



**VA ELECTRONIC HEALTH RECORD MODERNIZATION
(EHRM) SYSTEM
PERFORMANCE WORK STATEMENT (PWS)
DEPARTMENT OF VETERANS AFFAIRS**

Office of Electronic Health Record Modernization (OEHRM)

**RESEARCH, INNOVATION, TERMINOLOGY AND POPULATION HEALTH
PLANNING SUPPORT**

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VA-20-00086112

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1.0 BACKGROUND

The mission of the Department of Veterans Affairs (VA) is to provide benefits and services to Veterans of the United States. In meeting these goals, VA strives to provide high quality, effective, and efficient Information Technology (IT) services to those responsible for providing care to the Veterans at the point-of-care as well as throughout all the points of the Veterans' health care in an effective, timely and compassionate manner. VA depends on Information Management/Information Technology (IM/IT) systems to meet mission goals.

On May 17, 2018, VA entered into a ten-year indefinite-delivery, indefinite-quantity (ID/IQ) sole-source contract with Cerner Government Services, Inc. (Cerner) to acquire the Electronic Health Record (EHR) system being deployed by the Department of Defense (DoD) and related services for deployment and transition across the VA enterprise in a manner that meets VA needs, and which will enable seamless healthcare to Veterans and qualified beneficiaries. Procurement of a single common system across VA and DoD shall achieve VA's goal of seamless care for Veterans by facilitating the transition of active duty military members to VA and improving their timely access to the highest quality of care.

Cerner's EHR solution shall provide VA with a single system that can store and retrieve administrative, clinical, laboratory, radiology, pharmacy and scheduling data, and can interact with other internal and external systems. Modernization of VA's EHR will support a Veteran-centric, team-based care model, with modern decision support tools; clinical information content services; identification, communication and standardization of care paths; and resource provisioning. This will improve interoperability, performance, and user experience for the majority of the health care delivery and ancillary teams responsible for directly or indirectly providing health care services; and in turn will improve quality, safety, and timeliness of health care services delivered to Veterans.

Cerner shall provide a comprehensive EHR solution and services as specifically defined in the EHRM Basic contract. This Task Order (TO) requires research, joint innovation, and terminology planning and training support.

2.0 APPLICABLE DOCUMENTS

The documents in Paragraph 3.0 in the EHRM Basic PWS apply to the performance of this effort, there are no additional referenced documents.

3.0 SCOPE OF WORK

The Contractor shall provide research, innovation, terminology and population health planning support. These tasks include:

- a. Research Program and Management Planning
- b. Joint Cerner/VA Innovation Planning

- c. Terminology Alignment Planning
- d. Population Health Strategy
- e. Additional Technical Support

3.1 APPLICABILITY

This Task Order (TO) PWS is within the scope of paragraphs 5.8 Business Intelligence, Data Analytics, and Point of Care Decision Support, and 5.10 Innovation and Enhancements.

3.2 ORDER TYPE

The effort shall be proposed on a Firm Fixed Price (FFP) basis.

4.0 PERFORMANCE DETAILS

4.1 PERFORMANCE PERIOD

The period of performance (PoP) shall be 12 months from the date of award, with one optional task that can be exercised multiple times during the base period.

4.2 PLACE OF PERFORMANCE

Efforts under this TO shall be performed both in Contractor facilities, as well as VA facilities. Program meetings may also be held at VA Central Office, some of which may require in person attendance. Project management activities that occur at the enterprise level shall be performed at Contractor facilities.

4.3 TRAVEL OR SPECIAL REQUIREMENTS

The Government anticipates travel to perform the tasks associated with the effort, as well as to attend program-related meetings or conferences throughout the PoP. Include all estimated travel costs in your firm-fixed price line items. These costs will not be directly reimbursed by the Government.

The total estimated number of trips for this effort shall be proposed by the Contractor. Anticipated locations include, but are not limited to, Washington, DC.

4.4 CONTRACT MANAGEMENT

All requirements of Section 9.0 of the EHRM Basic PWS apply to this effort. This TO shall be addressed in the Contractor's Monthly Progress Report as set forth in the EHRM Basic contract.

4.5 GOVERNMENT FURNISHED PROPERTY

Not applicable.

4.6 SECURITY AND PRIVACY

All requirements in Section 7.0 of the EHRM Basic PWS apply to this effort.

It has been determined that protected health information may be disclosed or accessed and a signed Business Associate Agreement (BAA) shall be required. The Contractor shall adhere to the requirements of the BAA executed between OEHRM and Cerner Corporation; and shall comply with VA Directive 6066 and VHA Handbook 1605.05.

4.6.1 POSITION/TASK RISK DESIGNATION LEVEL(S)

The position sensitivity and the level of background investigation commensurate with the required level of access for all PWS tasks is Tier3/Non-Critical Sensitive in accordance with Section 8.7 of the EHRM Basic PWS.

The Tier3/Non-Critical Sensitive Position Sensitivity and Background Investigation requirements identify, in effect, the Background Investigation requirements for Contractor individuals, based upon the tasks the particular Contractor individual will be working. The submitted Contractor Staff Roster must indicate the required Background Investigation Level for each Contractor individual based upon the tasks the Contractor individual will be working, in accordance with their submitted proposal.

5.0 SPECIFIC TASKS AND DELIVERABLES

5.1 REPORTING REQUIREMENTS

The Contractor shall provide a Monthly Progress Report divided into subsections for each of the planning tasks identified below.

Deliverable:

- A. Monthly Progress Report

5.2 RESEARCH PROGRAM PLANNING

The Contractor shall provide planning, strategy, and oversight to ensure continuation of current VA research efforts and to capitalize on EHRM data and toolsets.

The EHRM Research team shall coordinate with VA to advise and provide executive support for:

- a. The design and prioritization of processes and workflows
- b. Leveraging the EHR to produce and provide the essential data required by researchers and identify new synergies
- c. Alignment of currently used VA research tools to EHRM solution sets

The Contractor shall create a Research Management Plan which shall be updated quarterly with topics added and removed, as appropriate, to reflect evolving priorities. The Plan shall address such topics as:

- a. Specific mitigation strategies (data mapping, syndication needs, validation considerations)-advocacy for research data, mapping and curation strategy, guidance for use of Cerner data alongside current data warehouse.
- b. Data access requirements for research staff to maintain critical levels of data access and functionality
- c. Clinical Trials and Research Electronic Health Record (EHR) Integration Analysis for IOC and future sites.

The Contractor shall support weekly strategy sessions with the VA Research team. VA will provide the agenda of topics/use cases for each strategy session. The Contractor shall:

- a. Convene appropriate subject matter experts to enhance the scope of EHRM research activities.
- b. Document agreed upon courses of action, requirements, issues, and future development requirements
- c. Assist VA to develop detailed requirements for future execution task orders in support of research

Research planning activities shall be summarized in the Research subsection of the Monthly Progress Report.

Deliverable:

- A. Research Management Plan

5.3 JOINT VA/CERNER INNOVATION PLANNING

The Contractor shall provide planning and strategy support to ensure opportunities for EHRM Innovation. The Contractor shall facilitate the Joint VA/Cerner Innovation Governance Board in accordance with the Innovation Board Charter. The Innovation Board Charter will be reviewed with the VA Executive Sponsor and updated to reflect changes.

The EHRM Innovation Team shall coordinate with VA to:

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- a. Further define roles and membership of ERHM Innovation Governance bodies
- b. Facilitate meetings for joint Cerner/VA Innovation Board and Innovation Committees in accordance with the charter.
- c. Create and maintain a Joint VA/Cerner Innovation Plan reflecting innovation topics of joint interest and benefit agreed to by VA and Cerner.
 - i. The Plan shall be reviewed quarterly and updated as needed to reflect evolving priorities
 - ii. The Plan shall detail the National EHRM Innovation Pipeline following a stage gate model
- d. Assist VA to develop detailed requirements for future execution task orders in support of fostering EHRM innovation efforts

Joint Cerner/VA Innovation planning activities shall be summarized in the Joint VA/Cerner Innovation subsection of the Monthly Progress Report.

Deliverable:

- A. Joint VA/Cerner Innovation Plan

5.4 TERMINOLOGY ALIGNMENT PLANNING

The Contractor shall create and maintain a Terminology Alignment Plan addressing such topics as:

- a. Alignment of VA/Cerner Standards Engagement with Standards Development Organizations and other organizations as mutually agreed.
- b. Alignment of essential data such as health factors and other terminologies used within VA, DoD and Cerner.
- c. Planning for continuous delivery of changes to the terminology landscape such as New-Term Rapid Turnaround
- d. Optimization/normalization of the Cerner data model to existing standards such as HL7 Analysis Normal Form and FHIR.
- e. Alignment of Care Quality between legacy VistA and Cerner EHRM solution.
- f. Achievement of High Reliability Organization status

The Terminology Alignment Plan shall be regularly updated with topics added and removed as appropriate, to reflect evolving VA priorities.

The Contractor shall provide a New-Term Rapid Turnaround plan to support continuous delivery of changes to the terminology landscape.

The Contractor shall support weekly strategy sessions with the VA terminology team. VA and Cerner will develop the agenda of topics for each strategy session. The Contractor shall:

- a. Provide the appropriate subject matter experts to support each agenda topic.

- b. Document agreed upon courses of action, requirements, issues, and future development requirements.
- c. Assist VA to develop detailed requirements for future execution task orders in support of terminology alignment

Terminology alignment planning activities shall be summarized in the Terminology Alignment subsection of the Monthly Progress Report.

Deliverable:

- A. Terminology Alignment Plan
- B. New-Term Rapid Turnaround Plan

5.5 POPULATION HEALTH STRATEGY AND PLANNING

In order to align and deliver VA population health programs, the Contractor shall provide services for population health strategy and planning and supporting continuation of current VA population health efforts to capitalize on EHRM data and toolsets.

The Contractor shall work with VA to create and provide strategies to continue to expand the value of VA population health initiatives. Identification and prioritization of VA needs shall be in alignment with national standards for programs and integration into the Electronic Health Record (EHR), workflows and processes. The Contractor shall create a draft Population Health Strategy based on VA priorities within the Cerner environment. The Strategy may include items such as:

- a. Rural health
- b. Integrated Case Management
- c. Employee and Occupational Health
- d. Military Health
- e. Military exposures
- f. Public Health
- g. Surveillance
- h. Prevention
- i. Population management (e.g., registries, cohorts)
- j. Whole Health
- k. VA-specific populations (e.g., Spinal Cord Injury and Disorders, Blind Rehabilitation, Traumatic Brain Injury)

The strategies should:

- a. Capitalize on EMRM data, toolsets and existing VA tools, reports, metrics and registries
- b. Align VA solutions
- c. Provide a foundation in health equity that provides tools to assess and address health disparities

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The work will include high priority areas for VHA (e.g., Suicide Prevention, Women's Health, Homelessness) and provide a framework that can pivot to address new priorities assigned by Congress. The Contractor shall work with VA to create a strategic Population Health Plan including:

- a. Assessment and documentation of emerging requirements, including adjudication and interpretation for functional and technical leadership.
- b. Align VA clinical and operational challenges with a documented road map for phases of work.
- c. Assist VA to develop requirements for future execution task orders in support of population health initiatives and objectives.

The Contractor shall support weekly meetings scheduled at the direction of VA and the respective topic teams. VA will contribute to the agenda of topics/use cases for each strategy session. The Contractor shall:

- a. Provide subject matter experts for
 - o Supporting design of best practice and standardized workflows
 - o Sharing lessons learned from commercial and public sectors
- b. Document agreed upon courses of action, requirements, issues, and future development requirements

Population Health Strategy & Planning activities shall be summarized in the Population Health subsection of the Monthly Progress Report.

Deliverable:

A. Population Health Strategy

5.6 ADDITIONAL TECHNICAL SUPPORT (OPTIONAL TASK)

Research, innovation, terminology and population health requirements continue to evolve to meet VA priorities and may require additional support throughout the PoP of this Task Order. This optional task may be exercised multiple times not to exceed the CLIN ceiling.

6.0 GENERAL REQUIREMENTS

6.1 PERFORMANCE METRICS

The table below defines the Performance Standards and Acceptable Levels of Performance associated with this effort. The Government may also utilize the commercially available and VA-specific Key Performance Indicators (KPIs) and Service Level Agreements (SLAs) defined at the ID/IQ level to measure performance under this TO, as applicable.

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Performance Objective	Performance Standard	Acceptable Levels of Performance
A. Technical / Quality of Product or Service	<ol style="list-style-type: none"> 1. Shows understanding of requirements 2. Efficient and effective in meeting requirements 3. Meets technical needs and mission requirements 4. Provides quality services/products 5. Meets performance thresholds/metrics defined in applicable Service Level Agreements 	Satisfactory or higher
B. Project Milestones and Schedule	<ol style="list-style-type: none"> 1. Quick response capability 2. Products completed, reviewed, delivered in accordance with the established schedule 3. Notifies customer in advance of potential problems 	Satisfactory or higher
C. Staffing	<ol style="list-style-type: none"> 1. Currency of expertise and staffing levels appropriate 2. Personnel possess necessary knowledge, skills and abilities to perform tasks 	Satisfactory or higher
D. Invoicing	<ol style="list-style-type: none"> 1. Invoices are current, accurate, and complete. 	Satisfactory or higher
E. Management	<ol style="list-style-type: none"> 1. Integration and coordination of all activities to execute effort 	Satisfactory or higher

The COR will utilize a QASP throughout the life of the TO to ensure that the Contractor is performing the services required by this PWS in an acceptable level of performance. The Government reserves the right to alter or change the QASP at its own discretion. A Performance Based Service Assessment will be used by the COR in accordance with the QASP to assess Contractor performance.

6.2 SECTION 508 –INFORMATION AND COMMUNICATION TECHNOLOGY (ICT) STANDARDS

All requirements in Sections 8.10, including subparagraphs, of the EHRM Basic PWS apply to this effort. Deliverable requirements are further defined in the following subparagraphs. The Contractor shall comply with the technical standards at: <https://www.access-board.gov/guidelines-and-standards/communications-and-it/about-the-ict-refresh/final-rule/single-file-version>

6.2.1 REPRESENTATION OF CONFORMANCE

The Contractor shall provide a Section 508 Subject Matter Expert lead for VA EHRM 508 resources to work with. The Contractor shall adhere to the VA-approved Section 508 Test and Delivery Plan and Section 508 Accessibility Roadmap delivered under TO 0001. The Contractor shall update the Government Product Accessibility Template (GPAT) and/or Voluntary Product Accessibility Template (VPAT) delivered under TO 0001 to indicate the level of Section 508 conformance as updates are made to its products and/or services to ensure and sustain 508 compliance.

The Contractor shall work closely with VA Section 508 representatives to verify Section 508 conformance of its products and/or services.

6.2.2 ACCEPTANCE AND ACCEPTANCE TESTING

The Contractor shall provide Final Section 508 Compliance Test Results. The Section 508 Test Results shall include a GPAT/VPAT Conformance Statement validating conformance to Section 508 Refresh Success Criteria and Conformance Requirements for already-developed ICT deliverables.

The Final Section 508 Test Results shall be reviewed and approved by VA Section 508 representatives to validate conformance to Section 508 Refresh Success Criteria and Conformance Requirements for ICT deliverables.

For software development for VA interfaces/systems, the Contractor shall prepare and submit a Section 508 Conformance Validation Package with content as outlined in VA Process Asset Library, Software Development Product Build process map.

The Section 508 Conformance Validation Package shall be reviewed and approved by VA Section 508 representatives to validate conformance to Section 508 Refresh Success Criteria and Conformance Requirements for ICT deliverables.

Automated test tools, manual techniques, and checklists are used in the VA Section 508 compliance assessment.

Deliverable:

- A. Final Section 508 Compliance Test Results for ICT Deliverables
- B. Section 508 Compliance Validation Package for ICT Deliverables

6.3 SHIPMENT OF HARDWARE OR EQUIPMENT

Not applicable.

6.4 ORGANIZATIONAL CONFLICT OF INTEREST

All functions related to Acquisition Support shall be on an advisory basis only. Please be advised that since the awardee of this Task Order will provide systems engineering, technical direction, specifications, work statements, and evaluation services, some restrictions on future activities of the awardee may be required in accordance with FAR 9.5 and the clause entitled, Organizational Conflict of Interest, found in Section H of the EHRM basic contract. The Contractor and its employees, as appropriate, shall adhere to the corporate-level Non-Disclosure Agreement signed under TO 0001.

6.5 DELIVERABLES

The Contractor shall provide deliverables for Government review and acceptance IAW with Section B.2 of the Task Order. The Contractor shall incorporate Government feedback provided via the OEHRM Deliverables review process into Task Order deliverables as applicable. Feedback shall be incorporated in either the resubmission or next required submission of the deliverable based upon the timeframe in which it is provided by the Government. For Government feedback requiring additional discussion and/or clarification, the Contractor shall coordinate language updates with VA to resolve and finalize revisions to the affected deliverable. The Contractor shall appropriately mark and date deliverables to maintain version control using the following format: TO Number – CLIN Number Formal Deliverable Title – Deliverable Due Date IAW Section B.2– Version X.X. The Contractor shall annotate major (initial submission) and minor (resubmission) deliverable releases using a numerical system (e.g. Initial submission: TO 0001 – 0001AA Contractor Project Management Plan - August 2018 – Version 1.0; Resubmission: TO 0001 – 0001AA Contractor Project Management Plan – August 2018 – Version 1.1). Resubmitted deliverables shall maintain the original due date defined in Section B.2 of the TO. The Contractor shall provide discrete deliverables in separate email submissions. Email submissions shall include the Contract/Task Order numbers and corresponding deliverable CLIN number. The Contractor shall track updates in both major and minor deliverable releases in an agreed upon format, such that the Government can identify and review language revisions for acceptance.

For all deliverables throughout this TO, Wiki links are not acceptable. If Wiki page content is required as part of the deliverable submission, the Contractor shall reference the Wiki page as an attachment within the deliverable. The Wiki page shall be representative of the current state at the time of submission. The Contractor shall export the referenced Wiki page as a timestamped portable document format and provide the referenced attachment(s) with the deliverable submission.

CONTRACTOR EMPLOYEE
PERSONAL FINANCIAL INTEREST/PROTECTION OF SENSITIVE INFORMATION
AGREEMENT

This Agreement refers to Contract/Order _____ entered into between the Department of Veterans Affairs and _____ (Contractor).

As an employee of the aforementioned Contractor, I understand that in connection with my involvement in the support of the above-referenced Contract/Order, I may receive or have access to certain "sensitive information" relating to said Contract/Order, and/or may be called upon to perform services which could have a potential impact on the financial interests of other companies, businesses or corporate entities. I hereby agree that I will not discuss or otherwise disclose (except as may be legally or contractually required) any such "sensitive information" maintained by the Department of Veterans Affairs or by others on behalf of the Department of Veterans Affairs, to any person, including personnel in my own organization, not authorized to receive such information.

"Sensitive information" includes:

- (a) Information provided to the Contractor or the Government that would be competitively useful on current or future related procurements; or
- (b) Is considered source selection information or bid and proposal information as defined in FAR 2.101, and FAR 3.104-4; or
- (c) Contains (1) information about a Contractor's pricing, rates, costs, schedule, or contract performance; or (2) the Government's analysis of that information; or
- (d) Program information relating to current or estimated budgets, schedules or other financial information relating to the program office; or
- (e) Is properly marked as source selection information or any similar markings.

Should "sensitive information" be provided to me under this Contract/Order, I agree not to discuss or disclose such information with/to any individual not authorized to receive such information. If there is any uncertainty as to whether the disclosed information comprises "sensitive information", I will request my employer to request a determination in writing from the Department of Veterans Affairs Contracting Officer as to the need to protect this information from disclosure.

