NYC
HEALTH+
HOSPITALS

AGENDA

MEDICAL AND PROFESSIONAL AFFAIRS
AND INFORMATION TECHNOLOGY COMMITTEE

Date: <u>September 9th, 2024</u>
Time: <u>9:00 AM</u>
Location: <u>50 Water St. New York, NY</u>
<u>10004 Room 1701</u>

BOARD OF DIRECTORS

CALL TO ORDER   **DR. CALAMIA**

ADOPTION OF MINUTES – June 10th, 2024   **DR. CALAMIA**

ACTION ITEMS:

1) Authorizing the New York City Health and Hospitals Corporation (the   **DR. WEI**
"System") to an execute agreement with Press Ganey Associates, LLC for
the provision of Care Experience Surveys, including patient
experience, employee engagement, nursing excellence, and healthcare
consumerism, on behalf of the System for an initial period of three-years
and two one-year renewal options, exercisable at the discretion of the
System, for an amount not to exceed $12,380,433 over the potential five-
year term.

Vendex: Approved
EEO: Pending

                                                                     DR. ALLEN

CHIEF MEDICAL OFFICER REPORT
                                                                     DR. CINEAS

CHIEF NURSE EXECUTIVE REPORT
                                                                     DR. MENDEZ

CHIEF INFORMATION OFFICER REPORT
                                                                     DR. SCHWARTZ

METROPLUS HEALTH PLAN
                                                                     DR. CALAMIA

OLD BUSINESS
                                                                     DR. CALAMIA

NEW BUSINESS
                                                                     DR. CALAMIA

ADJOURNMENT

**Medical and Professional Affairs / Information Technology Committee–
June 10th, 2024**
As Reported by Dr. Vincent Calamia
Committee Members Present- Dr. Mitchell Katz, Sally Hernandez-Piñero

Dr. Vincent Calamia, Chair of the committee, called the meeting to order
Calamia at 9:05AM. On motion made and seconded, the Committee adopted the
minutes of the April 8th, 2024 Medical and Professional Affairs/Information
Technology Committee.

CHIEF MEDICAL OFFICER REPORT
Machelle Allen MD, System Chief Medical Officer/Sr. Vice President of Medical
and Professionals Affairs, and Sewit Teckie MD, System Chief of Radiation
Oncology, highlighted the following:

Committed to Cancer Services
Dr. Teckie reconfirmed the System commitment to cancer services. Our patients
want to be treated in their local communities and is integrated with medical
care, starting with screening in primary care. We are capable of treating
the vast majority of cancers. We are committed to health equity and access.

The majority of our sites do have access to cancer care and for those
specialty services such as radiation oncology linear accelerator we do refer
internally, as needed.
Our System has been able to acquire new technology for our cancer patients.
Starting with a going live at Elmhurst in 2 weeks of a single fraction brain
radio surgery, spine radio surgery. Queens and King will also receive a new
linear accelerator next year.

In addition to having new technology we are supporting the practices with a
business plan that has been built and deployed to support Kings County,
Lincoln, and Bellevue, with a team-based staffing model to make sure that
the cancer patients have a team taking care of them and are getting the full
standard of care.

Dr. Teckie, shard a sample of the team-based staffing model to show that a
physician and advance practice provider, and a PCR are working together so
that the physician can focus on the highest impact physician requiring work
for a cancer doctor, which is making the diagnosis, staging, and determining
the right therapy.

Dr. Teckie highlighted some of what has been achieved in the last couple of
years.
- They started monthly cancer education series. This is important, not
  all of our doctors are affiliated with an academic site that has a
  strong cancer program.
- There are monthly ground rounds, inviting lectures from around the
  county to speak on cancer topics.
- The staff is being trained on the new technology and the new machines.
- A Cancer care team was created for Kings County and are expanding to
  other Radiology Oncology practices.

- They are now paperless, anyone from any site can access a patient record.

Dr. Teckie shared her principles of cancer services at Health + Hospitals.
- We should be collaborative amongst ours sites. The doesn't have to be the same technology at each hospital, but we need to be able to share and have access to it.
- We should be able to provide the care safely. We want to continuously improve and provide the patient care is excellent.
- Our patients have to feel taken care of as a whole person when they are going through their cancer journey. We are committed to providing timely, evidence-based, standard-of-care treatment to our patients with the support of Dr. Machelle Allen.

Question raised by the Boards: *How was it determined which site the service would be located, and why? Dr Teckie response; Advocacy of site for updates of outdated machines. The machines have been there since 1990 in some case. These plans were put into motion in the eighties and the machines were there and have never been updated.*

Board mentioned: *Bellevue has the highest number of cancer patients. Dr. Teckie response; yes, they do and we are starting to explore what it would look like if we had radiology oncology on-site instead of referring them outside.*

Board member raised a question; what is the cost of a linear accelerator? Dr. Teckie response, the full package of is about $4 to $5 million, the linear itself is about $3 million, and the tech, IT and the EMR that is required to run it is about $1 million. Then there is the CT simulator machine which is a special type of CT scanner, that is required for setting up the patient, that is about another million dollars. Those are the hard cost, then there is operations cost, and space cost, it is being looked into.

A Board member mentioned: *you always try to be cost effective as possible and not duplicate. If the linear is on-site but at a different institute. May it can jointly be looked at to collaborate, unless their capacity is being maxed out. In the future maybe, that can be looked at on how this can be done. Dr. Allen mentioned before Dr. Teckie arrived, each one of our hospitals were doing their own thing. In the two years Dr. Teckie has been thinking enterprise-wide as well as regionally and her plan for the new linear accelerator is regional. She established a surgical oncology council and a cancer council. The surgical oncology is going to be regionalized, that conversation has just started. Dr. Allen commended Dr. Teckie on her accomplishments, she is transforming how we deliver services to our patients. She is on the editorial board of one of the oncology journals and she will be giving the plenary lecture to the National Medical Association in August. Dr. Allen would like for Dr. Teckie to practice that with our CMOs and cabinet.*

The Board commended *Dr. Teckie on her accomplishments in the work she is doing.*
The Board raised the question; do we have cancer research? Dr. Teckie responded; we partner with other institutions. We have a strong relationship

with Memorial Sloan Kettering, there is a meeting quarterly to discuss what we are doing and how we can expand. We would like to expand into Therapeutic *cancer trails, not just diagnostic. Therapeutic trails require a different kind of infrastructure, a pharmacy infrastructure to be able to prepare the chemotherapy on-site. We submitted a grant to get funding to establish that. You would need a chemo pharmacy in the region and then be able to disseminate the research drug.*

We are approached by most of the partners because of our populations, the opportunity is great. We have to figure out how to use our resources to provide our patients access to the best care. On a micro level our doctors do refer to as a need to clinical trials all the time. The Board commended Dr. Teckie on her work.

SYSTEM CHIEF NURSE EXECUTIVE REPORT
Albert Belaro, representing Dr. Natalia Cineas, System Chief Nurse Executive, Office of Patient Center Care, provided the following highlights –

The Black Angels-Special Recognition Event held at Harlem Hospital. The Black Angels are Pioneering 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. 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 the Black Angels: untold story of the nurses who helped cure Tuberculosis was distributed. There were 50 to 100 people in attendance for the event.

The certified nursed day celebration was held March 28th, the guest speaker was Katie Boston-Leary, from the American Nurse Association. She talked about the values and benefits of the certification in our journey to Magnet recognition.

Fireside chats are continuing, the latest focus on Nurse builders. This is free software available to staff. It gives online certification reviews for staff that are interested, that includes frontline and leadership staff. This is in support of the quest for increasing nurse certifications across the System.

Coler has received the Silver-level Beacon Award for Excellence from the American Association of Critical-Care. This honor was recognized at the National Teaching Institute, which was held in May where a dozen other beacon awards were celebrated.

The clinical ladder program is growing. There are 2,622 individuals approved to participate in the 2024 program. What's new this year is a platform that streamlines the approval and application of clinical ladder, which has supported the increasing numbers moving to the end of the year.

Professional shared governance; completion of 9 system-wide reports, including 5 annual retreats, and 18 hospital wide reports released. The nurse residency program has reached the milestone of 2000 enrollments citywide.

There is a residency program hosted by the Mayor's Office. Our program is about 30% participation Citywide. Thirty-one cohorts have graduated to date. There are 8 cohorts active. Every three months, four times a year, a new cohort is launched. The mentorship program is being relaunched. This program is aimed at keeping talent in our System.

Emergency Department and Intensive Care Unit nursing fellowship has begun. This is a nurse residency program that has been successful. The nurse fellowship program and the critical care fellowship program are different from the nurse residency program, these are specialized to practice programs that support nurses after orientation. Orientation literature is not enough, it is supplemented by residency and fellowships that engage our nursed to stay on for more than 12 months and beyond.

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 presents the updates for EITS, which highlighted upgrades to business and clinical applications, including an epic upgrade in May with minimal downtime. She also mentions the launch of Nuvolo, a biomedical device software, and the inaugural EITS Employee Recognition Award this coming September. EITS is in the process of building out a "Grants Office" for the department and the launch of the "Going Green" initiative.

Dr. Bouton continued the update by sharing a success story of reducing downtime from 45 minutes to 30 minutes, with a focus on best practices from other institutions.

He also highlights the success of Epic's capability and billing insurance, mentioning their Honor Roll recognition and explains that the Honor Roll project is not just about IT infrastructure, but also about patient safety and experience. Dr. Bouton points out the dynamic nature of the metrics and the need to continuously adapt to changing requirements. By improving patient experience through personalized workspaces, online scheduling, and data analytics.

Dr. Katz acknowledged the state of Epic changed drastically over the past 6 and a half years and was impressed that the System made EPIC Honor Roll 2 years in a row. Dr. Allen also made note that the radiology enterprise would not have been possible without the infrastructure support from EITS.

Dr. Bouton discusses personalization of providers' workspaces, making it easier for emergency medicine doctors to access important information quickly. The program aims to provide online scheduling for patients, improve call center efficiency, and standardize metrics across the System. He states that patients with appointment-making capability with HelloWorld/Epic SMS portal improves access rate and reduces no-show rate. As part of the presentation, Dr. Bouton references EITS strategic pillars of financial stability, quality and outcomes. Aside from the recognition from Epic, participations in the Honor Roll is tied to the System's priorities.

Dr. Bouton discuss challenges with appointment reminders, personalization, and provider specific settings in healthcare systems. Part of the challenges includes the copy-and-paste functionality within electronic health records and changing the culture within medicine.

Dr. Katz made an acknowledgment of Dr. Mendez return to nurse practitioner as part of the Employee Health Department on a part-time basis.

Dr. Katz discusses his concerns of the use of copy and paste in medical notes, with Dr. Bouton agreeing that it is unnecessary to copy and paste information that is already in the notes. He explains that while the practice of copying and pasting information is common in the U.S., it is not necessary and can lead to errors. Epic will be implementing a feature called Copy Forward to address the issue. Although there are efforts being made at other institutions, minimal success has been made to minimize Copy & Paste. Dr. Calamia ended the discussion in agreement that there is a need for education and shift in culture and no further questions from the Board.

METROPLUS HEALTH PLAN, INC.
Talya Schwartz, MD, President and CEO, MetroPlus Health Plan, presented to the committee, a full report is included in the materials, with the following highlights –

Dr. Schwartz provide an update on the State budget that has direct impact in the health insurance industry. She started with the Quality pool funding, the majority of the funding goes to the providers and supports the infrastructure on the provider side to comply and improve the quality measures. The quality fund has been significantly cut by half of what it was originally. In addition, across the board, there was a plan rate reduction of 1%, which impacts the bottom line for Medicaid and for plans that are in risk arrangement with providers.

The new MCO Tax, is to pull in some of the Federal funds to New York State that would apply to Medicaid, Child Health Plus, Essential Plan, and Qualified Health Plan as well as commercial coverage. Other States are also using the MCO Tax, it is also used as a stability fund. Funds are rerouted into the quality pool, if the MCO tax require CMS approval. There are multiple steps until it comes to fruition. If it does come to fruition, it is important and we are in support to make sure it will fund the stabilization fund.

Questioned raised by the Board; has it been approved in other States? Dr. Schwartz replied, yes it has been approved in other states that have tried it.

Fiscal Intermediary, is a huge shift in the industry. There are approximately 600, fiscal intermediaries in New York State. They are the operational financial arm of CDPAS, the State is looking for a way to cut significant expenses in the personal care and long-term care. They quote 1200% increase spent in long-term care. The State is curtailing some of the spend from 600 to one with some subcontractors. They will determine the payment that will be going to agencies. Right now there is variabilities between the different plans with this shift. There is going to be one rate that is funded by the State. In this situation the plans will become a pass through, they will be

passing the funds from the State to the selected financial intermediary. The plans will administer the electronic visit verification, that is to prevent fraud and abuse.

Continuous Medicaid and Child Health Plus, eligibility for children zero to six currently parents of these children have to recertify every year, if the financial situation of the family remains the same they do not need to recertify. From our experience we are losing approximately 15% to 20% of membership because of the lack of successful recertifications.

On the Essential plan, the long-term support services, some of the services are available now, and some depend on the FPL, will potentially become available January 2026.

Authorization for new qualified health plans subsidy; in April EP eligibility increased from 200% to 2350%. What this means is a subset of the population that was sitting in QHP now became eligible for free health insurance. The remaining individuals in QHP and other plans are now expected to have higher expenses with this shift. The State is trying to compensate for this. There are additional eliminations of out-of-pocket for this population specifically related to type 2 diabetes treatment. If we offer more allowances for paying of out-of-pockets, what is going to happen to the premium.

There is an attempt to expand the subsides. We have seen what the plans have submitted to DFS, not what was approved, only what was submitted. On average for the New York State there is going to be an increase of 16% in premium and 24% to 25% for QHP, this is high, the subsidies are necessary.

MetroPlus offers medically tailored meals. There are 3 different food programs. The medical tailored meals are part of the Medicaid benefit package for eligible individuals. There are approximately 1,500 members who receive the medically tailored meals, this is in collaboration with the vendor, Gods love We Deliver. Ninety five percent of the members who were surveyed expressed satisfaction with the program. Ninety four percent of the members felt that the meals assisted them with managing their disease. The program has been in place for 2 years. Measuring of the financial impact has not been done yet. The analytical impact will be run and brought back to the Committee.

There is a peer to peer mentor program for members who live with diabetes. An independent vendor did the analysis on this program. They looked at the data to see whether the program is effective. Members that are living with controlled diabetes and uncontrolled. The members work with there peers on other issues that impact them not, only diabetes. From this program, 70% of enrolled members showed improvement with their diabetes control, which resulted in a reduction in their A1C. In 2023, the averaged A1C reduction was 1.3%, since 2020 over 500 members had at least a 2% or greater reduction in there A1C.

Among almost 1600 members that were enrolled in 2023, many social determinants of health were identified and addressed, 28% referred for food insecurity, and 7% were referred for housing issues, (most for homelessness.)

The 2024 spring campaign is to bring brand awareness. The campaigned was increased when the EP eligibility went from 200% to 250%, to capture those additional individuals. The goal is for people to go to the website, look at options, and enroll. Since the campaign was launched, there is was almost a 50% increase to the new visitor's site. The organic search is up 40%, and they are seeing a significant increase into the ACD line, where there are the live sales reps.

There is an incredible collaboration with Elmhurst. Elmhurst have over 24,000 members. A lot of the enrollment is happening in the hallways of the hospitals. Since the entire branding has changed, the space where the staff engage with the members, has been update. Lincoln is another hospital that has agreed to have space worked on as well. As other hospitals are interested, it will continue to be done throughout the System.

Questioned raised by the Board*; CDPAP program is where individuals are authorized to provide their own care, how are they selects? Dr. Schwartz responded; The member selects whoever they want, it can be a family member or a friend, whoever they are comfortable with. The point of the CDPAP was a lot of people who needed assistance with daily living activities who did not feel comfortable with a stranger taking care of them, and they were refusing care. How does the electronic verification work? It is to check in that you are at the location that you are supposed to be. This was implemented because there were circumstances where the services were not provided and the fees were paid.*

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

RESOLUTION

Authorizing the New York City Health and Hospitals Corporation (the "System") to execute an agreement with Press Ganey Associates, LLC for the provision of Care Experience Surveys, including patient experience, employee engagement, nursing excellence, and healthcare consumerism, on behalf of the System for an initial period of three-years and two one-year renewal options, exercisable at the discretion of the System, for an amount not to exceed $12,380,433 over the potential five-year term.

WHEREAS, Care Experience Surveys support the System by fulfilling public reporting and mandated regulatory requirements as well as providing expertise and resources that would be cost prohibitive for NYC Health + Hospitals to deploy; and

WHEREAS, the current three-year agreement with two optional one-year renewals began on July 1, 2019 and expired on June, 30, 2024. A best interest extension, which expires on November 30, 2024, was executed in order to complete the procurement process and to finalize the new agreement; and

WHEREAS, the Request for Proposals was released on February 16, 2024 through its Supply Chain Services unit, followed by a pre-proposal conference, attended by sixteen vendors; and

WHEREAS, of the sixteen vendors that attended the pre-proposal conference, seven vendors submitted proposals; and

WHEREAS, in conformance with its procurement operating procedure, the System received and evaluated proposals from seven vendors and evaluated such proposals among a diverse evaluation committee; and

WHEREAS, Press Ganey Associates, LLC was selected for contract award; and

WHEREAS, the Senior Vice President, Chief Quality Officer will be responsible for the administration of the proposed agreements.

NOW THEREFORE, be it

RESOLVED, that the New York City Health and Hospitals Corporation (the "**System**") be and hereby is authorized to an execute agreement with Press Ganey Associates, LLC for the provision of Care Experience Surveys, including patient experience, employee engagement, nursing excellence, and healthcare consumerism, on behalf of the System for an initial period of three-years and two one-year renewal options, exercisable at the discretion of the System, for an amount not to exceed $12,380,433 over the potential five-year term.

EXECUTIVE SUMMARY
RESOLUTION TO AUTHORIZE CONTRACT
WITH
PRESS GANEY ASSOCIATES, LLC.

OVERVIEW The purpose of these agreements is to provide a Care Survey Experience.

PROCUREMENT The System undertook an RFP to procure vendors to provide Care Survey Experience Services. including patient experience, employee engagement, nursing excellence, and healthcare consumerism. Seven vendors provided proposals. After evaluation, Press Ganey Associates, LLC was selected to provide services.

NEED Care Experience Surveys support NYC Health + Hospitals' by fulfilling public reporting and mandated regulatory requirements as well as providing expertise and resources that would be cost prohibitive for NYC Health + Hospitals to deploy internally.

TERMS The total not-to-exceed cost for the five-year contract is $12,380,433.

MWBE A waiver has been approved for this Agreement consistent with the System's Vendor Diversity Policy regarding self-performance..

To: Colicia Hercules
           Chief of Staff, Office of the Chair

From: Irmali Rivera-Bazan
           Associate Counsel
           Office of Legal Affairs

Re: Vendor Responsibility, EEO and MWBE status for Board review of contract

Contract: Care Experience

Date: August 16, 2024

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

Vendor Name	**Vendor Responsibility**	**EEO**	**MWBE**
Press Ganey Associates, LLC	Approved	Pending	Waiver

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.

Care Experience
Application to Enter into Contract -
- Press Ganey Associates, LLC
Medical and Professional Affairs/
Information Technology Committee
September 9, 2024

Jeremy Segall, MA, RDT, LCAT, FPCC
Assistant Vice President, Quality and Safety
Komal Lodaria, MA, FPCC
Senior Director, Quality and Safety

➢ Authorizing the New York City Health and Hospitals Corporation (the "System") to execute an agreement with Press Ganey Associates, LLC for the provision of Care Experience Surveys, including patient experience, employee engagement, nursing excellence, and healthcare consumerism, on behalf of the System for an initial period of three-years and two one-year renewal options, exercisable at the discretion of the System, for an amount not to exceed $12,380,433 over the potential five-year term.

Background / Current State

➤ The scope of this project is to seek a vendor for the health system's patient experience surveying, employee engagement and safety culture surveying, nursing excellence, and healthcare consumerism solutions and services

- These services are needed to fulfill public reporting and regulatory requirements such as through CMS Star Ratings, hospital-based value-based purchasing, Leapfrog, Excellence in Person-Centered Care, Pathway to Excellence, Beacon, and Magnet programs, among others
- The original contract was inclusive of two scopes of work: patient experience and employee engagement. Two additional scopes were added through contract amendment because of system priorities: nursing excellence and healthcare consumerism

➤ Initiating the RFP process allowed us to:

- Increase cost-savings by combining multiple contracts into one streamlined procurement with all scopes of work
- Renegotiate the terms of a new contract with the existing vendor, and/or
- Leverage better pricing from a single vendor
- Seek new vendor partnerships, products and service offerings to effectively meet our health system's needs and enhance the human experience strategy

Background / Current State

➢ Press Ganey Associates was procured through an RFP and received a 3-year service agreement, with two 1-year extensions, which expired on June 30, 2024

- The total spend for the life of this contract was $10,342,351
- A five-month Best Interest Extension, with an expected spend of $833,333, has been executed through November 30, 2024, in order for the RFP process, internal approvals, and the contracting process to be complete (since the current contract had expired this extension was approved by Management consistent with OP 100-05).
- The total spend for the life of the current agreement and best interest extension is $11,175,684

➢ Over the last five years, our evolving partnership with Press Ganey has allowed

for additional opportunities to meet the needs of our workforce and community. We experienced improved collaboration when tailoring products and services, and gained better access to evidence-based improvement planning and best practice application tools and resources

Procurement

➢ Minimum criteria:
  ➢ 5 years in business
  ➢ Similar experience in the subject matter areas outlined
  ➢ Currently servicing other large Integrated Delivery Network (IDN)

➢ Evaluation Committee:
  ➢ Senior Director, Care Experience
  ➢ Senior Director, Nursing Excellence/Research
  ➢ Care Experience Officer, Gotham Health
  ➢ Chief Quality Officer, Post-Acute Care
  ➢ Chief Strategy Officer, Community Care
  ➢ Director, Value and Safety
  ➢ Senior AVP, Human Resources
  ➢ AVP, Care Experience + Workforce Wellness
  ➢ Chief Experience Officer, Elmhurst
  ➢ Senior Director, EITS
  ➢ Asst. Director - Communications + Marketing
  ➢ AVP, Data and Analytics
  ➢ Director, Quality and Safety

Scoring Criteria

- ➢ Substantive Criteria - Scope 1 - Patient Experience
  - ○ 20% Patient surveying
  - ○ 20% Rounding Platform
  - ○ 20% Value Based Purchasing Calculator
  - ○ 20% Advisory
  - ○ 10% Cost
  - ○ 10% MWBE

- ➢ Substantive Criteria - Scope 2 - Employee Surveying
  - ○ 40% Employee Surveying
  - ○ 40% Best Practices Advisory
  - ○ 10% Cost
  - ○ 10% MWBE

- ➢ Substantive Criteria - Scope 3 - Nurse Excellence
  - ○ 80% Nursing excellence
  - ○ 10% Cost
  - ○ 10% MWBE

- ➢ Substantive Criteria - Scope 4 - Healthcare Consumerism
  - ○ 27% Digital Listings Management
  - ○ 27% Consumer Rating and Review Management
  - ○ 26% Consumer Outreach for feedback on services provided
  - ○ 10% Cost
  - ○ 10% MWBE

Overview of Procurement

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- ➢ 9/26/23: Application to issue request for proposals approved by CRC

- ➢ 2/16/24: RFP Posted on City Record, sent directly to 11 vendors

- ➢ 2/23/24: Pre-proposal conference held, 16 vendors attended

- ➢ 3/18/24: Proposals due, 7 proposals received

- ➢ 5/13/24: Vendor Presentations held, 3 vendors were invited to participate

- ➢ 5/20/24: Evaluation committee submitted final scores. Below is the top scoring proposer for all 4 scopes of work:
  - ➢ SOW1 (Patient Experience) - Press Ganey
  - ➢ SOW2 (Employee Engagement) - Press Ganey
  - ➢ SOW3 (Nursing Excellence) - Press Ganey
  - ➢ SOW4 (Healthcare Consumerism) - Press Ganey

Vendor Performance

Department of Supply Chain
Vendor Performance Evaluation
Press Ganey

DESCRIPTION	ANSWER
Did the vendor meet its budgetary goals, exercising reasonable efforts to contain costs, including change order pricing?	Yes
Has the vendor met any/all of the minority, women and emerging business enterprise participation goals and/or Local Business enterprise requirements, to the extend applicable?	Yes
Did the vendor and any/all subcontractors comply with applicable Prevailing Wage requirements?	Yes
Did the vendor maintain adequate records and logs, and did it submit accurate, complete and timely payment requisitions, fiscal reports and invoices, change order proposals, timesheets and other required daily and periodic record submissions (as applicable)?	Yes
Did the vendor submit its proposed subcontractors for approval in advance of all work by such subcontractors?	Yes
Did the vendor pay its suppliers and subcontractors, if any, promptly?	Yes
Did the vendor and its subcontractors perform the contract with the requisite technical skill and expertise?	Yes
Did the vendor adequately supervise the contract and its personnel, and did its supervisors demonstrate the requisite technical skill and expertise to advance the work	Yes
Did the vendor adequately staff the contract?	Yes
Did the vendor fully comply with all applicable safety standards and maintain the site in an appropriate and safe condition?	Yes
Did the vendor fully cooperate with the agency, e.g., by participating in necessary meetings, responding to agency orders and assisting the agency in addressing complaints from the community during the construction as applicable?	Yes
Did the vendor adequately identify and promptly notify the agency of any issues or conditions that could affect the quality of work or result in delays, and did it adequately and promptly assist the agency in resolving problems?	Yes
Performance and Overall Quality Rating	Satisfactory

Vendor Decision

➢ Press Ganey has established the relationship and functionality needed to continue to support regulatory and compliance requirements for patient experience surveying

➢ Press Ganey has a large benchmarking database to compare the health system to meaningful peer groups such as other essential and safety net organizations, large integrated delivery networks, etc

➢ Other vendors noted longer and costlier implementation timelines.

➢ Press Ganey's Nursing Excellence solutions allow for the health system nursing teams to meet requirements due for all nursing excellence designations (e.g. Magnet, Pathway to Excellence, Beacon, etc.)

➢ Working with one vendor for all scopes of work allows for easier collaboration and alignment across patient experience, employee engagement, nursing excellence and healthcare consumerism efforts for the health system, and a more valuable and optimal integration with our electronic health record(s)

➢ Press Ganey's upgraded human experience platform is more aligned with the health system's experience strategy

➢ Reference checks were conducted

Vendor Diversity

➢ The Vendor Diversity team set an MWBE component percentage of 5% allocated to translation services

➢ Press Ganey submitted a waiver with their proposal as Press Ganey uses proprietary software to perform all work under the agreement, including translation services. This is true for Press Ganey for all of its clients

➢ Accordingly, and consistent with the System's Vendor Diversity Policy regarding self-performance, the Vendor Diversity team has evaluated and approved the waiver request

Request for Committee Approval

➢ The Quality and Safety, Care Experience department is seeking approval to enter into contract with Press Ganey to provide patient experience, employee engagement, well-being and safety culture surveying, nursing excellence, and healthcare consumerism services services at a not to exceed amount of $12,380,433

➢ Anticipated start date of December 1, 2024 for a initial term of three years with two one-year optional renewals at the discretion of NYC Health + Hospitals.

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

September 9, 2024

Machelle Allen, MD
Senior Vice President

Institute for Medical Simulation and Advanced Learning (IMSAL) Initiatives

Michael Meguerdichian, MD MHP-Ed
- SAVP Simulation Education
- NYC H+H: Harlem Emergency Medicine
- Assistant Professor, Columbia University Vagelos College of Physicians and Surgeons

Aligning Initiatives with Strategic Pillars
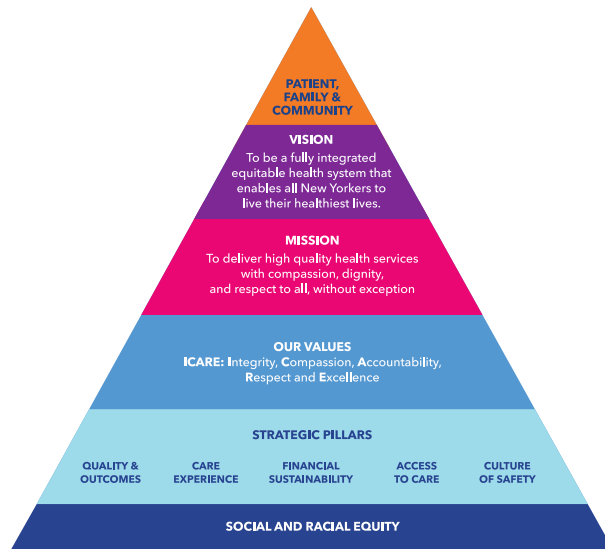
- Quality & Outcomes
- Care Experience
- Culture of Safety
- Financial Sustainability

VISION

The Institute for Medical Simulation and Advanced Learning offers innovative, safe educational and quality-driven opportunities to support and promote the highest quality, equitable care outcomes to the patients of NYC Health + Hospitals.

INFRASTRUCTURE

HUB – Located at Jacobi

Satellites:
Elmhurst
Kings County
Harlem
Lincoln
Corrections Health

INFRASTRUCTURE

Obstetric/Gynecology
Mini-Labs

Bellevue
Elmhurst
Harlem
Lincoln
Kings County
Jacobi

What is Healthcare Simulation?

NYC HEALTH+HOSPITALS
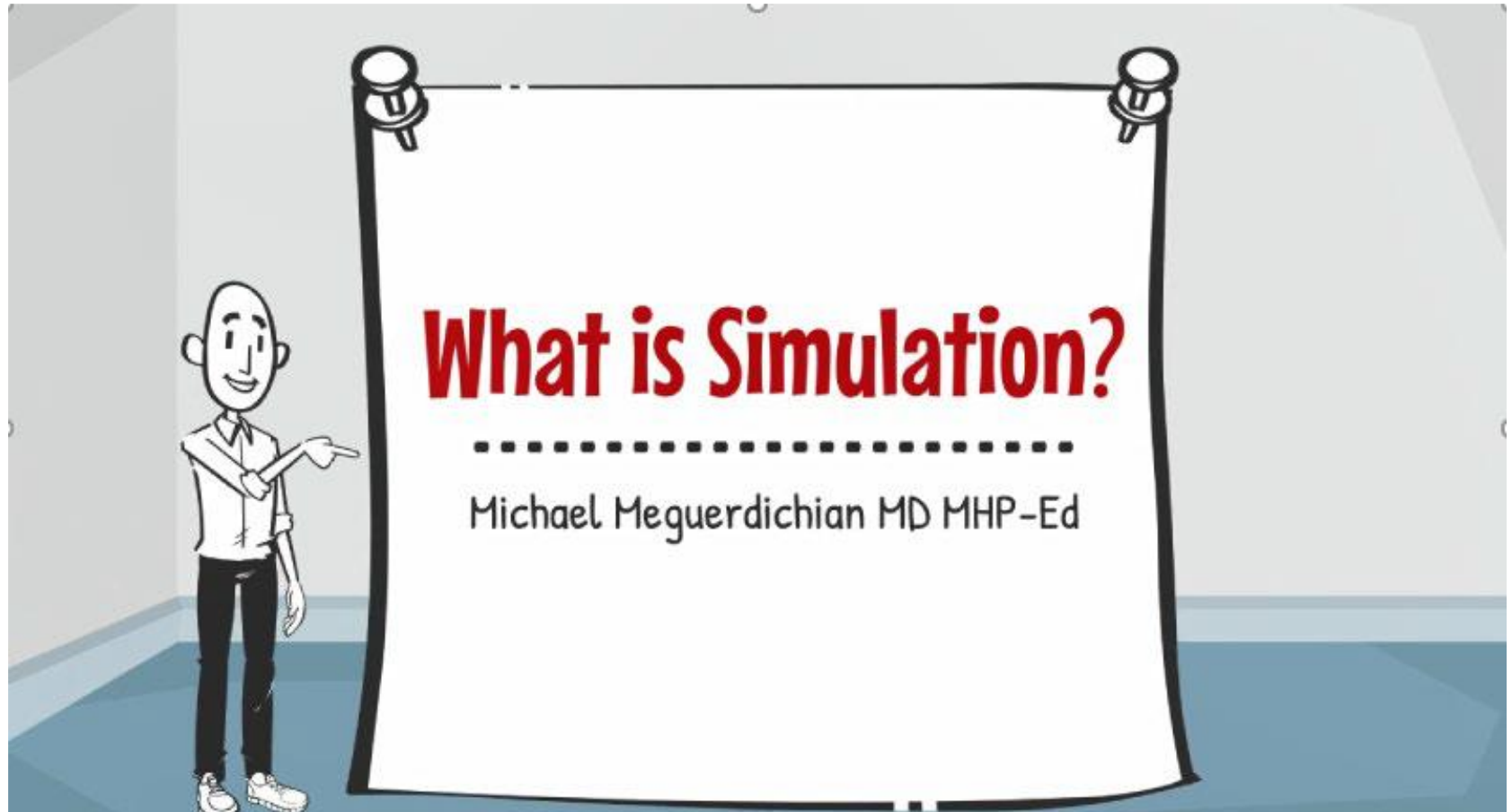
ACHIEVEMENTS

Quality + Outcomes
Financial Sustainability
Care Experience

Courses Taught:
- Adult CodeTeam
- Adult Code Team 2.0
- Pediatric Code Team
- Advanced Airway Skills
- Basic Airway Skills
- Pediatric Airway Skills
- Central Line Insertion
- Introduction to Debriefing
- Introduction to Debriefing Abridged
- Scenario Design
- Manikin Operations
- Obstetric Emergencies
- Postpartum Hemorrhage Emergencies
- Shoulder Dystocia Emergencies
- Cut Suit
- Opiate Use Disorder Program
- Divas

Supported:
- Emergency Medicine Grand Rounds
- Laproscopic Skills Trainer
- Endoscopy Skills Trainer
- Active Shooter Training

Maternal Mortality In-Situ Program
- Postpartum Hemorrhage
- Shoulder Dystocia
- Hypertension in Pregnancy
- Obstetric Advanced Life Support

25 Programs

NYC HEALTH+HOSPITALS

ACHIEVEMENTS

**Quality + Outcomes
Financial Sustainability
Care Experience**

SIMULATION FELLOWSHIP PROGRAM
- Largest Interprofessional Fellowship in United States
- Graduated over 100 fellows

ACCREDITATION THROUGH THE SOCIETY FOR SIMULATION IN HEALTHCARE
- Core
- Assessment
- Research
- Teaching/Education
- Systems Integration
- Fellowship

ACHIEVEMENTS

Quality + Outcomes
Financial Sustainability
Care Experience

15 National and International Presentations

6 Manuscripts Published or Submitted in 2024

Sim Center Hub Utilization Data

NURSING EDUCATION FELLOWSHIP/RESIDENCY
Quality + Outcomes
Care Experience
Financial Sustainability
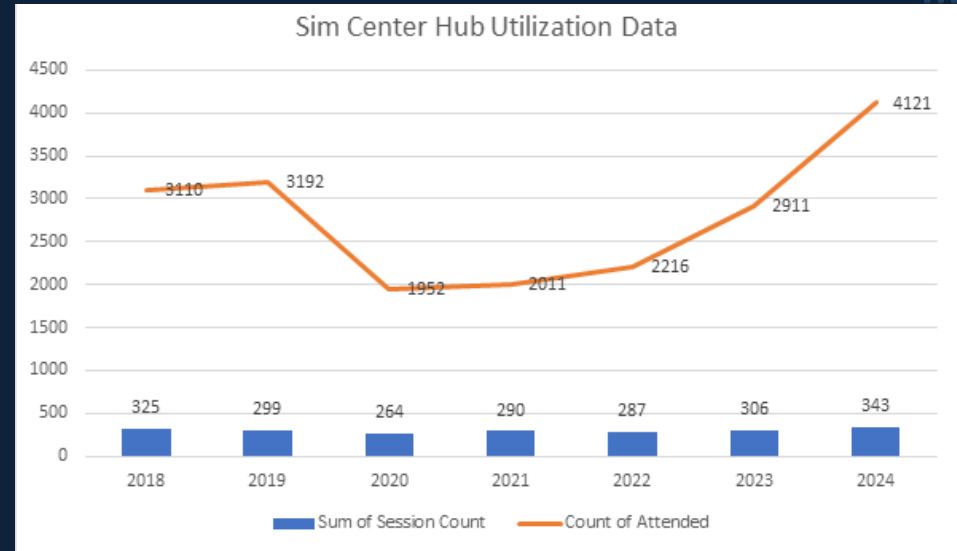
- Fellowship Programs focusing on Emergency Medicine, Critical Care, Operating Room
- Prepare new nurses after training during COVID
- Expanding to include Pediatric ICU, OB/GYN services Q4 2024
- Impacted utilization effectively doubling learner numbers by the end of 2024
- 2025 projections will likely quadruple utilization

NYC HEALTH+ HOSPITALS

MATERNAL MORTALITY REDUCTION PROGRAM

Care Experience
Financial Sustainability
Quality+Outcomes

- Women of color are 4x more likely to die during childbirth
- Prenatal care, acute care management and implicit bias all contribute to these figures

MATERNAL MORTALITY REDUCTION PROGRAM

Care Experience
Financial Sustainability
Quality+Outcomes

- Partnered with the Women's Health and Maternal Medical Home
- Created simulation program within existing units to address:
  - OB Advanced Cardiac Life Support
  - Postpartum Hemorrhage
  - Shoulder Dystocia
  - Hypertension in Pregnancy
  - Future: Sepsis in Pregnancy; Venous Thromboembolism
- Build 6 Obstetric/Gynecology Mini Simulation Labs

MATERNAL MORTALITY REDUCTION PROGRAM
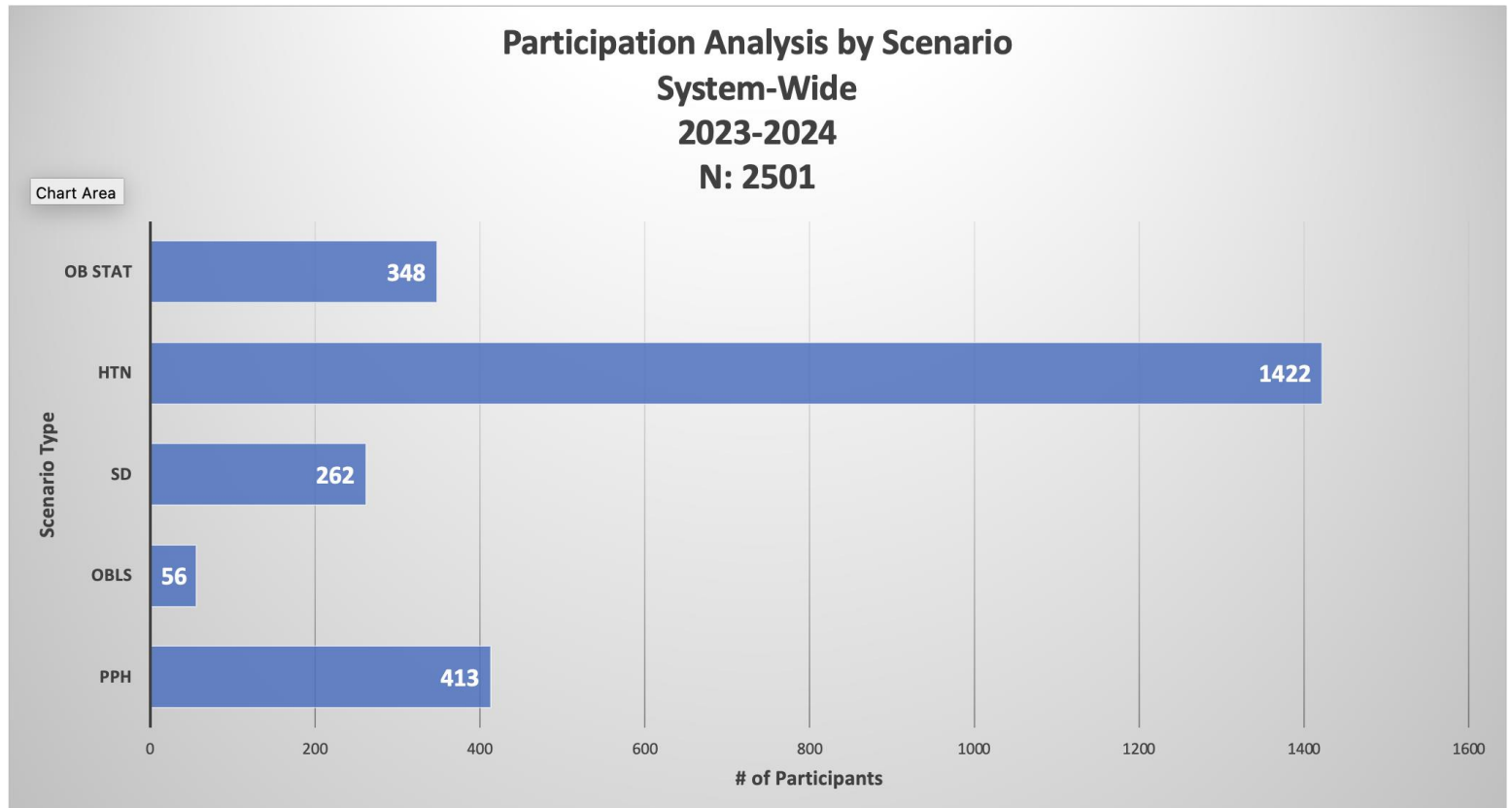
Care Experience
Financial Sustainability
Quality+Outcomes

Postpartum HemorrhageValidated ~3000 charts
- Build data mining capability to evaluate ~7000 patients
- Outcomes:
  - Use of TXA
  - Use of Uterotonics
  - Stage of bleeding
  - Hysterectomy
  - Length of Stay
  - ICU Transfers

NYC HEALTH+HOSPITALS

OPIOID USE DISORDER PROGRAM

Culture of Safety
Care Experience
Quality + Outcomes

- Opiate use has seen a significant rise over the last decade

- Mortality rate over the year for a patient who has an accidental overdose is the same as major heart attack (5-10%)

- Lack of access to care because of bias and an unfamiliarity with treatment protocols like Buprenorphine are identified as contributing limitations to care

OPIOID USE DISORDER PROGRAM

**Culture of Safety
Care Experience
Quality + Outcomes**

FIGURE 1: New York and U.S. Drug Overdose Deaths, 2010 – 2021

![NYC HEALTH+ HOSPITALS]
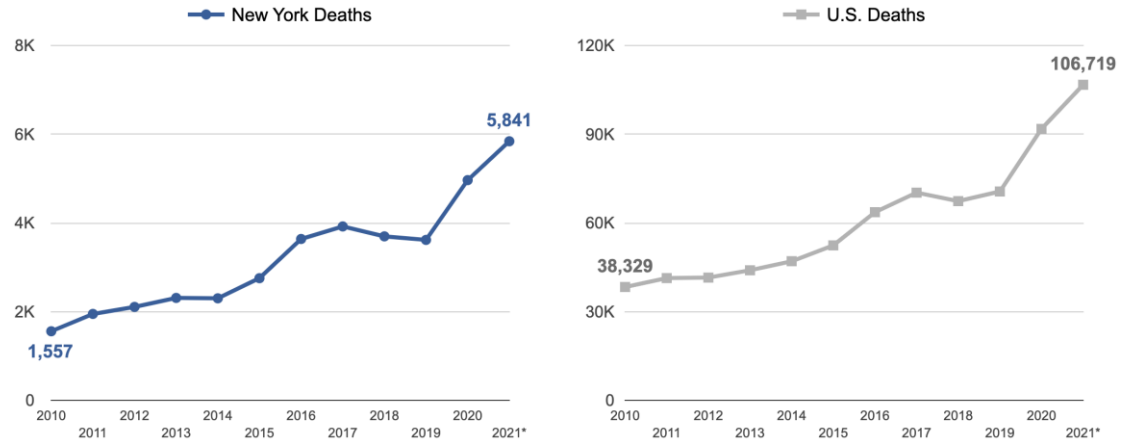
OPIOID USE DISORDER PROGRAM

**Culture of Safety
Care Experience
Quality + Outcomes**

Program Design:
- Partnered with Office for Behavioral Health targeting Emergency Medicine Providers
- Simulated patient encounters to focus on:
    - Establishing Rapport
    - Diagnosing Withdrawal appropriately
    - Ordering and prescribing Buprenorphine
    - Reframing Substance Use as a Disease
    - Address Stigmatizing Language

OPIOID USE DISORDER PROGRAM

Culture of Safety
Care Experience
Quality + Outcomes

Outcomes:
- Orders and Prescriptions for Buprenorphine
- Orders for Methadone
- Referrals to our ED LEADS/CATCH teams
- Detox Placements
- Return Visits to the Emergency Room

Training Stage:
- Trained approximately 60 providers
  - Metropolitan
  - Harlem
    Jacobi
  - North Central Bronx

Values of IMSAL

- Mutual Support
- Innovation
- Service

THANK YOU

SYSTEM CHIEF NURSE EXECUTIVE REPORT
M&PA/IT Committee Meeting
September 9, 2024

NYC Health + Hospitals

May – July 2024

Office of Patient Centered Care (OPCC) Accomplishments

Care Delivery Daily Management System (CD²) Roll-out at Jacobi

- Following a successful CD² roll-out at seven acute care facilities in 2023/2024, we implemented the Care Delivery Daily Management System at our 8th Acute Care Facility – **NYC Health + Hospitals/Jacobi** in June 2024.

- The initiative creates an evidence-based model that impacts excellence for all levels of nursing starting with nurse leaders, and creates standardization for nursing processes as well as sets the standard for nursing excellence and accountability.

- The classroom training was attended by 33 Nurse Leaders and Educators from Med/Surg, Behavioral Health, Critical Care, Emergency Medicine, and Maternal Child Health. The goal is to impart the training to ~900 nursing staff.

Office of Patient Centered Care (OPCC) Accomplishments

Biennial Report Celebration

- Celebration of the **May 2021 to March 2023 Biennial Report Launch** was held last May 31st

- Welcome and closing remarks were given by **Natalia Cineas, DNP, RN, NEA-BC, FAAN** and additional speeches were given by **Sonia Lawrence, RN, BSN,** Director at Large, New York State Nurses Association (NYSNA)

- The event was attended by NYC Health + Hospitals Senior Executives, CNOs, Nurse Administration, and staff to celebrate the launch at 55 Water Street outdoor garden

![NYC HEALTH+ HOSPITALS | NURSING]

Office of Patient Centered Care (OPCC) Accomplishments

Fireside Chat: Nurse Informatics and Documentation

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

- The topic was **Nurse Informatics and Documentation,** highlighting the importance of leveraging technology and data to transform healthcare delivery and proper documentation for patient safety and improved patient outcomes.

- The event was facilitated by **David Conner, MA, RN**, Director of Nursing Quality and the guest speaker was **Devika Persaud, MSN, RN**, Associate Director, Nursing Informatics.

- Event was held on June 26th from 3:00 – 4:00 PM

- Attendance: >346 people

Office of Patient Centered Care (OPCC) Accomplishments

Quality/Excellence/Outcomes – Beacon Awards

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

- 71 representatives from eight acute care facilities and one post-acute care facility were on hand during the celebration.

- The facilities include Bellevue, Coler, Harlem, Jacobi, Kings County, Lincoln, Metropolitan, Queens, and Woodhull.

Office of Patient Centered Care (OPCC) Accomplishments

Quality/Excellence/Outcomes – Emergency Nurses Association (ENA) Lantern Award

- The ENA Lantern Award recognizes emergency departments (ED) that demonstrates exceptional and innovative performance in leadership, practice, education, advocacy and research. It showcases the ED's accomplishments in incorporating evidence-based practice and innovation into emergency care, and a visible symbol of commitment to quality, safety, and a healthy work environment

- Last June 26th, **NYC Health + Hospitals/Metropolitan – Emergency Department** received ENA Lantern Award designation.

- This was closely followed on June 27th when **NYC Health + Hospitals/Queens – Emergency Department** received ENA Lantern Award designation.

Office of Patient Centered Care (OPCC) Accomplishments

Quality/Excellence/Outcomes – Nursing Clinical Ladder

- **2,622 individuals** have been approved to participate in the 2024 program

- Participants engaged in shared governance meetings, peer review committee meetings, research projects and other initiatives

- StaffGarden – a cloud based professional development platform is actively utilized to managed the nursing clinical ladder program.
  - 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 with 34 certification review courses was rolled-out and was made available to all our nursing staff.

- **2,416 registered nurses** across the health system have accessed and actively taking certification review courses through the platform.

- Obtaining certification benefits patients, nurses and the health system. Nurses validate specialized knowledge, skills and experience through certification and promote competence.

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
- 2191 enrolled residents to date, 2024 retention rate is 100% and program retention rate is 85.9%
- Practice Transition Accreditation Program (PTAP) journey was launched on July 15, 2024

RN Mentorship

- 116 trained mentors to date in LEAD Mentorship Training offered by Human Resources
- 38 Mentors in MentorCliq; 185 mentees ready to match; matching started in August 2024
- 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.
- Graduated 5 cohorts (165+ graduates) to date
- 11 Active Cohorts – new cohorts launched twice a month
- 358 enrolled fellows to date with 100% retention rate for 2024

Intensive Care Unit (ICU) Nursing Fellowship

- The program is now available systemwide to all acute care hospitals and admits candidates once a month with 4 active cohorts
- 51 enrolled fellows to date with 100% retention rate for 2024

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

Operating Room (OR) Nursing Fellowship

- The program pilot started July 29th for the following facilities: Harlem, South Brooklyn Health, and Woodhull

- The program will admit candidates once a month and will expand in the future to include all acute care hospitals in the NYC Health + Hospitals system

Thank you!

Questions

Medical & Professional Affairs/Information Technology Committee Meeting

Enterprise Information Technology Services
September 9th, 2024 Update

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

EITS Update Agenda

- Introductions
- Focused EITS Updates
  - FY 2024 OKRs
  - EITS Employee Recognition Program
  - EITS Applications Learning
  - Going Green Unprint Roadmap
- Q + A

NYC H + H Information Technology Completed FY 2024 Goals

- **EITS Infrastructure Enhancement (Financial Sustainability/ Quality & Outcomes)**
  - Go Live of Cyrus One Data Center CY 2023
  - Facility & Data Center Network Refresh
  - Enhanced telecommunication experience & device tracking
  - Enhanced Downtime & Business Continuity Access (BCA)
- **EITS Clinical Information Services Enhancement(Quality & Outcomes/ Access to Care)**
  - CQI of Clinical Applications & Integration
  - Enhanced Bio- Medical Device Management
- **Accelerated Digital Transformation (Quality & Outcomes/ Access to Care)**
  - Telehealth Expansion & Enhancement
  - CQI & Optimization of Patient Portal
  - Collaborate on System AI Strategy
- **Epic EHR Effective Use (Care Experience/ Quality & Outcomes / Social & Racial Equity)**
  - Expansion & enhanced utilization of Epic EHR
- **EITS CQI (Quality & Outcomes)**
  - Implement Service Now Platform Enhanced Management & Roadmap
  - Security & Risk Assessment / Management
  - EITS Governance (ERP, HIT, COEI)
  - Application Learning Team Optimization
  - EITS Operational Enhancements: Position Management, On-Off Boarding, Budget Control
  - Enhanced EITS Customer Experience

NYC HEALTH+ HOSPITALS

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

OKR Cascade – EITS FY 2024 Objectives

Objective: Enhancement of EITS Infrastructure

Key Result(s):

KR #1 – Cyrus One Data Center Go Live December 2023
KR #2 – Refresh Network for FY 24 planned facilities
KR #3 – Enhance telecommunication experience & device tracking
KR #4 – Improve downtime & business continuity access workflows & capabilities
KR#5- Develop Roadmap for System Architect, AI Ops, and Cloud Strategy- ongoing

Objective: Enhancement of Clinical Application Services

Key Result(s):

KR #1 – CQI of Clinical Applications & Integration
KR #2 – Launch new Bio-Medical Device Management solution & organizational framework

Objective: Improve Effective Use of Epic EHR

KR # 1- Re-launch Epic Community Connect w/ DOHMH (planned date TBA)
KR# 2- Expand & enhance utilization of Epic EHR

Objective: Accelerate Digital Transformation

Key Result(s):

KR #1 – Enhance & Expand Telehealth opportunities
KR #2 – CQI & Optimization of My Chart Patient Portal
KR# 3- Collaborate on System AI Strategy development

Objective: EITS CQI

KR#1 –Develop & Implement Service Now FY 24 Roadmap
KR#2- Security & Risk Management assessment findings mitigation plan developed, launched, and tracked to conclusion.
KR#3- Ongoing enhancement of EITS Governance (HIT, ERP, COEI, AI)
KR#4- EITS Operational improvements developed & implemented: position management, on-off boarding, budget control
KR#5- Improvement of EITS Customer Service

EITS STARS of Excellence Award Titles	Awardee
Safety In IT Practice	Rosemary Luu
Rising Star	Jeremy Muchler
Quality in IT Practice	Abdul Hirsi
IT Hero	Sean Rutherford
IT Exceptional Leadership	Haroon Bhatti
IT Empowerment	Ariel De La Rosa
Excellence in IT Practice	Chris Reyes
Customer Service Excellence	Laura Best
IT Innovator	Richard Plaza
CIO Award	Erald Velmishi
CIO Award	Edna Aurita Cargullo

EITS Applications Learning

- Provider Personalization & Technology Fair

- New Resident Epic Training

- Superuser Training

H₂O Good2Great!

Provider Personalization & Technology Fair

Site	Tuesday	Thursday
Metropolitan	5/21/24	5/23/24

51 Personalization
41 Dragon
31 Haiku
11 ProcDoc

#1

- South Brooklyn, KCH & Woodhull

New Resident Epic Training

- Resident on-boarding & Epic Training: Mid-June through August
- Live Webex Classes
- The balance, managed via an e-Learning

Live Webex Class	2023 Completions June - August	2024 Capacity JUNE ONLY	Increase % 2023-24	July Capacity
IP & OP Gen Prov	550 Residents	900 Residents	60+%	900 Residents
ASAP (ED)	153 Residents	450 Residents	30+%	450 Residents
Women's Health	57 Residents	150 Residents	38%	

NYC HEALTH+ HOSPITALS

New Resident Epic Training
Lessons Learned

- On-site dedicated space allocation
  - Need dedicated desk or laptop
  - Need individual(s) at the sites identified as support for residents
  - Bolster wayfinding to the area to sit for the class
  - SOLUTION: A.L.'s training centers
    - Contact Applications Learning to reserve seats: limited capacity
    - Resident should have headset, and know what class they are scheduled to
    - Metropolitan & KCH
- Class is not available via a cell-phone
- Must return from break
- Restricted access to class if 30 minutes + after it has started

New Resident Epic Training
Lessons Learned

- Resident not processed…
  - Not active in Peoplesoft ELM or Active Directory
  - Not active = unable to complete HIPPA & provision access
  - Contact local HR vs. Applications Learning
- Screenshots
  - Are not accepted as proof of an e-Learning's completion
- Practice kindness
  - Treat others how you would want to be treated
- Avoid enrolling residents to multiple live Webex sessions
  - Limits access & capacity

Super-user Training Rebranded to *Good**2**Great*

Request of Enterprise End-users

- Implementation Super-users
  - In the "rear-view mirror" or less in number secondary to attrition
- End-users wanted more!
  - Focused workflows
    - Blood Administration, Template Build, Patient Movement & more!
  - Instructor led training
  - Workflow based exercises
  - Efficiency tips & tricks

Clinical & Revenue Cycle Sessions

Progress to Date: July 2024

Session Name	Attendees
Anesthesia PP 100	8
Beacon Nurse Treatment Plan Deep Dive	3
Cadence Template Build Tips & Tricks	27
Cupid Snapboard for the Cardiology Schedulers	6
Grand Central A Review of Registration	25
HIM Review of Chart Corrections	19
Hospital Billing Summer School for Billers – CFB Edits	18
Hospital Billing Summer School for Insurance Follow-Up	19
Hospital Billing Summer School for Payment Posters & Self-Pay Follow-Up	12
OpTime Preference Card SuperUser	2
Radiant Epic Workflow Efficiency Tools	14
Resource Manager PowerUser	5
Willow Ambulatory Keyboard Shortcuts and Customized Work Queues	22
Willow Inpatient Keyboard Shortcuts and Clinical Monitoring	24
Wisdom PB Charge Review & Claims 200	5
Grand Total	**209**

NYC H+ H Facility	Attendees
BELLEVUE	7
BROADWAY COMMUNITY HEALTH CTR	1
CARTER	4
CUMBERLAND	6
ELMHURST	8
ENTERPRISE I/T	13
EPIC EMR	2
GOUVERNEUR	7
HARLEM	2
JACOBI	8
KINGS COUNTY	31
LINCOLN	47
METROPOLITAN	32
NORTH CENTRAL BRONX	1
QUEENS	14
SOUTH BROOKLYN HEALTH	18
WOODHULL	8
Grand Total	**209**

Good2Great Program
Nursing Focused

- "Back to School" September & October
  - 36 Full-day sessions to be hosted
- Pre-registration
  - 161 Nurses enrolled to date
- Marketing
  - Nursing Workgroup Meeting
  - TAG Meeting
  - H2O Site Directors
  - CNO Messaging

Good2Great Program

- Pre-registration Stats
  - By NYC H+ H Facility

G2G RN - Course and Facility	Enrolled
Ambulatory RN SU 100	**26**
BELLEVUE	1
KINGS COUNTY	24
QUEENS	1
ASAP ED Super User 100	**1**
QUEENS	1
ClinDoc RN SuperUser 100	**125**
BELLEVUE	109
KINGS COUNTY	3
QUEENS	13
Optime Intraoperative Macro Creation	**3**
EPIC EMR	1
KINGS COUNTY	2
Optime Perioperative Charging	**1**
KINGS COUNTY	1
Optime Perioperative Reports	**4**
KINGS COUNTY	2
QUEENS	2
Optime Postoperative patient Movement and Discharging	**1**
KINGS COUNTY	1
Grand Total	**161**

Going Green:
5 Year Unprint Sustainability Plan

Initiative Objective

- **Develop and Execute a Five Year Plan To Lower Overall Printing Across the System**
  - Establish a Repeatable Process
  - Go Department by Department across all facilities
    - Establish an enterprise process with Central Office as the 'Pilot'
  - Focus will be to
    - Be a more sustainable system
    - Lower overall printing
    - Lower color printing

PRINTING BY PRINT TYPE

- Epic 67%
- pdf 18%
- Word 8%
- Excel 3%
- Outlook 3%
- Powerpoint 1%

5 Process Steps – SEEDS

NYC HEALTH+HOSPITALS
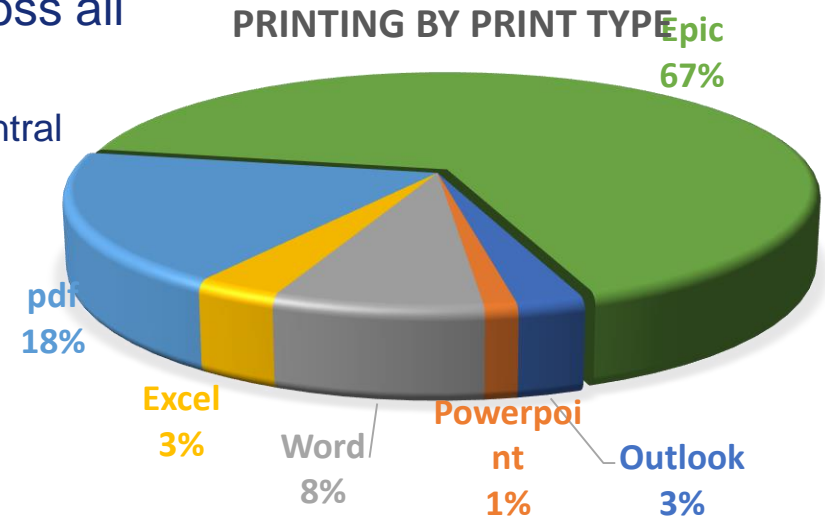
Unprint.
Keep your information accessible, secure, and eco-friendly.

MPS will set up an enterprise framework with identified service line and facility champions, gathering data and seeking to understand specific needs, ensuring alignment to the departmental workflow. Collaboration is key throughout – from initial assessment to final implementation. This not only optimizes workflows and processes, but also helps establish departmental printing standards that comply with industry regulations and shares improvements across the System.

1. **S**et Expectations
   - Identify departmental champion
   - Identify departmental processes, printing requirements and current printing layout
   - Communication plan reviewed and finalized

2. **E**stablish the Baseline
   - Review current department workflow
   - Perform walkthrough with champion
   - Establish baseline for printing based on current flows

3. **E**stablish Goals
   - Compare baseline with other facilities
   - Identify areas for improvement
   - Identify departmental goals

4. **D**eploy Improvements
   - Finalize plan to implement improvements
   - Communicate and Train Department on improvements and goals
   - Implement plan

5. **S**uccess Measured and Celebrated
   - Establish new baseline
   - Review against goals and identify areas of improvement

6 Marketing Strategies - SPROUT

- **S**pearhead
  - ○ Leaders will spearhead the program rollout by promoting its value proposition during departmental meetings and championing its adoption within their teams.
- **P**romote
  - ○ Utilize eye-catching visuals and concise messaging on the revamped MPS UnPrint website, printers and copiers, ServiceNow request forms and screen savers to spark curiosity about the program. This could involve short "Did you Know" questions or "Show me How" solution statements related to UnPrinting.
- **R**oute
  - ○ Integrate program information and access points seamlessly into existing workflows. Additionally, we can incorporate pop-up messages at the point of print selection to guide users toward better printing decisions and enforce relevant policies. These pop-ups can provide cost awareness, environmental impact details, and policy reminders.

- **O**ptimize
  - ○ Streamline workflows and maximize efficiency by conduct collaborative walkthroughs with each department. During these sessions, we'll gain a deep understanding of our printing needs and identify areas to reduce unnecessary printing, save time, and ensure to support departmental goals.
- **U**nderstand
  - ○ Our quality assurance team is all about understanding your printing needs. They'll ask insightful questions and actively listen to your challenges. This deep understanding allows them to identify the perfect MPS solutions for your department, ensuring our services truly address your specific printing pain points.
- **T**ransform
  - ○ We're transforming how we approach printing and move beyond a printer-centric view. Users will discover solutions that go beyond simply needing a printer. This shift in approach extends across the board – from a revamped website with clear information to a transformed ServiceNow requests.

5 Year Timeline
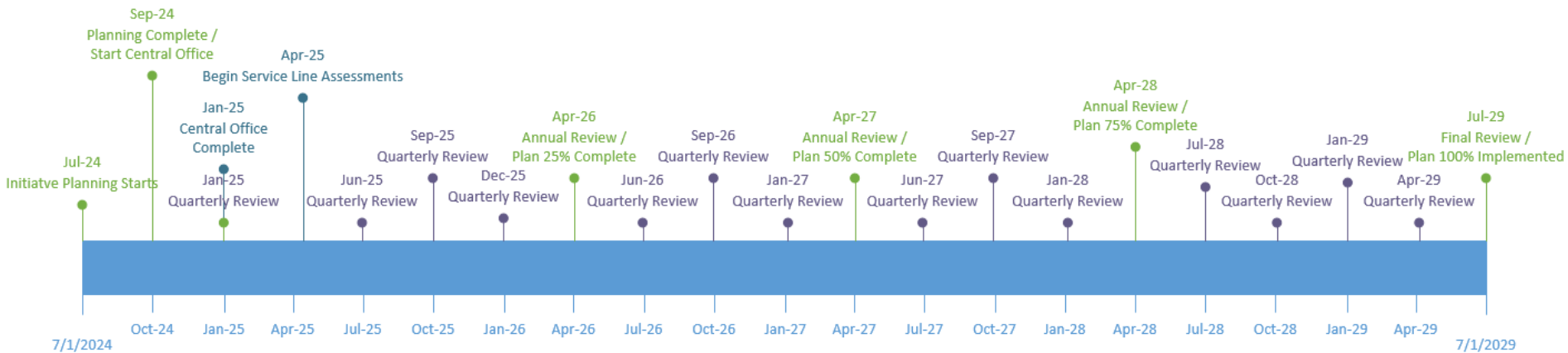
- Initiative planning to start 7/2024
- Planning / Prework to be completed and Central Office kick-off by 9/2024
  - Central Office to serve as 'Pilot' facility to allow for process maturation and refinement
- Reviewed quarterly through first three years and potentially reduced to biannually for remaining two years
- Initiative to complete 7/2029

5 Year Timeline - Phased Approach

	2024		2025				2026				2027				2028				2029			
	Phase 1		Phase 2				Phase 3				Phase 4				Phase 5				Phase 6			
	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
Plan/Build/Launch	█																					

Planned Walkthrough Rollout Sequence

	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
Central Office		█																				
Enterprise Admin/C-Suites			█																			
Service line Alignment					█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█

Launch Timeline
SPROUT + SEEDS – 7 Deliverables

	2024					
	July	August	September	October	November	December
Leadership and EITS Talking Points		S				
Rebranded Website & screen savers			P			
UnPrint Pop-Ups			R			
ServiceNow		O				
Listening and Surveying			U			
Reporting baseline & Ongoing reporting		T				
Start Central Office Walkthroughs			S	E E	D	S

23

7 Deliverables

Deliverable	Target Delivery Date
Reporting baseline & Ongoing reporting	8/1/2024
Leadership and EITS Talking Points	8/15/2024
ServiceNow Request Updates	8/15/2024
Listening and Surveying	9/1/2024
Rebranded Website and screen savers	9/15/2024
UnPrint Pop-Ups	9/15/2024
Start Central Office Walkthroughs	10/1/2024

UNPRINT AWARENESS LAUNCH DATE : September 23rd, 2024

Developing and Executing the Plan

- Planning
  - To ensure a smooth and impactful rollout of our 5-year sustainability plan, we're focusing on building strong foundational elements. This includes optimizing ServiceNow workflows for the UnPrint initiative, collaborating with other service lines, and establishing robust reporting and communication channels. This will involve data accuracy measures, user-friendly dashboards, targeted messaging platforms, and leadership engagement strategies.

- Planned Walkthrough Rollout Sequence
  - Central Office Departments: We'll begin by optimizing workflows for Central Office departments, allowing for focused attention and rapid learning.
  - C-Suite Leaders Across All Facilities: Next, we'll partner with C-suite leaders at each facility. Their firsthand experience with UnPrint optimization will not only benefit their own offices but also equip them to champion UnPrint and share success stories with their colleagues system-wide.
  - Cross-Facility Departments: Following the C-suite rollout, we'll focus on departments with operations across multiple facilities, such as Medical Records, HR, and Finance. This phased approach ensures a strong foundation and facilitates knowledge sharing across the organization. By working with these cross-facility departments, we can establish standardized UnPrint practices that promote departmental alignment. This standardization will not only streamline workflows but also ensure consistency in UnPrint implementation across all NYC Health + Hospitals facilities.

Thank You!

MetroPlusHealth

NYC Health + Hospitals

Medical & Professional Affairs/Information Technology Committee Report

September 9th, 2024

Dr. Talya Schwartz, President & CEO

Recertification Update

One Year In

- The first year of recertification efforts post the PHE unwind has been completed.

- Overall recertification rate is close to 80% and comprable to the NYS average rates. CHP has the highest rates and HARP the lowest.

- Despite the recertification rate, the membership shifted by approximately 10% in total (all LOBs, including the ones not impacted by the recertificaion process) and is currently stading at ~ 681,000 members.

- Focused attention has been placed on Navigator Agencies, as members without an MPH enroller or H+H enroller are recertifying at lower rates.

- We have increased staffing levels to enhance outreach strategies and improve member experience in the overall recertification journey.

- Elmhurst has the best recertification rate in the System; Gotham has the lowest.

Quality Results

MetroPlusHealth HIV SNP #1 in Quality for 2022

- MetroPlusHealth received the **highest** number of quality points and achieved the **highest** score of the 3 HIV SNPs in NYS for **2021 AND 2022- #1 for 2 years in a row!**

- Quality measures are specific to HIV as well as the general health of People Living With HIV.

- MetroPlusHealth excelled in viral suppression due to multiple initiatives to increase anti-retroviral medication adherence.

- Success facilitated also by strong collaboration with H&H Virology sites.

Second Community Office in the Bronx

Expanded Footprint in the Bronx

- MetroPlusHealth first opened a community office in the Bronx in 2018 at 959 Southern Blvd., serving South Bronx residents.

- We just opened our second Bronx community office at 25 East Fordham Rd. to assure physical presence and better access to services for all Bronx residents.

- **Services offered include** health insurance and enrollment education, screenings and illness prevention workshops and mental health services information, as well as help with applications and referrals based on individual needs for support services.

Medicare Bid

Medicare 2025

- Effective January 1st, 2025, MetroPlusHealth (as a Medicare Part D Sponsor) must provide members with the option to pay their Out-Of-Pocket (OOP) prescription drug costs in monthly amounts over the course of the plan year, instead of paying OOP costs at the Point of Service (POS).

  ➢ MetroPlusHealth members who opt into the program will pay $0 at POS for covered drugs, instead of the normal cost share they would have paid at the pharmacy. MetroPlusHealth must pay the pharmacy the OOP cost sharing amount that these participants would have paid if they were not in the program, and then bill the program participants monthly an adjusted amount for any OOP cost sharing they incurred while in the program according to prescribed calculations.

  ➢ This is designed to save members from having to pay large costs at the pharmacy and is intended to disperse those OOP costs over the course of several months instead of paying it all at the pharmacy during that transaction.

  ➢ The amount that the MetroPlus Health bills a participant for a month under the program cannot exceed a maximum monthly cap.

Even better Supplemental Benefits Expected in 2025

Benefit	2024	2025
Flex Card- OTC, utilities, groceries, PERS, bathroom safety devices	$155 per month, no rollover to next month	**$475 per quarter, no rollover to next quarter**
Dental	$700 comprehensive, $1,000 preventative	Medicaid dental covered as Medicare Supplemental with prior authorization rules (medical necessity)
Vision (Eyewear)	$450 annually	$450 annually
Podiatry Routine Visits	8 annual visits	8 annual visits
Fitness	$250 per six months (reimbursement)	$250 per six months (reimbursement)
Non-Emergency Transportation	48 one-way trips	48 one-way trips
Post Discharge Meals	20 meals	20 meals
Worldwide Emergency Room	reimbursement	reimbursement
Annual Physical Exam	not covered	covered
Hearing Aids	$500 annually	$500 annually
Acupuncture	20 visits annually	20 visits annually
Dietary Benefit	6 visits annually	6 visits annually
VBID- reduced Part D formulary genetic drugs (covered only in MetroPlus Advantage Plan (HMO D-SNP))	covered	covered

Financial Intermediary in Consumer Directed Personal Assistance Services - Update

Single Fiscal Intermediary

- NYS is moving to create a Statewide FI to manage the CDPAP program. This major change impacts the 200,000 CDPAP consumers and their Personal Assistants statewide.

- State is expected to award the contract on October 1st, 2024.

- FIs will bill MCOs according to a three-tiered monthly schedule. MCOs will pay the FIs the PMPM rate and bill the State via the newly established rate codes, which instigated a law suit by a group of Fis.

- In preparation for the implementation for the single statewide FI, FI administrative payment will move to a non-risk distribution methodology, which went into effect on August 1st, 2024. In other words, the Plans will serve as passthroughs for the purposes of payments.

- These anticipated changes have already caused shifts in members' care.