

**SUBMITTAL TO THE BOARD OF SUPERVISORS  
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**



**ITEM: 3.48  
(ID # 28118)**

**MEETING DATE:**  
Tuesday, June 24, 2025

**FROM :** RUHS-PUBLIC HEALTH

**SUBJECT:** RIVERSIDE UNIVERSITY HEALTH SYSTEM - PUBLIC HEALTH: Ratify and Approve Amendment No. 1 to the Professional Service Agreement with Ellit Groups LLC for the Epic Electronic Health Record Implementation Services for the Period of Performance of December 22, 2024 through December 21, 2025, with the Option to Renew for One (1) Additional Year through December 21, 2026. All Districts. [Total aggregate amendment amount \$3,477,740 – 100% Federal]

**RECOMMENDED MOTION:** That the Board of Supervisors:

1. Ratify and approve Amendment No. 1 to the Professional Service Agreement with Ellit Groups LLC for the Epic Electronic Health Record (EHR) Implementation Services (Agreement) for the period of performance of December 22, 2024, through December 21, 2025, with the option to renew for up to one (1) additional year through December 21, 2026, in the amount of \$3,477,740, and total aggregate amount of \$4,227,740;
2. Authorize the Chair of the Board to sign the Amendment on behalf of the County;
3. Authorize the Purchasing Agent, in accordance with Ordinance No. 459, based on the availability of fiscal funding and as approved as to form by County Counsel to sign all reports, certifications, forms, and subsequent amendments to the Agreement that exercise the options of the Agreement, including modifications to the statement of work that stay within the intent of the Agreement; and
4. Authorize the Purchasing Agent, based on the availability of fiscal funding, to issue Purchase Orders for goods and/or services related to the Agreement that do not exceed the sum total of the aggregate amount of the Agreement.

**ACTION:Policy**

  
Kim Saruwatari, Director of Public Health 6/18/2025

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**MINUTES OF THE BOARD OF SUPERVISORS**

On motion of Supervisor Spiegel, seconded by Supervisor Medina and duly carried by unanimous vote, IT WAS ORDERED that the above matter is approved as recommended.

Ayes: Medina, Spiegel, Washington, Perez and Gutierrez  
Nays: None  
Absent: None  
Date: June 24, 2025  
xc: RUHS-PH

Kimberly A. Rector  
Clerk of the Board  
By:   
Deputy

**SUBMITTAL TO THE BOARD OF SUPERVISORS COUNTY OF RIVERSIDE,  
STATE OF CALIFORNIA**

<b>FINANCIAL DATA</b>	<b>Current Fiscal Year:</b>	<b>Next Fiscal Year:</b>	<b>Total Cost:</b>	<b>Ongoing Cost</b>
<b>COST</b>	\$869,440	\$1,738,860	\$3,477,740	\$0
<b>NET COUNTY COST</b>	\$0	\$0	\$0	\$0
<b>SOURCE OF FUNDS: 100% Federal</b>			<b>Budget Adjustment: No</b>	
			<b>For Fiscal Year: 24/25 – 26/27</b>	

**C.E.O. RECOMMENDATION:** Approve

**BACKGROUND:**

**Summary**

Riverside University Health System – Public Health (RUHS-PH) is committed to modernizing the public health infrastructure and improve the delivery of care across Riverside County. As part of this commitment, Ellit Groups LLC (Ellit) was contracted with RUHS-PH to undertake a major implementation of the Epic electronic health record (EHR) system. This transformation represents a foundational shift not only in technology, but in how care teams collaborate, engage with patients, and deliver services across a complex and diverse public health environment. During the initial pre-implementation phase of the services, Ellit provided a comprehensive review of the planning tasks associated with completing the rollout of the Public Health EHR, including third-party products, project staffing approach and plan, total cost of ownership analysis, EHR technology integration and infrastructure requirements, training approach, data migration strategy, legacy decommissioning plan, project management support, data collection, standardization opportunities, and organizational change management plan. Additionally, Ellit has been responsible for managing the impact of the RUHS-PH rollout to Loma Linda University Health, as well as providing Public Health Epic module expertise for Health Planet, Beaker, EpicCare Ambulatory, and other important applications as part of the EHR.

**Impact on Residents and Businesses**

RUHS-PH's implementation of the Epic electronic health record system is an important piece to the entire Riverside University Health System (RUHS). The implementation of the Epic EHR within RUHS-PH will help the modernization of the Public Health infrastructure, unifying different data systems so patients and clients that are seeking care across RUHS would benefit from seamless referrals within RUHS-PH Programs internally and with external referral capability for patients and clients. The integration will also allow RUHS-PH to gather data across various electronic health sources and incorporate disease reporting to develop more real time reporting and surveillance that will benefit the residents of Riverside County.

**Additional Fiscal Information**

The aggregate cost of the amendment is expected to be \$3,477,740. The initial cost for the pre-implementation services was approximately \$750,000, bringing the total aggregate cost to approximately \$4,227,740. The services are 100% Federal funding, and there is no impact to

**SUBMITTAL TO THE BOARD OF SUPERVISORS COUNTY OF RIVERSIDE,  
STATE OF CALIFORNIA**

County General Funds. The estimated cost breakdown per fiscal year, including the original contract period of performance, is as follows:

Initial Period of Performance: December 22, 2023 – December 21, 2024:

<b>Fiscal Year</b>	<b>Annual Cost</b>
23/24	\$375,000
24/25	\$375,000
<b>Total Aggregate:</b>	<b>\$750,000</b>

Renewal Period: December 22, 2024 – December 21, 2025, with option to renew through December 21, 2026:

<b>Fiscal Year</b>	<b>Annual Cost</b>
24/25	\$869,440
25/26	\$1,738,860
26/27	\$869,440
<b>Total Renewal Periods:</b>	<b>\$3,477,740</b>
<b>Total Amended Aggregate:</b>	<b>\$4,227,740</b>

**Contract History and Price Reasonableness**

Riverside County Resolution 2024-127 authorizes the Purchasing Agent to make procurements not to exceed \$750,000 per vendor, pursuant to Public Contract Code Section 20131, Subsection (C), and implement such authority into County procurement policies and procedures relating to County hospital procurement procedures and activities. As part of this Resolution, the Board of Supervisors defines Riverside's "county hospital" as an integrated system of inpatient and outpatient locations known as the Riverside University Health System, which includes RUHS-PH. The implementation services of the Epic EHR falls within the list of professional services identified in Schedule A of Resolution 2024-127. Any services that exceed \$750,000 per year require approval from the Board of Supervisors.

**ATTACHMENTS:**

**ATTACHMENT A:** Amendment No. 1 to the Professional Service Agreement with Ellit Groups, LLC.

  
Melissa Curtis, Deputy Director of Purchasing and Fleet

6/18/2025

  
Douglas Ordóñez Jr.

6/19/2025

  
Gregg Gu, Chief of Deputy County Counsel

6/19/2025

AMENDMENT NO. 1 TO THE PROFESSIONAL SERVICE AGREEMENT FOR  
EPIC ELECTRONIC HEALTH RECORD PRE-IMPLEMENTATION SERVICES BETWEEN  
COUNTY OF RIVERSIDE AND ELLIT GROUPS LLC

Original Contract Term:	December 22, 2023 through December 21, 2024 (initial term) with option to renew through December 21, 2026
Effective Date of Amendment:	December 21, 2024
Original Aggregate Contract Amount:	\$750,000
Amended Aggregate Contract Amount:	\$4,227,740 (increase of \$3,477,740)
Contract ID:	HSARC-24-135

This Amendment No. 1 to the Professional Service Agreement for the EPIC Electronic Health Record Pre-Implementation Services (“Amendment No. 1”), is effective as of December 21, 2024 (“Effective Date”), by and between the COUNTY OF RIVERSIDE, a political subdivision of the State of California, on behalf of its Riverside University Health System – Public Health (“COUNTY”) and Ellit Groups LLC, a Texas limited liability company (“CONTRACTOR”). COUNTY and CONTRACTOR are collectively referred to as the “Parties” and individually as the “Party”.

**RECITALS**

**WHEREAS**, the Parties entered into that certain Professional Service Agreement (the Agreement) for EPIC Electronic Health Record Pre-Implementation Services on December 22, 2023, and effective as of such date; and

**WHEREAS**, Section 2, Period of Performance, allows for options to renew the Agreement for up to two (2) additional years by written amendment; and

**WHEREAS**, the Parties acknowledge and agree that the first renewal option was not exercised timely, and which would have commenced December 22, 2024; and

**WHEREAS**, the CONTRACTOR continued providing services to COUNTY and were accepted by COUNTY without a written services agreement in place; and

**WHEREAS**, the Parties now desire to ratify and exercise the first renewal option of the Agreement as of December 22, 2024, through December 21, 2025, amend the renewal options, increase the Compensation Provisions, update Exhibit A, Scope of Service, and update Exhibit B, Payment Provisions for first renewal term (12/22/24 – 12/21/25).

**NOW, THEREFORE**, in consideration of the foregoing, and the promises and mutual covenants and conditions hereinafter set forth, the Parties hereby do agree as follows:

1. **Recitals.** The recitals set forth above are true and correct and incorporated herein by this reference.
2. **Ratification and Renewal.** The Parties hereby ratify the Agreement in its entirety, as if continuously in effect without interruption by way of exercise of the first renewal option effective December 22, 2024, through December 21, 2025. All terms and conditions of the

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Agreement remain unchanged and in full force and effect, except as expressly modified by this Amendment No. 1.

3. **Section 2, Period of Performance.** The first sentence of Section 2.1 is deleted in its entirety and replaced with the following:

“This Agreement shall be effective upon signature by both parties and continues in effect for one (1) year, unless terminated earlier, with the option to renew for up to two (2) additional years by written amendment.”

4. **Section 3, Compensation.** The second sentence of Section 3.1 is deleted in its entirety and replaced with the following:

“Maximum payment by COUNTY to CONTRACTOR shall not exceed the aggregate amount of FOUR MILLION TWO-HUNDRED TWENTY-SEVEN THOUSAND SEVEN-HUNDRED FORTY DOLLARS (\$4,227,740), including all expenses and based on the budgeted amounts for the initial term and each subsequent term listed in Exhibit B, Payment Provisions.”

5. **Section 3, Compensation, Subsection 3.3, part b.** Subsection 3.3, part b shall be deleted in its entirety and replaced with the following:

“CONTRACTOR shall provide adequate supporting documentation, including source documentation as appropriate, (i.e., receipts, logs, time sheets, payroll records, detailed deliverables, etc.) as requested by the COUNTY. In alignment with grant reporting requirements, all invoices and payments must clearly identify and be tied to defined deliverables. Progress must be tracked and documented to demonstrate how funds are being utilized in support of these deliverables.”

6. **Section 3, Compensation, Subsection 3.4.** The last sentence in Subsection 3.4 shall be deleted in its entirety and replaced with the following:

“In the event that such funds are not forthcoming for any reason, COUNTY shall immediately notify CONTRACTOR in writing, and this Agreement shall be deemed terminated immediately, having no further force and effect.”

7. **Exhibit A, Scope of Service.** Exhibit A is hereby amended to add Exhibit A-1, Scope of Service for Implementation, Rollout and Deployment, attached hereto and incorporated herein by reference.

8. **Exhibit B, Payment Provisions.** Exhibit B shall be amended to add Exhibit B-1, Implementation Resources.

9. **Effective Date.** This Amendment No. 1 is effective as of December 21, 2024.

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10. **Miscellaneous.** All other terms and conditions of the Agreement not modified herein shall remain unchanged.
11. **Counterparts.** This Amendment No. 1 may be executed in any number of counterparts, each of which shall be an original, but all of which together shall constitute one and the same instrument.

**[SIGNATURES ON NEXT PAGE]**

IN WITNESS WHEREOF, the Parties hereto have caused their duly authorized representatives to execute this Amendment No. 1.

COUNTY OF RIVERSIDE, a political subdivision of the State of California, on behalf of its Riverside University Health System – Public Health

ELLIT GROUPS, LLC, a Texas limited liability company

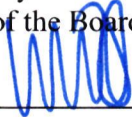
By:   
V. Manuel Perez, Chair  
Board of Supervisors

By: Sharon Heath  
Sharon Heath  
VP, Finance & Human Resources

Dated: JUN 24 2025

Dated: 06/16/2025

ATTEST:  
Kimberly Rector  
Clerk of the Board

By:   
Deputy

APPROVED AS TO FORM:  
Minh C. Tran  
County Counsel

By: Esen Sainz  
Esen Sainz  
Deputy County Counsel



## Scope of Work for Implementation, Rollout and Deployment

This Statement of Work (“SOW”), effective December 22, 2024, is made by and between Ellit Groups LLC and Riverside University Health System – Public Health, (“Customer” or “RUHS-PH”) in accordance with the terms of the Professional Service Agreement (the “Agreement”) effective December 21, 2023, for the provision of certain professional services as more fully described herein (“Services”).

All terms and conditions in the Agreement between Ellit Groups and Riverside University Health System, shall be applicable to this SOW, and are incorporated by reference, together constituting the entire understanding between the parties with respect to the subject matter hereof. This SOW may not be modified except pursuant to an amendment expressly stating a purpose to amend the terms of this SOW and signed by authorized representatives of both parties hereto. Any capitalized terms which are not defined herein shall have the meanings defined in the Agreement.

### Background

This SOW sets forth the implementation roles and rates for the support staff and leadership team who will assist Riverside University Health System in implementing Epic across all Public Health programs in scope. This agreement is a supplement to the agreement executed on December 21, 2023, made between Ellit Groups LLC and RUHS-PH for the scoping and implementation planning for the rollout of the Epic program.

Given that Riverside University Health System is a Community Connect partner of Loma Linda University Health System, RUHS-PH seeks a consulting partner to assist with the overall rollout and deployment of the Epic system across all appropriate Public Health programs. These services include:

- **Advisory Services:** providing implementation oversight and executive guidance
- **Program & Project Management managing alongside Loma Linda**

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**University:** implementation efforts of all areas including Public Health, Riverside University Health System, and Loma Linda University Health System

- **Electronic Health Record Workflow Subject Matter Expertise:** working directly with Public Health to champion operational requirements and ensure all implementation efforts align to the unique nature that Public Health requires
- **Implementation Services:** supporting leadership, operational readiness, technical support, and end user training, along with any additional areas needed throughout the project life cycle

All the terms and conditions of the Agreement are incorporated herein by reference. To the extent of any conflict between this Statement of Work and the Agreement, the terms of the Agreement shall prevail.

#### Scope

The Ellit Groups resources will report directly to RUHS-PH Executive Leadership and will manage and support the implementation efforts of the organization. Per the Epic – Public Health Roadmap provided by RUHS-PH leaders (see Appendix), a portion of the RUHS-PH Programs in scope for the Epic implementation are live in some capacity and require Optimization or Enhancement efforts to make these programs viable for use. The remaining programs require full Epic implementation and will be transitioning from other platforms.

Ellit Groups shall ensure RUHS-PH receives interoperability that includes registry reporting, surveillance reporting, and data sharing capabilities with key strategic external partners.

The implementation approach will be first to focus on the Programs that are already live using Epic and prioritize and coordinate the resolution of outstanding enhancements. In addition to this, the Ellit Groups resources will also identify key “quick wins” or workflow changes that can dramatically improve current state use of the system. Optimization and implementation shall be identified, prioritized and approved through the implementation Governance structure which includes RUHS-Information Services (RUHS-IS) RUHS-PH , and Loma Linda University Health System.

The implementation approach for the identified programs as referenced in the Appendix will follow Epic’s standard Community Connect Public Health implementation strategy. If additional programs are required, the implementation team will evaluate feasibility through the Governance structure.

- **Scoping & Kickoff – Partnering with RUHS, RUHS-PH and Loma Linda University Health System,** Ellit Groups will coordinate the efforts to confirm specific application scope for each of the programs and plan and execute the Kickoff event for the implementation.

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- Department Discovery Questionnaires & Workflows Assessments – Ellit Groups will coordinate the product demonstrations and workflow design sessions, including Department Discovery Questionnaires with all stakeholders including Loma Linda University Health, RUHS, and RUHS-PH leadership. Ellit Groups will ensure that key performance indicators are integrated into the Governance structure and are identified, prioritized and planned for go live and beyond.
  - Operational Champion and Readiness – Ellit Groups may provide guidance and advisory services to coordinate operational feedback for Loma Linda University Health resources who will take ownership of these efforts.
  - Change Management & Training – Ellit Groups will ensure Loma Linda University Health training materials for RUHS-PH is appropriate and effective for the unique workflows of RUHS-PH. Additionally, Ellit Groups will provide Trainer(s) to support the Subject Matter Experts and Super Users to conduct Super User & End User Training. Ellit Groups will ensure training assessments and end user satisfaction surveys are conducted and reviewed after each training session. Training Key Performance Indicators will be reviewed by Governance regularly during the training window.
  - End User Devices – Ellit Groups will provide some guidance to ensure the appropriate technical rollout and testing efforts occur. The bulk of this effort will be conducted by RUHS-PH IT resources.
  - Go Live – Ellit Groups will provide guidance in the planning and support of activation, leveraging RUHS-PH Super Users, RUHS-PH IT resources, and current Ellit Groups team members. In addition, Ellit Groups will provide 13 Activation resources, who will provide at-the-elbow support during the 3-week go-live window. If additional resources are required, there may be another contract amendment for these costs.
  - Post Live Support – Ellit Groups will remain engaged through 90-days of stabilization and ensure the organization is successfully transitioned to continued optimization of the system. Successful key performance indicators will be reviewed and measured through Governance and end-user success.

#### Deliverables

Ellit Groups will ensure the following deliverables are included in scope, either leveraging Ellit Groups, RUHS, RUHS-PH, or Loma Linda templates, based on the implementation team's recommendation.

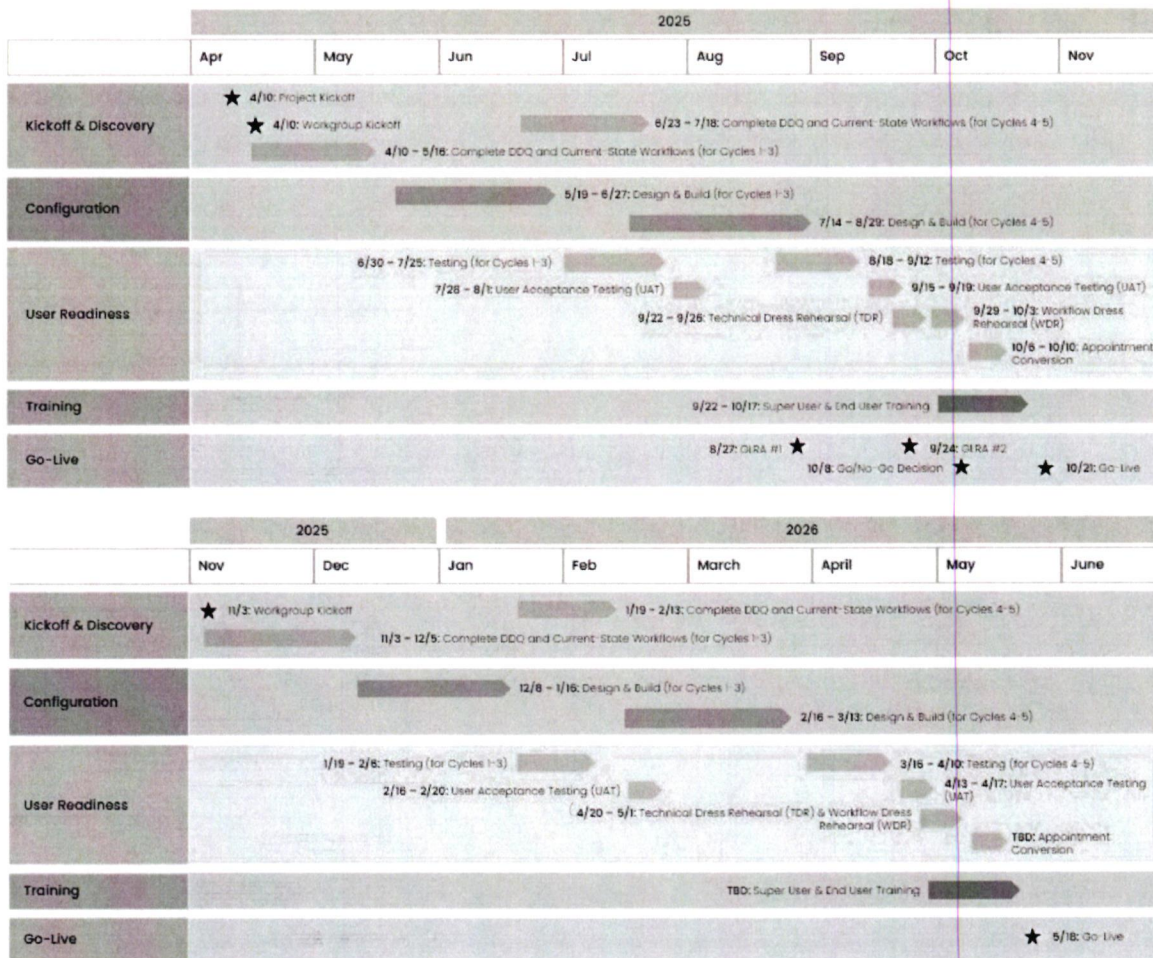
- **Project Charter** – Overall narrative of our project objectives, scope, milestone timeline, training plan, resource plan, and governance plan.
- **Operational & Readiness Plan** – Detailed readiness plan outlining and tracking milestones and supporting tasks to completion.
- **RAID Log** – Documented log tracking project Risks, Actions, Issues, and

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- Decisions with mitigation plans.
- **Department Discovery Questionnaire (DDQ)** – Document outlining the necessary design to support the build configuration of the system.
  - **Operational Readiness Assessments** – Documentation supporting system operationalization efforts which includes typical policies & procedures, high impact workflow assessments, surveys and readiness scorecards.
  - **Status Reports** – Regular (typically weekly) reports providing current accomplishments, planned work, program level high-level status, and critical issues with mitigation.
  - **Monthly Ellit Status Reports** – Monthly report outlining Ellit Groups accomplishments and planned work to be attached to each invoice.
  - **Monthly Billing** – In alignment with grant reporting requirements, all invoices and payments must clearly identify and be tied to defined deliverables. Progress must be tracked and documented to demonstrate how funds are being utilized in support of these deliverables.

#### Project Duration & Milestones

The implementation is broken into two parallel work efforts. Program Group 1 consists of the 8 programs that are currently live, per the Program Roadmap in the Appendix. Program Group 2 will occur in parallel with implementation activity increasing after Program Group 1 concludes.

The timeline reflects a 13-month implementation, with a kickoff in April 2025 and the big-bang go live in April/May 2026. We estimate another 3 months to stabilize, leaving resources in place through July 2026. The timeline below reflects the implementation approach and assumptions and will continue to be refined through the first quarter of the implementation. The timeline is subject to change and requires alignment with RUHS-PH and all stakeholders involved in the project. Changes to the timeline must be approved by the Epic Steering Committee members.



**Resources & Fee Schedule**

Ellit Groups will provide personnel to perform the roles designated in Exhibit B-1 in support of the project. Ellit Groups shall work with RUHS - PH to identify the appropriate resources according to the workplan. The anticipated cost for the implementation labor will be \$3,177,740. The anticipated cost for travel-related expenses shall not exceed \$300,000. RUHS-Public Health shall approve and request resources to be removed or replaced as necessary.

**Travel Expenses**

Travel by the Ellit Groups team is expected to be approximately two trips per month and depends upon the deliverables and ensure they align with key leaders. These travel expenses are above and beyond the rates shown above, not to exceed the aggregate amount of \$300,000. Travel and living expenses shall be billed at Ellit Groups' actual cost incurred, including air fare, lodging, transportation to and from the airport, rental car/ride share, and reasonable meal reimbursement, per COUNTY's travel policy, and shall be invoiced on a monthly basis as charges are incurred. Reimbursable expenses are outlined

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in the County's policy D-1 available at <https://rivcocob.org/sites/g/files/aldnop311/files/2023-04/D-1%2002.26.13.pdf>.

Any travel costs that exceed the current US General Services Administration website require written approval from RUHS - PH leadership.

#### **Implementation Assumptions**

- RUHS - PH and RUHS will identify sponsors who will serve as primary points of contact and decision makers for this engagement.
- RUHS - PH and RUHS will identify and assign project champions to lead all aspects of operational engagement and adoption activities.
- RUHS - PH , RUHS, and Loma Linda will identify and assign stakeholders and resources necessary to provide the required input and deliverables.
- The work performed by Ellit Groups will be conducted based on a hybrid model of remote and on-site visits.
- RUHS - PH , RUHS, and Loma Linda will engage in all appropriate Governance committees, make timely decisions, and mitigate risks as needed.

#### **Out of Scope**

Any services not specifically set forth herein or identified in the roadmap are considered out of Scope and are subject to an Amendment or SOW.

# Appendix

Epic - Public Health														
Proj #	Program	Priority	1 Registration/ Scheduling	2 Billing/ Claims	3 **Behavioral (ICD10)	4 Clinical Documentation	5 Discharge/6 Analytics	8 Data Mining	9 WPHC	10 Care Coordination	11 Mobile Device/Email	12 MCHW	13 Outreach	14 Telehealth
<b>EPE</b>														
1	Health Equity Mobile Teams 1.5		X	X	X	X	X	X	X	X	X	X	X	X
2	Blue Care		X	X	X			X	X	X			X	
<b>LAB</b>														
3	Labs		X	X	X	X	X	X		X	X	X		
<b>HIV/STD</b>														
4	OP (PHU, IC, FLORIS, HDK)		X	X	X	X	X	X	X	X	X	X	X	X
5	STD Case Investigation		X	X	X	X	X	X	X	X	X	X	X	X
6	PHU/IC & Investigation		X	X	X	X	X	X	X	X	X	X	X	X
<b>DISEASE CONTROL</b>														
7	CD Case Investigation (Quarantine)		X	X	X	X	X	X	X	X	X	X	X	X
8	TR Clinic (PHU, IC, HDK, PALM SPRINGS)		X	X	X	X	X	X	X	X	X	X	X	X
<b>CCS/CMS</b>														
9	PHU/IC, PHU, HD, La Grn, PS, Murietta, Red Maple		X	X	X	X	X	X	X	X	X	X	X	X
10	PHU/IC/PHU		X	X	X	X	X	X	X	X	X	X	X	X
11	PHU/IC/PHU													
12	CCS Med Consultants RTM				X	X		X						
13	Social worker profile RTM													
14	Student profile similar to PT and OT assistants RTM		Need new access for security language											
15	CCS Clinical Program		X	X	X	X	X	X	X	X	X	X	X	X
16	Outpatient Lab Prevention Program													
<b>WIC/NUTRITION SERVICES</b>														
17	WIC Clinic - Outpatient		X	X	X	X	X	X	X	X	X	X	X	X
18	WIC Inpatient MC		X	X	X	X	X	X	X	X	X	X	X	X
19	WIC Support		X	X	X	X	X	X	X	X	X	X	X	X
20	Outpatient Lab Prevention Program													
21	OPHO		X	X	X	X	X	X	X	X	X	X	X	X
22	OPHO		X	X	X	X	X	X	X	X	X	X	X	X
23	Outpatient Lab Prevention Program		X	X	X	X	X	X	X	X	X	X	X	X
24	Health Plans (Other/Meeting RTM)				X									
25	CCS Implementation		X	X	X	X	X	X	X	X	X	X	X	X
26	Blue Care (PHU, IC, HDK)		X	X	X	X	X	X	X	X	X	X	X	X
27	Location support for Correctional Health		X	X	X	X	X	X	X	X	X	X	X	X
<b>INJURY PREVENTION</b>														
28	Drug Health Program				X	X	X	X	X		X	X	X	X
29	Community Outreach				X			X	X		X	X	X	X
30	Outpatient Lab Prevention Program													
31	ADSA													
32	ADSA													
33	ADSA													
34	Violence Prevention													
<b>MCAH</b>														
35	Advanced Family Life		X	X	X	X	X	X	X	X	X	X	X	X
36	PHU Black Infant Health		X	X	X	X	X	X	X	X	X	X	X	X
37	Cal Learn		X	X	X	X	X	X	X	X	X	X	X	X
38	Nurse Family Partnership		X	X	X	X	X	X	X	X	X	X	X	X
39	Healthy Families of America		X	X	X	X	X	X	X	X	X	X	X	X
40	PHU/IC/PHU		X	X	X	X	X	X	X	X	X	X	X	X
41	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
42	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
43	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
44	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
45	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
46	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
47	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
48	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
49	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
50	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
51	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
52	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
53	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
54	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
55	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
56	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
57	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
58	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
59	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
60	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
61	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
62	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
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66	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
67	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
68	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
69	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
70	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
71	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
72	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
73	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
74	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
75	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
76	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
77	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
78	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
79	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
80	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
81	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
82	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
83	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
84	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
85	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
86	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
87	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
88	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
89	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
90	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
91	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
92	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
93	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
94	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
95	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
96	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
97	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
98	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
99	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X
100	PHU/IC/PHU/IC		X	X	X	X	X	X	X	X	X	X	X	X

**LEGEND:**  
 Implemented  
 Not implemented  
 In progress  
 Needs optimization  
 Not in scope  
 No Epic needed  
 \*\*Include Care link and Healthy Planet

**EXHIBIT B-1**

**1. IMPLEMENTATION RESOURCES**

**2. TRAVEL RESOURCES**

Travel costs shall not exceed the aggregate amount of \$300,000.

Role	Total Project Hours	Hourly Rate	Estimated Cost
<b>Leadership</b>			
Executive Advisor	330	\$ -	\$ -
Program Director	2,640	\$ 195	\$ 514,800
Associate Project Manager	2,640	\$ 125	\$ 330,000
Population Health & Lab SME	1,980	\$ 160	\$ 316,800
Client / Patient Documentation SME	2,640	\$ 145	\$ 382,800
Scheduling & Registration SME	2,080	\$ 160	\$ 332,800
Billing SME	1,320	\$ 150	\$ 198,000
Report Writer	2,640	\$ 145	\$ 382,800
Device Operational Readiness PM - 75%	1,980	\$ 165	\$ 326,700
<b>Total</b>			<b>\$ 2,784,700</b>
<b>Additional Roles</b>			
Trainer 1	546	\$ 140	\$ 76,440
Trainer 2	546	\$ 140	\$ 76,440
Activation ATE 1	160	\$ 115	\$ 18,400
Activation ATE 2	160	\$ 115	\$ 18,400
Activation ATE 3	160	\$ 115	\$ 18,400
Activation ATE 4	160	\$ 115	\$ 18,400
Activation ATE 5	160	\$ 115	\$ 18,400
Activation ATE 6	160	\$ 115	\$ 18,400
Activation ATE 7	160	\$ 115	\$ 18,400
Activation ATE 8	160	\$ 115	\$ 18,400
Activation ATE 9	160	\$ 115	\$ 18,400
Activation ATE 10	160	\$ 116	\$ 18,560
Activation ATE 11	160	\$ 117	\$ 18,720
Activation ATE 12	160	\$ 118	\$ 18,880
Activation ATE 13	160	\$ 115	\$ 18,400
<b>Additional Roles SubTotal</b>			<b>\$ 393,040</b>
<b>Total</b>			<b>\$ 3,177,740</b>











# HSARC-24-135 ELLIT GROUPS Amd 1 final

Final Audit Report

2025-06-17

Created:	2025-06-16
By:	Irene Maese (icmaese@ruhealth.org)
Status:	Signed
Transaction ID:	CBJCHBCAABAAAIQP22xl-4zBrawUDynzl87orZUcTZ50

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-  Document created by Irene Maese (icmaese@ruhealth.org)  
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