<table>
<thead>
<tr>
<th>Month</th>
<th>Key Tasks</th>
</tr>
</thead>
</table>
| July    | • Project Launch  
        • Initial Interviews                                                                 |
| August  | • Additional interviews  
        • Shadowing Sessions  
        • Create RFI                                                                 |
| September | • Assemble Selection Team  
            • Executive Demos  
            • Future state design documents                                                                 |
| October | • Detailed demos  
            • Scoring process                                                                 |
| November | • Reference Checks  
            • Finalize pricing  
            • Vendor Fair  
            • Board review                                                                 |
Activities over the past month

- Conducting interviews with staff members
- Beginning process to develop RFI
- Identification of shadowing session candidates
- Draft communication plan created
- Meetings with vendors to update them on selection process
• 45 interviews completed
• 79 interview candidates identified
Key Observations from Interviews

• Staff is not satisfied with the current solution and willing to invest the time to change it

• Clinical staff felt that their input was not factored into the previous selection decision – concerned it will happen again
  – Perception is that UMC chose McKesson because it was cheap

• Business processes not documented
Key Current Challenges

- Inability to view information across the continuum of care
- Limited availability of information
  - Accuracy concerns
  - Reporting limited
  - Hard to get and validate data
- Manual charting as many clinicians and physicians will not use the solution
- Downtime
Implementation Feedback

- Not enough clinical involvement
- Overly reliant upon McKesson resources
  - Limited knowledge transfer
- Resource limitations internally
- Silos in design resulted in incompatible configurations
- Limited communication and information
- No opportunity to participate in testing or signoff
Shadow Sessions identified

- ED
- Maternity
- Admitting
- Pharmacy
- Lab
- Imaging
- Revenue Cycle
Key Principles of Selection Process

• Rapid, yet methodical and inclusive
• Representation from all impacted areas
• Simple invitation to participate sent to vendors
• Clear roles and responsibilities for team members
• Clear expectations of vendors
• Focus on replacement of McKesson and long term benefit to the hospital
Invitation to Bid/RFI

• Issued in the first week of September
• Content will include:
  – Overview of UMC
  – Current state and challenges
  – Desired direction/future state
  – Timeline for implementation
  – Overview and timeline of selection process
  – Selection process “rules”
  – List of modules to be replaced
  – Request for information
Primary Selection Committee

- 15-20 members
- Mix of:
  - Executive Staff
  - Clinical Representation in each specialty
  - Revenue Cycle
  - IT
  - Physicians
  - Nursing
Secondary Committees

• 5-10 members per committee
• Primary committee members may participate
• Detailed demonstrations and discussions with vendors
• Committees will make recommendations to primary committee
Secondary Committee Draft

- ED
- Pharmacy
- Revenue Cycle
- Meaningful Use/Metrics
- Nursing
- Technology
- Physicians

- Ambulatory
- Lab
- Maternity
- Surgery
- Ad-hoc as necessary
Selection Roles

• Primary Committee
  – Score initial vendor presentations
  – Determine which vendors should proceed to detailed demonstrations
  – Participate in sub-committees as appropriate
  – Evaluate recommendations of sub-committees
  – Review all factors and vote on recommendation
Selection Roles

- **Sub-Committee**
  - View detailed demonstrations
  - Ask questions/challenge vendors
  - Provide follow-up questions and discussion points
  - Score demonstrations
  - Create consensus recommendation for main committee
Key Dates (week of)

- 9/4  - Issue RFI
- 9/14 – First meeting of selection committee (preparation)
- 9/21, 9/28 – Initial vendor presentation and scoring
- 10/5 – Selection of vendors to participate in demonstration process
- 10/5-10/30  - Sub-committee demonstrations and scoring
RFI Process Overview

• 11/2 – Choose top two vendors
• 11/11 – Present initial findings to audit committee
• November TBD – Vendor Fair (two vendors)
• 11/16, 11/30 – Complete reference checks, finalize pricing
• 12/1 – Committee reviews final proposals and makes recommendation
• 12/9 – Presentation of recommendation
Vendor Commitments

- Software must be clearly identified as:
  - Included in proposal
  - Optional but not included
  - Not yet released
- Demonstrations will not be allowed for software not generally available
  - May only be mentioned as part of roadmap
- Vendors may not discuss the selection process outside of the committees
Selection Team Commitments

- Commit to attend all vendor demonstrations
- Communicate with team members to get input and represent their concerns
- Complete scoring sheet after each demo as well as a comparative survey at the end of the process
- Commit to making a decision on a primary and secondary choice for discussion with their committees
Focus until next update

• Completion of interviews
• Completion of shadowing sessions
• Creation, approval, and issuance of RFI
• Develop initial project communications
• Identify staff for committees
• Obtain commitments to participate
• Schedule initial primary committee meeting
Questions
Ambulatory Electronic Health Records
Vendor Selection Discussion

Audit and Finance Committee

8/12/2015
Background

• Ambulatory clinics were scheduled to implement McKesson Horizon Ambulatory Care (HAC) in 2014, but stopped after notice of future non-support.

• HAC was identified as a poorly performing EHR according to major EHR reviews.

• Began a new vendor selection late-2014 and reached out to top three KLAS-rated vendors:
  • Athenahealth
  • Greenway
  • Cerner

• Did not seek Epic because of the company’s desires to only offer enterprise solution.

• Product feedback from: Revenue Cycle, Clinic Front Office, Providers, Clinical Staff.

• Over 70-employees participated over two-day period to review the products.
## Scoring Matrix*

<table>
<thead>
<tr>
<th></th>
<th>Revenue Cycle</th>
<th>Providers</th>
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<tbody>
<tr>
<td>Athena</td>
<td>2.2</td>
<td>Athena</td>
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<tr>
<td>Cerner</td>
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<td>Greenway</td>
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<td>Greenway</td>
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<table>
<thead>
<tr>
<th></th>
<th>Front Office</th>
<th>Clinical Staff</th>
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<tr>
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<td>Cerner</td>
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</tr>
<tr>
<td>Greenway</td>
<td>2.1</td>
<td>Greenway</td>
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</table>

## Score Totals*

- **Athena**: 5.6
- **Cerner**: 8.8
- **Greenway**: 8.9

*Lower is better

## Estimated Costs

<table>
<thead>
<tr>
<th>Vendor</th>
<th>Year 1</th>
<th>Year 2</th>
<th>Year 3</th>
<th>Year 4</th>
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<tr>
<td>athenahealth</td>
<td>$2,179,089</td>
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<td>$1,845,639</td>
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<td>Cerner (Remote Hosted Integrated Platform)</td>
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<td>$818,132</td>
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</table>
athenahealth Highlights

- Cloud-based provider (no system maintenance or hardware upkeep)
- Simplified provider access to system (web-based)
- Co-sourced model for aligned incentives for performance
- Best of breed for Ambulatory EMR/PM
- Highest level of interoperability and low-cost interfacing
- Native discharge summary viewing within EMR
- Provider-level feedback on EMR compliance
- Continually updated rules-engine based on payer contracts
- Highest ratings for physician patient interaction
- Included document management
Product Reviews (KLAS)

Ambulatory EMR

**Physicians 11-75**

1. Epic EpicCare Ambulatory EMR: 84.1, 0%, ✓✓
2. SRSsoft EHR: 82.8, NA, ✓✓
3. athenahealth athenaClinicals: 81.6, -2%, ✓✓
4. Greenway PrimeSUITE Chart: 70.9, -12%, ✓✓✓
5. eClinicalWorks EHR: 69.4, -5%, ✓✓✓
6. GE Healthcare Centricity Practice Solution EMR: 66.9, -9%, ✓✓
7. Allscripts Professional EHR: 66.7, +1%, ✓
8. NextGen Healthcare EHR: 61.3, -9%, ✓✓
9. Allscripts TouchWorks EHR: 55.0, -12%, ✓✓
10. McKesson Practice Partner: 47.7, -17%, ✓

**Physicians 75+**

1. Epic EpicCare Ambulatory EMR: 88.6, +3%, ✓✓✓
2. athenahealth athenaClinicals: 77.6, NA, ✓✓
3. Allscripts Sunrise Ambulatory Care: 76.0, NA, ✓
4. Cerner PowerChart Ambulatory: 73.1, -1%, ✓✓
5. eClinicalWorks EHR: 67.0, -8%, ✓✓✓
7. Allscripts TouchWorks EHR: 58.1, -12%, ✓✓✓
### Product Reviews (KLAS)

#### Practice Management

**Physicians 11-75**

<table>
<thead>
<tr>
<th>Vendor Solutions</th>
<th>Score</th>
<th>Trend</th>
<th>Confidence Level</th>
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<tbody>
<tr>
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<td>GE Healthcare Centricity Practice Solution PM</td>
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<td>eClinicalWorks PM</td>
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<tr>
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<td>Allscripts PM</td>
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<td>✔️ ✔️</td>
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</table>

**Physicians 75+**

<table>
<thead>
<tr>
<th>Vendor Solutions</th>
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<th>Confidence Level</th>
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<tbody>
<tr>
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<tr>
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<td>eClinicalWorks PM</td>
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<tr>
<td>Allscripts PM</td>
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<td>+1%</td>
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### Product Reviews (KLAS)

#### Patient Portal

<table>
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</thead>
<tbody>
<tr>
<td>Epic MyChart</td>
<td>89.6</td>
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<td>athenahealth athenaCommunicator</td>
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<td>NextGen Healthcare NextMD</td>
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<td>Allscripts FollowMyHealth</td>
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<td>eClinicalWorks Patient Portal</td>
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<td>Cerner HealthLife</td>
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<td>RelayHealth Patient Portal</td>
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Score range: 0 to 100
## Product Reviews (KLAS)

### Vendor Performance

![Image]

**Figure 47: Side-by-Side Comparison – Ambulatory EMR Vendor Performance**

<table>
<thead>
<tr>
<th>Vendor</th>
<th>Allscripts</th>
<th>Practicon EHR (Enterprise)</th>
<th>athenahealth clinicals</th>
<th>Cerner PowerChart Ambulatory</th>
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<td>Contracting Experience</td>
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<td>Product Works as Promoted</td>
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<td>Quality of Implementation</td>
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<td>6.7</td>
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<td>Overall Product Quality</td>
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<td>56%</td>
<td>64%</td>
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<td>Overall Communication</td>
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<td>Recommend to a Peer/Friend</td>
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<td>Part of Long-Term Plans</td>
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<td>91%</td>
<td>95%</td>
<td>86%</td>
<td>100%</td>
<td>90%</td>
<td>93%</td>
<td>82%</td>
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<tr>
<td>Would You Buy This Again</td>
<td>51%</td>
<td>85%</td>
<td>81%</td>
<td>72%</td>
<td>94%</td>
<td>77%</td>
<td>77%</td>
<td>58%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ranked Client’s Best Vendor</td>
<td>7%</td>
<td>40%</td>
<td>17%</td>
<td>31%</td>
<td>74%</td>
<td>22%</td>
<td>41%</td>
<td>19%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Note:** The highest score for each indicator is highlighted in green; the lowest in red.
Product Reviews (KLAS)

Interoperability

SUCCESS AND DEPTH OF INTEROPERABILITY

INTER-VENDOR COOPERATION

How well do vendors cooperate with other vendors?

- Cooperation with Other Vendors
- Overall Contribution to Provider Success

Percentage with "Advanced Options" or "Complex Connections" (Facilitated Interoperability beyond common interfaces)