quantitative scoring on all solicitations
- Closed pool solicitations among M/WBEs for appropriate staffing titles
- Discretionary awards
- EITS and the Vendor Diversity Team will report periodically to the Board IT Committee on the M/WBE performance of this pool of contracts

NYC HEALTH + HOSPITALS Information Technology Committee Approval Request

- NYC Health + Hospitals' EITS seeks Information Technology Committee approval to enter into a three year contracts with two one-year renewals at the discretion of H+H with each of the following: Momentum Resource Solutions, LLC; DynTek Services, Inc,; GCOM Software LLC; Experis US Inc.; Siri InfoSolutions Inc.; Integrated Resources, Inc.; Kforce, Inc.; Stellar Services, Inc.; Spruce Technology Inc.; The CJS Solutions Group, LLC dba The HCI Group; TEKsystems, Inc.; 314e Corporation; Gevity Consulting US LLC; OST, Inc.; W3, LLC dba Healthcare IT Leaders, LLC for a not to exceed amount of \$283M.
 - Term: July 1, 2022 to June 30, 2027
 - Estimated cost through contracts renewal term: \$283M
 - > No minimum usage requirement
 - Termination for convenience at the discretion of NYC H+H

То:	Colicia Hercules Chief of Staff, Office of the Chair
From:	Keith Tallbe Senior Counsel Office of Legal Affairs
Re:	Vendor responsibility, EEO, and MWBE status
Vendor:	EITS Temp Staff Requirements Contractors
Date:	January 26, 2022

The below chart indicates the vendor's status as to vendor responsibility, EEO and MWBE:

Vendor Name	Vendor Responsibility	<u>EEO</u>	M/WBE UP
Momentum Resource Solutions, LLC	Pending	Approved	30%
DynTek Services, Inc.	Approved	Approved	35%
GCOM Software LLC	Approved	Pending	30%
Experis US Inc.	Approved	Approved	30%
Siri InfoSolutions Inc.	Pending	Pending	NYC MBE
Integrated Resources, Inc.	Pending	Pending	NYC MBE
Kforce, Inc.	Approved	Approved	30%
Stellar Services, Inc.	Approved	Approved	NYC MBE
Spruce Technology Inc.	Approved	Pending	NYC MBE
The CJS Solutions Group, LLC dba The HCI Group	Approved	Approved	30%
TEKsystems, Inc.	Pending	Approved	30%
314e Corporation	Approved	Approved	NYC MBE
Gevity Consulting US LLC	Approved	Approved	30%
OST, Inc.	Pending	Pending	30%
W3, LLC dba Healthcare IT Leaders, LLC	Pending	Pending	30%

The above status is consistent and appropriate with the applicable laws, regulations, and operating procedures to allow the Board of Directors to approve this contract.