AGENDA

INFORMATION TECHNOLOGY COMMITTEE

Meeting Date: May 12th, 2016

Time:

12:00 PM

Location: 125 Worth Street, Room 532

BOARD OF DIRECTORS

CALL TO ORDER

DR. BARRIOS-PAOLI

ADOPTION OF MINUTES
March 8, 2016

CHIEF INFORMATION OFFICER REPORT

MR. GUIDO

- 1) Authorizing the New York City Health and Hospitals Corporation (the "System") to negotiate and execute a five-year contract (the "Contract") with Canon Solutions America to provide System-wide Managed Print Services with one, two-year option to renew solely exercisable by New York City Health and Hospitals Corporation, in an amount not to exceed \$74.3 million for seven years.
- MR. GUIDO
- 2) Authorizing the New York City Health and Hospitals Corporation ("NYC Health + Hospitals") to execute contract documents as necessary to increase funding for and extend the existing contract (the "Contract") with SunGard Availability Services ("SunGard") for an active/active redundant data center, business continuity and associated professional services. The funding increase for the current contract, an amount not to exceed \$8,010,000, covers the remainder of the Contract term through October 31, 2016, and the rest of the funding, in an amount not to exceed \$23,142,062, covers a two-year extension plus a one-year renewal option (exercisable solely by the NYC Health + Hospitals) for a total of \$31,152,062 (including a contingency of \$3,018,530 for costs that may be incurred in the event of any additional power and cooling needs and/or moves or changes to the equipment.

MR. GUIDO

INFORMATION ITEM:

1) Compass Overview

MR. SARADHI

OLD BUSINESS
NEW BUSINESS
ADJOURNMENT
NEW YORK CITY HEALTH + HOSPITALS

MINUTES

Meeting Date: March 8, 2016

INFORMATION TECHNOLOGY COMMITTEE

ATTENDEES

COMMITTEE MEMBERS

Lilliam Barrios-Paoli, PhD, Chair Josephine Bolus, RN Vincent Calamia, MD Ram Raju, MD, President Jennifer Yeaw (representing Steven Banks in a voting capacity)

NYC HEALTH + HOSPITALS STAFF:

Suzanne Fathi, Director, Enterprise Information Technology Services Lucinder Glover, Senior Director/Strategic Analyst, Medical and Professional Affairs Sal Guido, Interim Chief Information Officer, Enterprise Information Technology Services Barbara Lederman, Senior Director, Enterprise Information Technology Services Patricia Lockhart, Secretary to the Corporation

Satish Malla, Senior Auditor, Office of Internal Audits

Ana Marengo, Senior Vice President, Communications & Marketing

Antonio Martin, Executive Vice President and Chief Operating Officer

Matthew McQuillan, Enterprise Information Technology Services

Robert Patterson, Network Corporate Information Officer, Enterprise Information Technology Services

Anthony Rajkumar, Executive Director, Metropolitan Hospital Center

Salvatore Russo, Senior Vice President & General Counsel, Legal Affairs

Marisa Salamone Greason, Assistant Vice President, Enterprise Information Technology Services

Barry Schechter, Assistant Director, Enterprise Information Technology Services

Brenda Schultz, Assistant Vice President, Enterprise Information Technology Services

Tony Williams, Senior Director, Enterprise Information Technology Services

Ross Wilson, MD, Senior Vice President and Corporate Chief Medical Officer, Medical & Professional **Affairs**

OTHERS PRESENT:

Larry Garvey, Cerner Corporation Edward Marx, CIO, Clinovations Shaxlee Wheeler, Analyst, Office of Management and Budget

INFORMATION TECHNOLOGY COMMITTEE Tuesday, March 8, 2016

Dr. Lilliam Barrios-Paoli, Chair of the Committee, called the meeting to order at 12:30 PM. The minutes of the February 11, 2016 Information Technology Committee meeting were adopted.

CHIEF INFORMATION OFFICER REPORT

Mr. Guido, Interim Chief Information Officer, presented the Chief Information Officer Report. He began by stating that Ed Marx would be giving another Epic status report update to the Committee since go-live is scheduled for 22 days from now at Queens and Elmhurst Hospital Centers.

Mr. Guido addressed the report's Major IT Program Status Updates on a red-yellow-green color scale: Meaningful Use (Overall yellow, Budget green, On-Time yellow); Electronic Medical Record (Overall yellow, Budget and On-Time status green); Enterprise Resource Planning (all green); Radiology Consolidation (all green); and Data Sciences (all green).

He then spoke to several projects that are in progress:

MEANINGFUL USE UPDATE

Mr. Guido stated that NYC Health + Hospitals received almost \$19 million in calendar year 2015 for the year 2014 Adopt-Implement-Upgrade (AIU) providers (894 total). In calendar year 2016, he said, we will receive over \$30 million for the 2015 AIUs (1,423 providers). Once our organization begins attesting during a 90 day period in 2016, we should receive another \$19.6 million based on the total 2014 and 2015 providers.

MARCH 27TH ePRESCRIBING REQUIREMENT GO-LIVE

Mr. Guido explained the mandate requiring providers to submit medications electronically will go into effect on March 27, 2016. He said implementation of this requirement was delayed by legislation signed by Governor Cuomo one year ago. Mr. Guido said that we are about 80% complete and on-track to be ready for the March 27th deadline.

RADIOLOGY CONSOLIDATION PROGRAM UPDATE

Mr. Guido said that, as mentioned in the last CIO report, McKesson was selected for this project and a contract was signed and finalized two (2) weeks ago. He said we have completed our prerequisites for the first four (4) locations. We are on track with the project and looking forward to getting it into place.

ENTERPRISE IT SERVICES (EITS) WELLNESS SESSIONS

Mr. Guido indicated there is a lot of stress within the EITS organization due to all the projects underway. He announced that in collaboration with Dr. Ross Wilson from M&PA and Yvette Villanueva from Human Resources that an EITS staff wellness program is being established. In addition, health screening resources and stress tests, are being made available to EITS staff thanks to Dr. Wilson. Mr. Guido also mentioned that EITS held its first wellness event last Friday. Finally, Mr. Guido stated that in order to get staff active, other programs like salsa dancing and aerobics would be available as well.

EITS RESPONSE TO RECENT RANSOMWARE ATTACK NEWS STORY

Mr. Guido spoke about the recent news story regarding that Hollywood Presbyterian Medical Center (HPMC) in Los Angeles being the victim of a "ransomware attack." He explained how the virus locks up data and a ransom must be paid to free it up. He said we take precautions but we can only protect so much with the information we have.

Minutes of March 8, 2016 Information Technology Committee Pg 3

Ms. Bolus raised the question as to how can an organization pay a \$17,000 ransom in Bitcoins? Mr. Guido explained what bitcoins are (they are purchased in dollars but they are their own currency; and they can be traded around the world) and how their payments on an exchange are untraceable. He likened it to an electronic version of the Federal Reserve. Dr. Barrios-Paoli likened it to PayPal. Mr. Guido agreed but stated again that they are untraceable. Mr. Guido went on to say it is a nasty virus and we are putting a lot of resources for prevention. He said there is no guarantee that they will not come back and do it again.

ACTION ITEM:

Sal Guido, Interim Chief Information Officer, presented to the committee the following resolution on Storage:

Authorizing the President of the New York City Health and Hospitals Corporation ("NYC Health + Hospitals"), or his designee, to purchase storage hardware, software, and associated maintenance from various vendors on an on-going basis via Third Party Contract(s) in an amount not to exceed \$13,748,060 for a one year period.

The following EITS staff introduced themselves: Tony Williams, Senior Director, Midrange Systems, and Brenda Schultz, Assistant Vice President, Financial Administration.

Mr. Williams spoke to a PowerPoint presentation entitled, "On-Gong Purchases for Storage Hardware, Software and Maintenance through Third Party Contacts." He gave the presentation, including a Background Summary, Procurement Method, Some Reasons Why Storage Needs Continue to Grow, and Storage Trend.

Mr. Guido pointed out there has been a 1000% increase in storage since 2011.

Ms. Schultz spoke to the next page of the presentation: Storage Needs and Associated Funding Sources.

Ms. Bolus asked if this has to do with the fact that we have to maintain files on minors. Mr. Guido responded yes, and mentioned that once someone turns 18, we are required to keep their files for 25 years.

Dr. Barrios-Paoli raised the question and asked if this for everyone to which Mr. Guido responded that there is different criteria for maintaining different patient data. He indicated that we standardize all data. He also pointed out that we are using technology to protect patient privacy that is currently available and that it is new. Ms. Bolus then asked what happens with emails that contain patient information and are forwarded from one person to the next. Mr. Guido responded that we search for ePHI (electronic protected health information), but we can only check within the NYC Health + Hospitals system. He said that DLP (data loss prevention) technology is maturing and we are keeping up.

Approved for consideration by the full board.

INFORMATION ITEM:

Ed Marx, Epic GO Program CIO, Clinovations, gave the following update:

Mr. Marx introduced the PowerPoint presentation entitled, "GO Executive Governance: Update to the Information Technology Board Committee." He pointed out there were 22 days until the first go-live of the Epic system on April 1st at Queens and Elmhurst hospitals.

Mr. Marx said that he was representing a huge group of people that has done a tremendous amount of work to get to this point, including Mr. Guido's EITS team. He said GO is a tool that will enable a clinical transformation which will allow us to have better patient care.

Minutes of March 8, 2016 Information Technology Committee Pg 4

Mr. Marx then spoke to the first slide called Executive Summary. He pointed out that this slide has a lot more green and yellow than last time (red-yellow-green colors are used to show progress in the program).

Mr. Marx then addressed each section of the Summary, including Clinical Build (green), Non-Clinical Build (green), Staffing (yellow), Ancillary Systems (green), Soarian Readiness (green), Facilities Prepared (yellow), Infrastructure (yellow), EMPI (yellow), Testing (green), Training (yellow) and Lab Integration (yellow). Overall, the project is listed as yellow. Mr. Marx said that this is common and that no other Epic project that he is aware of has ever gone live as green. He added that he had just visited some facilities that day and was happy to report good progress.

Mr. Marx then spoke to the slide called Since We Met Last... He said that the scheduling module (Cadence) is now live. So technically, he said, Epic is live at NYC Health + Hospitals. He said that there was a Go Live Readiness Assessment (GLRA 30) last week to mark 30 days before launch at Queens and Elmhurst on April 1st. These meetings started at GLRA 180 and have been held every 30 days since that time. He also said that End-User Training was currently taking place, with 250 people getting trained per day.

Mr. Marx talked about the slide called Top Risks and noted that there are risks in any big project. He pointed out that Integrated Testing, which was a risk before, is now considered green. He thanked Mr. Guido's team for helping on Enterprise Master Patient Index (EMPI) which is now at the 5% rate, which is considered ideal.

On the Budget Overview, Mr. Marx spoke about the EMR Project – Six Year Implementation Budget. He made the point that spending is on-budget and thanked Ms. Schultz's team for their work in making that the case.

Mr. Marx spoke to the slide called Go-Live Experience. He pointed out that there is a lot of excitement at the beginning of a roll-out but that falls in the weeks and months afterwards. Conversely, stress levels and other issues will rise in that time. He humorously called the point when stress is highest and excitement lowest as the Valley of Despair.

Dr. Raju said that this group should be prepared to hear about despair, since that is what happens with big changes in any organization, including ours. He said that there will be complaints and calls to the Enterprise Service Desk as well as the New York Post and the New York Daily News.

Dr. Barrios-Paoli joked that this was beyond the Valley of Despair.

Dr. Raju stated that many people's reactions will not be helpful, so be prepared.

Mr. Marx addressed the next slide called It May Feel Like Multiple Go-Lives. He said that once people get over the initial resistance to something new, their attitude will be, "How did we survive without it?"

Dr. Barrios-Paoli asked how different Epic will be from NYC Health + Hospitals' current system. Mr. Guido answered it is much different. He indicated that the current system, QuadraMed, is twenty (20) year old technology, while Epic is state-of-the-art. He stated that Epic is more effective and efficient.

Ms. Bolus said that this new system will mean much less cut and paste for users.

Ms. Yeaw asked whether Epic is this Enterprise-wide. Mr. Guido replied that it will be. The first go-lives will be starting on April 1st at Queens and Elmhurst Hospitals. It will take until 2018 to get everyone on-line.

Dr. Barrios-Paoli raised the question as to which facilities will be the last to have Epic implemented. Mr. Guido responded that Bellevue and Kings County Hospitals will be last facilities. He added that once the first roll-outs happen, we will look at the schedule to see which roll-outs might be able to change.

Dr. Barrios-Paoli stated that there are a lot of doctors from NYU who work at Bellevue and NYU already has Epic. Mr. Guido concurred but indicated that the builds are different. He told the committee members that we are working with the ClOs at NYU and Mt. Sinai on this.

Minutes of March 8, 2016 Information Technology Committee Pg 5

Ms. Bolus raised the question as to whether the Corrections Department would have Epic implemented as well. Mr. Guido replied that the Corrections Department maintain a different system.

Dr. Raju responded and stated that NYC Health + Hospitals would need extra money to bring Epic to Corrections and we do not have it at this time. He said unless they take money out to do this, we cannot. Dr. Raju concluded that we do not want to take on more work since it costs money and resources.

Dr. Barrios-Paoli stated that this is quite an achievement. Mr. Marx thanked her but stated that the implementation was the easy part. He said that what happens after April 1st needs leadership for success.

Ms. Bolus offered her thanks to both Messrs. Marx and Guido for the presentation.

Mr. Guido stated that this was the end of his team's presentations for today's meeting.

There being no further business, the meeting was adjourned 1:05 PM.

CHIEF INFORMATION OFFICER REPORT

Information Technology Committee of the NYC Health+Hospitals Board of Directors - May 12, 2016 @ 12:00PM

Thank you and good afternoon. We are now forty (40) days post go-live with the Epic Electronic Medical Record (EMR) at Queens and Elmhurst Hospital Centers. Both Queens and Elmhurst are functioning with the new EMR and the Epic GO teams continue to monitor and provide support. This was a herculean endeavor on the part of everyone involved and I cannot thank enough all of EITS, EMR Go project staff, Kenra Ford and M&PA, Dona Green, Wayne Zimmerman and their respective teams, as well as all the Queens and Elmhurst staff who made this the success that it is. This implementation could not have been accomplished without the steady leadership and unwavering commitment provided by Dr. Raju and Tony Martin. I would be remiss not to mention the help and constant support from the Clinovations team: Edward Marx, CIO, Dr. Matt Lambert, Chief Information Medical Officer and Preston Raulerson, Program Manager who navigated us to where we are today. This first of many service transformations could not have been done without everyone's cooperation, dedication and commitment to this monumental effort. Pre-Planning has already begun for our next implementation at Jacobi and North Central Bronx Hospital Centers for October 2016.

I have several other updates that I want to provide the committee with:

Major IT Program Status Updates:

EITS PROGRAM	OVERALL	BUDGET	ON-TIME
	STATUS	STATUS	STATUS
MEANINGFUL USE	+		(
ELECTRONIC MEDICAL RECORD (EMR)	+		

ENTERPRISE RESOURCE PLANNING (ERP)		
RADIOLOGY CONSOLIDATION		
DATA SCIENCES (ANALYTICS)		



Enterprise Resource Planning (ERP) Program Update:

- The PeopleSoft Financials Enterprise Resource Planning (ERP) contract was finalized and executed on February 25th, 2016.
- The ERP Implementation Partner Solicitation was released to thirty (30) vendors on February 19th, 2016.
- Proposals were received on March 21st, 2016 with and vendor presentations were scheduled the week of March 28th, 2016. The Vendor Selection Committee selected Deloitte as the Implementation Partner.
- Deloitte is currently conducting Discovery sessions with Finance, Supply Chain and EITS. Final documents from this engagement are due May 11th. A Financial and Supply Chain Current and Future State assessment is currently underway.
- A Governance framework for this program is currently being established and will follow the Epic governance structure. The first Governance meeting was held on April 27, 2016.
- Hardware has gone out to bid.
- Training for the Subject Matter Experts (SMEs) is being scheduled.

IDNYC Update:

- NYC Health + Hospitals has partnered with IDNYC to allow New Yorkers with IDNYC cards to serve as a registration card to help improve the patient experience by reducing registration wait times, streamline the registration process and provide patients with a convenient way to register at any NYC Health + Hospitals patient care locations.
- EITS in partnership with Finance has deployed Palm Vein Biometric (PVB) scanning technology as the vehicle for identifying patients who use their IDNYC cards to register for health care services at any NYC Health + Hospital sites.
- Prior to any testing, PVB Scanning technology was shared with and approved by the local Community Advisory Boards who view this as a mechanism to assist patients with registration, overcome communication barriers and improve the overall patient experience.
- A successful PVB scanning pilot was deployed at Elmhurst Hospital Center with 10,000 patients.
- This technology will introduce improvements in patient safety as well as identity any
 medical record duplication in our EMR environment. By uniquely identifying our
 patient population, not only are the risks of medical duplication reduced, but so is the
 risk of fraud and potential misidentification of unconscious patients.
- In addition, Palm Vein Biometrics utilizes proven technology which can integrate with Soarian Revenue Cycle and Clinical (Epic) applications.

ActionHealthNYC:

- IDNYC will serve as the membership card for ActionHealthNYC which is a new health care access program, scheduled to begin July 2016 which will be based at Elmhurst Hospital Center, Gouverneur, and community-based health centers.
- This program is part of a comprehensive plan to improve health care access for the city's immigrant population.

• EITS is actively involved and working with the City to insure that all required information necessary for the program to be successful is made available.

Secure Texting Update:

- Enterprise Information Technology Services has been working with the clinical staff
 to procure technology that will allow clinicians to securely communicate and receive
 notifications across multiple devices including desktops, tablets and mobile phones.
- A solicitation review was completed on Friday, April 29th.
- Product finalization and vendor selection to be completed during the first week in May.
- Procurement is expected to occur during the month of May.
- Once procurement has been completed, an implementation plan will be developed with the selected vendor.

This completes my report today. Thank you.

RESOLUTION

Authorizing the New York City Health and Hospitals Corporation (the "System") to negotiate and execute a five-year contract (the "Contract") with Canon Solutions America to provide System-wide Managed Print Services with one, two-year option to renew solely exercisable by New York City Health and Hospitals Corporation, in an amount not to exceed \$74.3 million for seven years.

WHEREAS, New York City Health and Hospitals Corporation does not currently have a Systemwide management program of its print devices creating inefficiencies and excess costs;

WHEREAS, a Request for Proposals to address this concern was issued on April 6, 2015 and Canon Solutions America was chosen by the selection committee based on the scoring criteria set forth in the Request for Proposals; and

WHEREAS, estimated savings from the contract are \$5.8 million over the initial term, and \$5.5 million for the two-year option; and

WHEREAS, the Senior Vice President/Corporate Chief Information Officer shall be responsible for overall management and monitoring of the Contract.

NOW, THEREFORE, BE IT

RESOLVED, that the New York City Health and Hospitals Corporation be and is hereby authorized to negotiate and execute a five-year contract (the "Contract") with Canon Solutions America to provide System-wide Managed Print Services with one, two-year option to renew solely exercisable by New York City Health and Hospitals Corporation, in an amount not to exceed \$74.3 million for seven years.

Executive Summary Proposed Contract Canon Solutions America for Managed Print Services

Objective:

The NYC Health + Hospitals (Health + Hospitals) developed and conducted a Request for Proposal to evaluate the opportunity to move towards a Managed Print Services ("MPS") environment for printers and multi-functional devices ("MFD") across the entire organization. The objective is to work with a single supplier who will be responsible to provide hardware service on all desktop printers and MFDs while also providing new MFD hardware when necessary. Further, the MPS Vendor will provide consultative services that will assist in reducing the total number of pages printed over time while also reducing total cost through the process of redirecting print to lower cost machines and migrating from color pages to black and white. The MPS Vendor will also recommend ways to repurpose existing devices across the entire organization which will result in a reduction of new printer hardware purchases.

Current State:

Health + Hospitals utilizes Multi-Functional Devices ("MFDs" to include high-speed print shop devices) and Desktop Printers to support the majority of Health + Hospitals' printing needs.

There are 2,434 MFDs currently in use at Health + Hospitals. Health + Hospitals utilizes 1,050 (43%) Canon devices, 1,056 (43%) Xerox devices, 312 (13%) Ricoh devices, 15 (<1%) Konica Minolta devices, and 1 (<1%) HP device. Regarding device ownership; 1,200 (49%) devices are rented, 600 (25%) devices are leased, and 634 (26%) devices are owned. 2,385 (98%) of the devices are serviced by the original equipment manufacturers, while 49 (2%) of the devices are serviced by a third party. This service includes the parts, labor, maintenance, and toner to ensure the devices are operating correctly. Health + Hospitals prints roughly 225M black and white pages and 15M color pages for a total of 240M pages per year. Click volumes for these print shop devices are included in the MFD click volume totals listed above.

There are approximately 22,356 networked and local printers currently utilized at Health + Hospitals. There is currently no model standardization at Health + Hospitals; there are several hundred different printer models currently in use. Health + Hospitals prints roughly 207M black and white pages and 33M color pages for a total of 240M pages per year.

Health + Hospitals spends of \$11.5M annually on its current state non-standardized managed print services.

Award Recommendation:

After evaluating proposals submitted by multiple interested parties, the NYC Health + Hospitals Evaluation Committee is recommending for Canon to be awarded the Managed Print Services contract. Canon agrees to support all Service Level Agreements required by Health + Hospitals (to include aggressive response time and uptime requirements) by offering 30 (thirty) full-time employees for use across the organization. These service levels will greatly improve the existing services being performed by multiple incumbents. Canon will service 2,434 MFD devices and 22,356 printers throughout the term of the 5 year agreement. Canon has agreed to absorb nearly \$2.6M in competitor's early termination costs to ensure that Canon will be capable to service the entire fleet of MFDs within NYC Health + Hospitals.

Executive Summary Proposed Contract Canon Solutions America for Managed Print Services

Financial Results:

Canon's financial proposal equals \$54.1M in projected future print related costs over the next 5 years under Canon's Managed Print Services solution. Without Canon's proposed solution, Health + Hospitals was estimated to spend \$60.M over the next 5 years for all related managed print services and hardware. Canon's solution will result in a \$5.8M savings over the five year contract term.

Estimated 5-Year Costs Prior to RFP: \$60,027,579.27

Canon's 5-Year Managed Print Services Solution: \$54,148,070.00

• 5 Year Cost Savings: \$5,879,509.27

Including extension years:

Estimated 7-Year Costs Prior to RFP: \$85,752,996.01

Canon's 7-Year Managed Print Services Solution: \$74,334,132.00

5 Year Cost Savings: \$11,418,864.01

Canon's financial offering, of which 19.7% will be through an M/WBE provider, incorporates a guaranteed 5% reduction per year on all non-fixed costs (fixed costs being hardware only). Through the NYC Health + Hospitals / Canon partnership, additional cost reduction is possible through further click volume reductions. As the number of printed pages go down, the overall cost of these services will also reduce.

Canon Service Offering:

Canon will provide right-sizing services by strategically reducing the number of printers and recommending an appropriate MFD inventory based on print volume and staff requirements. Canon will track, monitor and manage all hardcopy output equipment and their associated supplies for Health + Hospitals' local and networked printers, multi-functional devices, copiers, scanners and facsimile devices supporting all Health + Hospitals facilities.

The enterprise MPS program will include break/fix/parts/labor maintenance service support for current and future equipment along with delivering timely, comprehensive and highly detailed usage reports while providing leading technology, multi-functional devices ("MFDs"), continuous education and best practice protocol to achieve print avoidance. Print avoidance will be achieved through a variety of technical and cultural changes recommended by Canon and approved by Health + Hospitals. For example, user tracking results in increased visibility to who prints what and why, creating a sense of ownership and accountability of print related costs. Working with Health + Hospitals Senior Leadership, Canon will help develop policies and assist in educating staff on proper printing procedures (what should be printed versus what shouldn't). Health + Hospitals and Canon will mutually agree to annual print reduction targets that will be achieved through the adoption of various technologies and educational programs.

CONTRACT FACT SHEET

New York City Health and Hospitals Corporation

Contract Title:		MANAGE	D PRINT SERVICES	
Project Title & Number:	MANAGED PR	RINT SERVIC	ES	
Project Location:	CORPORATE WIDE			
Requesting Dept.:	ENTE	RPRISE INFO	RMATION TECHNOLOGY SERVICES/ Supply Chain	
	Services			
Successful Respond	ent: <u>CANON SO</u>	DLUTIONS A	MERICA	
Contract Amount: 5	74,334,132 for	7 years		
Contract Term: <u>5 Ye</u>	are with 2 1.V	ar Ontions	to Penew	
Contract Term. 5 Te	dis Willi 2, 1-16	ear Options	to kenew	
Number of Respondents:	7			
(If Sole Source, explain in Background section)				
Range of Proposals:		C	\$56,707,025 - \$61,890,764 for a 5-year portract (5-yr proposals submitted)	
Minority Business Enterprise Invited:		Г	Yes □ No If no, please explain:	
Zintorpinoo intritodi.			Tho, please explain.	
Funding Source:			☐ General Care ☐ Capital	
	☐ Grant: expl			
	☑ Other: Cos	t Center by	Facility	
Method of Payment:			me and Rate	
	for repair/par		ther: <u>Health + Hospitals will be invoiced monthly</u> iintenance service support for current and future	
	equipment	30, 10001 1110	The second secon	
EEO Analysis:	FEO s	tatus was ai	pproved by Manasses Williams on September 15,	
,	2015		preved by manages williams on september 13,	
Compliance with Health +	Hospital's			
McBride Principles?	⊠ Yes	□ No		
Vendex Clearance	□ Yes	□ No	□ N/A (Pending Approval)	

(Required for contracts in the amount of \$100,000 or more awarded pursuant to an RFP, NA or as a Sole Source, or \$100,000 or more if awarded pursuant to an RFB.)

Background (include description and history of problem; previous attempts, if any, to solve it; and how this contract will solve it):

NYC Health + Hospitals currently utilizes Multi-Functional Devices ("MFDs" to include high-speed print shop devices) and Desktop Printers to support the majority of NYC Health + Hospitals' printing needs.

There are 2,434 MFDs currently in use at Health + Hospitals. NYC Health + Hospitals utilizes 1,050 (43%) Canon devices, 1,056 (43%) Xerox devices, 312 (13%) Ricoh devices, 15 (<1%) Konica Minolta devices, and 1 (<1%) HP device. In regards to device ownership; 1,200 (49%) devices are rented, 600 (25%) devices are leased, and 634 (26%) devices are owned. 2,385 (98%) of the devices are serviced by the original equipment manufacturers, while 49 (2%) of the devices are serviced by a third party vendor. The service includes the parts, labor, maintenance, and toner to ensure the devices are operating correctly. The NYC Health + Hospitals prints roughly 225M black and white pages and 15M color pages for a total of 240M pages per year. Click volumes for print shop devices are included in the MFD click volume totals listed above.

There are approximately 22,356 networked and local printers currently utilized at Health + Hospitals. There is no model of standardization currently in place at Health + Hospitals; there are several hundred different printer models currently in use. Health + Hospitals prints roughly 207M black and white pages and 33M color pages for a total of 240M pages per year.

NYC Health + Hospitals spends a total of \$11.5M annually on its current state non-standardized managed print service. With the Manage Print Service initiative, Health + Hospitals sees an opportunity to consolidate its supplier base and drive standardization and operational efficiencies across the organization. In centralizing the contracting process and leveraging the volume of the entire organization, Health + Hospitals expects to realize cost savings through a comprehensive, well thought-out, print management program, while maintaining or improving the current levels of quality and service/support.

Contract Review Committee

Was the proposed contract presented at the Contract Review Committee (CRC)? (include date):

The proposed contract was not presented to CRC. Former Health + Hospitals President, Alan Aviles has signed a waiver to present the RFP for Managed Print Services prior to release which is attached in this document.

Has the proposed contract's scope of work, timetable, budget, contract deliverables or accountable person changed since presentation to the CRC? If so, please indicate how the proposed contract differs since presentation to the CRC:

Not applicable

Selection Process (attach list of selection committee members, list of firms responding to RFP or NA, list of firms considered, describe here the process used to select the proposed contractor, the selection criteria, and the justification for the selection):

Selection Committee Members

- 1. Jim Gomez Former Assistant Vice President, EITS
- 2. Craig Franklin Network Chief Information Officer
- 3. Eli Tarlow Network Chief Information Officer

- 4. George Bonanno Associate Director, Supply Chain Management
- 5. Gil Vega (withdrew committee membership after the voting process was finalized)
- 6. James Linhart Deputy Comptroller
- 7. Jerry Childs Coordinating Manager A, Coney Island Hospital
- 8. Michael Cosmi Director, Information Services, Network Services
- 9. Richard Plaza Assistant Director, Desktop Technologies

Firms Submitted Proposal

- 1. Canon considered and selected finalist
- 2. HP
- 3. Lexmark
- 4. Pitney Bowes considered
- 5. Xerox considered
- 6. Auxilio
- 7. Ricoh

Canon is currently a supplier of products and services to NYC Health + Hospitals. In addition, other incumbents who provide similar services to NYC Health + Hospitals also participated in the RFP process. As collectively decided by the Selection Committee, Canon's current performance was the most beneficial amongst all incumbents providing Manage Print Services to NYC Health + Hospitals today. Reference checks with other Hospital systems similar in size to NYC Health + Hospitals were conducted amongst the RFP finalists; Canons references resulted in the most complimentary out of all finalists. Canon was the only finalist to offer a reference of comparable size and scope to NYC Health + Hospitals. During the evaluation phase of this process, Canon received the highest scores when compared with the other 2 finalists.

Scope of work and timetable:

Health + Hospitals selected Canon to provide a comprehensive and innovative enterprise managed print services program (MPS) including an initial fleet replacement where necessary, tracking of print volumes across departments and facilities, recommendations based on tracking to re-direct printing to Multi-Functional Devices (MFDs) while reducing color printing.

The selected supplier will provide right-sizing services by strategically reducing the number of printers and recommending an appropriate MFD inventory based on print volume and staff requirements. Health + Hospitals expects that the selected Supplier will track, monitor and manage all hardcopy output equipment and their associated supplies for Health + Hospitals' local and networked printers, multi-functional devices, copiers, scanners and facsimile devices supporting all Health + Hospitals facilities.

The enterprise MPS program will include break/fix/parts/labor maintenance service support for current and future equipment along with delivering timely, comprehensive and highly detailed usage reports while providing leading technology, multi-functional devices ("MFDs"), continuous education and best practice protocol to achieve print avoidance. Print avoidance can be achieved through a variety of technical and cultural changes recommended by the Supplier. User tracking results in increased visibility to who prints what and why, creating a sense of ownership and accountability of print related costs.

Working with NYC Health + Hospitals Senior Leadership, selected Supplier will help develop policies and assist in educating staff on proper printing procedures (what should be printed versus what shouldn't). NYC Health + Hospitals and the Supplier will mutually agree to annual print reduction targets that will be

achieved through the adoption of various technologies and educational programs.

Further, the selected Supplier will be responsible for managing the acquisition (and removal) of the physical devices as well as providing the necessary service and support for all hardcopy output equipment.

NYC Health + Hospitals' owned MFDs will be serviced by the selected Supplier until the device reaches end of life. At that point, the device will be replaced by the selected Supplier's proposed technology (contingent of an approval by Health + Hospitals).

NYC Health + Hospitals' rented and leased devices will either be serviced by the selected Supplier or replaced with selected Supplier's proposed technology (which Supplier will then service).

All existing contracts and current service providers will be replaced by the selected Supplier through a mutually agreed upon transition plan between NYC Health + Hospitals and selected Supplier. The networked and local printers are owned by Health + Hospitals and will be serviced by the selected Supplier throughout the contract. Health + Hospitals is also open to Supplier proposed solutions based on Supplier's experience in implementing a managed print services program at similar organization to Health + Hospitals.

Below is a timetable which will take 84 days to cover all sites.

Project Initiation and Planning	
Review project plan for all locations	
Kick off meeting for program	
Identify H+H escorts for 4 PDS Teams across Regions	
Confirm Server and Monitoring requirements	
Complete IT Security requirements for VPN	
Review process changes - Managing printers, MFP, Fax, Ticketing procedures	
Confirm toner logistics per facility	
Create transition communication & Confirmation Meeting with Each Facility	
Pre Rollout Tasks	
Finalize project plan	
Finalize resources and logistics	
Team conference call - review project plan	
Service launch prep meeting - Ticketing mgmt, Hot swaps, Dispatching, end user follow ups	
Pre Rollout Meeting - all locations	
Technical / Process Set up Tasks	
Set up Device Monitoring - FM Audit	
Set up Help Desk Processes - Remedy Configuration	
Set up Device SLA Configurations	
Testing - ticketing procedures	
Set up Portal / user accounts	

Provide a brief costs/benefits analysis of the services to be purchased.

		Estimated Current Year Costs		Estimated Future Fiscal Years Costs		Estimated Canon Savings	
Year 1	FY 2017	\$	11,534,803.23	\$	11,629,790.00	\$	(94,986.77)
Year 2	FY 2018	\$	11,765,499.30	\$	11,197,492.00	\$	568,007.30
Year 3	FY 2019	\$	12,000,809.29	\$	10,797,821.00	\$	1,202,988.29
Year 4	FY 2020	\$	12,240,825.47	\$	10,429,936.00	\$	1,810,889.47
Year 5	FY 2021	\$	12,485,641.98	\$	10,093,031.00	\$	2,392,610.98
Total 5-Year Costs		\$	60,027,579.27	\$	54,148,070.00	\$	5,879,509.27
Extension Years							
Year 6	FY 2022	\$	12,735,354.82	\$	10,093,031.00	\$	2,642,323.82
Year 7	FY 2023	\$	12,990,061.92	\$	10,093,031.00	\$	2,897,030.92
Total 7-Year Costs		\$	85,752,996.01	\$	74,334,132.00	\$	11,418,864.01

Provide a brief summary of historical expenditure(s) for this service, if applicable.

Spend Type:	Annual Spend			
MFD Device and Service Costs	\$ 7,483,163.92			
Printer Toner Spend	\$ 3,816,891.24			
Additional Printer Supply Spend	\$ 77,628.54			
Outsourced Printer Service Spend	\$ 157,119.58			
Total	\$ 11,534,803.28			

Provide a brief summary as to why the work or services cannot be performed by the Corporation's staff.

The current products and services cannot be provided by the Corporation's staff because Health + Hospitals is not a distributor or a manufacturer of printers and other equipment required for a Managed Print Services program. NYC Health + Hospitals' staff also does not have expertise to repair and maintenance the type of equipment required for a Managed Print Service program.

Canon has been selected as they are able to provide adequate staffing to support all Clinical areas on a 24/7 basis, and maintain an inventory of all critical parts to complete any repair within the required time frames. Further, on-site staffing will be provided for each facility to support the response time requirements, up-time requirements, and overall goals of NYC Health + Hospitals.

Canon will also provide a dedicated technical support by providing their personnel to proactively monitor devices, clear paper jams, swap out consumables when toner is low, prior to an NYC Health + Hospitals employee making a request to the Enterprise Service Desk

Will the contract produce artistic/creative/intellectual property? Who will own It? Will a copyright be obtained? Will it be marketable? Did the presence of such property and ownership thereof enter into contract price negotiations?

No.

Contract monitoring (include which Senior Vice President is responsible):

Eli Tarlow, Assistant Vice President, Enterprise IT Services /Network CIO & IT Services Sal Guido, Senior Vice President, Infrastructure Services, EITS Network Services

Equal Employment Opportunity Analysis (include outreach efforts to MBE/WBE's, selection process, comparison of vendor/contractor EEO profile to EEO criteria. Indicate areas of underrepresentation and plan/timetable to address problem areas):

Received By E.E.O.: September 14, 2015

Date

Analysis Completed By E.E.O.: September 15, 2015

Date

Manasses C. Williams, (resigned)

Name



Managed Print Services Contract with Canon Solutions America

Eli Tarlow, Assistant Vice President, Enterprise IT Services / Network CIO & IT Services

Sal Guido, Senior Vice President, CIO, EITS Network Services

IT Committee Meeting – 5/12/16



Current State

- Health + Hospitals currently has multiple contracts for printers, service and toners.
- Health + Hospitals prints roughly:
 - 432 million black & white pages and
 - 48 million color pages
 - total of 480 million pages per year
- Employee to Printer Ratio
 - 2:1, above industry standard
- Current Annual Cost: \$11,534,803.23
- Health + Hospitals sees an opportunity for a Managed Print Services (MPS) a program that gives enterprises full control over their office print devices to gain visibility and control of their printing, which helps save money and boost productivity.
- Health + Hospitals sees an opportunity to consolidate its supplier base and drive standardization and operational efficiencies across the organization.



Core Benefits

- Average cost reduction of \$1,631,266.29 per year through consolidation of print vendors and services to one managed program, assuming average annual spend of \$10.6 million from \$12.2 million currently
- Reduced complexity of print management by reducing the quantity and model variation of print assets
- Improved end user experience through increased service presence and improved response time to all print related needs
- Provide full visibility to Health + Hospitals management on print, costs, volumes, and assets through consolidated reporting and vendor management of asset database
- Develop a strategic program through continuous education and best practice protocol to achieve print reduction targets



Procurement Methodology

- An eRFP process was utilized through MedPricer
- Advertisement posted in the City Records
- 7 vendors submitted proposals
- 3 vendors submitted the most competitive proposals and were invited for verbal presentations:
 - 1) Canon 2) Pitney Bowes 3) Xerox
- Auxilio, HP, Lexmark and Ricoh submitted weak proposals that were not beneficial to the Corporation





Evaluation Committee

- 1. Jim Gomez EITS
- 2. Craig Franklin EITS
- 3. Eli Tarlow EITS
- 4. George Bonanno Metropolitan Hospital
- 5. Gil Vega Woodhull Hospital
- 6. James Linhart Central Office, Finance
- 7. Jerry Childs Coney Island Hospital
- Michael Cosmi –EITS
- Richard Plaza EITS



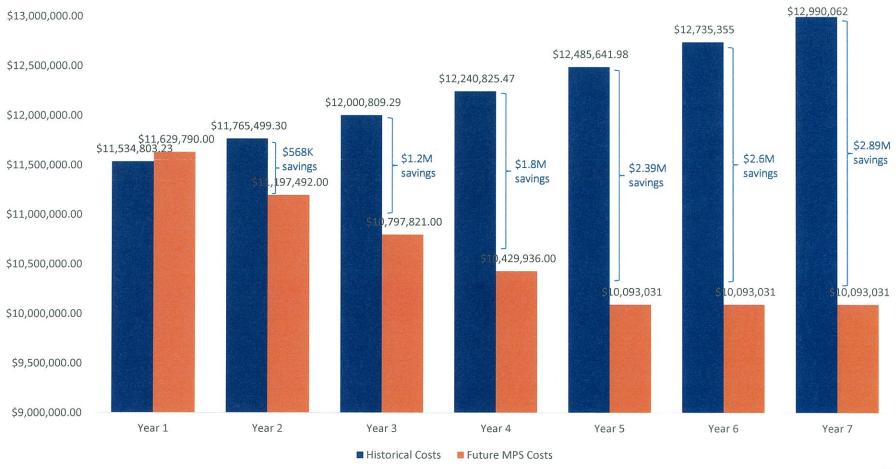
Canon Solutions America – The Selected Vendor

- Canon is the selected vendor of the eRFP based on the following criteria:
 - Managed Print Service Staff Coverage
 - Right Sizing and Consultative Solutions
 - Best Service Levels
 - Best Customer Service Offering
 - Transition and Implementation
 - Cost
 - References
 - Value Adds
- Canon has the experience in consolidating, enhancing and sustaining some of the most complicated national and global enterprise engagements with long term partnerships.
- With Canon's knowledge, they are able to customize solutions within clinical areas to meet the unique needs that clinical environments require, while utilizing a corporate approach to provide optimized solutions to the Health + Hospitals's administrative and business areas.



7-Year Contract Budget

Not to Exceed: \$74,334,132 over 7 contract years (5 years + 2, 1-year extensions)





Summary

We are seeking authorization to enter into a contract with Canon Solutions America in an amount not to exceed \$74,334,132 with total savings of \$11,418,864.01 to provide Managed Print Services throughout Health + Hospitals for a period of 5 years + 2 one-year extensions.

Resolution

Authorizing the New York City Health and Hospitals Corporation ("NYC Health + Hospitals") to execute contract documents as necessary to increase funding for and extend the existing contract (the "Contract") with SunGard Availability Services ("SunGard") for an active/active redundant data center, business continuity and associated professional services. The funding increase for the current contract, an amount not to exceed \$8,010,000, covers the remainder of the Contract term through October 31, 2016, and the rest of the funding, in an amount not to exceed \$23,142,062, covers a two-year extension plus a one-year renewal option (exercisable solely by the NYC Health + Hospitals) for a total of \$31,152,062 (including a contingency of \$3,018,530 for costs that may be incurred in the event of any additional power and cooling needs and/or moves or changes to the equipment).

WHEREAS, the Contract with SunGard, which was procured originally via a GNYHA third party contract, provides an active/active redundant data center that expires on October 31, 2016; and

WHEREAS, SunGard has hosted mission critical servers and computer systems and has provided customized solutions for NYC Health + Hospitals under the Contract; and

WHEREAS, the extension of the Contract is required to allow sufficient time to conduct a competitive solicitation and contract award process, plan, prepare and design a transition and then migrate to a new data center with the selected vendor (if other than SunGard) prior to the expiration of such extension; and

WHEREAS, the increase in funding for the Contract is required to cover the costs associated with increasing the power and cooling capacity for the Data Center; and

WHEREAS, the Contract will be managed and monitored under the direction of the Senior Vice President/Corporate Chief Information Officer.

NOW, THEREFORE, be it:

RESOLVED, THAT the New York City Health and Hospitals Corporation ("NYC Health + Hospitals") be and hereby is authorized to execute contract documents as necessary to increase funding for and extend the existing contract (the "Contract") with SunGard Availability Services ("SunGard") for an active/active redundant data center, business continuity and associated professional services. The funding increase for the current contract, an amount not to exceed \$8,010,000, covers the remainder of the Contract term through October 31, 2016, and the rest of the funding, in an amount not to exceed \$23,142,062, covers a two-year extension plus a one-year renewal option (exercisable solely by the NYC Health + Hospitals) for a total of \$31,152,062 (including a contingency of \$3,018,530 for costs that may be incurred in the event of any additional power and cooling needs and/or moves or changes to the equipment).

Executive Summary – Alternate Data Center (Business Continuity/Disaster Recovery)

The accompanying resolution requests approval to both extend and amend the contract with SunGard Availability Services (SunGard) for total not to exceed amount of \$31,152,062, which includes a contingency of \$3,018,530. The extension is for a two-year term with a one-year option to renew for SunGard to continue to provide an active/active redundant data center. The extension is required to allow sufficient time to conduct a competition, plan, prepare and design a transition and then migrate to a new data center with the selected vendor, should the incumbent vendor SunGard not be selected.

NYC Health + Hospitals has a current contract with SunGard, via a GNYHA third party contract, to provide a Tier 4 active/active redundant Data Center for the Jacobi Data Center that expires October 31, 2016. Under the contract, SunGard provides space, power and environmentals, including cabinet space, caged cabinets, power, cabling, and professional services in an active redundant Data Center. SunGard also assists the NYC Health + Hospitals with conducting annual disaster recovery mainframe planning and testing.

SunGard hosts mission critical servers and computer systems for the NYC Health + Hospitals in its Tier 4 Backup Data Center. Data center tier standards measure the quality and reliability of a data center's server hosting ability. Tier 4 data centers are considered the most robust and are less prone to failures. SunGard has provided customized solutions for the NYC Health + Hospitals for the last four years.

The total not to exceed amount for the extension is \$23,142,062, including the contingency, for costs that may be incurred in the event of any additional power and cooling needs and/or moves or changes to the equipment. The remaining spending authority is to increase the current contract by \$8,010,000 to cover the costs associated with an increase to the maximum power and cooling reserve for the current contract. The funding will be paid through the Enterprise IT Services (EITS) operating budget.

At the time EITS entered into the current contract, the original spending authority included the anticipated maximum projected kilowatt (KW) power load needed to support the IT equipment installed in the data center. This power load is used to calculate the data center cooling and square footage requirements; and includes reserve power capacity to allow for changes in power requirements due to growth or changes to the IT equipment housed in the data center.

EITS determined that it was reaching the maximum power and cooling capacity for the size of the Data Center, and entered into a contract modification with SunGard to increase the reserve power available to NYC Health + Hospitals. An increase to the reserve power would eliminate the need to buildout additional Data Center space to support the IT equipment. The total monthly cost, including the increase to power, is currently \$890,000 per month. The annualized cost of the current contract is \$10.7 million.

As a result of a decrease in on-going power needs and other efficiencies, EITS was able to negotiate a reduction in the monthly cost during the extension term to approximately \$559,000 for an annualized cost of \$6.7 million, approximately 37% less than the current spend. This reduction in costs represents a savings of approximately \$4 million per year, for a savings of \$12 million over the three year extension term including the renewal option.

EITS is planning to conduct a competition to ensure that a new contract in place prior to the expiration of the contract extension period with SunGard.

CONTRACT FACT SHEET New York City Health and Hospitals Corporation

Contract Title:

SunGard Disaster Recovery Data Center Project Title & Number: Alternate Data Center (Business Continuity/Disaster Recovery) **Project Location:** SunGard Data Center, New Jersey Requesting Dept.: **Enterprise IT Services** Contractor: **SunGard Availability Services** Contract Term: 2 Years with 1 year option to renew Contract Amount: \$31,152,062 which includes a contingency of \$3,018,530 Number of Respondents: **Extension and Amendment via GNYHA Contract** (If Sole Source, explain in Background section) Range of Proposals: Minority Business **Enterprise Invited:** N/A If no, please explain: Extension Funding Source: General Care Operating Grant: explain Other: explain Method of Payment: **Lump Sum** Per Diem Time and Rate Other: explain Monthly Payments **EEO Analysis: Approved 4/27/16** Compliance with HHC's McBride Principles? Yes No **Vendex Clearance** Yes No N/A(X)(Required for contracts in the amount of \$100,000 or more awarded pursuant to an RFP. NA or as a Sole Source, or \$100,000 or more if awarded pursuant to an RFB.)

Background (include description and history of problem; previous attempts, if any, to solve it; and how this contract will solve it):

NYC Health + Hospitals utilizes SunGard Availability Services as an active/active redundant data center to backup and replicate applications, data and services which reside at the Jacobi Data Center in the Bronx. Enterprise Information Technology Services (EITS) is requesting approval to extend and amend the contract for a total not to exceed amount of \$31,152,062, which includes a contingency of \$3,018,530.

The extension is for a two-year term with a one-year option to renew for SunGard to continue to provide an active/active redundant data center. The extension is needed to allow sufficient time to conduct a competition, plan, prepare and design a transition and then migrate to a new data center with the selected vendor.

NYC Health + Hospitals' current contract with SunGard, to provide a Tier 4 Backup Data Center for the Jacobi Data Center expires October 31, 2016. Under the contract, SunGard provides space, power and environmentals, including cabinet space, caged cabinets, power, cabling, and professional services in an alternate Data Center. SunGard also assists the NYC Health + Hospitals with conducting annual disaster recovery mainframe planning and testing.

SunGard hosts mission critical servers and computer systems for the NYC Health + Hospitals in its Tier 4 Backup Data Center. Data center tier standards measure the quality and reliability of a data center's server hosting ability. Tier 4 data centers are considered the most robust and are less prone to failures. SunGard has provided customized solutions for the NYC Health + Hospitals for the last four years.

The total not to exceed amount for the extension is \$23,142,062, including the contingency, for costs that may be incurred in the event of any additional power and cooling needs and/or moves or changes to the equipment. The remaining spending authority is to increase the current contract by \$8,010,000 to cover the costs associated with an increase to the maximum power and cooling reserve for the last 9 months of the contract term. The funding will be paid through the EITS operating budget.

At the time EITS entered into the contract, the original spending authority included the anticipated maximum projected kilowatt (KW) power load needed to support the IT equipment installed in the data center. This power load is used to calculate the data center cooling and square footage requirements; and includes reserve power capacity to allow for changes in power requirements due to growth or changes to the IT equipment housed in the data center.

EITS determined that we were reaching the maximum power and cooling capacity for the size of the Data Center, and entered into a contract modification with SunGard to increase the reserve power available to NYC Health + Hospitals. An increase to the reserve power would eliminate the need to buildout additional Data Center space to support the IT equipment.

EITS is planning to conduct a competition to ensure that a new contract in place prior to the expiration of the contract extension period with SunGard.

HHC 590B (R July 2011)

Contract Review Committee
Was the proposed contract presented at the Contract Review Committee (CRC)?
(include date):

N/A

Has the proposed contract's scope of work, timetable, budget, contract deliverables or accountable person changed since presentation to the CRC? If so, please indicate how the proposed contract differs since presentation to the CRC:

Selection Process (attach list of selection committee members, list of firms responding to RFP or NA, list of firms considered, describe here the process used to select the proposed contractor, the selection criteria, and the justification for the selection):

Not Applicable. This is an extension and amendment to an existing contract VIA GNYHA.

Scope of work and timetable:

SunGard provides space, power and environmentals to the Corporation. The contract scope includes cabinet space, caged cabinets, power, cabling, and professional services. In addition, SunGard assists the Corporation with conducting annual disaster recovery mainframe planning and testing. Costs are billed monthly.

The current contract with SunGard expires on October 31, 2016. Following approval of this extension from the Contract Review Committee and the Board of Directors, the extension will be for two years and one year renewal option.

Provide a brief costs/benefits analysis of the services to be purchased.

The total monthly cost, including the increase to power, is currently \$890,000 per month. The annualized cost of the current contract is \$10.7 million.

As a result of a decrease in on-going power needs and other efficiencies, EITS was able to negotiate a reduction in the monthly cost during the extension term to approximately \$559,000 for an annualized cost of \$6.7 million, approximately 37% less than the current spend. This reduction in costs represents a savings of approximately \$4 million per year, for a savings of \$12 million over the three year extension term including the renewal option.

Provide a brief summary of historical expenditure(s) for this service, if applicable.

Year	Amount
FY2014	\$ 5,471,462
FY2015	\$ 9,935,178

Provide a brief summary as to why the work or services cannot be performed by the Corporation's staff.

This contract submission is for the Tier 4 Backup Data Center for the Jacobi Data Center. Data center tier standards exist to measure the quality and reliability of a data center's server hosting ability. The Uptime Institute uses a 4-Tier ranking system as a benchmark to determining the dependability of a data center.

Tier 4 data centers are considered the most robust and are less prone to failures. They are designed to host mission critical servers and computer systems, with fully redundant subsystems (cooling, power, network links and storage) and compartmentalized security zones controlled by biometric access controls methods. All cooling equipment is independently dual-powered, including chillers and heating, ventilating and air-conditioning (HVAC) systems guaranteeing 99.995% availability.

NYC Health + Hospitals currently does not have the ability to provide for this internally.

Will the contract produce artistic/creative/intellectual property? Who will own It? Will a copyright be obtained? Will it be marketable? Did the presence of such property and ownership thereof enter into contract price negotiations?

No artistic/creative/intellectual property will be produced from this contract. All data stored at the SunGard facility will be owned by HHC and secured by SunGard using HHC requirements. All installed equipment at the SunGard facility will be owned by HHC.

Contract monitoring (include which Senior Vice President is responsible): Sal Guido

SVP/Corporate Chief Information Officer

Equal Employment Opportunity Analysis (include outreach efforts to MBE/WBE's, selection process, comparison of vendor/contractor EEO profile to EEO criteria. Indicate areas of under-representation and plan/timetable to address problem areas):

HHC 590B (R July 2011)

Received By E.E.O._

Analysis Completed By E.E.O.



SunGard Availability Services – Alternate Data Center

Information Technology Committee Meeting
May 12, 2016



Background Summary

Current SunGard contract, procured via GNYHA third party contract, to provide an active/active redundant data center expires October 31, 2016

- SunGard provides:
 - space, power and environmentals, including cabinet space, caged cabinets, power, cabling, and professional services in an alternate Data Center
 - hosts mission critical servers and computer systems in an active redundant data center
 - assists NYC Health + Hospitals with conducting annual disaster recovery mainframe planning and testing



Request

- Spending authority in the amount of \$31.15 million, made up of:
 - \$23.14 million for contract extension (including \$3.02 million contingency)
 - \$8.01 million increase to current contract
- Extension of the contract term for two-years with one-year renewal to allow sufficient time to conduct a competition, plan, prepare and design a transition and then migrate to a new data center with the selected vendor, should the incumbent vendor SunGard not be selected.
- Increase of current contract spending authority to cover additional costs attributed to an increase in the maximum power and cooling reserve available to NYC Health + Hospitals.
- Contingency is needed to pay for costs incurred in the event of any additional power and cooling needs moves and/or changes to the equipment.



Reduction in On-Going Costs

Replacement of the end of life equipment with new energy efficient infrastructure has decreased the power and cooling needs moving forward, resulting in savings. NYC Health + Hospitals will realize significant savings during the extension compared to current spend:

- Current contract monthly cost, including the increase to power, is currently \$890K per month \$10.7 million annualized cost.
- Extension monthly cost reduced to \$559K for an annualized cost of \$6.7 million, approximately 37% less than the current spend
- Savings of approximately \$4 million per year savings of \$12 million over the three year extension term



Budget Overview

FY16 Operating OTPS Budget (Non-Epic EMR)

		FY16 - IT Budget				
		Includes, but not limited to	(\$ in millions) Expenditures [Paid or in Progress] Total Budget as of 3/31/2016 ⁽¹⁾ B			
1	Maintenance	Radiology/Picture Archiving and Communication System, Dentrix, Microsoft, Quadramed, Mcafee, Cerner, Oracle, Sungard and CISCO Smartnet	\$138.9	\$96.2	\$42.7	
2	Services	Consulting Services for Business Intelligence, PeopleSoft, Desktop Support, Enterprise Service Desk and Enterprise Operations Center	\$43.5	\$22.5	\$21.0	
3	3 Upgrades	Information Security & Risk Management, Application Standarization, Secure File Transfer, MobileIron, Secure Texting and PC Refresh	\$26.9	\$14.9	\$12.0	
	Total (IT OTPS Budget)		\$209.3	\$133.6	\$75.7	

⁽¹⁾ Paid or in progress represents received amounts from the OTPS system.



Questions?