AGENDA

INFORMATION TECHNOLOGY COMMITTEE

Meeting Date: April 11, 2022
Time: 11:00 AM
Location: 50 Water St Rm 1515

BOARD OF DIRECTORS

CALL TO ORDER

ADDITION OF MINUTES
   February 7, 2022

ACTION ITEM

• RESOLUTION
  Authorizing the New York City Health and Hospitals Corporation (the “System”) to execute a three-year contract with Derive Technologies LLC (“Derive”) for services to maintain workstations on wheels and medical carts with the System holding two 1-year options to renew for an amount not to exceed $6,500,000 over the entire potential five-year term.

VENDEX: Approved / EEO: Approved

CHIEF INFORMATION OFFICER REPORT

OLD BUSINESS

NEW BUSINESS

ADJOURNMENT

NEW YORK CITY HEALTH + HOSPITALS
MINUTES

Meeting Date: February 7, 2022

INFORMATION TECHNOLOGY COMMITTEE

ATTENDEES

COMMITTEE MEMBERS
Feniosky Pena-Mora, Chair
Matthew Siegler representing Dr. Mitchell Katz
Dr. Vincent Calamia, BOD IT Committee member
Jose Pagan, BOD IT Committee member
Karen St. Hilaire representing Commissioner Gary Jenkins

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, AVP, EITS Business Operations
Sean Koenig, Chief Application Officer
Mr. Feniosky Peña-Mora, Chair of the Committee, called the February 7th meeting of the Information Technology (IT) Committee to order at 11:03 A.M.

Mr. Peña-Mora noted for the record that Matthew Siegler will be representing Dr. Katz and Karen St. Hilaire will be representing Gary Jenkins, both in a voting capacity.

Mr. Peña-Mora proposed a motion to adopt the minutes of the IT Committee meeting held on September 20, 2021.

Upon motion made and duly seconded the minutes of September 20, 2021 IT Committee meeting was unanimously approved.

Mr. Peña-Mora turned the meeting over to Dr. Kim Mendez, Senior Vice President and Corporate Chief Information Officer to carry on the agenda, she was joined by Dr. Michael Bouton, Chief Medical Informatics Officer, Sean Koenig, Chief Application Officer, Jeff Lutz, Chief Technology Officer, Apoorva Karia, AVP EITS Finance & Administration and Soma Bhaduri, Chief Information Security Officer.

Dr. Mendez presented a high-level overview of the agenda and highlighted the alignment with EITS goals and system strategic pillars.

Dr. Bouton provided a current update of the Bio-Medical Device Integration and Upgrade initiative noting the achievement of the expected 1700 device integration and the adaption to business and clinical needs.

Dr. Bouton went on to present the H2O Effective Use update. He focused on Epic (vendor) Gold Star and Honor Roll programs. The Gold Star program highlights the adoption of Epic EMR features by NYC H+H. In January 2021 NYC H+H began the program at 5 Gold Stars which is equivalent to the 50th percentile nationally. At present, January 2022, NYC Health + Hospitals has achieved 8 Gold Stars status which positions the enterprise at the top 25th percentile nationally. It was also noted that there are no other safety net hospitals at Gold Star level 8.

Dr. Bouton then presented the update on the Epic (vendor) EMR Honor Roll which illustrates how many features were adopted and their level of utilization. NYC H+H has completed the majority of at risk goals.
Dr. Bouton provided a more detailed review of the Honor Roll program goals which were achieved and those still at risk. Dr. Bouton went on to discuss the Epic (vendor) Honor Roll at risk goals which included Fast Pass, Hello Patient and Patient Message Handling. He explained that the Fast Pass function allows a patient the ability to sign up for a waiting list to get an earlier appointment if one becomes available. If an earlier appointment becomes available, the patient will receive a text message and a MyChart message alerting them of this. This function is scheduled to Go Live towards the end of February 2022.

He further discussed Hello Patient, a new function where the patient does not have to go to the front desk to check in, they can do it from their electronic device. Hello Patient also supports the patient to complete their paperwork digitally on their device.

Dr. Bouton explained that Patient Message Handling is when a patient sends a MyChart message to the provider and how long it takes the provider to respond. At present, 63% of the time the provider is responding within 3 days. Currently, Patient Message Handling has become a top priority for the ambulatory care leadership and the MyChart steering committee. A goal of 80% has been set.

Dr. Calamia asked if there is a process in place to triage messages or do they go straight to the provider. Dr. Bouton explained the message goes to a pool, which is monitored by a nurse. From there, if it regarding a prescription refill the message is routed to one area, if it regarding scheduling it will go to scheduling team. If the message is regarding neither of those two requests, it will go to a provider to answer if appropriate. A follow up question by Dr. Calamia was is there a mechanism to be able to follow through on timing of when it done or some reminder or is there any player that makes sure there a follow up. Dr. Bouton answered there is no subsequent alert that there is a message; however, when the physician logs into Epic they are able to see how many unanswered messages there are remaining for them to address. Dr. Bouton further noted that there are analytics that break message responsiveness by system, facility, and provider. Dr. Katz noted that the more complicated issues are not always technology but more clinical practice.

Mr. Peña-Mora inquired about the existing protocol for acknowledgement of receipt of patients’ messages. Dr. Bouton explained that there are no automated messages in MyChart for patients to be made aware that their messages have been received and have been forwarded to the appropriate provider/team for further review. A follow-up will be provided to the Board on this feature.

Dr. Bouton went on to provide an update on My Chart, patient portal activation rates. He highlighted that the system is currently at 72% nationally. Dr. Bouton highlighted the system team effort to increase
activation of MyChart. Engagement has increased with My Chart, not just signing in to get results but consistent use throughout the year. The MyChart steering committee is working on keeping patients engaged by responding timely to messages, putting more relevant information in the charts, as well as the use of video visits.

A committee member asked if the patients are seeing a background that is in their language on MyChart. Dr. Bouton replied English and Spanish is currently being shown and simplified Chinese is actively being worked on at the moment. Dr. Bouton further emphasized that NYC H+H EITS is pushing Epic to develop expanded languages in MyChart that align and support our patient needs. The translation of messages for the provider is an active discussion. Additionally, on-site interpreters have been utilized to assist with translation.

Dr. Mendez introduced Jeff Lutz, Chief Technology Officer to provide an update on the Data Center Migration 24-month project. Mr. Lutz shared a current visual representation of the timeline, goals, and achievement. He highlighted the partnership with Ms. Soma Bhaduri, Chief Information Security Officer, in certifying the data center, which allows applications to move into the new Data Center. The applications will begin to move between April 2022 and August 2022. The goal is to make it seamless for end users, applications will not have to shut down as equipment is being physically moved from one Data Center to the next. The project is currently on target and budget.

Dr. Mendez then introduced Sean Koenig, Chief Application Officer, to present an update on clinical and revenue cycle application accomplishments. He highlighted the continued support of COVID19 testing and vaccination sites, implementation of eHealth Exchange with Social Security Administration, and the work focused on reducing unnecessary inpatient lab tests through an active partnership with the Quality Department to assure the patients are receiving the best care possible.

Mr. Koenig went on to share that the Blood Bank HCLL system was recently upgraded (over the past weekend) with few issues and is continuing to be tracked. He went on to highlight the upcoming implementation of Epic(vendor)Wisdom, which is the Epic dental module and is planned for a July 2022 Go Live. In addition, the system will implement the Epic Willow Ambulatory retail pharmacy module with partners from the Pharmacy Department. Both Lincoln and Kings County medical facilities are planned for a May 2022 Go Live.

Dr. Mendez then shared an update on the EITS customer service survey which began in April 2021. She provided an overview of the process highlighting that once an individual calls/emails the support desk and their issue is addressed, an email is then sent to the individual to fill out the survey. Currently, there is a 94 percent overall customer satisfaction rate.
Inclosing the update, Dr. Mendez went on to recognize and present key accomplishments of EITS team members.

Mr. Peña-Mora asked if there were any further questions. Having heard none, he asked that the resolution be read by Dr. Mendez followed by the presentation.

Dr. Mendez read the resolution and introduced herself and Apoorva Karia, AVP EITS Finance & Administration as the presenters of the IT Supplemental Staffing Services 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.

Dr. Mendez kicked off the presentation with an overview of the background of EITS supplemental staffing and the current state. This was followed by an outline of key benefits including the flexibility to quickly align with business needs, that payment will be based on actual services performed, that vendors will be aligned with NYC H + H COVID19 vaccination requirements and noted there are no minimum payment requirements to the vendor if we do not use the contract.

Ms. Apoorva Karia then shared an overview of the procurement process, the scoring results, the vendor pool background and performance evaluation of incumbents. She then discussed the RFP criteria and noted the increase of MWBE scoring from 10% to 20%. She also shared the profiles of all the vendors along with their MWBE utilization commitments during the contract period. Ms. Karia closed with an overview of vendor diversity management including that EITS and the Vendor Diversity Team will work closely to assure all vendors comply with established goals, along with periodically reporting to the IT Committee.

Mr. Peña-Mora asked for the approval of the IT Board of Directors Committee, and was unanimously approved to bring to the Board of Directors. Mr. Peña-Mora then adjourned the at 11:56 am
RESOLUTION

Authorizing the New York City Health and Hospitals Corporation (the “System”) to execute a three-year contract with Derive Technologies LLC (“Derive”) for services to maintain workstations on wheels and medical carts with the System holding two 1-year options to renew for an amount not to exceed $6,500,000 over the entire potential five-year term.

WHEREAS, the System makes extensive use of carts equipped as mobile workstations and medical carts that permit clinicians to document patient care even while away from a computer and to perform certain clinical functions using only the cart; and

WHEREAS, these high-tech carts require regular preventative maintenance, hardware support and replacement, battery reconditioning and replacement and device integration and support, which is complicated by the System’s using carts from multiple manufacturers; and

WHEREAS, the System performed a competitive RFP which was issued, however, to only a closed pool of eleven certified MWBE contractors resulting in a determination, made with the approval of Supply Chain and the Contract Review Committee, to award the contract to Derive; and

WHEREAS, the System’s Senior Vice President and Chief Technology Officer will be responsible for the management of the proposed agreement.

NOW THEREFORE, be it

RESOLVED, that the New York City Health and Hospitals Corporation (the “System”) be and hereby is authorized to execute a three-year contract with Derive Technologies LLC (“Derive”) for services to maintain workstations on wheels and medical carts with the System holding two 1-year options to renew for an amount not to exceed $6,500,000 over the entire potential five-year term.
EXECUTIVE SUMMARY
MEDICAL AND DOCUMENTATION CART MAINTENANCE CONTRACT
WITH DERIVE TECHNOLOGIES LLC

OVERVIEW: In its healthcare facilities, the System makes extensive use carts as mobile work stations or as documentation carts. Currently in the System’s inventory are approximately 3,000 documentation carts and approximately 1,000 medical carts. These carts require regular preventative maintenance, hardware support and replacement, battery reconditioning and replacement and device integration and support, which is complicated by the System’s using carts from multiple manufacturers. The proposed contract will provide the necessary maintenance of such carts.

PROCUREMENT A competitive RFP was conducted through Supply Chain and under the review of the Contract Review Committee. The RFP was issued to a limited pool consisting of only MWBE firms in accordance with OP 100-5 and OP 100-10. Eleven firms were invited to participate. Five firms attended a pre-proposal conference and three firms submitted proposals. The Evaluation Committee selected Derive as the best proposer and the CRC approved such selection.

PROGRAM: Derive will have staff on site to conduct regular preventative maintenance, hardware support and replacement, battery reconditioning and replacement and device integration and support.

COSTS: Total not-to-exceed cost for the potential five-year contract will not exceed $6,500,000.

MWBE: Because Derive is a certified MWBE, the System will regard this as achieving 100% MWBE participation.
To: 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: Derive Technologies LLC

Date: March 28, 2022

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

<table>
<thead>
<tr>
<th>Vendor Responsibility</th>
<th>EEO</th>
<th>MWBE Utilization Plan</th>
</tr>
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<tbody>
<tr>
<td>Approved</td>
<td>Approved</td>
<td>NYC and NYS MBE</td>
</tr>
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</table>

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.
Workstation on Wheels and Medication Cart Maintenance

Information Technology Committee
Contract Application
April 11, 2022

Jeff Lutz, Senior Assistant Vice President
Chief Technology Officer
EITS
These devices allow for clinicians to document patient care in locations that do not have a computer. Currently the carts are from different manufacturers including Capsa and Ergotron. The maintenance will include, but not be limited to:

- Regularly scheduled preventative maintenance
- Hardware support and replacement
- Battery reconditioning and maintenance
- Device integration and support

Existing maintenance:

- Service was developed in conjunction with Derive Technologies to support the carts as they grew in use due to the increase of wireless and implementation of Epic.
- Derive Technologies has provided service for the past five years referencing an Intalere Contract. The maintenance has been renewed annually.
- The estimated cost is $1.6M annually covering 3,000 Documentation Carts and 1,000 Med Carts across all facilities. This covers the technicians that come on site and any associated parts that are warrantied by the manufacturer.
- Derive Technologies, a NYC Certified MWBE, has been a partner to NYC H+H for several years.

Given the different manufacturers for the devices, partners are leveraged to perform this maintenance.
Sourced via public solicitation (RFP) and sent directly to 11 vendors

Solicitation was limited to a pool of Diverse (M/WBE) Vendors only, which is consistent with our Procurement and Contracting Policy 100-05 & Vendor Diversity Policy 100-10

Derive Technologies was the highest rated proposer of three proposers with a score of 8.6 out of 10

Derive Technologies is a certified MBE and was rated as satisfactory for its historical performance as an incumbent vendor

Contract amount is $6,500,000

Contract duration is three years with two one-year renewal options at the discretion of NYC Health + Hospitals
Overview of Procurement

- 02/08/22: RFP posted on City Record, sent directly to 11 vendors
- 02/16/22: Pre-proposal conference held, 5 vendors attended
- 03/04/22: Proposal deadline, 3 proposals received
- 03/11/22 – 03/14/22: Vendors presented proposal solution to evaluation committee. Evaluation Committee debriefed and finalized scoring
- 03/15/22: Scoring results tabulated; Derive Technologies was the highest rate proposer
Minimum criteria:
- 5 years in business
- Similar experience supporting other healthcare locations
- Certifications and qualifications to provide support from cart manufacturers
- M/WBE Certification

Substantive Criteria
- 35% Cost
- 35% Service Proposal
- 30% Experience

Evaluation Committee:
- Chief Technology Officer
- Director End User Innovations
- Sr. Director EITS Infrastructure Services
- Director EITS Infrastructure Services
- Associate Director Nursing
- AVP EITS Finance
Taking into account the availability, capacity, and scalability of the M/WBE firms, the Cart Maintenance RFP was limited to a pool of Diverse (M/WBE) Vendors only, which is consistent with our Procurement and Contracting Policy 100-05 & Vendor Diversity Policy 100-10.

### Awarded M/WBE Vendor Information

<table>
<thead>
<tr>
<th>M/WBE Name</th>
<th>Certifying Agency</th>
<th>Certified as</th>
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<tbody>
<tr>
<td>Derive Technologies</td>
<td>NYC &amp; NYS</td>
<td>MBE</td>
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</table>
EITS seeks to enter into a five year agreement with Derive Technologies to provide support on the current fleet of deployed Documentation carts and Medication carts at a not-to-exceed amount of $6,500,000.

Termination for convenience at the discretion of NYC Health + Hospitals.

Three years with two one-year renewal options at the discretion of NYC Health + Hospitals.
Enterprise Information Technology Update
April 11, 2022 Committee Update

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

- Introductions
- EITS Targeted April 2022 Updates
  - Updated 2022 EITS Goals
  - Clinical Informatics
    - Effective Use of Epic EHR: Epic Gold Star & Honor Roll benchmarks
    - BioMed Device Integration: 2021 Focused Project Completion
    - MyChart: Activation, utilization and support
  - Application Learning
  - Data Center Migration
  - Service Management Organization
- Q & A
NYC H + H Information Technology 2022 Goals

- **Data Management (Quality & Outcomes)**
  - Data and Analytics (DnA) ongoing developments: website, Platform, Enterprise Data Warehouse, Archiving, etc.
  - UMPI
  - Data Conversion best practice guidelines

- **Infrastructure Enhancement (Financial Sustainability/ Quality & Outcomes)**
  - Data Center migration
  - Epic Hyperdrive transition planning
  - Telecommunication – improve experience & device tracking
  - CMDB Sustainable Structure with auditing & Qtrly ecosystem updates

- **Accelerated Digital Transformation (Quality & Outcomes/ Access to Care)**
  - Telehealth Optimization
  - Remote Radiology Program in partnership with Quality & M & PA
  - Biomedical device asset tracking, security risk assessment and system standardization with Strategic Sourcing

- **H2O Effective Use (Care Experience/ Quality & Outcomes / Social & Racial Equity)**
  - MyChart Optimization
  - Leveraging Epic to support social & racial equity in care
  - Expansion & enhancement of Epic Modules
  - Application Learning Team Optimization
  - Downtime & Business Continuity Access (BCA) enhancement

- **CQI (Quality & Outcomes)**
  - Security & Risk Assessment / Mitigation best practices
  - Portfolio Management & Application Rationalization
  - Enterprise Resource Planning (ERP) Governance & Prioritization Structure
  - Establish Service Management Office (SMO)
National EPIC customer’s Gold Star Levels
Honor Roll Current State

Honor Roll as of Jan 1’ 21

Met (20)  Expect to Meet (13)  At Risk (12)

Honor Roll as of today

Met (45)  Expect to Meet (0)  At Risk (0)

H+H has achieved honor roll requirements for the following components:
Eligibility, Ease of Use, Data Analytics, HIE, Pop Health and Stay Current.
EITS 2021: Focused Project Completion
(Quality & Outcomes)

2021 Biomed Integration & Upgrade Progress Tracking

Year to date completed # vs Monthly Cumulative Goal #
Care Experience: My Chart Patient Portal Optimization
FY 2022 Activation Goal: 75%
February 2022: 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. (February 2021 to February 2022)
MyChart Activation Rate
H2O Effective Use
Care Experience

Logins Per User

<table>
<thead>
<tr>
<th>Month</th>
<th>Logins Per User</th>
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<tbody>
<tr>
<td>July '21</td>
<td>5.3</td>
</tr>
<tr>
<td>Aug '21</td>
<td>5.8</td>
</tr>
<tr>
<td>Sept '21</td>
<td>5.6</td>
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<tr>
<td>Oct '21</td>
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<td>5.3</td>
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<tr>
<td>Dec '21</td>
<td>6.5</td>
</tr>
<tr>
<td>Jan '22</td>
<td>7.3</td>
</tr>
<tr>
<td>Feb '22</td>
<td>5.5</td>
</tr>
</tbody>
</table>
MyChart Optimization: Adding New Languages
Data Center Migration CY22Q1 : January- March 2022
(Financial Sustainability & Quality)

- Enterprise Data Center Migration : Project Timeline 5/2021-5/2023
- As of March 2022, overall project progress on target at 38% completion.
- Enterprise Data Center Migration CY22Q1 key accomplishments include:
  - Installed storage environment and replicated over 1.6PetaBytes of data
  - Installed and tested support infrastructure applications – Active Directory, Nutanix, DNS
  - Defined and planned first seven move waves, joint venture with PMO, ESD, Security and Application teams
    - First Move Wave: April 12 to include 15 applications (mix of non-production and production) and no user impact
    - Information gathered for testing and virtual moves to be leveraged in the future with the Disaster Recovery teams
  - Office area at QTS has been setup
  - QTS Lessons learned exercise completed
  - CyrusOne pre-planning and preparation 75% completed
Data Center Migration Update

Discovery, Planning, and Design
5/1/2021 - 4/1/2022

QTS Build and Migration
7/1/2021 - 8/30/2022

CyrusOne Build and Migration
11/1/2021 - 4/1/2023
Applications Learning Department’s
H2O Thrive Sessions

**Thrive Training** - Training geared towards current users of H20 to enhance skills and optimize their use of the electronic health record system

The Applications Learning department identifies end user needs based on tickets and facility stakeholder feedback, develops the curriculum and implements the training strategy

- JC Prep Workshop
  - Began hosting in 2021
  - 524 end-users trained
- Chart Review, Lunch & Learn for survey navigation
  - 172 end-users trained
- Operating Room Preference Card maintenance
  - 45 end-users trained
- Hospital Billing Workqueue
  - New this year
  - 184 end-users trained
Launch of 1:1 Virtual Training

- Users can request a session with a trainer for application support, provider personalization, or other assistance in using the systems.
- [https://applicationslearningrequest.nychhc.org/](https://applicationslearningrequest.nychhc.org/)
Continuous Service Improvement (CSI)

The EITS Service Management Office (SMO) is an Internal Center of Excellence (CDE) that will improve the quality, effectiveness, and efficiency of delivering services within the H+H enterprise.

Keep Practices Current

Improve Company Coordination
Service Management Office (SMO): Key Value Attributes

- Next step in the development of EITS organization and goal for continuous quality improvement
- Coordinates system requests and the delivery of services
- Supports users receiving consistent service experience
- Coordinates continuous activities of managing the end-to-end lifecycle of services.
- Alignment of Enterprise Support Services, PMO, Change Control/Problem Management & Infrastructure ServiceNow Team for improved coordination and communication.
- SMO will encompass Enterprise Support Services, Knowledge Management, Request Management, Change Control, Incident Management & Problem Management, and Service Configuration Management (CMDB).
Service Configuration Management

- To ensure that accurate and reliable information about the configuration of services and the configuration items that support them, is available when and where it is needed. This includes information on how Configuration Items – CIs are configured and the relationships between them.
- Primary objective: to efficiently provide useful information to the organization.
- Scope: of the components under its control should be defined by their usefulness and efficiency.
- Main factors: the usefulness of the Configuration Information and the costs of obtaining and maintaining it.

Configuration Item - CI

- Any component that needs to be managed in order to deliver an IT service.
Service Configuration Management: CMDB

Configuration Management Database - CMDB

- A database used to store configuration records throughout their lifecycle. It also maintains the relationships between configuration records.
- i.e. A database that hosts Configuration Items – CIs and their relationships such as depend on, installed on, etc.
Thank You!