NYC HEALTH+ HOSPITALS

AGENDA

**MEDICAL AND PROFESSIONAL AFFAIRS
AND INFORMATION TECHNOLOGY COMMITTEE**

Date: June 10th, 2024
Time: 9:00 AM
Location: 50 Water Street
New York, NY 10004
Room 1701

BOARD OF DIRECTORS

CALL TO ORDER DR. CALAMIA

ADOPTION OF MINUTES – April 8th, 2024 DR. CALAMIA

CHIEF MEDICAL OFFICER REPORT DR. ALLEN

CHIEF NURSE EXECUTIVE REPORT DR. CINEAS

CHIEF INFORMATION OFFICER REPORT DR. MENDEZ

METROPLUS HEALTH PLAN DR. SCHWARTZ

OLD BUSINESS DR. CALAMIA

NEW BUSINESS DR. CALAMIA

ADJOURNMENT DR. CALAMIA

Mr. José Pagán, Chairman of the committee, called the meeting to order on behalf of Dr. Vincent Calamia at 9:03AM, he noted for the record Sally Hernandez-Piñero is participating virtually, she have submitted questions after review of previously distributed materials.

On motion made and seconded, the Committee adopted the minutes of the February 5th, 2024 Medical and Professional Affairs/Information Technology Committee.

ACTION ITEM:
Dr. Jonathan Jimenez, Executive Director, NYC Care, Department of Ambulatory Care and Population Health presented the resolution to the committee.

> **Authorizing New York City Health and Hospitals Corporation (the "System") to execute agreements for NYC Care outreach services to cover all five boroughs with vendors, each of the 22 CBOs, and attached hereto as Exhibit A, on behalf of the System for an initial period of eighteen months with one eighteen-month renewal option, exercisable at the discretion of the System. These agreements shall not exceed $6,652,800 over the potential thirty-six-month term.**

From the initial launch of NYC Care in 2019, community-based organizations (CBOs)have facilitated significant outreach, education, and enrollment assistance. These CBOs have helped ensure NYC Care is understood among NYC's diverse uninsured and underinsured communities. These CBOs are ambassadors in building trust in NYC Care and accessing healthcare through NYC Health + Hospitals.

All CBO partners have been performing satisfactorily. CBOs have helped bring NYC Care membership to over 135,000 New Yorkers, exceeding the initial target of 100,000.

An RFP process was completed in 2021 for a twelve-month contract with the option to extend another year. 22 organizations were funded and then 21 were offered an extension. The 21 contracts expired on October 31, 2023 and a deviation memo for a six-months extension was signed by Dr. Katz to avoid disruption of services and to allow the RFP process to be completed. Vendors were selected based on organizational experience in serving neighborhoods from a pre-set list of NYC Care-selected priority Zip Codes. Priority Zip Codes are those with higher rates of uninsured residents & lower rates of current NYC Care membership. Boroughs are allotted vendor slots relative to their general population and rates of uninsured residents and current NYC Care membership.

Most Selected Vendors are multi-service organizations with the capacity to leverage built-in audiences and existing community trust. They also represent additional programmatic areas, including: AIDS/HIV Services & Advocacy, Anti-

Poverty, Benefits Access, and Social Services Civic Engagement, Disability Services & Advocacy, Education (Afterschool Programs, Job Training) Housing & Homelessness Immigrant/Refugee Services & Advocacy, Food Security (including America's largest Kosher Food Pantry System, Public Health & Healthcare Access

All selected incumbent vendors have performed satisfactorily. Performance is based on fulfillment of contract responsibilities and quantitative Outreach Goals. Each outreach funding line targets at least 400 individuals reached per month, and 40 appointments made for insurance eligibility screenings. Each Direct Enrollment Funding Line will have a target of 10 enrollments per month.

Comment made by the Board; in most communities at best, they are trying to meet the need of people who are arriving at their emergency rooms. How unique it is that NYC is actually outreaching to try to get people into care that needs care.

Questioned raised by the board: *since 2019 approximately 27,000 members have been enrolled each year, can we project how many people are still eligible to be enrolling in the program.* *Response by Dr. Jimenez;* *it is hard to estimate how many people that are ineligible for health insurance, that estimate fluctuates. When the program started there was an estimate that was 476,000 members with the best methodologies that had then. We are working with the Department of Health to see if they can refresh that, a lot of the people are already engaged in care in the FQFCs. It is hard to know, the goal was set of 100,000, we've surpassed that and think there is going to be more because some new arrivals will end up being ineligible for health insurance because of not being able to get through the asylum process.*

Questioned raised by the Board: *Is the idea that the other 300,000 get their care through other systems.* *Response by Dr. Jimenez;* *we are not sure, this is the reasoning for continuing the outreach work, we are learning that some people are hearing about us for the first time, and are receiving care for the first time in decades. This is our emphasis for continuing to do our work.*

As of late, due to new arrivals we are over 135,000, we are going to expect a decrease because of the expansion of Medicaid eligibility to undocumented people who are 65 and older. This allow people to be able to get insurance. As part of the reenrollment process they will get screened again and enrolled in Medicaid, which means they would not be NYC care members.

Questioned raised by the Board: *for clarity, are 400 people reached each month and 40 are enrolled?* *Response by Dr. Jimenez;* *it is estimated per funding line, of the 22 vendors represented about 32 funding lines, its 32 times 400 contact the they would be doing per month at a minimum.*

After discussion, Mr. Pagán read the resolution into the record, the resolution was duly seconded, and unanimously adopted by the Committee for consideration by the full board.

Dr. Kim Keziah Mendez, Senior Vice President and Corporate Chief Information Officer, and Jeffrey Lutz, Senior Assistant Vice President, Enterprise Information Technology Service, presented the resolution to the committee

> **Authorizing New York City Health and Hospitals Corporation (the "System") to execute a best-interest renewal agreement with Canon Solutions America Inc. for the provision of enterprise-wide managed print services for a period of seven-years. The agreement shall not exceed $63,572,940 over the seven-year term**

Mr. Lutz provided an overview which includes a summary that Canon provides all printing support service which includes consumables, toner replacement parts to keep the printers working as well as the leasing of large printers for the enterprise.

Mr. Lutz provided background on the current Canon contract and that they were selected from an RFP in 2015 and the contract will expire in June 2024. Through the partnership with Canon, a total cost of $79M was spent. It also included a cost savings of $19.4M due to a reduction of the printer fleet by 30% during the time period of 2018 to 2024. In both administrative and clinical areas, the printer count went from 26,000 to 17,500 with features like secure print that allows the ability to utilize any printer with a tap of an ID badge. It provided efficiencies at the clinical level, less wear and tear on devices and overall print volume and cost. The reduction of printers also lowered the number of printer models that needed to be supported and repaired. Canon has also assisted with decreasing the number of facilities print shops from 11 to 5. They used to support each of the facilities individually but have now been made more efficient, so they support the whole enterprise, with an increase to their capabilities such as business cards and wayfinding signage.

Mr. Lutz provided background of the due diligence process with Gartner and Conductiv, through the GNYHA contract, who both reviewed the overall contracts and provided feedback regarding Canon's services and pricing alignment with similar sized contracts within healthcare. Conductiv was also involved in the contract review process to look at where there is ability to gain efficiencies. One of the recommendations was lease pausing in the event that some of these larger devices are no longer needed temporarily, the lease can be paused and no payments will be made on that machine until it comes into function again.

Mr. Lutz explained the reason for the best interest renewal was due to the very large and complex environment which would be very difficult to transition. Costs have been lowered and efficiencies were gained within the current contract, and based on the pricing due diligence there would not be a significant advantage if there was a transition.

Mr. Lutz presented a slide showing vendor diversity performance, they performed satisfactorily across all areas. He also presented a slide showing

the total cost of the new contract broken down by years, but would not exceed $63,572,940. For each year, they have an annual gain share or max spent which is how the price increases are addressed. Over the span of the new contract, there will be a savings of $16 Million. The Canon team will also help with gaining more efficiencies across the whole enterprise and improve the service level agreements when it comes to response times of repairs. Mr. Lutz then presented a slide regarding the MWBE subcontracting, they were able to achieve 14.5% by contracting through Garic, Inc and will push them to 20% as part of the new contract. Mr. Lutz concluded his presentation with a summary of the resolution and opened the floor for questions.

Dr. Katz stated he agreed with the presentation and the overall goal of the contract. He then asked the question of how would the organization go from 200M to 100M pages printed as it would be good for the environment and protects confidentiality. He did acknowledge there was already an impressive drop from 400M to 200M printed pages. Mr. Lutz did agree that there is opportunity to pursue achieving this request and there is a current initiative in place encouraging people to use electronic formats as opposed to printing and filing away into cabinets. Ishmael Miller and team have visibility and understanding into how the organization thinks around devices and present opportunities for efficiencies.

Dr. Katz suggested as part of the campaign in the areas where a person is printing, other options are presented aside from printing. He did acknowledge the audience and there are some who may want to have hard copies and that is okay but a question can be asked on preference. He also stated it would not be the EITS team's responsibility but the organization's and would need to understand the scope of the problem. He proposed to have a 5-year goal of how to decrease printing and being good stewards. He suggested that during meetings since we have the projected and electronic versions of the presentations maybe we can limit printing.

After discussion the resolution was duly seconded, and unanimously adopted by the Committee for consideration by the full board.

CHIEF MEDICAL OFFICER REPORT
Machelle Allen MD, System Chief Medical Officer/Sr. Vice President of Medical and Professionals Affairs, and Wendy Wilcox MD, Chief Women's Health Officer, highlighted the following:

Dr. Allen gave examples of some of the ongoing projects that is being done in M&PA. Dr. Teckie is developing our system wide cancer services, Dr. Bell is establishing new residency programs in South Brooklyn Health, they have a new anesthesia residency, a new surgery residency, and Jacobi has a new OB/GYN residency. Dr. Ashwin Basavaraj is working with low dose CT lung cancer screening; Dr. Rajesh Verma is working on staffing model on the inpatient side, Dr. Manish Parikh is working on robotic expansion, increasing robotic efficiency, Dr. Michael Meguerdichian is working on simulation, and

Omar Fattal is meeting the needs of the behavioral health crisis in New York City.

Quality and Outcomes

Dr. Wendy Wilcox, presented a couple of Women Health initiative. The profession organization for Women Health is the American College of Obstetricians and Gynecologists, also know as (ACOG). The program has been running since 1986. They have conducted over 230 site visits all over the country. It is staffed with Board Certified Gynecologist and obstetricians, as well as midwives and anesthesiologists. They will come in and meet with the team, review charts, interview people, look at policies, and give you an overall functioning of your OB GYN team. They come in on a Thursday evening, they have an entrance interview, and an exit interview 8:00AM Sunday morning. They give a verbal report, and 2 months after you receive a written report.

Starting April 2022 and ending March 2024, ACOG VRQC conducted 11 site visits of all of our OBGYN departments. To date, we received 9 of those reports. A complete assessment is being worked on. However, work has started on some items that need to be addressed. Our ACOG VRQC teams have notice that the staff is extremely committed to the patient population and communities that we serve.

Some opportunities where we can improve on are, all staff need training in fetal heart rate interpretation, our physicians, nurses, midwives, and residents need this training. Women Health and Nursing have started AWHONN training, AWHONN is the Association of Women Health Obstetric and Neonatal Nurses, they are the leaders in fetal heart rate training. It is nurse led training in person. Women Health and nursing have teamed up to organize training. They have brought in certified AWHONN trainer, at each site and have held multiple trainings so staff can engage as a team and learn fetal heart rate training. To date they have completed 2 sites training and the rest are ongoing.

Other findings were, a need for more robust quality structure, this should be developed at the System structure. It is currently being worked on with Women Health and Quality. Team training was needed to enhance communication and foster healthy department culture. That we encompassed in the AWHONN training as well as in the simulation training. Also, the need for a policy management system, which makes policies easier to find and it will alert us as to when they need to be revised,

Care experience

Women Health partnered with the virtual express care team, and for postpartum women, they will be able to access a provider 24/7 for both postpartum and behavioral health concerns. This information will be on everyone discharge summary, letting them know how to access the number.

Quantification if Blood Loss

Being able to quantify how much blood lost after a vaginal or C section is important to get a handle on whether or not someone is experiencing a hemorrhage. It was recommended from ACOG and Joint Commission that we get a standardized way to measure obstetric blood lost. Triton QBL quantitative

blood lost system, will enable this to be done. The Triton QBK system uses light technology, it has a reader that scans a canister and can tell how much blood is in it, even if it is mixed with amniotic fluid, because it senses the darkness of the color and then assigns a quantity. As of March 2024, all labor and delivery units in 11 hospital have implemented the Triton system.

Periwatch Feral Monitoring System
Our OBGYN council did a rigorous review on fetal heart rate monitoring system for a year. All of the fetal heart rate monitor was examined across the system. The fetal heart rate monitor, senses the baby's heart beat and gives a read out, then a provider interprets it. It was decided that the providers needed some additional decision support, as our current system was becoming out dated.

After a vigorous review the providers settled on a system called PeriWatch Fetal Heart Monitoring System, it uses ACOG capability to help providers, especially in the category 2 tracing, which is an indeterminate tracing. Which may be hard to figure out whether a baby is in danger or not. It allows for standardized documentation specially for nurses, and it will take about a year to put the hardware that is necessary for this implementation, and also to put in the rule's decision support, which will be specific to Health and Hospitals.

Questioned raised by the Board: When they provide recommendations, is that based on what the teams knows or what they have learned from visiting other facilities around the country? Dr. Wilcox response; it is both, it is a really comprehensive report. They give you references if they bring up something and they think that references will help, and provides an example on what you should look at. They will also let you know what you are struggling with has been seen at many sites and suggest what other sites have done. The reports are about 25 to 30 pages, most of them are very dense and have a lot of information. We have been implementing what they have found.

SYSTEM CHIEF NURSE EXECUTIVE REPORT
Dr. Natalia Cineas, System Chief Nurse Executive, Office of Patient Center Care, highlighted the following –

Care Delivery Daily (CD²) Management System – Bellevue
Bellevue hospitals for the care delivery model was completed. Which is implemented to improve communication and to standardize the nursing process and standard of care. There are 4 hospitals that remain for 2024, which Jacobi is in June, Kings County is in September, Woodhull and North Central Bronx in quarter 4 of 2024.

Leadership visibility continues with CNE town halls for leadership, and fireside chats for frontline staff. In March the townhall focused on the clinical ladder program. There was a roll out of the new cloud base system, by the name of StaffGarden. Two new platforms in a month was built. For StaffGarden there are over 900 nurses that have already applied for the clinical Ladder program. The goal is to exceed 1300 from last year.

There continuous to be excellent recognition throughout our critical care units across the enterprise. Most recently Jacobi cardiac cath lab goal beacon level, which is only one of four cath labs in New York State and one of seven in the country. The neonatal intensive care unit at Metropolitan received the gold level beacon award for nursing excellence, the first in New York City and second in New York State. Kings County Neonatal Intensive Care Unit received second level Beacon award for excellence. Jacobi received a silver level Beacon Award for Excellence, one of 4 CCU in Jew York State.

As far as certifications; Nurse Builders, a cloud-based certification review course platform went live on March 19th, 2024. One thousand nursed registered for the new system within a year and 956 within 3 weeks, the participation and engagement of the nurses when it comes to professional development has been great. There was a system wide certified nurse's day celebration on March 28th. The top 3 facilities, Queens, Elmhurst, and Gouverneur will be celebrated for in person certification events this month.

Recruitment is top priority, a number of Critical Care fellowship programs has been established, starting with the Emergency room department to recruit new nurses. Three hundred graduates are projected from this new fellowship program for the emergency room department. There will be a roll out of a Critical Care fellowship, a OR Fellowship, and a Neonatal Intensive Care fellowship in the next three months.

The Board commended Dr. Cineas on the accomplishments.

CHIEF INFORMATION OFFICER REPORT
Dr. Kim Keziah Mendez, Senior Vice President and Corporate Chief Information Officer gave highlights of EITS to the committee.

Dr Mendez presented the Chief Information Officer report for EITS which included the department's 2024 goals. The presentation then focused on the key areas of clinical information services and one epic module.

Dr. Bouton stated the Epic transfer module was successfully implemented and further described two important aspects. The overall project is allowing clinical staff to remain inside of Epic and not having to go make phone calls outside of the system which allows for streamlined operations. The clinical teams can connect via secure chat, similar to text messaging, within the electronic medical record. It was implemented about two months ago with a very high level of adoption within the system which helped with moving to a platform strategy. By providing more functionality within the electronic medical record, it is easier for the provider.

Dr. Bouton then presented the process when implementing new functoriality, which begins with a good design that needs partnership with the end users. Clinical teams, business applications, and others who will be using that process need to be involved up front. Good design then makes for a good build, which is where the analyst team goes through and actually builds it out. A good build then makes for a good test, which included rigorous testing before going live with anything. He then stated with the transfer

module, it was a successful Go Live with minimal issues that needed to be troubleshoot. Since being live for a few weeks, over 400 transfers have been completed.

Dr. Bouton then presented another module that is the computerized maintenance management system, a database of all biomedical devices. It provides the ability to go to one spot that provides control and an understanding of what needs to be updated. The system connects to ServiceNow so when a user has an issue they place a ticket to the service desk and goes through the process to create a seamless experience.

Dr. Bouton concluded the presentation with no questions from the Board.

METROPLUS HEALTH PLAN, INC.
Sanjiv Shah, MD, Chief Medical Officer, MetroPlus Health Plan, presented on behalf of Talya Schwartz, MD, President and CEO, to the committee, a full report is included in the materials, with the following highlights –

There is more expansion insurance coverage. The Essential plan, which currently has a federal poverty limit of two hundred, is now being increased to a State innovation waiver to two hundred and fifty percent of the FPL. More people will get coverage and particularly individuals covered through the qualified health plans that pay a premium, will get premium relief as a result for the FPL expansion. MetroPlus estimates over three thousand four hundred of the QFP members will be positively impacted by this provision, and will be moved to the EP two hundred to two hundred and fifty Plan. It will be a saving of $4,700 per year compared to what they would have been paid through tax credits in the QHP plans.

Dr Katz, ask Dr. Shah to bring back to the Board what efforts it would take to allow MetroPlus coverage to areas outside of the of the Metropolitan area that would like to have access to this coverage. Dr. Shah response; this was being reviewed by the MetroPlus Board, to be one of the 2024 strategic pillars into 2025 and 2026 as geographic expansions. Once it evolves into a more concrete plan, it will be presented to Health + Hospitals Committee and Board.

There being no further business, the meeting was adjourned 10:05AM.

Medical & Professional Affairs and Information Technology Committee Meeting
Chief Medical Officer's Report

June 10, 2024

Machelle Allen, MD
Senior Vice President

Oncology Initiatives

Sewit Teckie, MD MBA
- System Chief of Radiation Oncology
- Radiation Oncologist at Kings County
- Associate Professor, NYU Grossman School of Medicine

Aligning M&PA Goals and Initiatives

- Quality & Outcomes
- Care Experience
- Financial Sustainability
- Access to Care

PATIENT, FAMILY & COMMUNITY

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

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

OUR VALUES
ICARE: Integrity, Compassion, Accountability, Respect and Excellence

STRATEGIC PILLARS

| QUALITY & OUTCOMES | CARE EXPERIENCE | FINANCIAL SUSTAINABILITY | ACCESS TO CARE | CULTURE OF SAFETY |

SOCIAL AND RACIAL EQUITY

Why we are committed to cancer services

- Our patients want to be treated in their local communities
  - Cancer care is integrated with usual medical care
  - Cancer screening integrated with primary care
- We are capable of treating the vast majority of cancers
- **We are committed to health equity and access**

NYC Health and Hospitals Cancer Programs

Facility	2022 New Cancer Patients Treated	Radiation Oncology (LINAC)	Hematology Oncology	Infusion Center	Accreditation
Bellevue	1,144	N - refer to NYU	Y	Y	COC Academic Comprehensive Cancer Program, NAPBC Breast Program
Elmhurst	546	Y	Y	Y	COC Academic Comprehensive Cancer Program
Harlem	124	N - refer to Lincoln	Y	N - refer to LI, ME, or local	--
Jacobi/NCB	329	N - refer to local partner	Y	Y	COC Community Cancer Program, NAPBC Breast Center
Kings	999	Y	Y	Y	COC Comprehensive Community Cancer Program
Lincoln	585	Y	Y	Y	NAPBC Breast Center
Metropolitan	191	N - refer to Lincoln or NYU	Y	Y	NABPC Breast Center
Queens	342	Y	Y	Y	COC Community Cancer Program
South Brooklyn	436	N - refer to Kings	Y	Y	--
Woodhull	233	N - refer to Kings	Y	Y	--

Access to State-of-the-Art Care

1. Capital purchases for replacement of end-of-life Linear Accelerators at Elmhurst (2023-2024), Queens (2024-2025), Kings (2024-2025)

2. Business plan to support Kings, Lincoln, and Bellevue hematology-oncology with a team-based staffing model

Hematology Oncology Team-Based staffing model

0.25 FTE Division Chief			
0.25 FTE Asst Dir of Nursing			
0.25 FTE Head NP			
1.00 FTE Physician$_1$	**1.00 FTE** Physician$_2$	**1.00 FTE** Physician$_3$	**1.00 FTE** Physician$_4$
1.00 FTE NP$_1$	**1.00 FTE** NP$_2$	**1.00 FTE** NP$_3$	**1.00 FTE** NP$_4$
1.00 FTE PCA$_1$	**1.00 FTE** PCA$_2$	**1.00 FTE** PCA$_3$	**1.00 FTE** PCA$_4$
1.0 FTE Social Worker			
1.0 FTE Clerical Associate			
1 FTE Dietician			
1.00 FTE Patient Navigator			
0.50 FTE Hospital Care Investigator			
Across sites			
1.0 FTE Program Manager (across all sites / entire model)			
1.0 FTE Nurse Educator (across all sites / entire model)			

Clinical Quality Achievements

1. Established a monthly Cancer Education Series for system participants, with CMEs available

2. Training sessions for Rad Onc staff to learn new technologies, at Lincoln, Elmhurst, and Kings

3. Created "Cancer Care-team" for Rad Onc practice at Kings (MD + NP/RN + PCA + secretary)

4. "Paperless" departments in Rad Onc

Principles of Cancer Services at H+H

- Collaboration
- Safety
- Continuous Improvement
- Excellence in Patient Care

- We are committed to providing timely, evidence-based, standard-of-care cancer treatments to our patients

INTEGRITY
Keep Everyone Safe

COMPASSION
Keep Patients First

ACCOUNTABILITY
Manage Resources

RESPECT
Work Together

EXCELLENCE
Pursue Excellence.
Keep Learning

SYSTEM CHIEF NURSE EXECUTIVE REPORT
Medical & Professional Affairs/Information Technology Committee

NYC Health + Hospitals

Mar – May 2024

Office of Patient Centered Care (OPCC) Accomplishments

The Black Angels – Special Recognition Event

- **NYC Health + Hospitals**, the **DAISY Foundation**, and the **Chi Eta Phi Sorority, Inc**. hosted a celebration recognizing the **Black Angels**, black nurses who treated tuberculosis patients at Sea View Hospital on Staten Island from the 1920's to the 1960's.

- **Ms. Virginia Allen**, one of the last surviving Black Angels, received a **Lifetime Achievement Award** from the **DAISY Foundation**, a recognition given to nurses who have devoted their life's work to the compassionate care of others. Ms. Allen treated patients with tuberculosis from 1947 to 1961.

- **NYC Health + Hospitals/Harlem** was also recognized by the **DAISY Foundation** and **Chi Eta Phi Sorority, Inc**. for its role in providing nurses to treat tuberculosis patients

- Signed copies of a new book about this period, **The Black Angels: The Untold Story of the Nurses Who Helped Cure Tuberculosis** by **Maria Smilios,** were distributed by the author at the recognition event.

- Hosted by NYC Health + Hospitals/Office of Patient Centered Care at Harlem Hospital on April 5th, 2024 from 2:00 – 4:00 PM. It was attended in person by ~50 people and ~120 people attended virtually.

Office of Patient Centered Care (OPCC) Accomplishments

Certified Nurses Day Celebration

- The 2024 Virtual Systemwide Certified Nurses Day celebration, where all certified nurses were recognized, was held last March 28th, 2024 from 10:00 – 11:00 AM.

- The guest speaker was **Katie Boston-Leary, PhD, MBA, MHA, RN, NEA-BC,** Senior Director of Nursing Programs for the American Nurses Association (ANA), who gave an inspirational and motivational speech to the certified nurses.

- The remarks and introductions were given by **Natalia Cineas, DNP, RN, NEA-BC, FAAN** and additional speech and presentation were given by **Opeyemi Blessing, DNP, RN, CCRN, CPPS.**

- Attendance: >256 people

Office of Patient Centered Care (OPCC) Accomplishments

Fireside Chat: Nurse Builders

- **Brief:** This is the eleventh iteration of the bi-monthly series that **Natalia Cineas, DNP, RN, NEA-BC, FAAN** has an intimate chat about important topics within our Nursing System.

- The topic is **Nurse Builders**, an online certification review platform that is offered to the nursing staff.

- The guest speaker was **Opeyemi Blessing, DNP, RN, CCRN, CPPS**, Associate Director of Nursing Excellence/Research, who gave insight on how to access the online certification review platform.

- Event was held on April 16th from 3:00 – 4:00 PM

- Attendance: >271 people

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Office of Patient Centered Care (OPCC) Accomplishments

Quality/Excellence/Outcomes – Beacon Awards

- The **Memory Care Unit (MCU)** at NYC Health + Hospitals**/Coler** received a **Silver-level Beacon Award for Excellence** from AACN on March 13, 2024.
  - This is the first long-term care facility in the United States to receive a Silver Beacon Award for Memory Care by the American Association of Critical-Care Nurses (AACN).

- During the recent **National Teaching Institute and Critical Care Exposition (NTI)** annual conference held in Denver, Colorado last May 20th to 22nd, NYC Health + Hospitals was celebrated for achieving six Gold and six Silver Beacon AACN Beacon designations during the 50 years of NTI event:

NYC HEALTH+ HOSPITALS | NURSING

Office of Patient Centered Care (OPCC) Accomplishments

Quality/Excellence/Outcomes – Beacon Awards

- 71 RN staff members and nurse leaders represent the facilities during the celebration:

  - Bellevue – **MICU GOLD**
  - Coler (PAC) – **Memory Care Unit SILVER**
  - Harlem – **Burn ICU SILVER**
  - Jacobi – **Cath Lab GOLD**
  - Jacobi – **NICU SILVER**
  - Jacobi – **CCU SILVER**
  - Kings County – **MICU/CCU GOLD**
  - Kings County – **NICU SILVER**
  - Lincoln – **MICU2 SILVER**
  - Metropolitan – **NICU GOLD**
  - Queens – **ICU GOLD**
  - Woodhull – **ICU GOLD**

Office of Patient Centered Care (OPCC) Accomplishments

Quality/Excellence/Outcomes – Nursing Clinical Ladder

- There were 2,796 applications received for 2024 and **2,622 individuals** have been approved to participate in the 2024 program.

- StaffGarden – a new cloud based professional development platform for the Nursing Clinical Ladder Program was rolled out on March 29th, 2024.
  - Since its implementation, there has been a **25% increase** in the number of applicants and a **23% increase in the number of approved participants** for the Nursing Clinical Ladder Program (NLCP).
  - Currently being used by all participants and administration.

Office of Patient Centered Care (OPCC) Accomplishments

Quality/Excellence/Outcomes – Certification

- Nurse Builders, a cloud-based certification review course platform went live on March 19th, 2024. A total of **1,968 registered nurses** across the health system have accessed and actively taking certification review courses through the platform.

- Systemwide **Certified Nurses' Day virtual celebration** was held on March 28th in addition to each facility's celebration to recognized all certified nurses working in NYC Health + Hospitals.

Office of Patient Centered Care (OPCC) Accomplishments

Access to Care

Professional Shared Governance

- Completed 9 system wide reports (including 5 annual retreats) and 18 hospital wide report outs

Nurse Residency Program

- Graduated 31 cohorts (841+ graduates) to date
- 8 Active cohorts – new cohorts launched every 3 months, 4x a year
- 2002 enrolled residents to date, 2024 retention rate is 100.

RN Mentorship

- 116 trained mentors to date in LEAD Mentorship Training offered by Human Resources
- Embedded into Clinical Ladder Program as of February 2022

Office of Patient Centered Care (OPCC) Accomplishments
Culture of Safety

Emergency Department (ED) Nursing Fellowship

- The program that piloted in three facilities in May 2023 is now available systemwide to all acute care hospitals.
- Currently, there are **289 ED nurse fellows** from cohorts one to thirteen in the program.
- The next graduation is scheduled on June 11, 2024 for 41 ED fellows and will transition into the Nurse Residency Program.
- The ED Nurse Fellowship program is projecting 400 graduates for 2024-2025 schedule.

Intensive Care Unit (ICU) Nursing Fellowship

- The pilot started in April 1, 2024 for the following facilities: Harlem, Bellevue, Lincoln, South Brooklyn Health, Jacobi, and Kings County. The program is now available systemwide to all acute care hospitals and admits candidates once a month.

Thank you!

Questions

NYC HEALTH+ HOSPITALS

Medical & Professional Affairs/ Information Technology Committee Meeting
June 10, 2024

Enterprise Information Technology Services Update

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

EITS Update Agenda

- Introductions
- Focused EITS Updates
  - Epic EHR – HIT Honor Roll
  - Business & Clinical Applications Update
  - EITS Employee Recognition Program
  - IT Grants Office Development
  - Print Reduction – Going Green
- Q + A

Effective Use of H2O
Epic Honor Roll v7
HIT Prioritization

Background

- Epic offers a recognition grant-based program based on the use of proven strategies and best practices in the healthcare industry, to help organizations optimize the use of their EMR system. Customer who have met these benchmarks have improved patient outcomes, quality of care, workflow efficiency, and financial performance.

  - There are three levels 1)Cum Laude 2) Magna Cum Laude and Summa Cum Laude

Epic Honor Roll Awardees

- Total organizations eligible for Honor Roll = 385
- 175 unique organizations have achieved Honor Roll
  - Of the 175 organizations, some have achieved Honor Roll multiple times:

# of Awards	# of Organizations
Two-time achievers	36*
Three-time achievers	31
Four-time achievers	29
Five-time achievers	20
Six-time achievers	14
Seven-time achievers	0

*H+H is amongst the two-time achievers*

Epic Honor Roll Awardees

- Cleveland Clinic
- Children's Hospital of Philadelphia
- Geisinger
- Hawaii Pacific Health
- Henry Ford Health System
- Hospital for Special Surgery
- Johns Hopkins Medicine
- Michigan Medicine
- Mount Sinai Health System
- NorthShore University Health System
- Oregon Health & Science University
- Parkland

- Mass General Brigham
- Penn Medicine
- Rush University Medical Center
- SUNY Upstate Medical University
- UCSF Benioff Children's Hospital Oakland
- UCSF Health
- UW Health
- Wake Forest University Baptist Medical Center
- Yale New Haven Health System

- Effective Use of H2O is a program that aims to complete requirements to achieve **Cum Laude Honor Roll.**

- To achieve **Cum Laude Honor Roll,** H+H is focusing on completing requirements associated with components
  - Patient Experience
  - Infrastructure
  - Ease of Use for Providers
  - Enterprise Data and Analytics
  - Health Information Exchange
  - Population Health
  - Staying Current with the latest features

- Effort will be made to work with honor roll requirements of the following components to the extent relevant council endorses
  - Ease of Use for Nurses
  - Finance

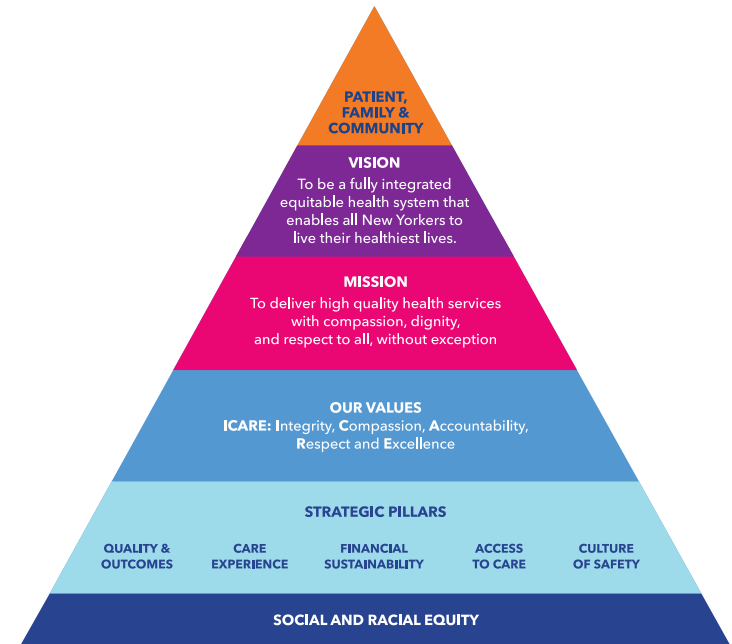Program Landscape

Honor Roll v7 as of April 30 '24
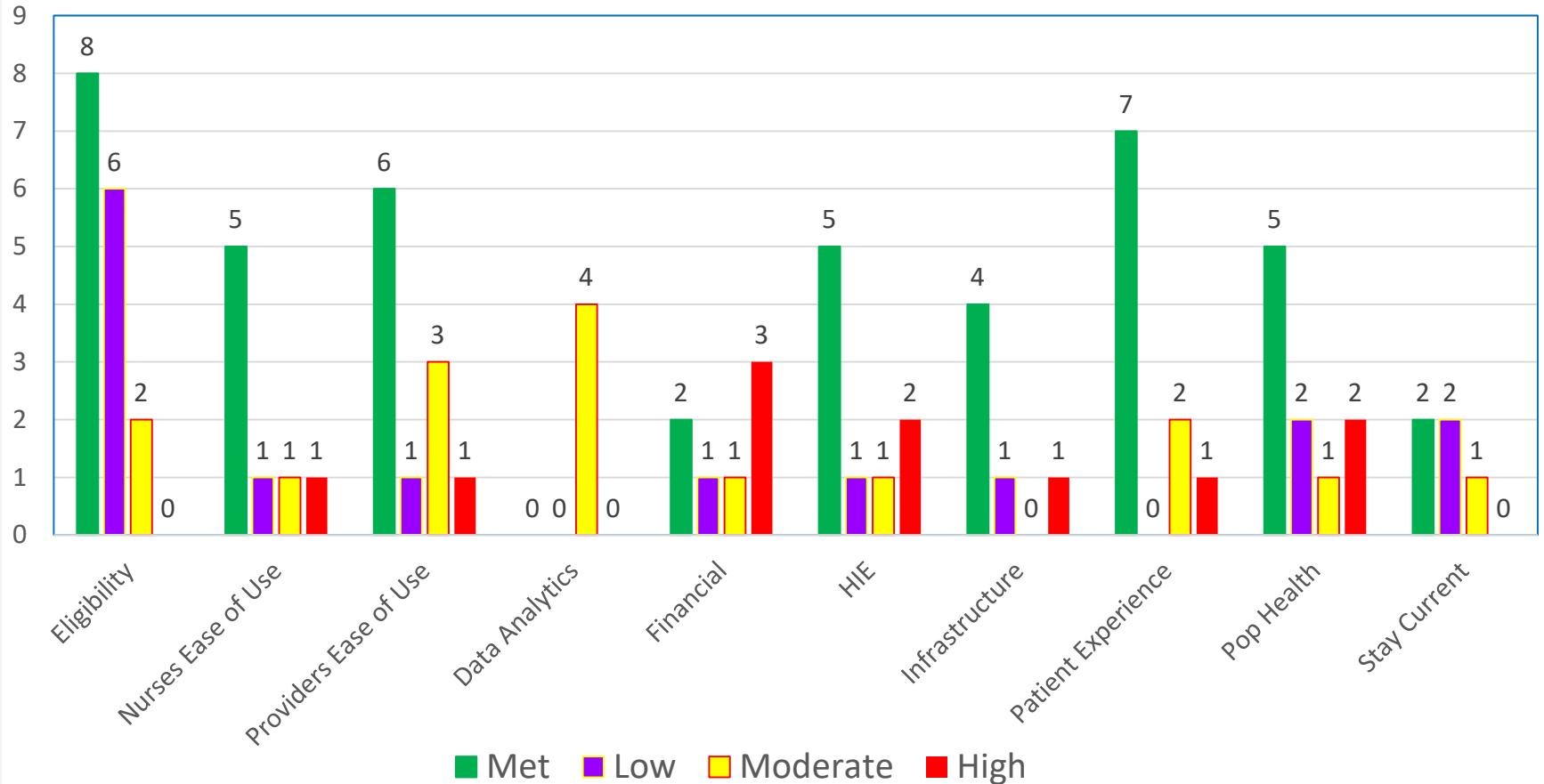
Totals: Met=44 Low=15 Moderate=16 High=11

NYC H + H Information Technology FY 2024 Goals

- **EITS Infrastructure Enhancement (Financial Sustainability/ Quality & Outcomes)**
  - Enhanced Downtime & Business Continuity Access (BCA)
- **Accelerated Digital Transformation (Quality & Outcomes/ Access to Care)**
  - Telehealth Expansion & Enhancement
  - CQI & Optimization of Patient Portal
- **Epic EHR Effective Use (Care Experience/ Quality & Outcomes / Social & Racial Equity)**
  - Expansion & enhanced utilization of Epic EHR

PATIENT, FAMILY & COMMUNITY

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

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

OUR VALUES
ICARE: Integrity, Compassion, Accountability, Respect and Excellence

STRATEGIC PILLARS

| QUALITY & OUTCOMES | CARE EXPERIENCE | FINANCIAL SUSTAINABILITY | ACCESS TO CARE | CULTURE OF SAFETY |

SOCIAL AND RACIAL EQUITY

Components	IT Owner	Business Champion
Eligibility Requirement	▪ Katherine Thayer	▪ Mike Bouton
Enterprise Data Analytics	▪ David Mancher	▪ Data Governance
Ease of Use Providers	▪ Anand Reddy	▪ Nathaniel Yao ▪ ACLC
Health Information Exchange	▪ Tatyana Dorogan	▪ Gabe Cohen ▪ CMIO Council
Infrastructure	▪ Jeff Lutz	▪ Mike Bouton ▪ Downtime Steering Committee
Patient Experience	▪ Dan Mackall	▪ Sarah Cass ▪ Kenan Katranji ▪ MyChart Steering Committee
Population Health	▪ Anand Reddy ▪ Patti Spuma	▪ Gabe Cohen / Nathaniel Yao ▪ Pop Health/ACLC
Staying Current	▪ Katherine Thayer	▪ Mike Bouton ▪ CMIO

Clinicians

- **Nursing Ease** Increase efficiency and patient safety by raising BCMA Med Admin Rate and flowsheet documentation
- **Provider Ease** Raise physician efficiency through power of **personalization**
- **Provider Ease** Growth in empowering physicians via Physician Builder & Physician Power User Program
- **Data Analytics** Timely action via metric based reporting and alerts
- **Nurse Ease** Increase nurse satisfaction by implementing Nurse Brain
- **Data Analytics** More accurate and timely decisions via predictive modeling

Patients

- **Patient Experience** Offer more patients the ability to schedule appointments directly.
- **HIE** Increase in patient authorizations on file allowing the release of their record to external healthcare organizations
- **Patient Experience** Text messaging patients to schedule appointments online or join video visits even without a MyChart account
- **Pop Health** Increase patient care and safety by integrating data across organizations
- **Patient Experience** Optimize workflows so patients receive more timely responses to medical advice questions
- **Pop Health** give patient agency over their care by allowing them to schedule overdue wellness visit

Organization

- **Infrastructure** Have BCA computers ready and available in our critical units-Infrastructure
- **Eligibility** Adopt best practices from the EPIC community of Health Systems
- **Data Analytics** Find the right information faster with approved dashboards and reports
- **Data Analytics** Better monitoring of patients with chronic conditions by leveraging decision support tools.
- **HIE** Improve continuity of care by maximizing use of Care Everywhere Referral Management to create electronic pathway for patient referrals
- **Staying Current** Latest and most innovative features to improve quality of care, productivity and user experience
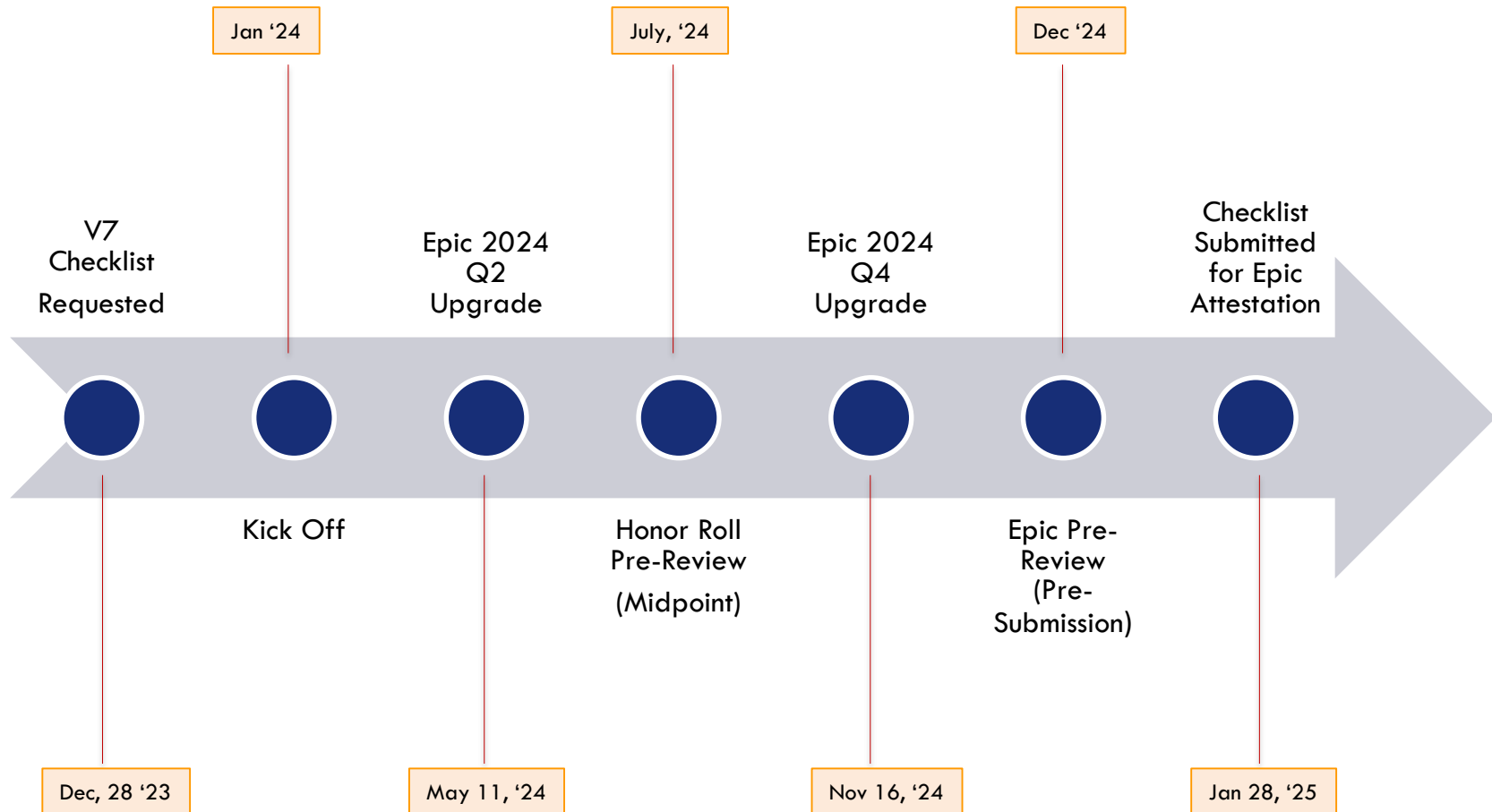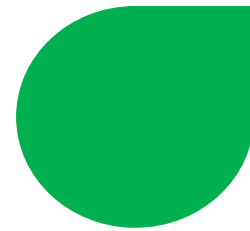
Financial achievement levels listed below.

Recognition	Cum Laude Minimum	Cum Laude Maximum	Magna Cum Laude Minimum	Magna Cum Laude Maximum	Summa Cum Laude Maximum
Components Completed	5	6	7	8	All 9
Restricted Grant %	45%	70%	65%	90%	100%
Restricted Grant $	$612, 000	$952,000	$884,000	$1,224,000	$1,360,000

EITS Clinical & Business Applications Update

- Epic Upgrade May 2024
  - Downtime Duration: 12:00AM - 12:57AM (57 min)
  - Technical Upgrade: ~40 min
  - WDE reconciliation: ~15 min
  - No critical or patient safety issues
- Epic Hello World module – Go Live May 22, 2024
- Nuvolo – Bio Medical Device Database
  - Phase I Go Live completed
- People Soft
  - Human Resources Payroll to V 46
  - Finance/ Supply Chain to V 48

Biomed Device Database – Nuvolo

Phase 1: Customized Computerized Maintenance Management System (CMMS), Work Order Management (WOM)
Preventative Maintenance (PM) and Biomed Incident Management (IM) , OT Security
Project Manager: Nicole Corbin

Summary

This project status has the Green status this month. The Nuvolo Implementation for Phase 1 is on target for the Go Live.

Accomplishments	Highlighted Risks

Phase 1a: Clinical Implementation:
  Migration of Historical Data to the Production Environment:
    The historical data from Crothall's TeamChamps Nuvolo instance was transferred to H+H's Nuvolo instance ahead of schedule in order to facilitate the transfer of a significant amount of data.
 	
  Project Milestone – Testing (UAT):
    UAT Sign Off has been successfully completed and confirmed.
    The transfer of data to the Production Environment is currently underway.
 	
  Project Milestone – H+H Nuvolo Training:
    Training needs were identified and agreed upon
    Training schedules and registrations have been finalized for all teams
    Training will start on Tuesday, March 12th
 	
  Project Milestone – Cutover:
    Cutover Plan has been presented and is under review
 	
Phase 1b: OT (Operations Technology) Security:
    Asimily Integration – UAT on the Asimily Workflow is complete. This integration is a Cyber Security Feature.
	RSK1568: This is a Schedule Risk related to the Project Milestone dates that were recast and presented at the HIT Committee Meeting in January 2024.
	Mitigation: The project manager will keep close watch and work with the stakeholders to recast new dates, if necessary. In the event of a slippage, the project manager will escalate to Sr. Leadership.

UPCOMING MILESTONES	End Date	Status	Notes
Design/Build	1/26/2024		
Testing	3/06/24		
Training	3/22/2024		
Go-Live Phase 1 – Clinical and OT Security	3/25/2024		

The EITS Employee Excellence Awards recognizes outstanding EITS Employees whose work performance and actions not only support NYC Health + Hospital's Mission and Values, but also continuously demonstrates and promotes professionalism in all aspects of their role within EITS.

The awards program will consist of 10 awardees, one from each award category, that an employee within EITS can be nominated for.

After the nomination process, the EITS Employee Recognition Committee will work with Human Resources to identify EITS Excellence Awardees. All awardees will be celebrated at a EITS-wide event.

EITS Grants Office: 2024 Update

- Developing EITS Grant Office for seeking opportunities, submission and tracking. Current Submissions:
- **FEMA** – Cybersecurity only
- **NYSDOH -**

Proposed **HeA³L-IT Project** offers a comprehensive, patient-centered approach that supports improving healthcare access and outcomes for patients. By integrating and enhancing interoperability, network infrastructure, AI analytics, and personalized alert systems, the project overcomes traditional barriers to healthcare access. It empowers the NYC H+H patient population, particularly those in underserved communities, with the tools and support necessary for better health management and outcomes.

- **Enhanced Interoperability and Master Data Management (MDM)**
- **Wireless, Cellular and Alert Infrastructure**
- **Implementation of a Healthcare Artificial Intelligence (AI) Platform**

Going Green:
Sustainability In Printing

Achievements & Opportunities

- Printing reduction achievements over the past seven years include:
  - Reduced printing by half through identifying easy wins and improving our *technology*
    - Condensing tech footprint to fewer machines
    - Redirecting print to more efficient machines
    - Over 30% of printers - from over 26,000 to currently 17,507.
    - 40% few models to manage (from 392 to 234)
    - 58% overall print volume reduction (from 480 million down to 200 million pages)
    - 50% reduction in color print volume (from 48 million to 23.6 million pages)
    - Increase in network connected printers from 35% to 90%

- Establish a five year print reduction plan focused on *optimizing workflow, developing new sustainable mindset & behaviors*
  - Metric driven, phased campaign
  - Mapping and designing workflows that allow for strategic printing
  - Support training and QA Rounding
  - Leveraging technology rather than printing
  - Rethinking how, when, and where to print

Thank You!

MetroPlusHealth

NYC Health + Hospitals

Medical & Professional Affairs/Information Technology Committee Report

June 10th, 2024

Dr. Talya Schwartz, President & CEO

New York State Budget

FY25 State Budget | Health and Mental Hygiene (HMH) Bill

Medicaid Managed Care Reforms

- ***Quality Pool Funding. Both*** Mainstream Managed Care (MMC) Quality pool and the Managed Long-Term Care (MLTC) Quality pool were reduced by more than half.

- ***Across-the-Board (ATB) Plan Rate Reduction.*** Removes the 1% ATB fee-for-service rate increase for payments to plans, effectively reducing managed care payments by 1%.

- ***New MCO Tax.*** Imposing the tax as an assessment on plans offering Medicaid managed care, Child Health Plus, Essential Plan, Qualified Health Plan, and other commercial coverage.

- Establishes a "healthcare stability fund" for tax-related revenue and stipulates uses for the fund, among them funding increases to Medicaid managed care plan rates to account for the assessment, the non-federal share of QIP funding, and reimbursement to the general fund for Medicaid-related expenditures.

FY25 State Budget |
Long-Term Care-Specific Proposals

- ***Medicaid Coverage of Dental Benefits for Dual-Eligible Special Needs Plan (DSNP) Enrollees.*** Requires D-SNP plans to cover Medicaid dental benefits as Medicare supplemental benefits.

- ***Single Statewide Fiscal Intermediary (FI).*** Establishes a new statewide FI for the Consumer Directed Personal Assistance Program (CDPAP), selected through a procurement process.

- Plans, local social service districts, and other appropriate long-term service programs offering CDPAS will be required to contract with the Statewide FI.
  - ➢ Effective April 1st, 2025, no entities other than the Statewide FI and its subcontractors will be allowed to provide FI services.

- ***Plan Penalty for Electronic Visit Verification (EVV) Non-Compliance.*** The final budget institutes a plan penalty for Electronic Visit Verification non-compliance.

FY25 State Budget | Coverage and Eligibility

- ***Continuous Medicaid and Child Health Plus (CHP) Eligibility for Children 0-6.*** This provision allows children under age 6 who are determined eligible for these programs to remain eligible and enrolled in coverage through the last day of the month in which they reach age 6, without having their eligibility redetermined on an annual basis. This provision would take effect January 1, 2025.

- ***Essential Plan (EP) Coverage of Long-Term Supports and Services (LTSS).*** Extends the authority by one year (to December 31st, 2025) for the State to implement coverage of LTSS for individuals who are between 0-138% of the FPL and are not eligible for Medicaid due to immigration status; also proposes to delay implementation of LTSS in the Essential Plan for all individuals 0-200% FPL for one year, to January 1st, 2026.

- ***Authorization of New Qualified Health Plan (QHP) Subsidies.*** New subsidies to assist with the payment of premiums, cost-sharing, or both for individuals who are eligible to purchase a QHP through the Marketplace. We understand that these subsidies will be used to eliminate cost-sharing for care related to Type II Diabetes for QHP members.

Food Programs

MetroPlusHealth Offers Medically Tailored Meals

- **The only Plan our size to offer MTM as a Medicaid benefit!**

- **Medicaid** members can receive up to 2 meals/day x 7 days/week at 6-month intervals or 2 meals/day (lunch and dinner) x 5 days/week for up to 90 days based on criteria.

- **Medicare Advantage and Ultracare** members are eligible to receive 20 pre-made meals for 30 days upon discharge from the hospital.

- **Over 1500 members received Medically Tailored Meals (MTM) from God's Love We Deliver.**

MTM Programs | Member Feedback

- 95% members surveyed expressed satisfaction with MTM program.

- 94% members surveyed felt that meals assist them in managing their disease.

Members in MTM program receive a birthday cake and card on their special day. For many, it is the only formal acknowledgement of their birthday. Members expressed gratitude for this "kind gesture."

Pxy Health | A Peer Mentor Program for Members Living with Diabetes

PYX Health | Peer Mentor Program for Members with Diabetes

- PyxHealth provides 1:1 peer mentor support to members living with diabetes for up to 6 months.
- Members are matched with peers who share lived experience with the condition, similar demographics.
- Peers outreach members and assess/address social, medical and health educational needs.
- Peers address social needs identified and educate/support members.
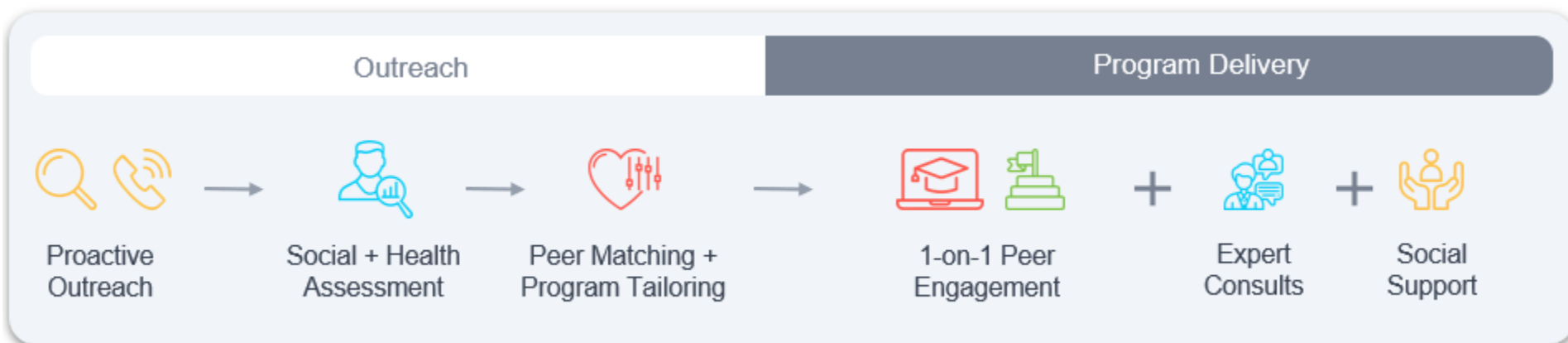
PXY Health | Engagement in 2023

- In 2023 1,595 members were enrolled in peer mentoring.

- **Top challenges faced by enrolled members:**

  - Healthy eating

  - Knowledge of condition

  - Housing

  - Food insecurity

  - Appointments

  - Emotional health

PXY Health | Outcomes in 2023

- Overall, 70% of enrolled members showed an improvement in their diabetes control (i.e., reduction in their hemoglobin A1c, or A1c, a key metric for diabetes care).

  - **In 2023, Average A1c Reduction:** 1.3%; a clinically significant reduction!

  - Since 2020, over 500 members had at least a 2% or greater reduction in their A1c (marked improvement that impacts morbidity and mortality).

- Among the 1595 enrolled members (2023), many social determinants of health were addressed through referrals to community-based organizations, including:

  - 28% referred for food insecurity.

  - 7%referred for housing issues (most for homelessness).

MetroPlusHealth 2024 Spring Campaign Update

MetroPlusHealth 2024 Spring Campaign

Preliminary Results

May 2024

Goals & Opportunity

- Over the past two years, our **Brand Awareness and Consideration** have been trending upward. Now, our focus is shifting towards driving from **Consideration to Purchase**.

- Thanks to the waiver application, the **Essential Plan (EP)** is now accessible to a broader audience from 200% FPL to 250% FPL.

- **Challenge:** Develop a **Spring brand campaign to spread the word** about the increased eligibility for the Essential Plan and drive growth.

NYC Health + Hospitals

Single, making up to $37,650 a year? Essential health care for $0!
Metro Plus Health
metroplus.org

Couple, making up to $51,100 a year? Essential health care for $0!
Metro Plus Health
metroplus.org

Family of 4, making up to $78,000 a year? Essential health care for $0!
Metro Plus Health
metroplus.org

$0 vision. Yeah, you saw that right!
Metro Plus Health
metroplus.org

$0 dental. Really!
Metro Plus Health

Unbelievably good news: You may now qualify for our $0 health care!
Metro Plus Health
Get covered today. Visit us at metroplus.org

Unbelievably good news: You may now qualify for our $0 health care!
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Mount Sinai
Plus
NYU Langone Health
Plus
Labcorp
Plus
Hospital for Special Surgery
Plus
Montefiore
Plus
CityMD
Plus
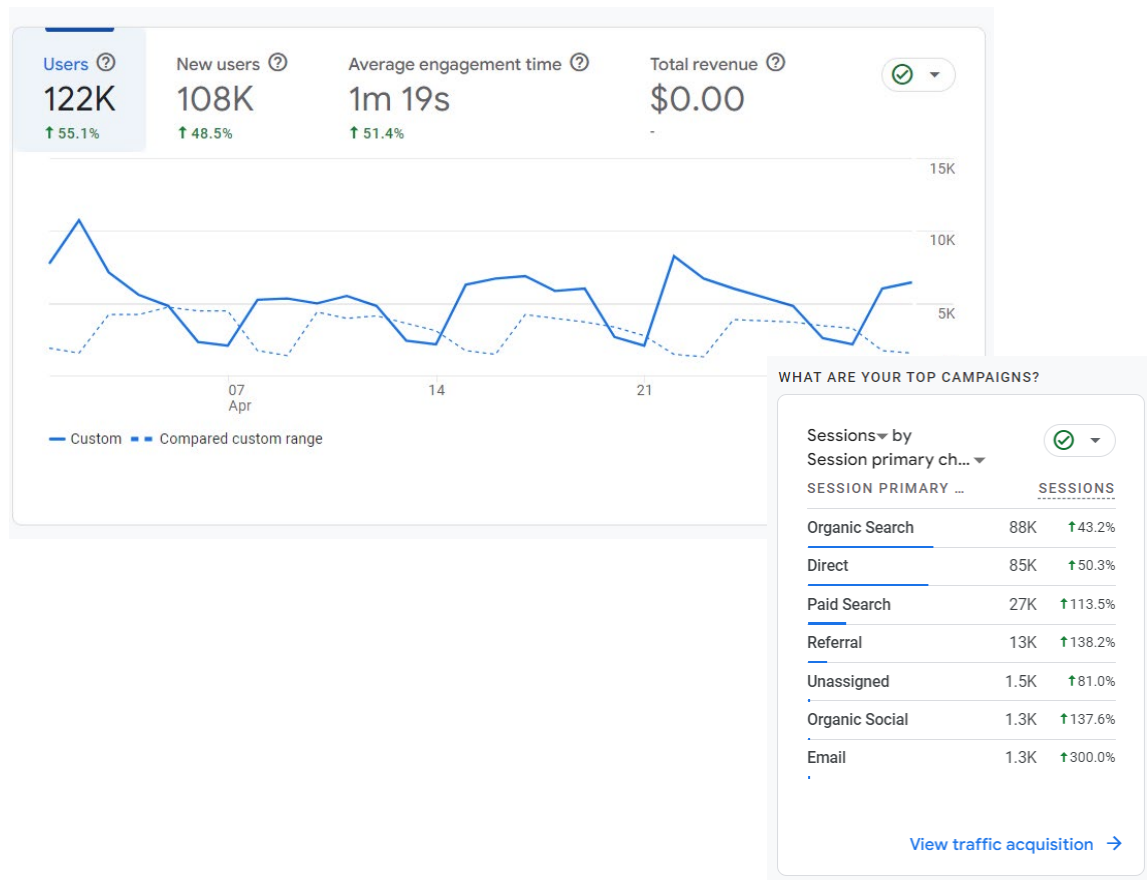NYC Health + Hospitals
Plus
Quest Diagnostics
Metro Plus Health
It's unbelievably easy to find a provider near you.
metroplus.org

More Web Visitors With Visitors Typing Our Brand | On Track to Break 1.5M

Users ⑦	New users ⑦	Average engagement time ⑦	Total revenue ⑦
122K	108K	1m 19s	$0.00
↑ 55.1%	↑ 48.5%	↑ 51.4%	-

WHAT ARE YOUR TOP CAMPAIGNS?

Sessions ▾ by
Session primary ch… ▾

SESSION PRIMARY …	SESSIONS	
Organic Search	88K	↑43.2%
Direct	85K	↑50.3%
Paid Search	27K	↑113.5%
Referral	13K	↑138.2%
Unassigned	1.5K	↑81.0%
Organic Social	1.3K	↑137.6%
Email	1.3K	↑300.0%

View traffic acquisition →

More new visitors compared to same time last year.

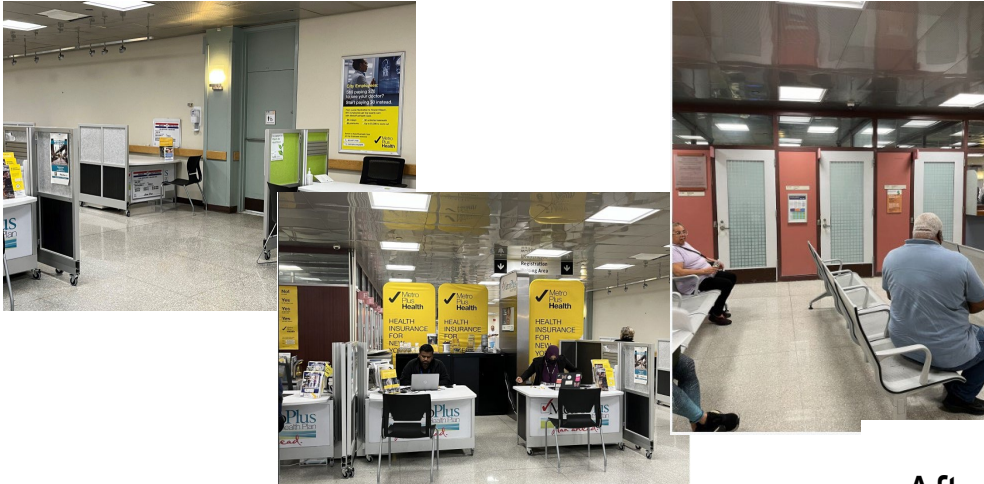Most are coming by searching our name or typing directly!

- New Visitors: ↑ 48.5%
- Organic Search: ↑ 43.2%
- Direct Web Type: ↑ 50.3%

Elmhurst Collaboration

Elmhurst Hospital Lobby Facelift: Driving Engagement, Enrollment & Excitement

- Elmhurst Hospital serves over 24,000 members.

- As part of an integrated health system, we aimed to enhance our visibility within the facility. Our mission: To enroll new members and provide top-notch service to existing ones.

- In collaboration with Elmhurst's leadership we revamped the space that halts foot traffic in its tracks—a place where patients pause, learn, and enroll with MetroPlusHealth. We've also revamped other areas of the hospital to align seamlessly with our fresh brand.

- This is the first overhaul and others to follow.

Before

After