

COOK COUNTY  
HEALTH



# CCH Monthly Report

to the Cook County Board of Commissioners

January 2022



COOK COUNTY  
HEALTH

# Administrative & Legislative Updates



Presented to the CCH Board on 11/19/2021



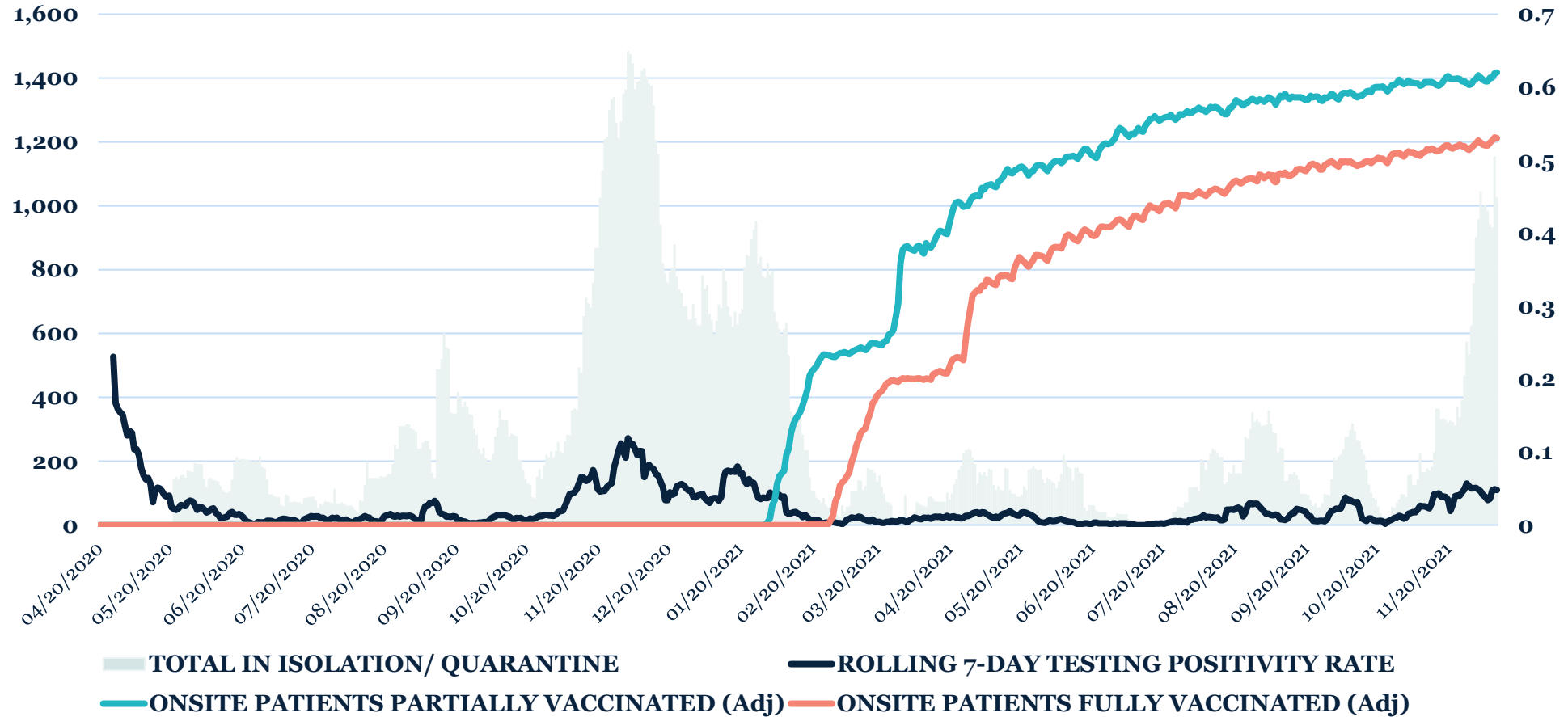
COOK COUNTY  
**HEALTH**

# Administrative Updates – CCH Employee Recognition

- **Dr. Orlanda Mackie**, Chair of Hospice and Palliative Medicine, is one of seven awardees of the 2021 National Compassionate Caregivers of the Year Award from the Schwartz Center for Compassionate Healthcare, a national nonprofit dedicated to putting compassion at the heart of health care. The Award recognizes extraordinary health care professionals from across the country who display exceptional compassion in the care of their patients, colleagues and communities. Dr. Mackie has devoted her career to providing compassionate and comprehensive care for CCH patients facing end-of-life decisions. Dr. Mackie brings over two decades of expertise and can regularly be found educating and mentoring the health system’s doctors, nurses and other staff on properly caring for patients receiving hospice and palliative care. During the COVID-19 pandemic, Dr. Mackie has been a calm and steady presence for many patients as they near the end of life, providing compassionate care to CCH patients.
- **Dr. Maha Elsebaie**, an internal medicine resident at Cook County Health, received an Abstract Achievement Award from the American Society of Hematology (ASH) for her research project on antiphospholipid syndrome, a disorder which causes puts those types of patients at an increased risk for developing blood clots.
- On December 5, 2021, NBC Chicago’s four-part docuseries, “Vaccinated State,” won a Chicago/Midwest Regional Emmy Award for Outstanding Achievement for News Gathering – News Special. Cook County Health physicians, **Dr. Gregory Huhn**, infectious disease physician and COVID-19 vaccine lead, and **Dr. Whitney Lyn**, family and community medicine physician, were both interviewed and included in several parts of the docuseries. The series, which ran in February and March 2021, documented what is known and unknown about COVID, as well as the rollout of the vaccines. Drs. Huhn and Lyn served as essential resources for reporter Chris Hush and shared important public health messages.
- The Cook County Department of Public Health received the Governor's Engaging Aging Award for their hard work and dedication to care for older adults throughout the COVID pandemic. CCDPH accepted the award on Monday, December 13 at a special ceremony hosted by the Illinois Department of Aging to honor their contributions to some of suburban Cook County’s most vulnerable communities. Thank you to **Dr. Kiran Joshi**, **Dr. Jacqueline Korpics** and **Dr. Rachel Rubin** for your leadership.
- **Juanita Ellison, RN** in our Labor and Delivery unit, and **Rose Pita, RN** on our Medical/Surgical unit, were recognized for extraordinary patient care with the DAISY award in 2021 for quarters 2 and 3. The DAISY award is an international program that rewards and celebrates the extraordinary compassionate and skillful care given by nurses every day. Ms. Ellison’s nomination by a colleague stated, “Juanita is the best nurse I have worked with ... I have 1 million amazing Juanita stories.” “She is the embodiment of great nursing.” Ms. Pita was nominated by a patient who expressed that, “She understood my situation as a patient and as a mother. She showed empathy, cordiality, and vocational service. I thank her for her work.

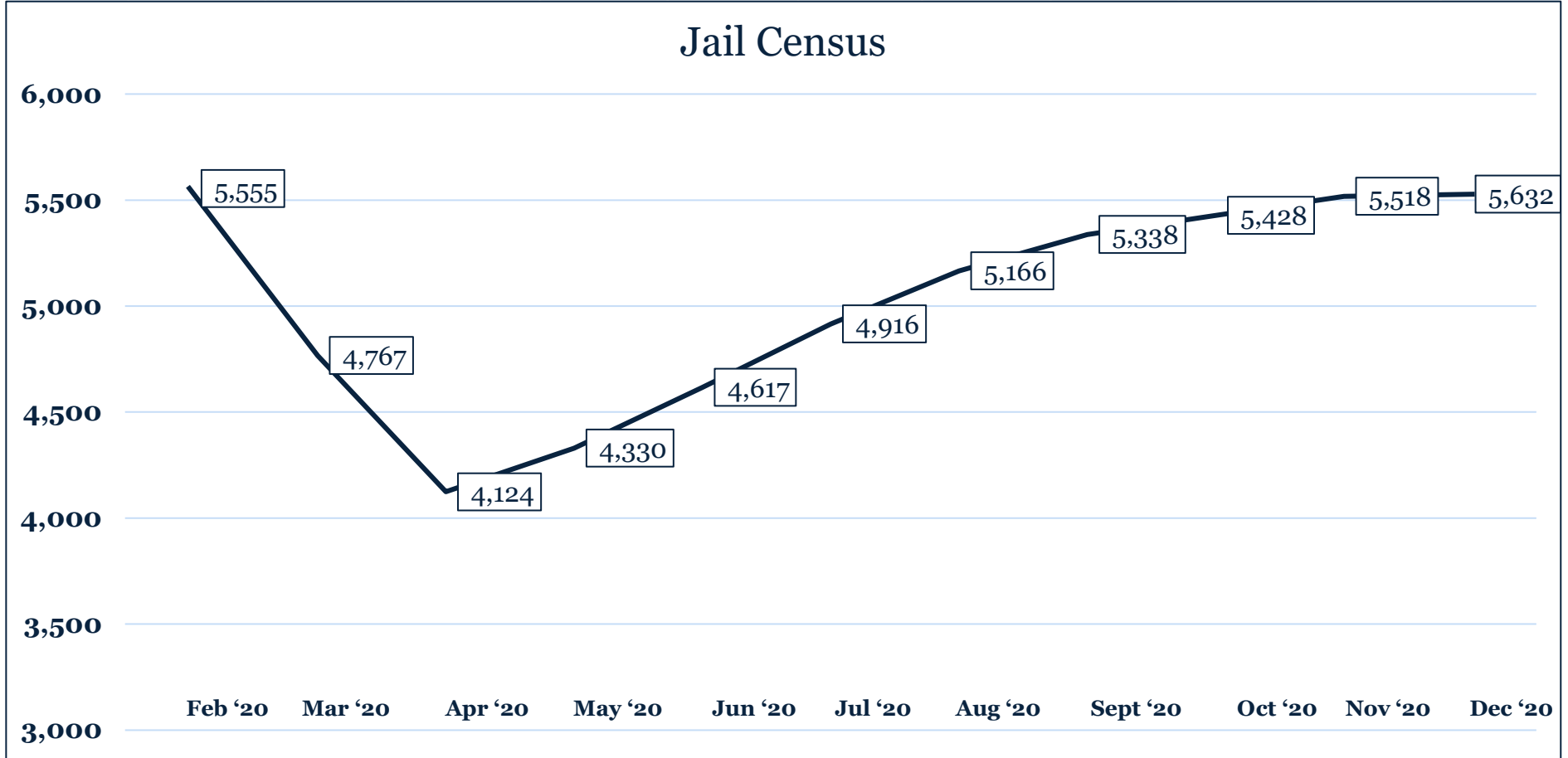


## Cermak Health Services Covid19 Testing Positivity + % of Compound Vaccinated



# Administrative Updates – Cermak

	2/29/20	3/31/20	4/29/20	5/31/20	6/30/20	7/27/20	8/27/20	9/22/20	10/27/20	11/17/20	12/16/21
Census	5,555	4,767	4,124	4,330	4,617	4,916	5,166	5,338	5,428	5,518	5,632



- Cermak remains our highest priority.
- Population continues to rise compressing space to accommodate social distancing. There are approximately 500 detainees awaiting transfer to the Illinois Department of Corrections.
- Lower census allowed for single celling, distancing and other mitigation strategies that have led to containment.
- Work continues to reduce the jail population.

# Administrative Updates – COVID-19

## COVID-19

- It is expected that Omicron will quickly replace Delta as the prominent variant. Inpatient admissions for COVID are rising at CCH as are cases at the jail. Daily briefings with the management team are occurring to monitor bed capacity, staffing and supplies.
- Cook County Health continues to offer COVID vaccination to employees, patients and the community. CCH has administered more than 925,000 vaccine doses to date.
- On December 2<sup>nd</sup>, President Preckwinkle and CCH CEO Israel Rocha were joined at a press conference by CCH physicians and area religious leaders to encourage people to get vaccinated before the holidays. The press conference received wide media coverage.
- On Sunday, December 12<sup>th</sup>, in partnership with the State, booster events were held at CCH's Arlington Heights, North Riverside and Blue Island health centers. Nearly 3,000 individuals received a vaccination. The success of this single day effort was repeated on Sunday, December 19<sup>th</sup>.
- Both CCH and CCDPH continue to offer vaccines, including booster shots, in the community. A full list of locations, dates and times can be found at <https://myshotcookcounty.com/locations/>. CCH is working to develop open access community testing at its community health centers.

## Employee Vaccination

- As of December 15<sup>th</sup>, 96% of CCH employees are fully vaccinated (one dose of J&J or two doses of Moderna/Pfizer) and 98% of employees have at least one vaccine and 85% of CCH employees are compliant with the CCH influenza vaccination policy.

# Administrative Updates – Activities and Announcements

## Extension of PrEP and HIV Services

- Cook County Health and Cook County HIV Integrated Programs (CCHIP) are expanding the Pre-Exposure Prophylaxis (PrEP) program – a preventive HIV medication used for people who are at higher risk of contracting the virus – to CCH community health centers in Belmont Cragin and North Riverside. This will help accommodate the growing need for high-impact HIV prevention services.
- This new expansion will help Cook County Health increase access to services in areas disproportionately impacted by HIV/AIDS, including communities of color, and provide specialty care for patients closer to home. Expanded services will include access to free or low-cost PrEP treatment, HIV testing, health education, medical monitoring, testing for sexually transmitted infections, supportive services to address social risk factors of health and greater accessibility to protection such as condoms.

## Food As Medicine

- As access to healthy food remains a great need for our patients and communities, the Fresh Truck partnership between Cook County Health (CCH) and the Greater Chicago Food Depository (GCFD) continues. The onset of the COVID-19 pandemic required CCH and GCFD to develop and implement revised protocols for the Fresh Truck distributions that allow for appropriate screenings and social distancing to protect patients, as well as CCH and GCFD staff and volunteers. These revised protocols are in place until further notice.
- Through December 9, CCH's Fresh Truck partnership with the Greater Chicago Food Depository (GCFD) resulted in 361 visits to CCH health centers – Arlington Heights, Austin, Blue Island, the CORE Center, Cottage Grove, Englewood, Logan Square, North Riverside, Provident/Sengstacke, Prieto, and Robbins.
- Collectively, the Fresh Truck distributions have resulted in the provision of fresh fruits and vegetables, as well as some shelf stable items during the COVID-19 pandemic, to an estimated 40,910 households, representing 134,983 individuals, totaling more than 917,900 pounds of food. Most of the individuals benefiting from the Fresh Truck screened positive for food insecurity at a CCH health center visit. The GCFD's Fresh Food Truck visits for the month of December include the following ACHN Health Centers.
  - January 6 – Prieto Health Center – 2424 S. Pulaski Road, Chicago, IL 60623
  - January 11 – Provident Hospital/Sengstacke Health Center – 500 W. 51st Street, Chicago, IL 60615
  - January 20 – Arlington Heights – 3520 N. Arlington Heights Road, Arlington Heights, IL 60004
  - January 21 – CORE Center – 2020 W. Harrison Street, Chicago, IL 60612
  - January 25 – Belmont Cragin Health Center – 5501 W. Fullerton Avenue, Chicago, IL 60647
  - January 27 – Blue Island Health Center – 12757 S. Western Ave., Blue Island, IL 60406



# Administrative Updates – Community Advisory Councils

- Cook County Health Community Advisory Councils (CAC) include patients, community and religious organizations and provide an opportunity to engage patients, organizations, and civic leaders in the communities where our centers are located. The Councils provide feedback to our staff and help strengthen our health centers' relationships in the community. The councils meet quarterly to provide current information on Cook County Health and as an avenue for members to share information about their organizations.
- In calendar year 2021, CCH established two new advisory councils bringing the total of active advisory councils to seven. The Provident Hospital/Sengstacke Health Center Advisory Council had its first meeting in January of 2021 and the Blue Island Health Center Advisory Council met for the first time in November. In addition to these seven advisory councils, in 2022, we will start a new advisory council at the new Belmont Cragin Health Center. We anticipate to have the first meeting in 2Q22 as well as a CAC at the Austin Health Center.
- Highlights from CAC efforts in 2021 include:
  - Council members were active participants in Covid-19 vaccination and education efforts. Many council members helped promote these initiatives to their workforce and constituents.
  - Many advisory council members participated in our Racial Healing Circles which were done with Umoja. Advisory Council members provided specific insights at the South Side Chicago, South Suburban Cook County, West Suburban Cook County and Spanish Language circles.
  - Advisory Council members provided testimonials at the Cook County Health and Cook County Board of Commissioners Budget Hearings for Fiscal Year 2022. Their insights as to our work, provided a unique perspective of the services CCH brings to their constituencies.
  - Cottage Grove and Robbins council member Emily Inman from Respond Now was featured in the My Shot Cook County Campaign
  - LaShun James of Addus Homecare, member of the Cottage Grove, Englewood, and Provident Advisory Councils, was selected as a community member to the Commission on Dental Accreditation after being nominated by CCH.
- The Councils meet quarterly to provide current information on Cook County Health and as an avenue for members to share information about their organizations. The 2022 calendar is under development.



# Legislative Updates – State & Federal

## State

- Legislators will return to Springfield January 4 for the Spring 2022 session and are scheduled to adjourn April 8.
- The Governor’s State of the State and Budget Address is scheduled for February 2. Legislators are expected to return in May for a brief session to pass the budget before the May 31 deadline.
- The Illinois Department of Healthcare and Family Services posted a provider notice indicating that they are accepting written comments through December 31, 2021 on Medicaid certification and reimbursements for community health workers, doula, and perinatal home visitors. Oral comments were also accepted at the Equity and Quality Subcommittee of the Medicaid Advisory Committee that took place on December 8. These new providers were authorized as a result of HB158 / PA 102-0004, also known as the Illinois Legislative Black Caucus’ health and human services pillar bill.
- Governor Pritzker issued Executive Order 2021-31 (COVID-19 Executive Order 95) on November 22, which suspends certain requirements for restoration of an inactive or expired license of five years or less for professional counselors, clinical professional counselors, social workers, and clinical psychologists. This Executive Order seeks to address behavioral health workforce shortages.

## Federal

### FY 2022 Budget and Reconciliation

- The House passed the Build Back Better Act on November 19 2021 sending the measure to the Senate where the Democrats’ narrow majority and unique parliamentary budget reconciliation rules are requiring protracted negotiations. Senate Democratic Leadership’s plans in the Senate for votes on the Senate version of Build Back Better Act before Christmas appear to be slipping, as negotiations with hold-out Sen. Joe Manchin (D-W.V.) continue. The County has continued to advocate directly, and in collaboration with other organizations, for keeping the following programs in the bill as this process and negotiation unfolds:
  - **Medicaid Reentry Act:** This provision would permit Medicaid to reimburse for services provided to Cook County Jail inmates during the 30 days prior to their release. This provision is supported by the National Association of Counties, the National Sheriffs’ Association and a broad coalition of health and mental health organizations. The provision was included in the House-passed bill and is in the draft released by the Senate Finance Committee on December 11.
  - **Public Health Infrastructure:** The provision in the House-passed bill would provide \$7,000,000,000 in funding to support core public health infrastructure activities to strengthen the public health system through grants to state, territorial, local, or Tribal health departments, and expanding and improving activities of the CDC. Grants would go directly from CDC to each state, territory and local public health department serving counties with population over 2 million and cities over 400,000. This provision is supported by the National Association of County and City Health Officials and a broad coalition of public health organizations. The Senate Health, Education, Labor & Pensions Committee version released on December 11 included \$1.75 billion more for the direct grants to state and large local health departments.
  - **Maternal Mortality:** The “Mombibus” provisions require states to cover pregnant women for a full twelve months postpartum and make investments to reduce inequities in maternal health outcomes and strengthen the maternal health workforce. The Medicaid and Maternal Mortality provisions are in both the House-passed bill and the December 11 Senate Finance and HELP Committees’ text.

The Safety-Net Hospital Infrastructure provision, which would have provided \$10 billion over ten years to give award grants for construction or modernization projects to increase capacity and update hospitals and other medical facilities, was dropped from the House bill and Senate sources have said that restoring it was unlikely



# Legislative Updates – Federal (cont.)

## Provider Relief Fund

- On December 14, the U.S. Department of Health and Human Services (HHS), through the Health Resources and Services Administration (HRSA), announced \$9 billion in Provider Relief Fund (PRF) Phase 4 payments to health care providers who have experienced revenue losses and expenses related to the COVID-19 pandemic. The average payment for large providers is \$1.7 million. Distributions will start to be made by December 17.

## Appropriations

- The parties are still deadlocked on the top-line FY 2022 appropriations levels for defense and non-defense discretionary spending. To keep the government open beyond the December 3 expiration of the first FY 2022 continuing resolution (CR), Congress passed a second CR on December 2, which would run through February 18, 2022. Leaders hope that this will allow enough time to reach agreement on the outstanding topline issues and to pass an omnibus FY 2022 appropriations bill on a bipartisan basis.

## Medicare Cuts

- On December 9, the Senate voted 59-34 to stop scheduled statutory Medicare cuts to providers, sending the legislation to President for signature. The bill passed the House last week. It delays the 2 percent cut to Medicare rates through March 2022 and a separate 4 percent Medicare cut totaling about \$36 billion to 2023.

## Biden Administration

- On November 22, the Biden Administration announced \$1.5 billion in scholarships and student loan repayment assistance for students and healthcare workers to help promote diversity in the health care workforce and to relieve shortages in underserved communities. According to the White House, the \$1.5 billion will support nearly 23,000 providers participating in NHSC, Nurse Corps, and behavioral health workforce programs. These programs are generally funded through the annual appropriations process, but a funding boost under the American Rescue Plan Act will help reach more students and health workers.
- On November 29, the CDC recommended COVID-19 booster shots for all adults as the Omicron variant began circulating in countries around the world. CDC had previously approved boosters for all adults, but only recommended them for adults over 50 years or living in a congregate setting. CDC Director, Dr. Rochelle Walensky, recommended that everyone 18 and older get a booster shot 6 months after their initial Pfizer or Moderna series or 2 months after their initial J&J vaccine.
- On December 2, the Administration announced plans to expand the availability of free, over the counter COVID-19 tests to reduce seasonal coronavirus surges. According to the White House, people with private health insurance can get the cost of at-home tests reimbursed for the remainder of the public health emergency. Those without private insurance will be able to get free tests distributed in more than 20,000 community sites, including health centers and rural clinics.
- On December 2, the Centers for Medicare and Medicaid Services (CMS) issued a Quality Safety & Oversight Memo (QSO-22-04-ALL) which explained that they will not enforce the new COVID-19 vaccination mandate for health care workers and related regulations while court-ordered injunctions are in place prohibiting enforcement.

# Monthly Media Report



# Earned Media Dashboard: November 15– December 12, 2021



Total Media Placements

**432**



Total Reach

**997.9 Million People**



Total Media Value

**\$9.2 Million**

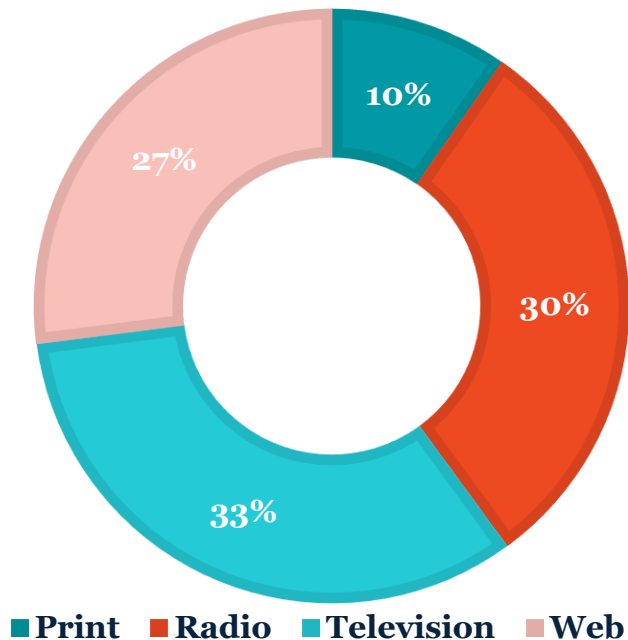
## Top 5 Local Media Outlets

1. *WBBM Radio*
2. *NBC 5 Chicago*
3. *WBEZ Radio*
4. *Fox 32 Chicago*
5. *ABC 7 Chicago*



# Media Dashboard: November 15– December 12, 2021

## Media Outlet Type



## Most Common Topics

1. Omicron
2. COVID vaccine boosters
3. COVID and the holidays
4. Information about vaccine clinics and sites
5. Opening of Belmont Cragin

# Recent Cook County Health COVID-19 Media Coverage

16,170 Media Hits on COVID-19 since February 2020



Be on Guard as Omicron Looms, Official Says: 'There Cannot be COVID Fatigue.'



One Year in, new Cook County Health CEO Focuses Beyond Pandemic



More Americans Died of Drug Overdoses During the Pandemic Than Ever Before



Cook County Officials, Faith Leaders Urge COVID-19 Vaccinations, Boosters



Contact Tracing 'Takes an Emotional and Psychological Toll'



Beyond Brain Fog: Neurologist Details Long-lasting Symptoms Post-COVID



Cicero Vaccination Rate Exceeds 70 Percent, County Officials Report



¿Quieres vacunarte contra el coronavirus o recibir el refuerzo? En el condado Cook puedes hacerlo sin cita

# Social Media Insights

As of December 12

## Twitter (28-Day Summary)

- Impressions: **56.7K** (up **119%**)
- Profile visits: **2.4K**
- Mentions: **47**
- Followers: **4,331** (up **39**)

## LinkedIn (28-Day Summary)

- Impressions: **23.5K**
- Unique visitors: **547**
- Followers: **7,299** (up **74**)

## Facebook (28-Day Summary)

- Post reach: **68.4K**
- Post engagement: **2.7K**
- Page views: **1.8K**
- Page followers: **7,509** (up **19**)

## Instagram (28-Day Summary)

- Impressions: **11.0K**
- Reach: **1.3K**
- Profile visits: **418**
- Followers: **2,615** (up **26**)

# Finance Metrics



Presented to the CCH Finance Committee on 12/9/2021



COOK COUNTY  
**HEALTH**

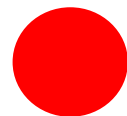


# Executive Summary: Statement of Financial Condition – October 31, 2021

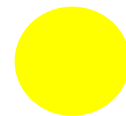
On an accrual basis, interim financials show that CCH ended October with a \$12M positive variance. On a cash basis, CCH has a positive variance of \$40M due to the timing of CountyCare PMPM payments impacting the revenue and increased claims payments impacting expenses. In addition, recoupment of the \$28M FY2020 Medicare advance is underway.

- CountyCare:
  - CountyCare is showing an operating gain of \$10M
  - Membership is exceeding 400,000, greater than the 356,000 monthly average expected
  - Capitation revenue and claims expenses are higher due to membership growth
- Revenue Commentary:
  - Realization of the DSH enhanced FMAP impact due to legislative change from Federal Stimulus Legislation
  - Slow down in CountyCare utilization of CCH facilities
- Expenditures:
  - Rolling FEMA reimbursements are reflected in the financials
  - Excess in salary and benefits due to hiring timing

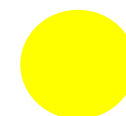
- Revenue Cycle Indicators:



Accounts Receivable



Discharged Not  
Final Billed



Denials

# Financial Results – October 31, 2021

Dollars in 000s	FY2021 Actual	FY2021 Budget	Variance	%	FY2020 Actual (3)
<b>Revenue</b>					
Net Patient Service Revenue (1)	\$516,918	\$581,502	(\$64,583)	-11.11%	\$539,540
Government Support (2)	\$381,059	\$350,305	\$30,754	8.78%	\$511,908
CountyCare Capitation Revenue	\$2,241,499	\$1,912,652	\$328,847	17.19%	\$1,839,075
Other	\$14,751	\$13,750	\$1,001	7.28%	\$5,041
CountyCare Elimination (1)	(\$69,233)	(\$68,931)	(\$302)	0.44%	(\$94,998)
<b>Total Revenue</b>	<b>\$3,084,994</b>	<b>\$2,789,278</b>	<b>\$295,717</b>	<b>10.60%</b>	<b>\$2,800,567</b>
<b>Operating Expenses</b>					
Salaries & Benefits	\$609,046	\$649,111	\$40,065	6.17%	\$618,791
Overtime	\$31,204	\$32,062	\$859	2.68%	\$42,746
Supplies & Pharmaceuticals	\$137,739	\$124,190	(\$13,548)	-10.91%	\$134,191
Purchased Services & Other	\$332,624	\$348,750	\$16,125	4.62%	\$296,142
Medical Claims Expense (1)	\$2,116,802	\$1,788,790	(\$328,012)	-18.34%	\$1,789,640
Insurance	\$29,209	\$33,131	\$3,922	11.84%	\$29,209
Utilities	\$13,265	\$9,433	(\$3,832)	-40.62%	\$11,703
CountyCare Elimination (1)	(\$69,233)	(\$68,931)	\$302	-0.44%	(\$94,998)
<b>Total Operating Expenses</b>	<b>\$3,200,656</b>	<b>\$2,916,537</b>	<b>(\$284,119)</b>	<b>-9.74%</b>	<b>\$2,827,425</b>
<b>Operating Margin</b>	<b>(\$115,661)</b>	<b>(\$127,259)</b>	<b>\$11,598</b>	<b>9.11%</b>	<b>(\$26,858)</b>
<b>Non-Operating Revenue</b>	<b>\$112,480</b>	<b>\$112,480</b>	<b>\$0</b>	<b>0.00%</b>	<b>\$83,300</b>
<b>Net Income (Loss) (3)</b>	<b>(\$3,182)</b>	<b>(\$14,780)</b>	<b>\$11,598</b>	<b>78.47%</b>	<b>\$56,441</b>

**Notes:**

- (1) CountyCare Elimination represents the elimination of intercompany activity – Patient Service Revenue and Medical Claims Expense – for CountyCare patients receiving care at Cook County Health.
- (2) Government Support includes Graduate Medical Education payments.
- (3) Does not reflect Pension, OPEB, Depreciation/Amortization, or Investment Income.

# CCH Vendor Contract Savings to Date

<b>Savings Target</b>	<b>Vendor Contract Renegotiation Savings</b>	<b>Vendor Contract Utilization Savings</b>	<b>Total Savings Achieved</b>
16.5M	\$9.4M	\$4M	\$13.4M

Major categories of savings include:

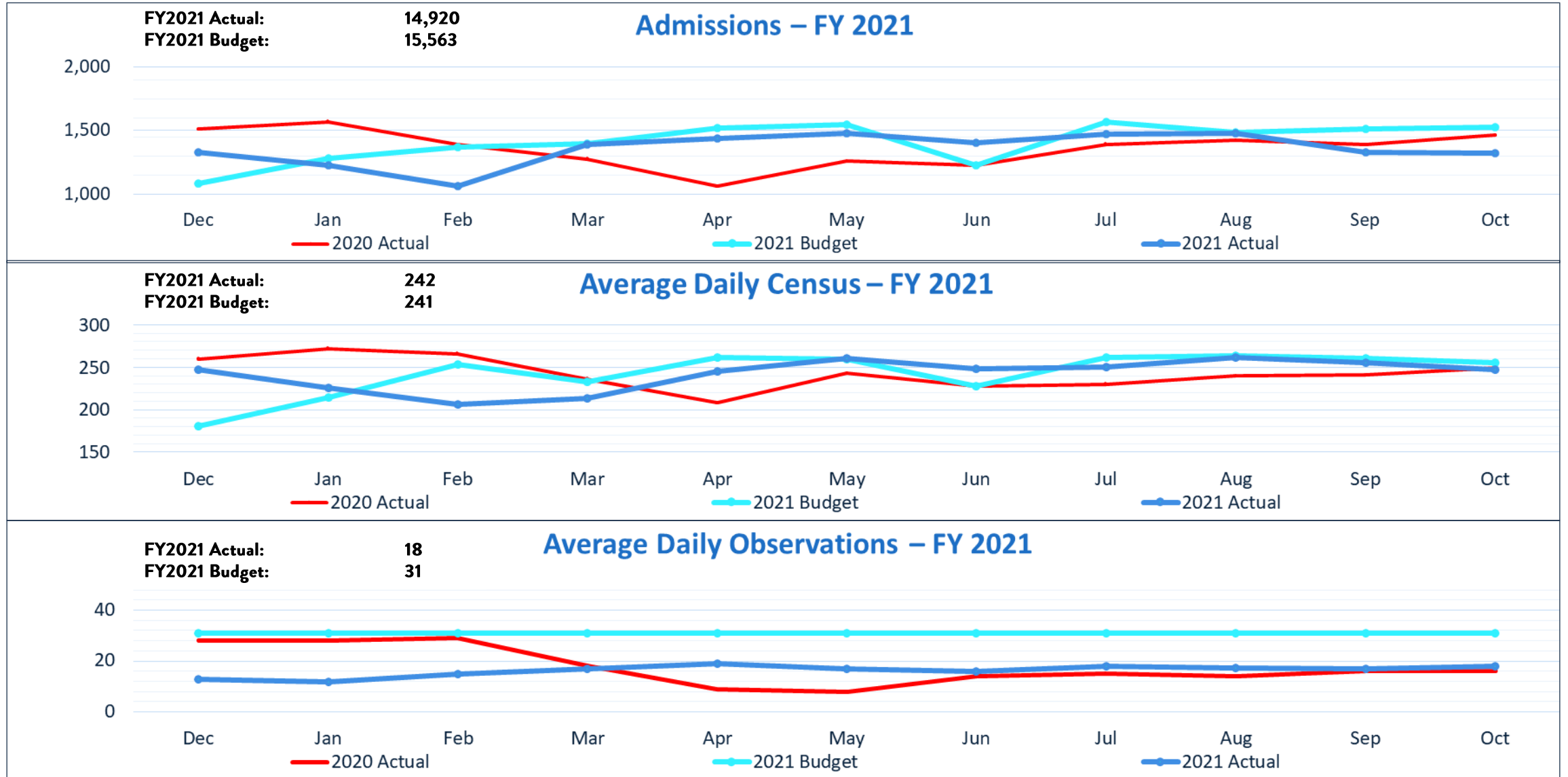
- Lab diagnostics
- Supplemental staffing
- Security services
- Transportation
- Parking /valet
- Actuarial services
- Facility maintenance
- Information Technology contracts
- Pharmacy utilization

# CCH Health Providers Revenue – October 31, 2021

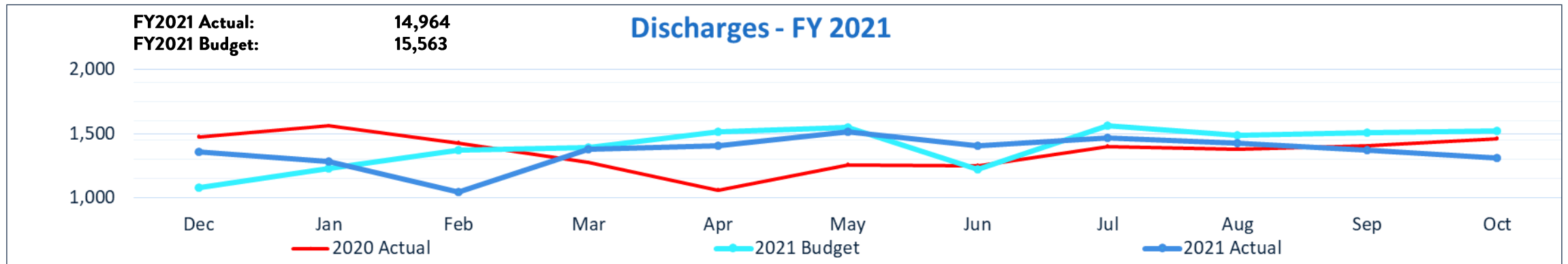
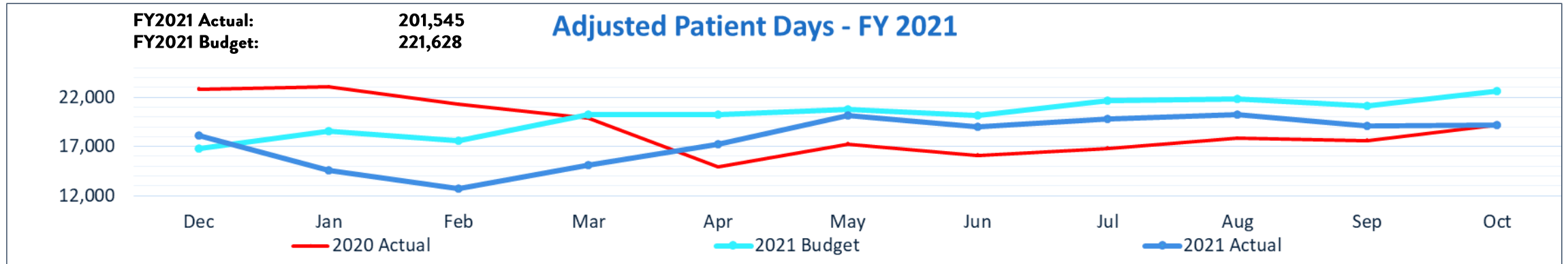
## Revenue Operating Indicators

Patient Activity	YTD 2021 Actual	YTD 2021 Budget	%	Oct 2021 Actual	Oct 2020 Actual	Oct 2019 Actual	2020 YTD Actual	2019 YTD Actual
Admissions	14,920	15,563	-4.1%	1,320	1,462	1,510	14,949	15,336
Patient Days	81,169	80,662	0.6%	7,650	7,721	8,231	81,630	86,170
Average Daily Census	242	241	0.4%	247	249	266	243	257
Adjusted Patient Days	201,545	221,628	-9.1%	19,167	19,190	21,378	206,774	230,531

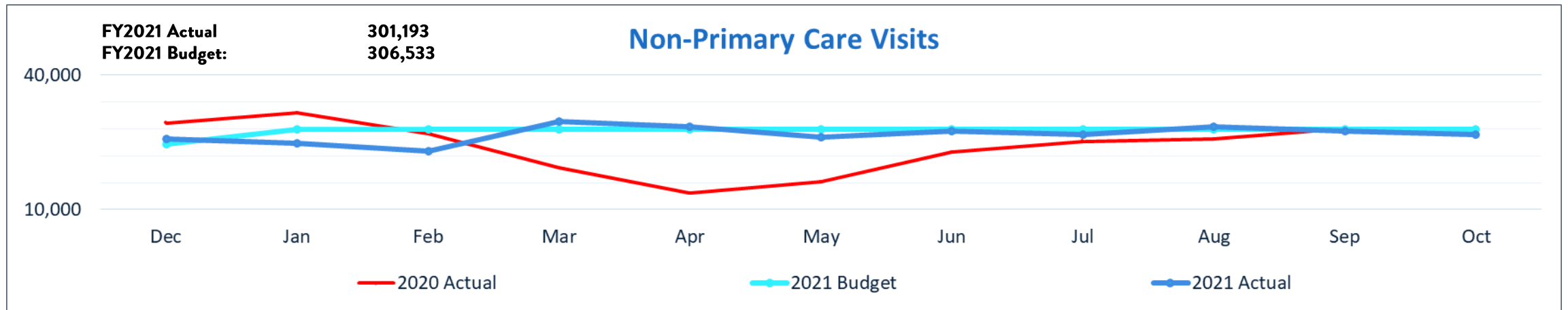
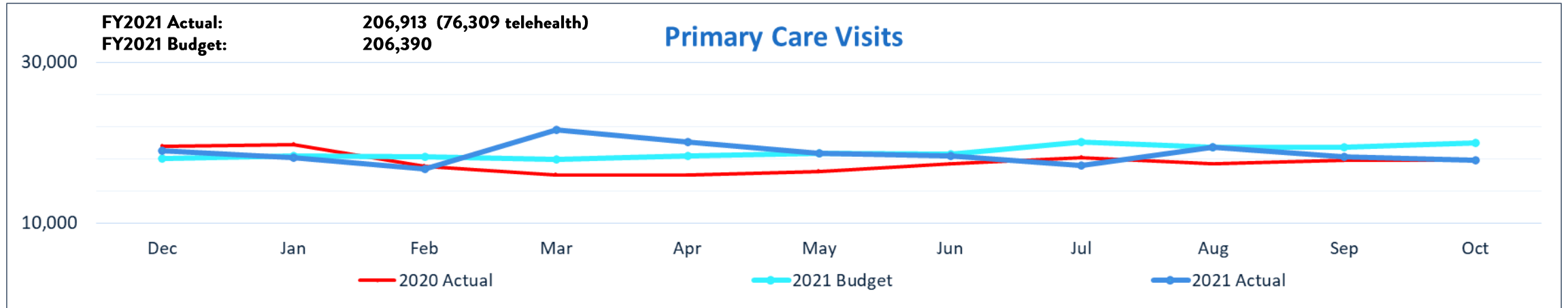
# CCH 12 Month Patient Activity Levels



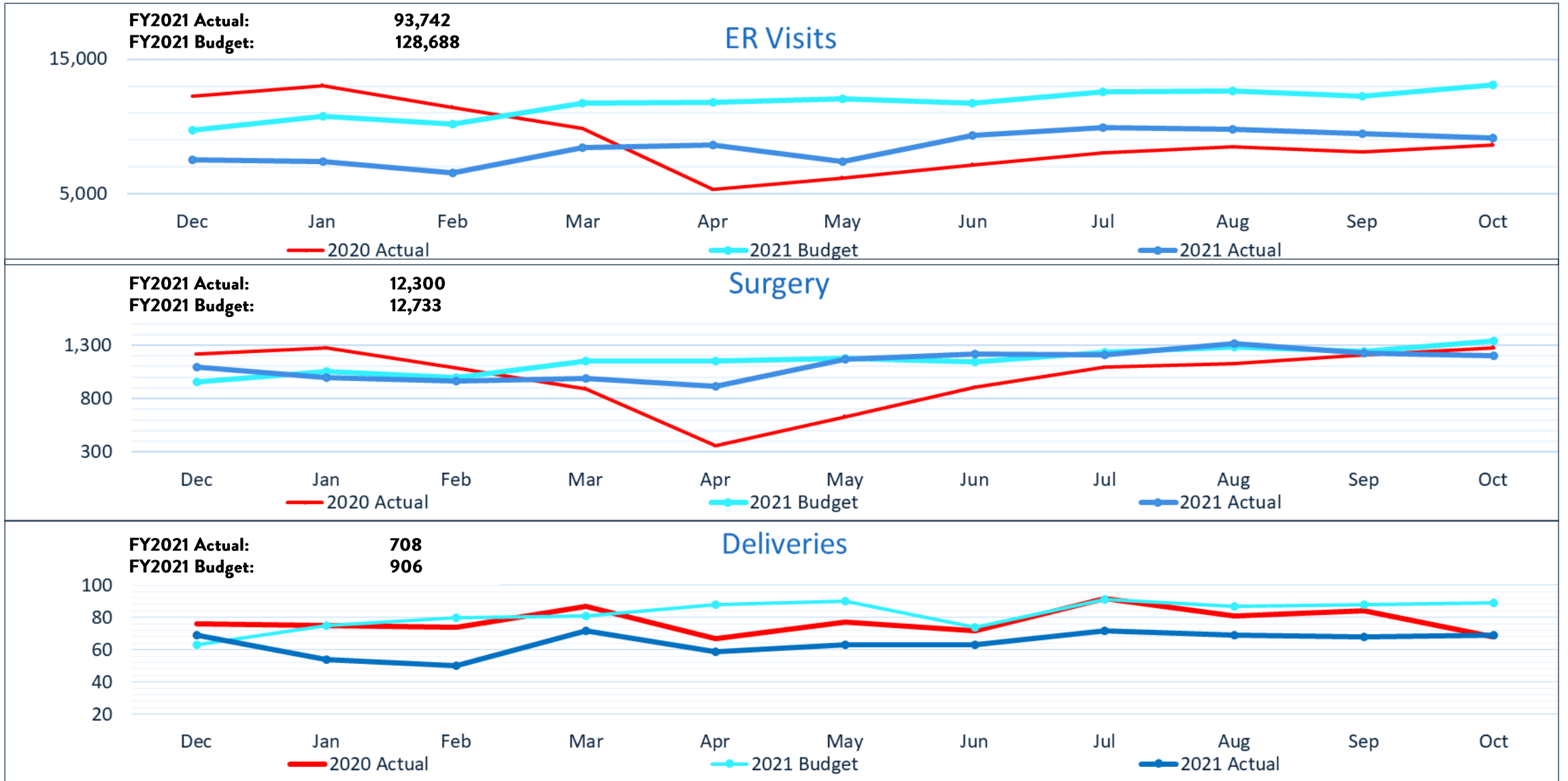
# CCH 12 Month Patient Activity Levels



# Patient Activity Indicators – FYTD 2021



# Patient Activity Indicators – FYTD 2021

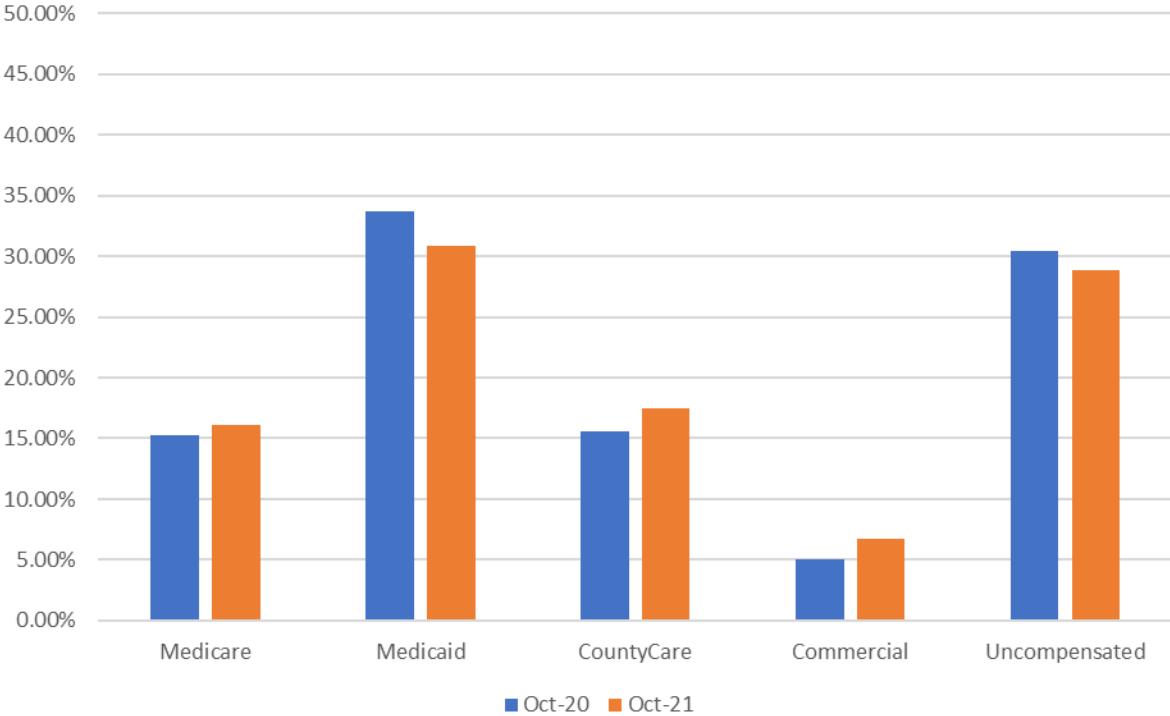




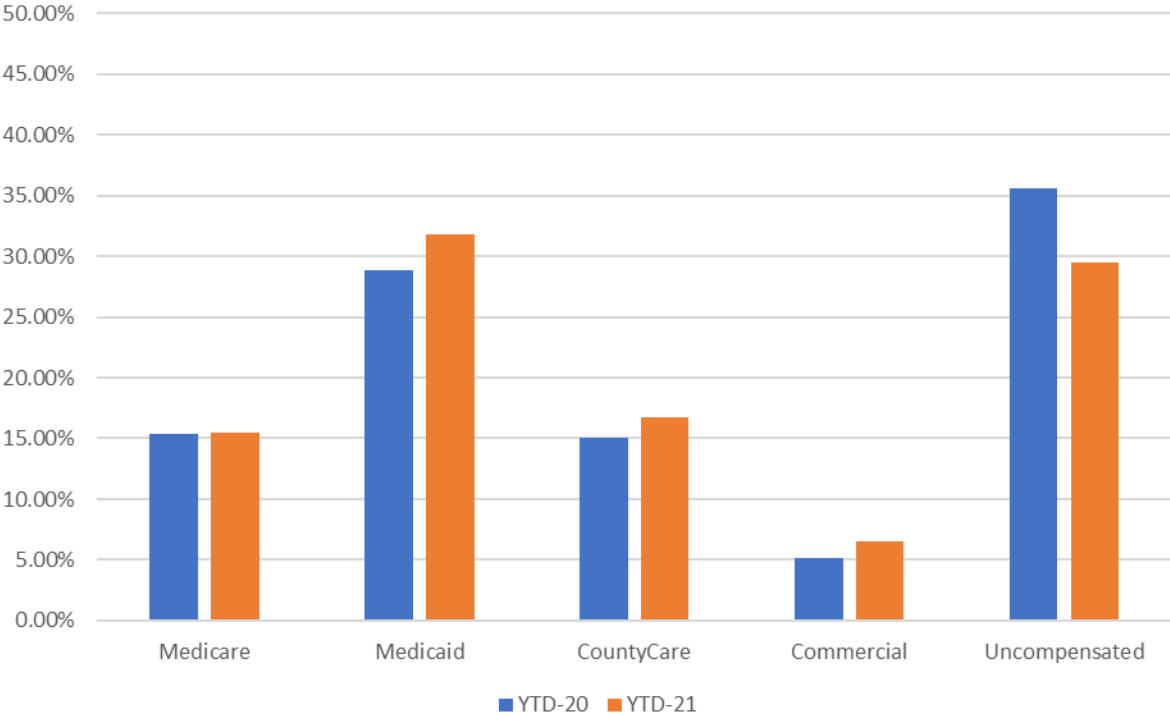
# CCH Health Providers Revenue – October 31, 2021

## Payer Mix Analysis (by Charges)

Monthly

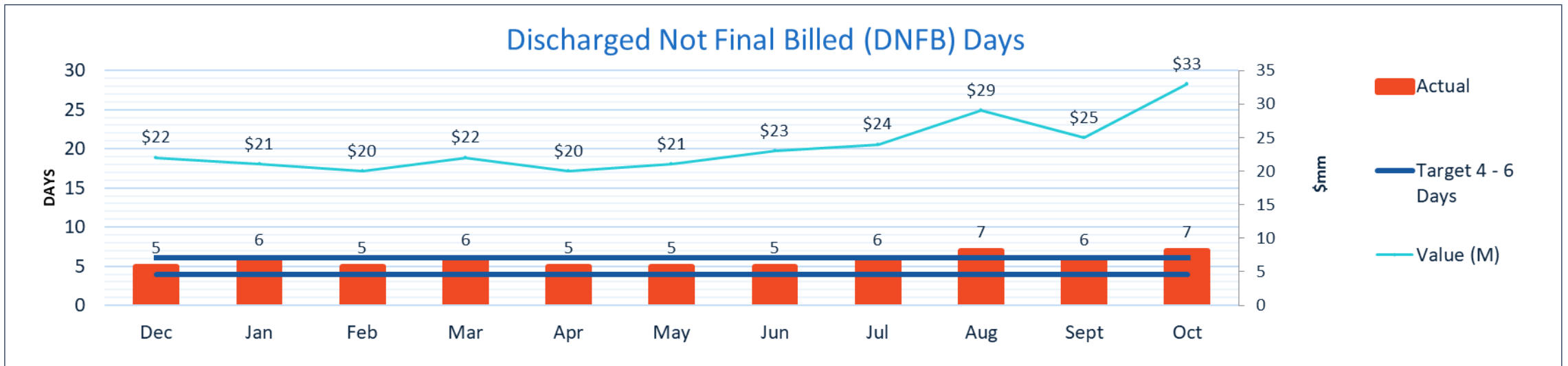
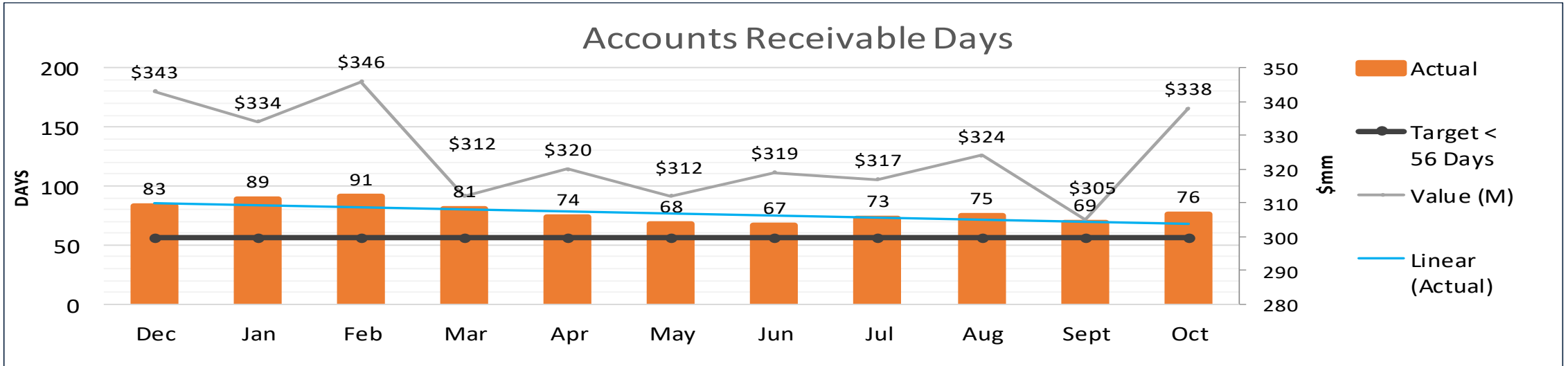


YTD



**Note:** CountyCare is a Medicaid managed care program. It is shown separately to provide visibility to CountyCare.

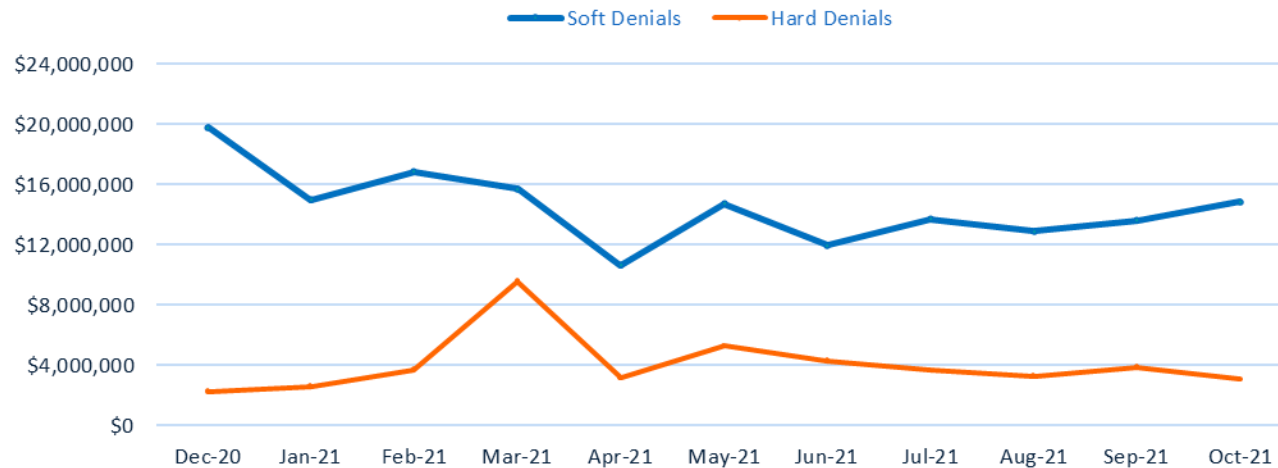
# Financial Key Performance Indicators – 2021 FYTD



# Denials - October 31, 2021

Type	Current Month		FY21 YTD		Benchmark
	%	\$	%	\$	%
Soft Denials*	11%	\$14,832,509	11%	\$159,353,417	5%
Hard Denials**	2%	\$3,035,375	3%	\$44,362,350	2%

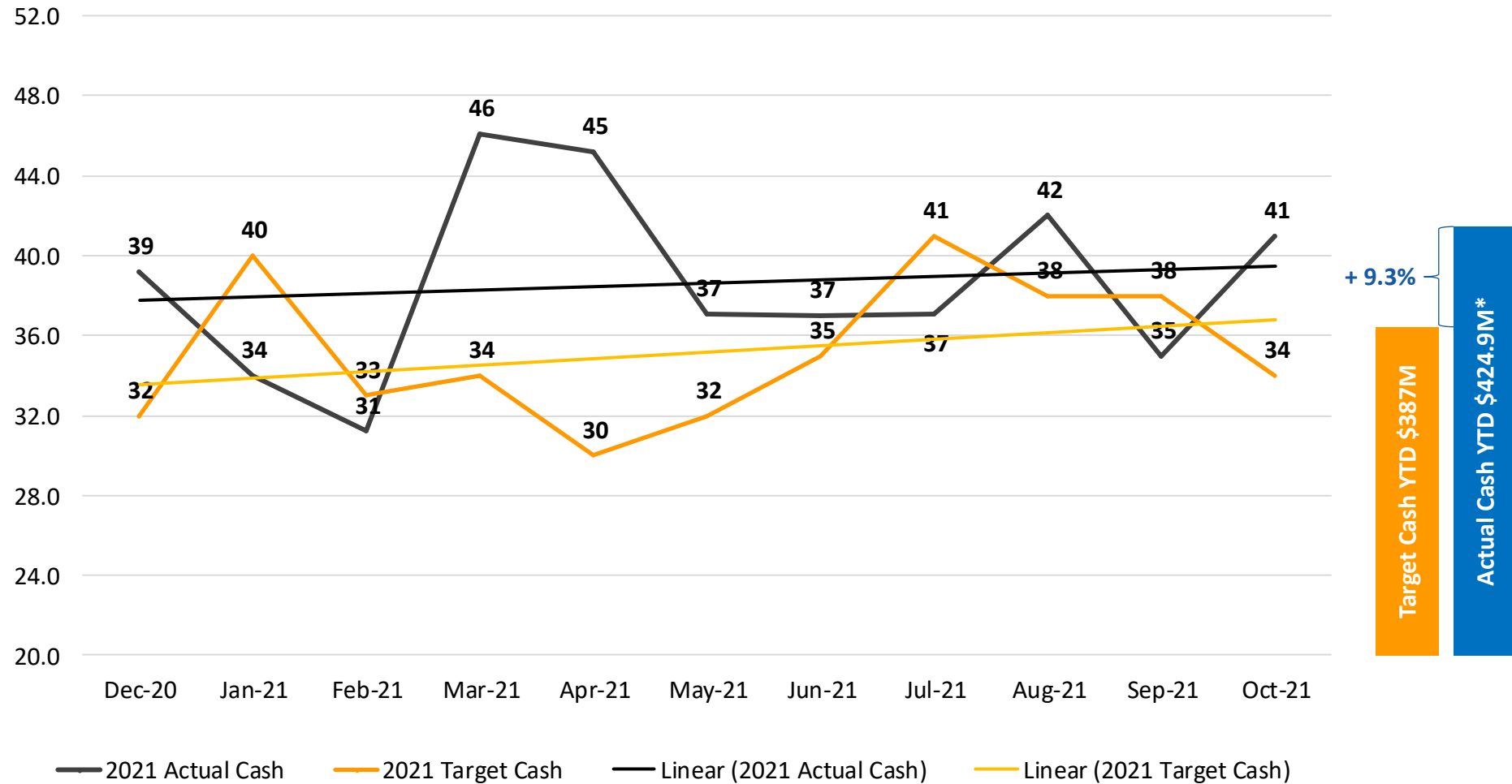
\* Claim is denied soon after submission, but there is an opportunity to mitigate/appeal  
 \*\* Claim is denied and needs to be written off



Hard Denial Summary	Amount
CASE MANAGEMENT	\$1,099,043.15
TIMELY FILING	\$704,885.61
PRIOR AUTHORIZATION	\$695,702.07
NON-COVERED	\$317,673.36
PATIENT ACCESS	\$130,815.60
CODING	\$80,778.17
OTHER	\$6,476.90
<b>Total</b>	<b>\$3,035,375</b>

Denials are reported as gross charges, the amount of money charged to a patient for services prior to adjustments.

# CCH Cash YTD Target vs. Actual – October 31, 2021



\*17M in recoupment of 28M Medicare Advance has been received.

# CCH Annual Pricing Review Strategy – 2022

	Strategic Increase	Net Reimbursement Impact	Contractual Allowance Impact	Charity Impact	Bad Debt Impact
Med/Surg	11.29%	\$ 560,611	\$ 6,128,983	\$ 1,237,200	\$ 785,883
ICU	50.00%	\$ 3,291,812	\$ 35,988,342	\$ 7,264,628	\$ 4,614,574
Surgical Rates	9.00%	\$ 190,708	\$ 2,084,950	\$ 420,869	\$ 267,341
		\$ 4,043,131	\$ 44,202,275	\$ 8,922,698	\$ 5,667,798

## Commentary

- Current state, CCH's pricing is approximately 40% below the market with a 4% annual price increase cap from our payer contracts.
- Strategic Price Increase Target, focus on room & board (~55% below market) and surgery rate (~78% below market) realignment.
  - Effective Date: 01/01/2022 with an annual review thereafter.

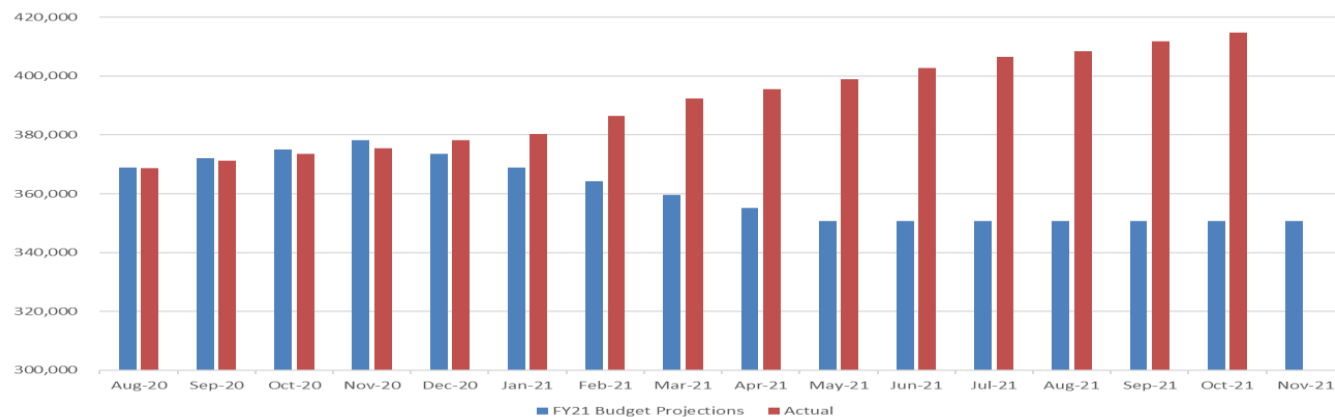
CCH R&B RATES COMPARED TO AREA HOSPITALS											
R&B TYPE	CCH	U of I	LOYOLA	MT SINAI	RUSH	U OF C	AVERAGE	CURRENT % BELOW AVG	NEW CCH RATE	% BELOW AVG POST ADJ	CHANGE
PRIVATE ROOM	\$2,228	\$2,713	\$3,638	\$5,714	\$2,120	\$4,471	\$3,731	-40%	\$2,480	-34%	7%
SEMI-PVT	\$2,078	\$2,713	\$3,638	\$4,033	\$2,120	\$4,471	\$3,395	-39%	\$2,313	-32%	7%
NICU LEVEL 1	\$800	\$1,561	\$2,112	\$1,790	\$1,331	\$3,626	\$2,084	-62%	\$1,200	-42%	19%
NICU LEVEL 2	\$2,228	\$4,578	\$2,737	\$5,542	\$2,766	\$4,996	\$4,124	-46%	\$3,342	-19%	27%
NICU LEVEL 3	\$2,400	\$5,167	\$4,787	\$7,225	\$4,620	\$10,752	\$6,510	-63%	\$3,600	-45%	18%
NICU LEVEL 4	\$2,900	\$5,601	\$6,254	\$7,225	\$6,014	\$10,760	\$7,171	-60%	\$4,350	-39%	20%
INTENSIVE CARE	\$2,900	\$5,973	\$6,254	\$10,680	\$4,310	\$10,760	\$7,595	-62%	\$4,350	-43%	19%

CCH SURGERY RATES COMPARED TO AREA HOSPITALS											
SURGERY - PER HOUR	CCH	U of I	LOYOLA	MT SINAI	RUSH	U OF C	AVERAGE	CURRENT % BELOW AVG	NEW CCH RATE	% BELOW AVG POST ADJ	CHANGE
<b>SURGERY BASIC LVL 1</b>											
First Hour	\$3,043	\$5,443	\$3,135	\$47,271	\$4,756	\$11,770	\$14,475	-79%	\$3,317	-77%	2%
Second Hour	\$2,678	\$3,784	\$2,340	\$36,414	\$4,440	\$9,136	\$11,223	-76%	\$2,919	-74%	2%
<b>SURGERY INTER LVL 2</b>											
First Hour	\$4,714	\$5,443	\$5,144	\$45,506	\$6,551	\$16,540	\$15,837	-70%	\$5,138	-68%	3%
Second Hour	\$3,578	\$3,784	\$3,836	\$36,414	\$5,640	\$9,136	\$11,762	-70%	\$3,900	-67%	3%
<b>SURGERY COMPL LVL 3</b>											
First Hour	\$6,385	\$5,443	\$5,144	\$45,506	\$6,920	\$30,123	\$18,627	-66%	\$6,960	-63%	3%
Second Hour	\$6,124	\$3,784	\$3,836	\$36,414	\$6,240	\$8,736	\$11,802	-48%	\$6,675	-43%	5%

# Health Plan Services Financial Results – October 31, 2021

Dollars in 000s except PMPM amounts	FY2021 Actual	FY2021 Budget	Variance	%	Fy20 Actual
<b>Capitation Revenue</b>	\$2,241,499	\$1,912,652	\$328,847	17.19%	\$1,839,075
<b>Operating Expenses</b>					
Clinical - CCH	\$69,233	\$68,931	(\$302)	(0.44%)	\$94,998
Clinical - External	\$2,047,568	\$1,719,859	(\$327,710)	(19.05%)	\$1,694,643
Administrative	\$114,634	\$128,749	\$14,114	10.96%	\$91,500
Total Expenses	\$2,231,436	\$1,917,539	(\$313,897)	(16.37%)	\$1,881,141
Operating Gain (Loss)	\$10,063	(\$4,887)	\$14,949	(305.92%)	(\$42,065)
<b>Activity Levels</b>					
Member Months	4,376,326	3,925,414	450,912	11.49%	3,757,317
CCH CountyCare Member Months	458,870	N/A	N/A	N/A	397,094
CCH % CountyCare Member Months	10.49%	N/A	N/A	N/A	10.57%
<b>Operating Indicators</b>					
Revenue Per Member Per Month (PMPM)	\$512.19	\$487.25	\$24.94	5.12%	\$489.47
Clinical Cost PMPM	\$483.69	\$455.69	(\$28.00)	(6.14%)	\$476.31
Medical Loss Ratio (1)	92.3%	93.40%	1.07%	1.14%	90.72%
Administrative Cost Ratio	4.7%	6.35%	1.67%	26.37%	4.95%

CountyCare Membership



## Commentary

- Total YTD member months exceed budget by 450,912 due to increased Medicaid enrollment as a result of the COVID-19 induced growth in unemployment, and no state redetermination of Medicaid eligibility.
- CountyCare expects enrollment to continue to exceed budget as auto-assignment increased to 50% as of February 2021. This change was due to CountyCare's top-quality ranking among Medicaid MCOs.
- CountyCare's reimbursement to CCH for domestic spend is exceeding budget.
- Operating Gain of \$10M consists of \$17.8M from CountyCare and a loss of \$(7.8)M from Medicare.
- Agreement executed with State of Illinois and CCH to reduce IGT by 50% beginning in January 2021. This change has been reflected in the results.

## Notes:

- (1) Medical Loss Ratio is a measure of the percentage of premium that a health plan spends on medical claims.

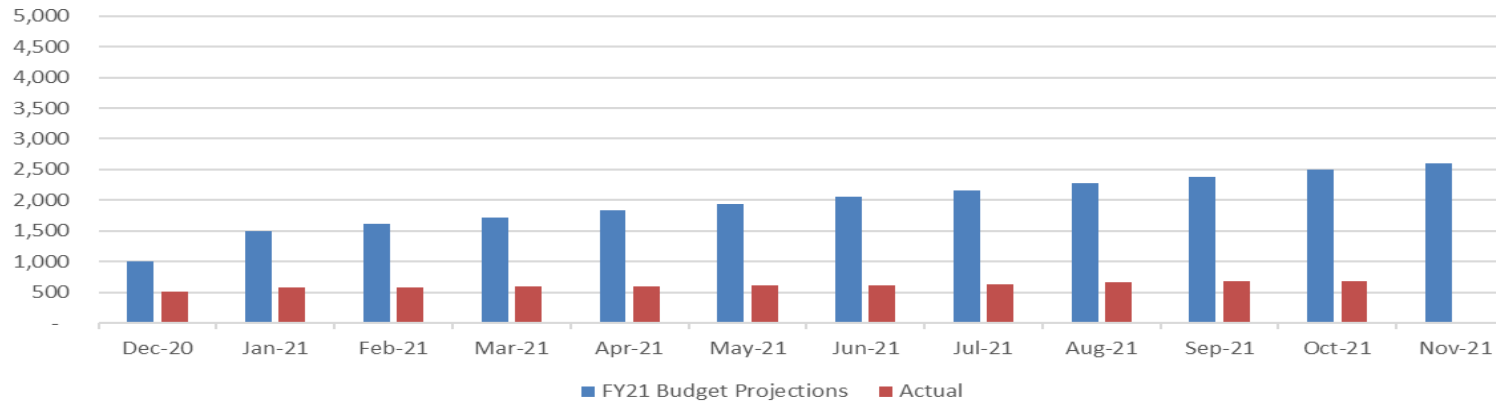
# Medicare Financial Results – October 31, 2021

Dollars in 000s except PMPM amounts	FY2021 Actual	FY2021 Budget	Variance	%
<b>Capitation Revenue (Total dollar amount)</b>	\$13,044	\$30,974	(\$17,930)	(57.89%)
<b>Operating Expenses</b>				
Clinical Expenses	\$11,839	\$30,974	\$19,135	61.78%
Administrative	\$9,041	\$9,264	\$223	2.41%
Total Expenses	\$20,880	\$40,238	\$19,358	48.11%
Operating Gain (Loss)	(\$7,836)	(\$9,264)	\$1,428	(15.41%)
<b>Activity Levels</b>				
Member Months	6,718	20,975	(\$14,257)	(67.97%)
<b>Operating Indicators</b>				
Revenue Per Member Per Month (PMPM)	\$1,941.63	\$1,476.76	\$464.88	31.48%
Clinical Cost PMPM	\$1,762.29	\$1,476.76	(\$285.54)	(19.34%)

## Commentary

- Membership is lower than budget, driving lower than expected revenue and cost.
- Revenue and cost on a per member per month basis is exceeding budgeted PMPM due to population mix (more members enrolled in higher premium Special Needs Plans versus lower premium MA-PD Plan).
- Total operating loss is lower than budget by \$1.4M.

MoreCare Membership



# Human Resources Metrics



Presented to the CCH Board on 12/17/2021



COOK COUNTY  
HEALTH



# FY 2021 CCH HR Activity Report

Thru 11/30/2021

## Hires

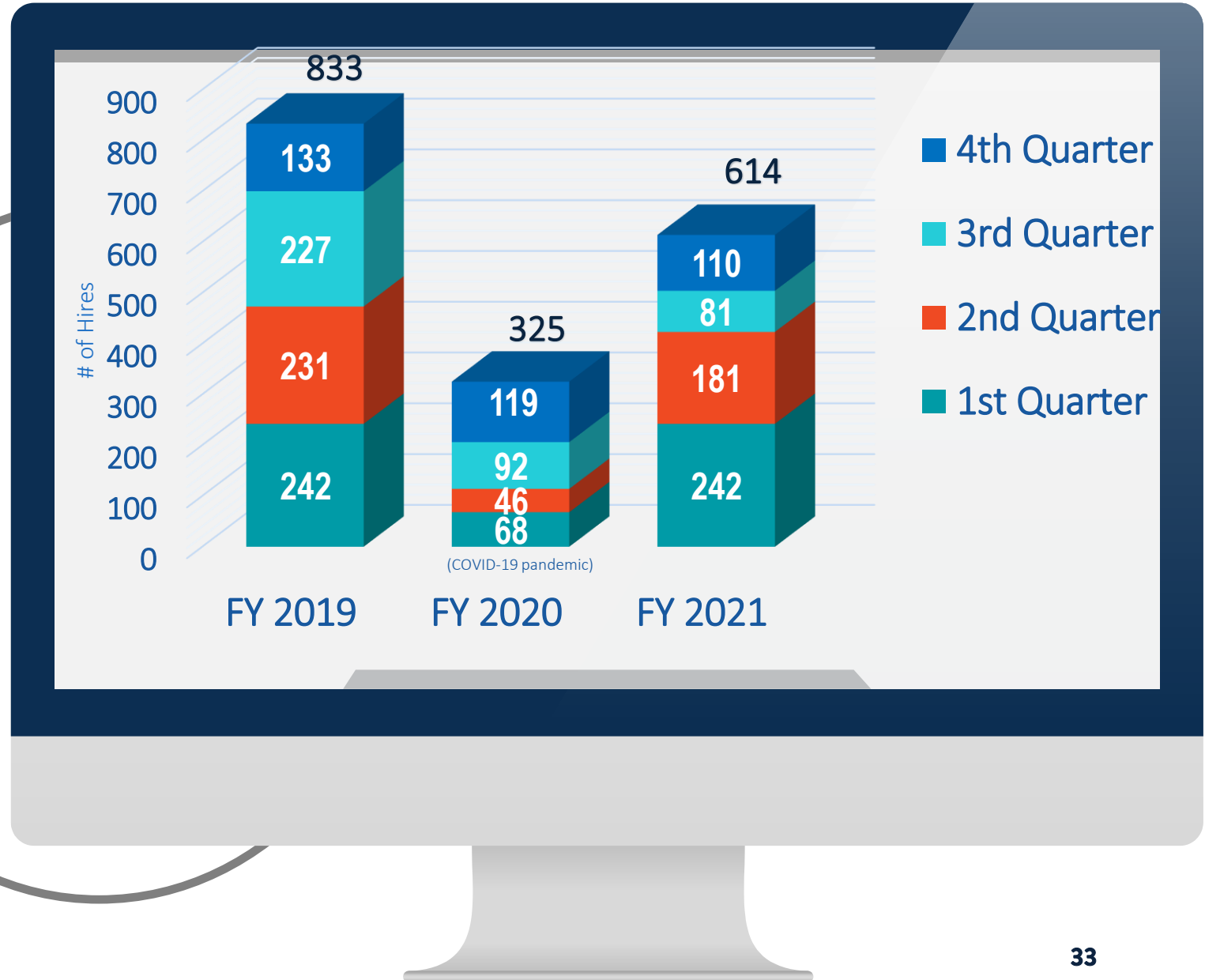
**74% FY 2021 New Hires**  
453 out of 614 positions



**12% FY 2021 Promotions**  
76 out of 614 positions



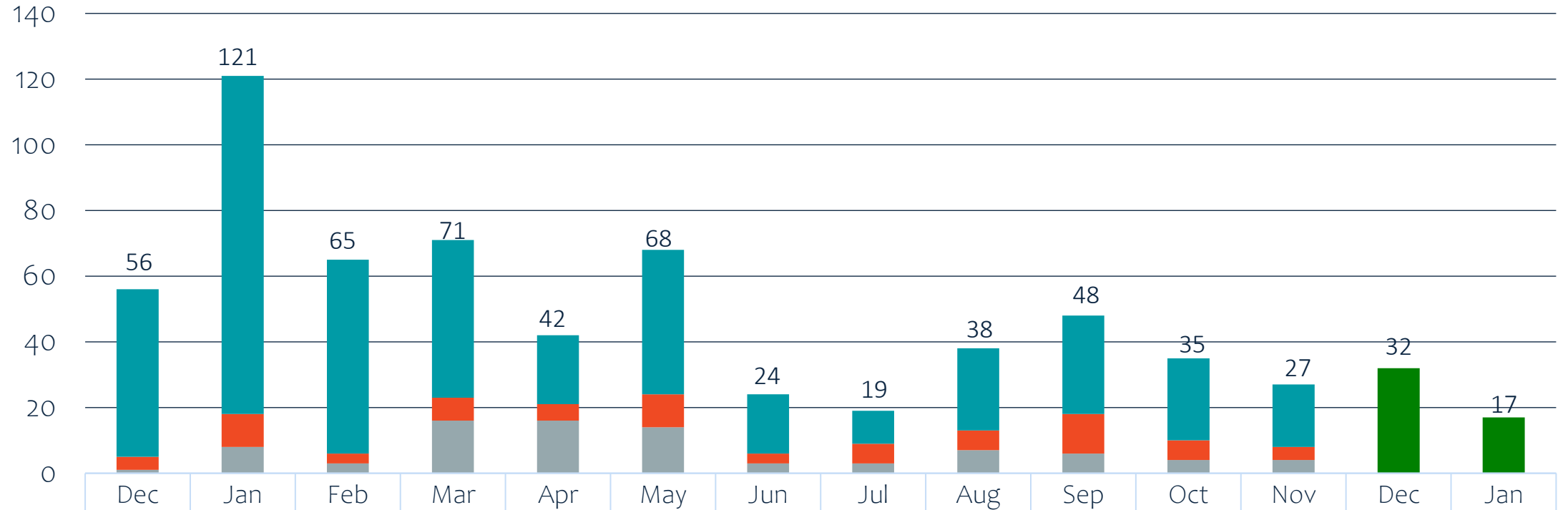
**14% FY 2021 Transfers**  
85 out of 614 positions



# FY 2021 CCH HR Activity Report

## Vacancies Filled

Thru 11/30/2021



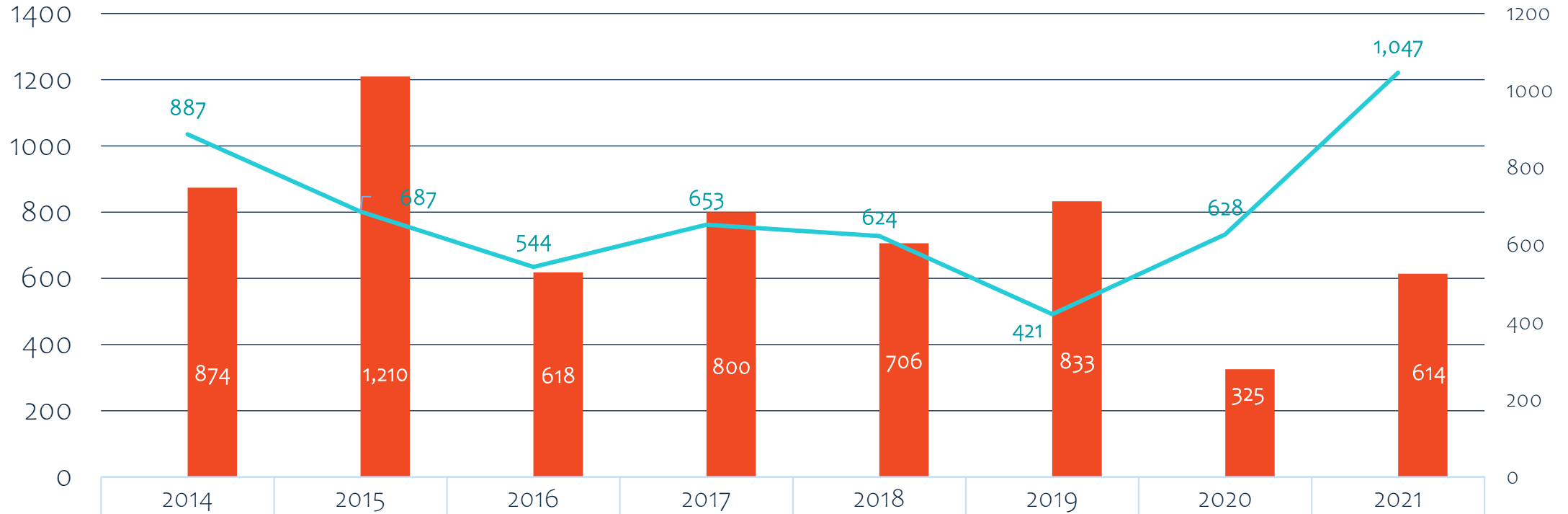
	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan
<span style="color: teal;">■</span> New Hire (453)	51	103	59	48	21	44	18	10	25	30	25	19		
<span style="color: orange;">■</span> Promotion (76)	4	10	3	7	5	10	3	6	6	12	6	4		
<span style="color: grey;">■</span> Transfer (85)	1	8	3	16	16	14	3	3	7	6	4	4		
<span style="color: green;">■</span> Future Hires (49)													32	17



# FY 2021 CCH HR Activity Report

## HR Resources in Review

Thru 11/30/2021



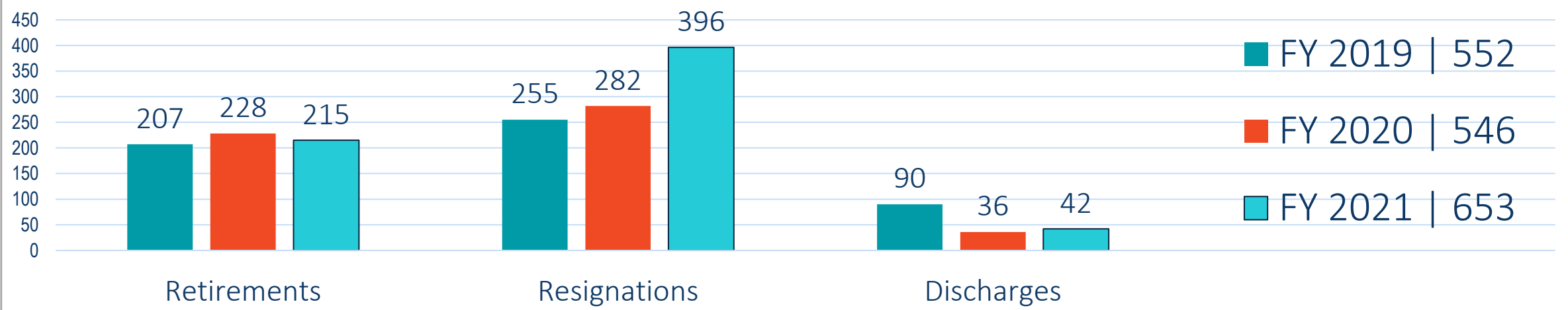
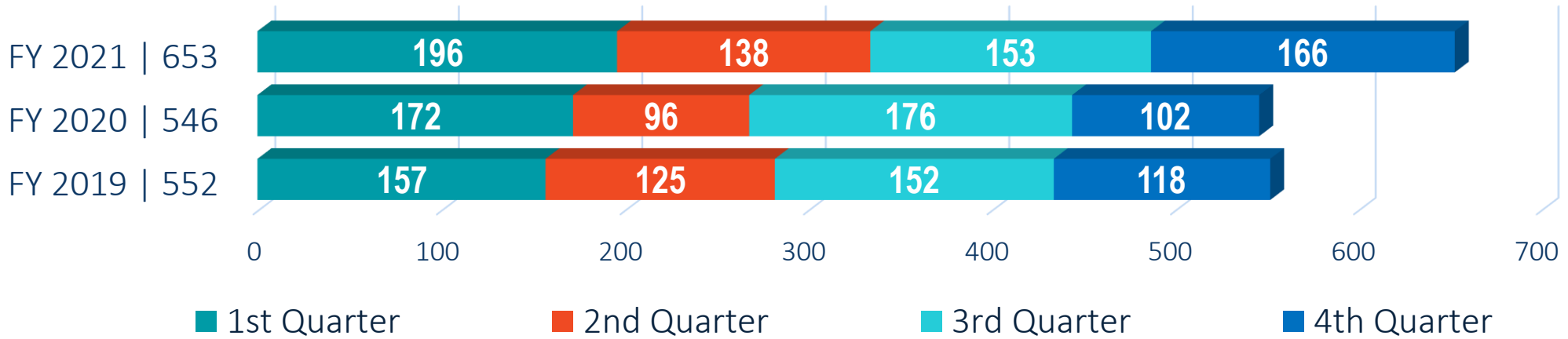
	2014	2015	2016	2017	2018	2019	2020	2021
Recruiters	9	11	10	12	6	7	6	4
Vacancies Filled	874	1,210	618	800	706	833	325	614
Vacancies in HR	887	687	544	653	624	421	628	1,047
Avg. Monthly Hires	73	100	51	67	59	69	27	51

# FY 2021 CCH HR Activity Report

## Separations

Thru 11/30/2021

Net Loss = -200  
Separations (653) & External Hires (453)



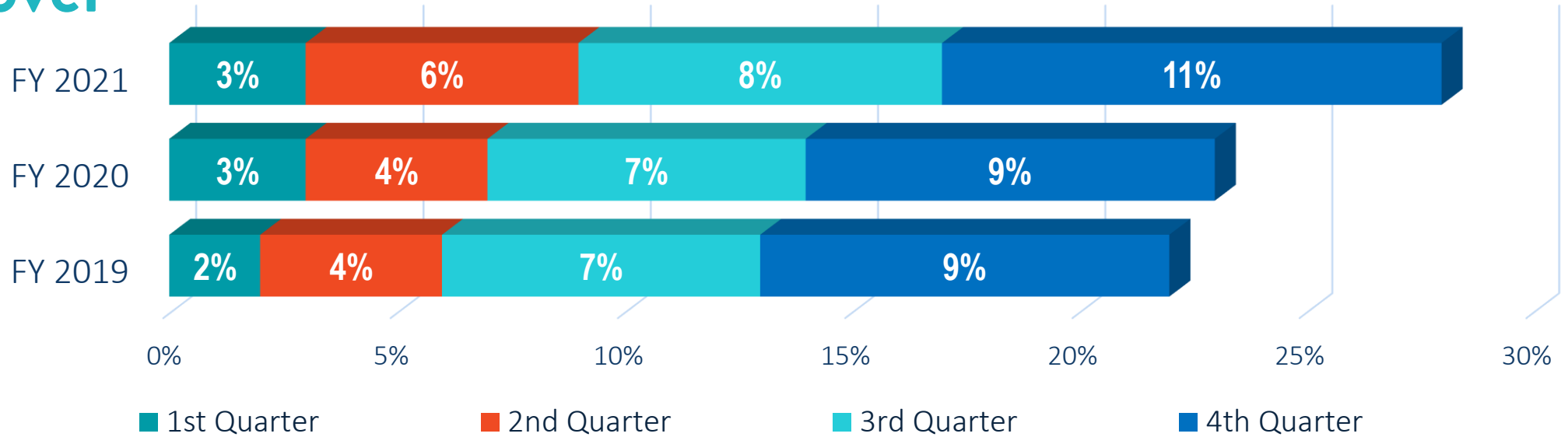
**COOK COUNTY HEALTH**

Does not include Consultants, Registry and House Staff

# FY 2021 CCH HR Activity Report

## Turnover

Thru 11/30/2021



2019			
Qtr.	# of Employees	Separations	Turnover
Q1	6366	157	2%
Q2	6407	282	4%
Q3	6437	434	7%
Q4	6404	552	9%

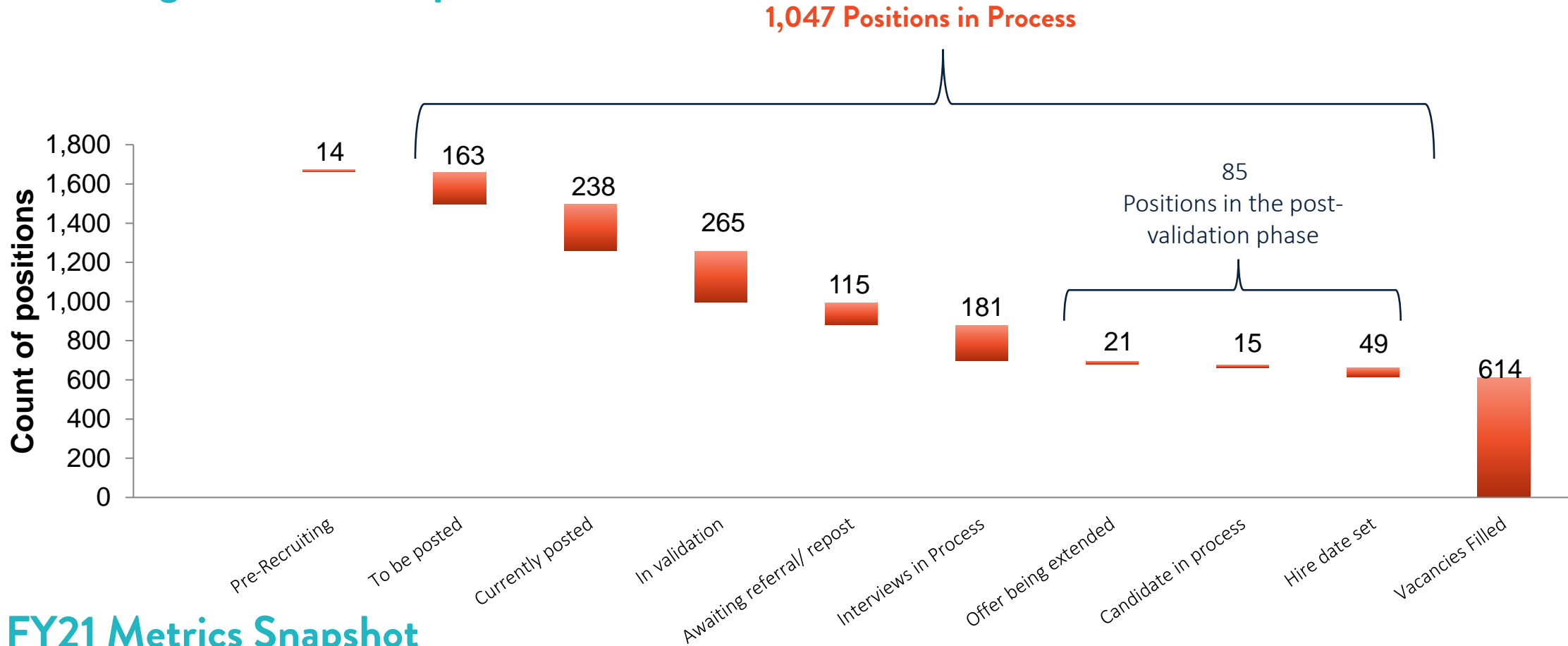
2020			
Qtr.	# of Employees	Separations	Turnover
Q1	6263	172	3%
Q2	6200	268	4%
Q3	6078	444	7%
Q4	6080	546	9%

2021			
Qtr.	# of Employees	Separations	Turnover
Q1	6071	196	3%
Q2	6038	334	6%
Q3	5926	487	8%
Q4	5841	653	11%



# FY 2021 CCH HR Activity Report

## CCH Hiring Funnel & Snapshot



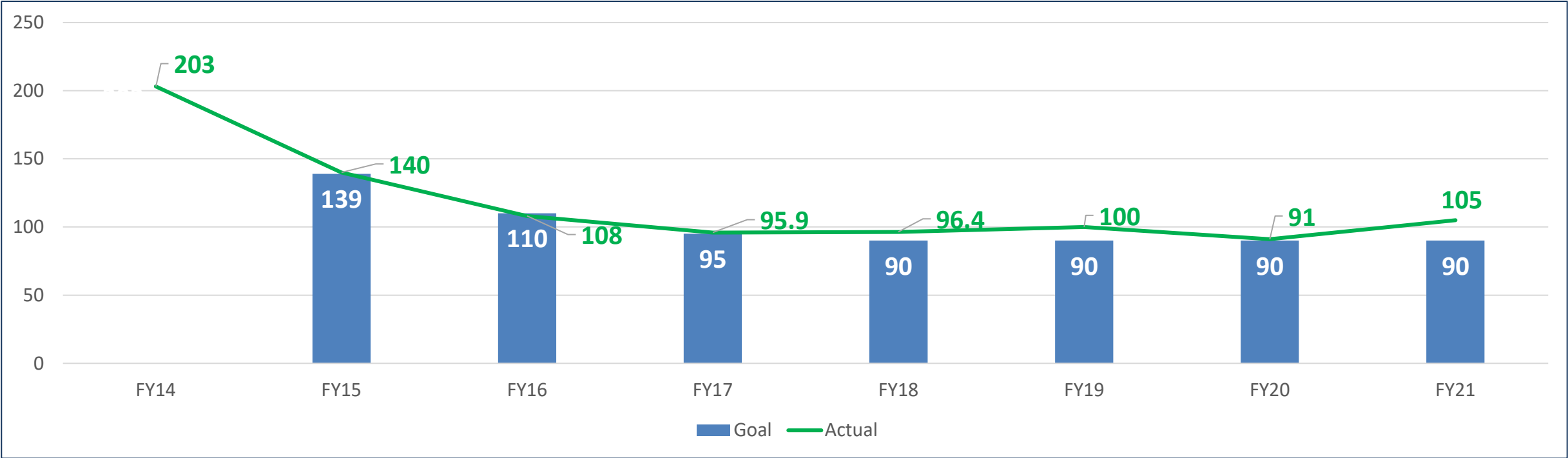
## FY21 Metrics Snapshot

Vacancies (Request To Hires)	Posted	Postings Closed	Validation Completed	Referred for Interview	Interviews Completed	Candidate Offers	Vacancies Filled
1,675	1,498	1,250	995	880	699	663	614

# FY 2021 CCH HR Activity Report

## Average Time to Fill

Thru 11/30/2021



# FY 2021 CCH HR Activity Report

## Strategic Planning



### HR Staffing

- Leverage Agency Staffing
- Leverage former experienced human resources staff
- Recruitment Process Outsourcing (RPO) to assist CCH HR with recruitment and specifically coordination of monthly job fairs.



### Improved Technology

- Job Tracker
  - Improved user defined fields to make data useful and meaningful for reporting.
- Document Management System
- Credentialing
  - Implementing Pre-Check so CCH can track credentials of nearly 2,000 employees



### Enhance Recruitment Process

- Recruitment Process Redesign/Optimization
  - Streamline the Job Posting to Onboarding processes
  - Establish service level agreements/timelines



### Leverage Partnerships, Advertising and Social Media

- Job specific boards
- Television
- Facebook
- LinkedIn
- Cook County Health announcements
- Colleges, universities



# Managed Care Metrics



Presented to the CCH Board on 12/17/2021



COOK COUNTY  
**HEALTH**

# Current Membership

Monthly membership as of December 5<sup>th</sup>, 2021

Category	Total Members	ACHN Members	% ACHN
FHP	262,977	20,628	7.8%
ACA	115,305	18,198	15.8%
ICP	30,474	5,310	17.4%
MLTSS	8,139	0	N/A
SNC	5,371	637	11.9%
<b>Total</b>	<b>422,266</b>	<b>44,773</b>	<b>10.6%</b>

**ACA:** Affordable Care Act

**FHP:** Family Health Plan

**ICP:** Integrated Care Program

**MLTSS:** Managed Long-Term Service and Support (Dual Eligible)

**SNC:** Special Needs Children

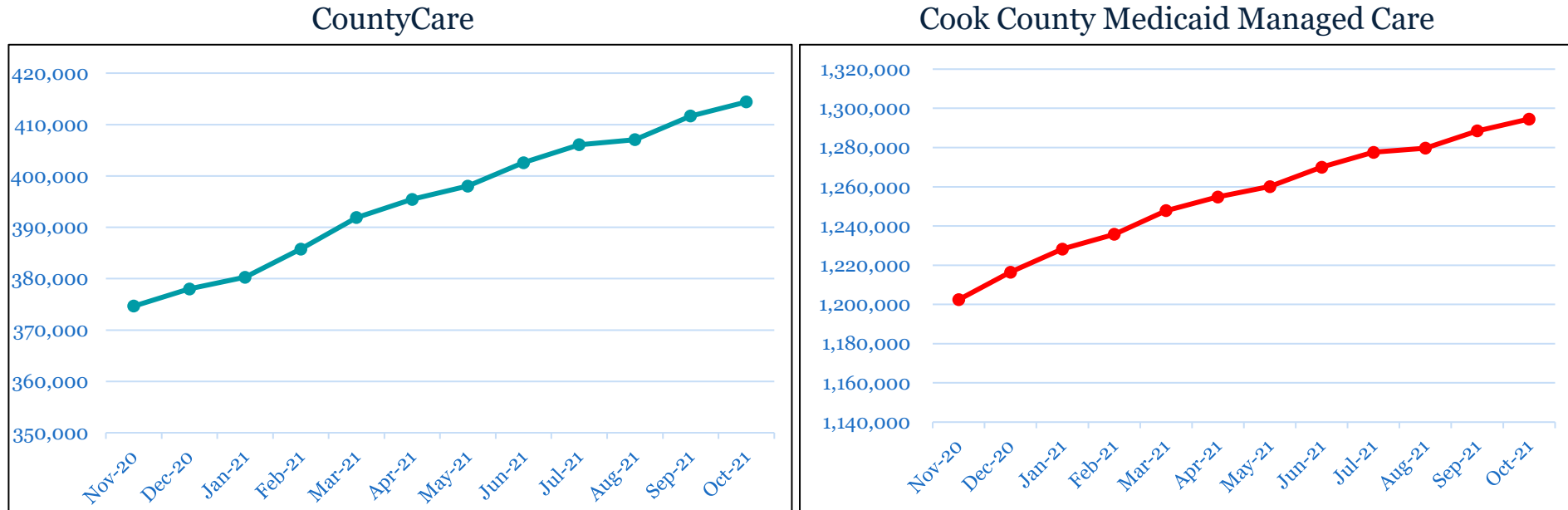
# Managed Medicaid Market

Illinois Department of Healthcare and Family Services October 2021 Data

Managed Care Organization	Cook County	Cook Market Share
*CountyCare	414,416	32.0%
Blue Cross Blue Shield	330,661	25.5%
Meridian (a WellCare Co.)	315,508	24.4%
IlliniCare (Aetna/CVS)	128,402	9.9%
Molina	95,809	7.4%
YouthCare	9,763	0.8%
<b>Total</b>	<b>1,294,559</b>	<b>100.0%</b>

\* Only Operating in Cook County

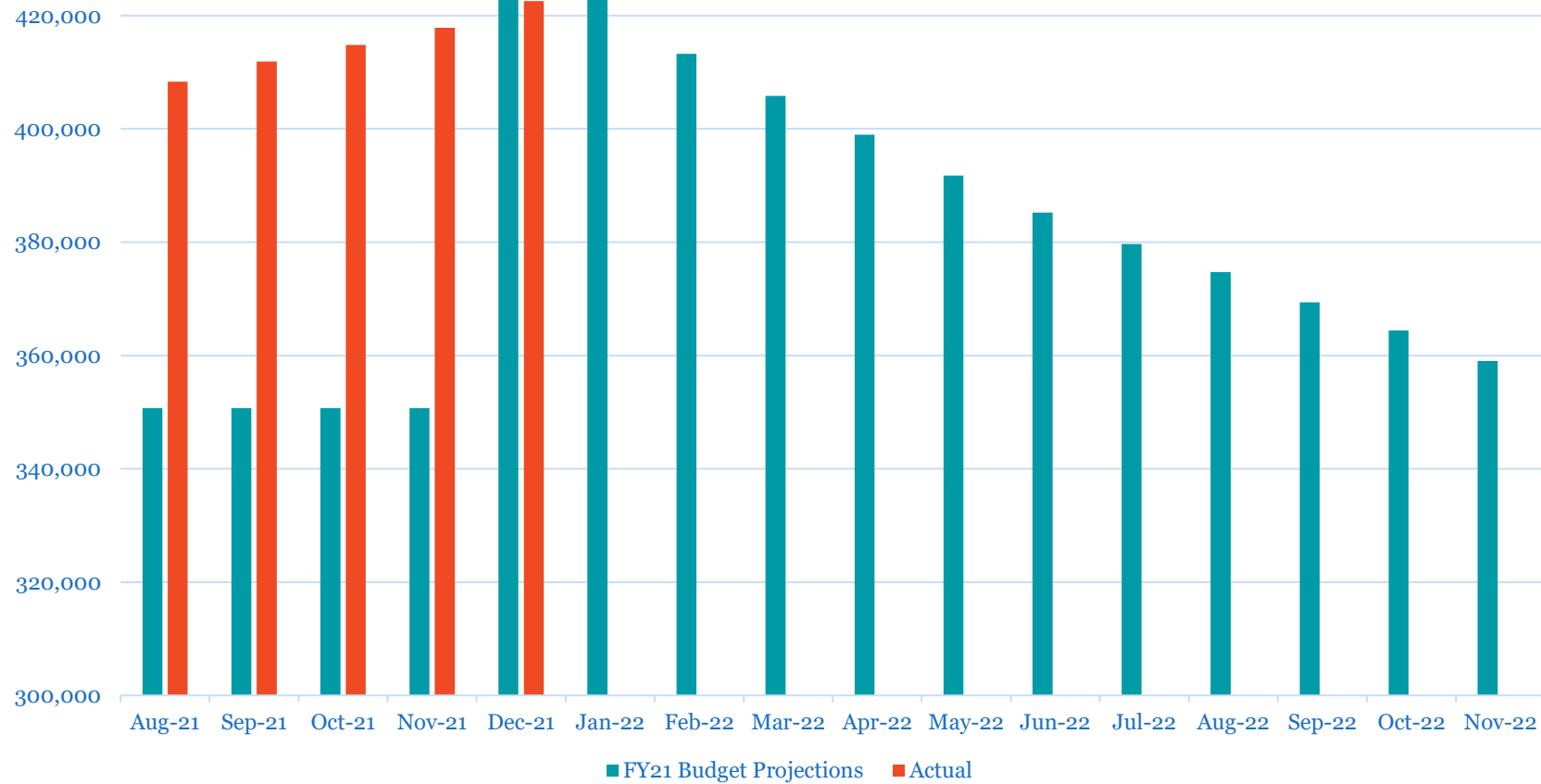
# IL Medicaid Managed Care Trend in Cook County (charts not to scale)



- CountyCare's enrollment has increased 11% over the past 12 months, slightly ahead of the Cook County increase of 10%
- CountyCare's enrollment increased 0.7% in October 2021 compared to the prior month

# FY 21 Budget | Membership

## CountyCare Membership



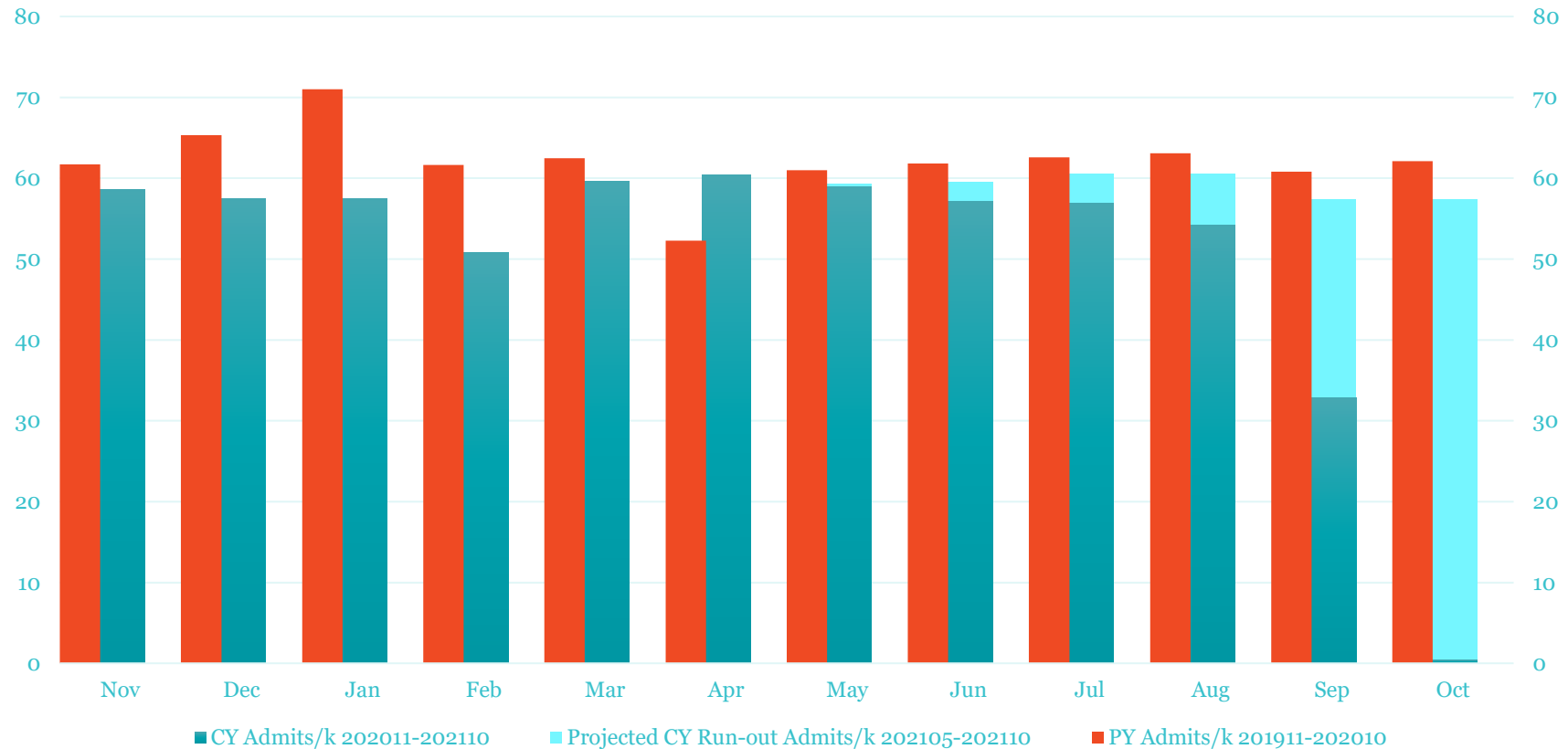
# Operations Metrics: Call Center & Encounter Rate

		Performance		
Key Metrics	State Goal	Sept 2021	Oct 2021	Nov 2021
<b>Member &amp; Provider Services Call Center Metrics</b>				
Abandonment Rate	< 5%	5.00%	2.14%	2.42%
Hold Time (minutes)	1:00	1:05	0:23	0:27
% Calls Answered < 30 seconds	> 80%	68.72%	85.20%	81.87%
<b>Quarterly</b>				
Claims/Encounters Acceptance Rate	98%	98%		

# Operational Updates

Request for Proposals	Posting Date	Expected Completion
Pharmacy Benefit Managers	October, 2021	1 <sup>st</sup> Quarter, 2022
Third Party Administrative Services	October, 2021	1 <sup>st</sup> Quarter, 2022
Care Management	December, 2021	1 <sup>st</sup> Quarter, 2022
ESRD Services	October, 2021	1 <sup>st</sup> Quarter, 2022
Actuarial Services	November, 2021	1 <sup>st</sup> Quarter, 2022

# Current v. Prior Year: IP Acute Admits/1000



Updated monthly, paid through October 2021  
 All acute and surgical cases + approved acute authorizations  
 Domestic admissions are not included since they do not require Prior Authorization

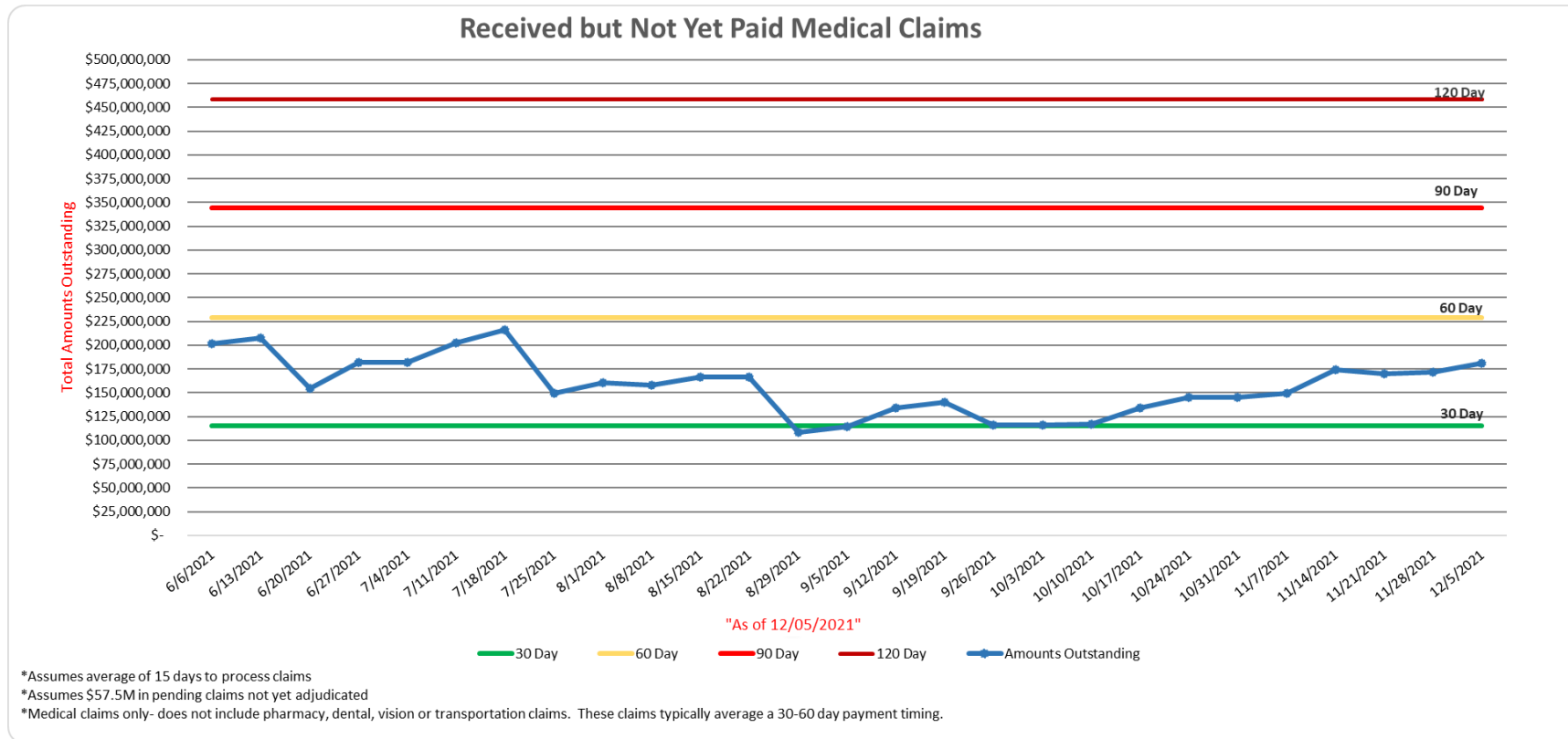


# CountyCare COVID Vaccination Rates

Vaccination Phase	Count of Membership	Percent of Total Membership (407k)	Percent of Vaccine-Eligible Membership (294k)
1st of 2 doses only:	19,285	4.57%	5.14%
Fully Vaccinated:	136,468	32.32%	36.34%
Vaccinated with at least 1 dose:	155,911	36.89%	41.48%

Data as of 12/3/2021

# Claims Payments



# Claims Payments

## Received but Not Yet Paid Claims

Aging Days	0-30 days	31-60 days	61-90 days	91+ days	Grand Total
Q1 2020	\$ 109,814,352	\$ 53,445,721	\$ 46,955,452	\$ 9,290,569	\$ 219,506,093
Q2 2020	\$ 116,483,514	\$ 41,306,116	\$ 27,968,899	\$ 18,701,664	\$ 204,460,193
Q3 2020	\$ 118,379,552	\$ 59,681,973	\$ 26,222,464	\$ 71,735	\$ 204,355,723
Q4 2020	\$ 111,807,287	\$ 73,687,608	\$ 61,649,515	\$ 1,374,660	\$ 248,519,070
Q1 2021	\$ 111,325,661	\$ 49,497,185	\$ 4,766,955	\$ 37,362	\$ 165,627,162
Q2 2021	\$ 131,867,220	\$ 49,224,709	\$ 566,619	\$ 213,967	\$ 181,872,515
Q3 2021	\$ 89,511,334	\$ 25,733,866	\$ 38,516	\$ 779,119	\$ 116,062,835
Week of 12/5/2021	\$ 124,580,103	\$ 55,650,668	\$ 5,027	\$ 1,052,150	\$ 181,287,948

\*0-30 days is increased for an estimated \$57.5M of received but not adjudicated claims

\*Medical claims only-does not include pharmacy, dental, vision or transportation claims

\*The amounts in the table are clean claims

# Quality & Patient Safety Metrics



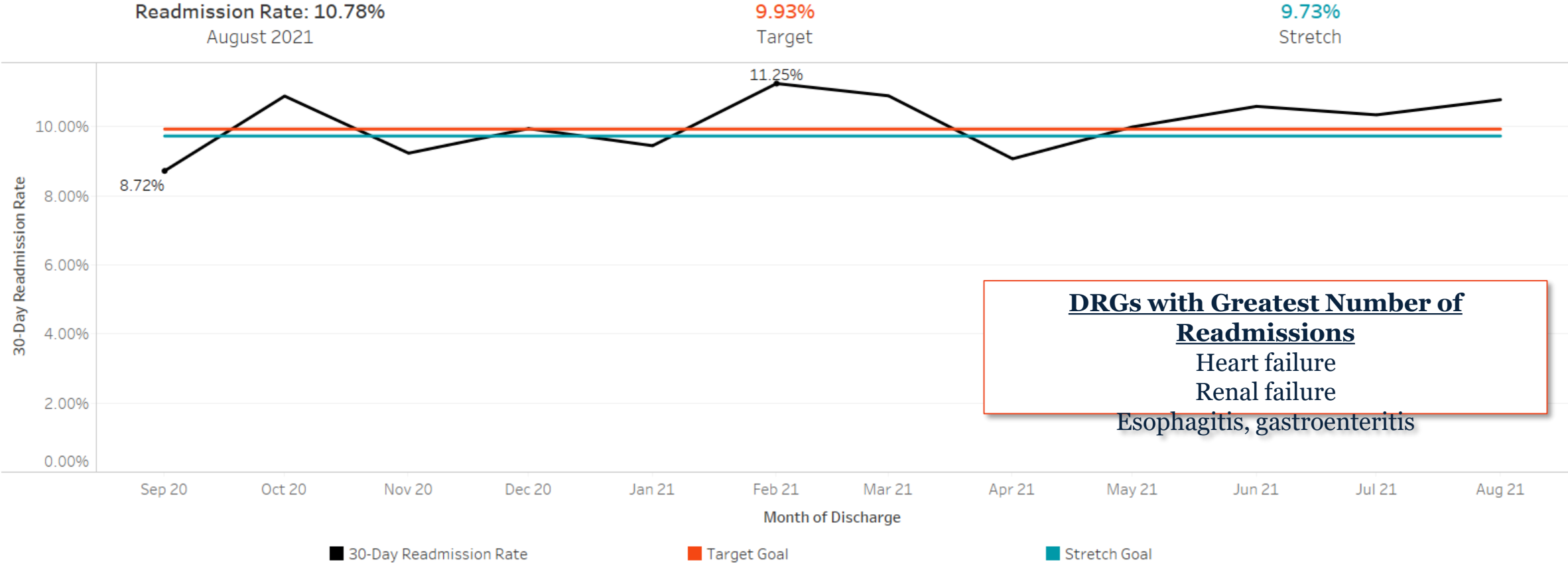
Presented to the CCH Quality and Patient Safety Committee on 12/9/2021



COOK COUNTY  
HEALTH

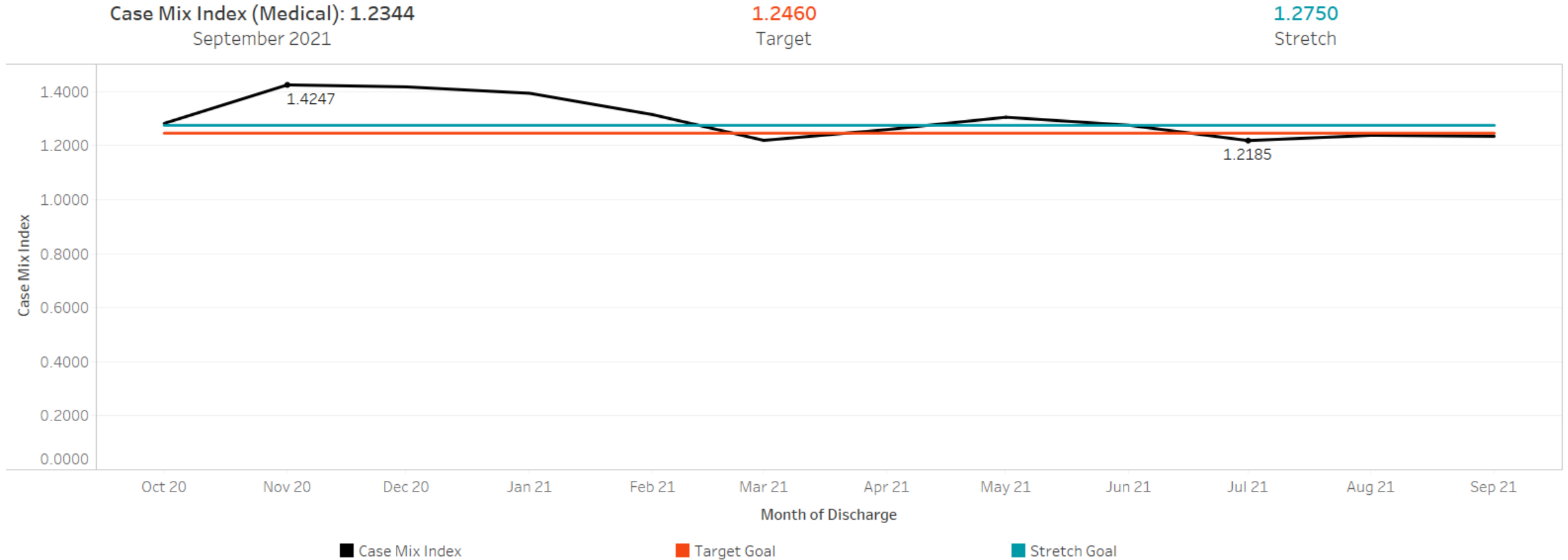
# 30-Day Readmission Rate (Stroger Hospital)

HRO Domain: Readmissions



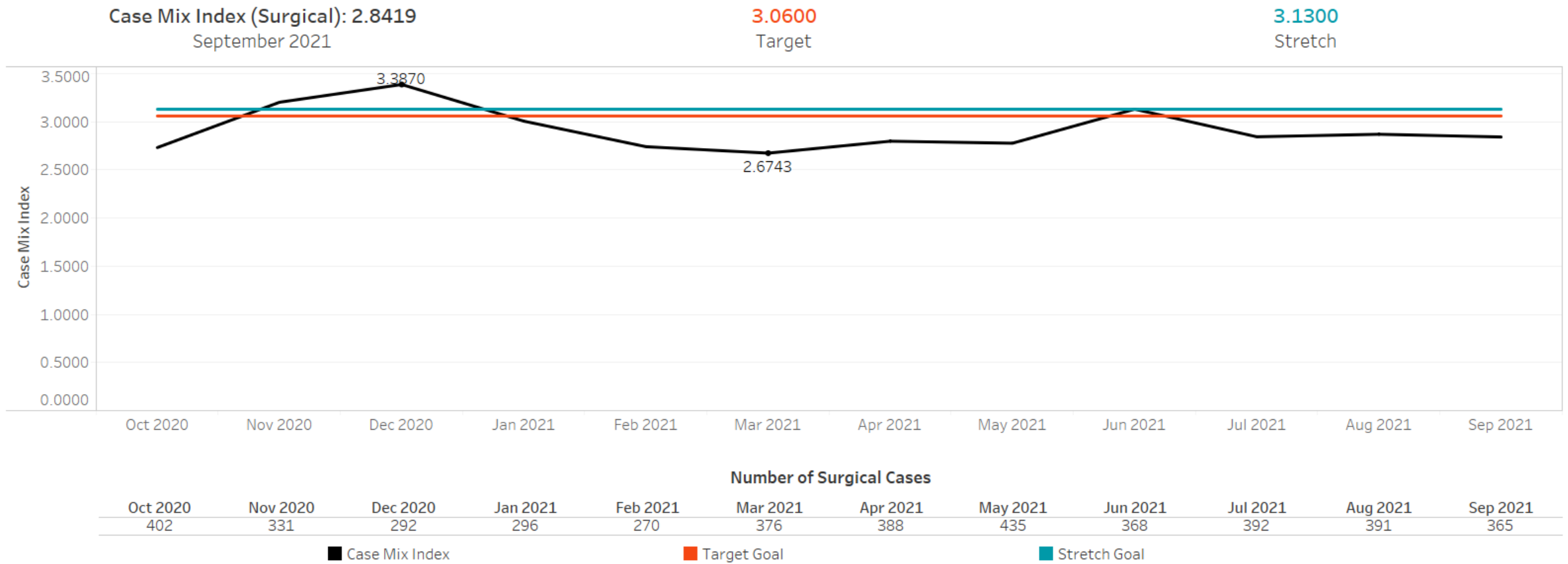
# Case Mix Index, Medical MS-DRG (Stroger Hospital)

## HRO Domain: Clinical Documentation



# Case Mix Index, Surgical MS-DRG (Stroger Hospital)

## HRO Domain: Clinical Documentation



\*Higher case mix index is favorable

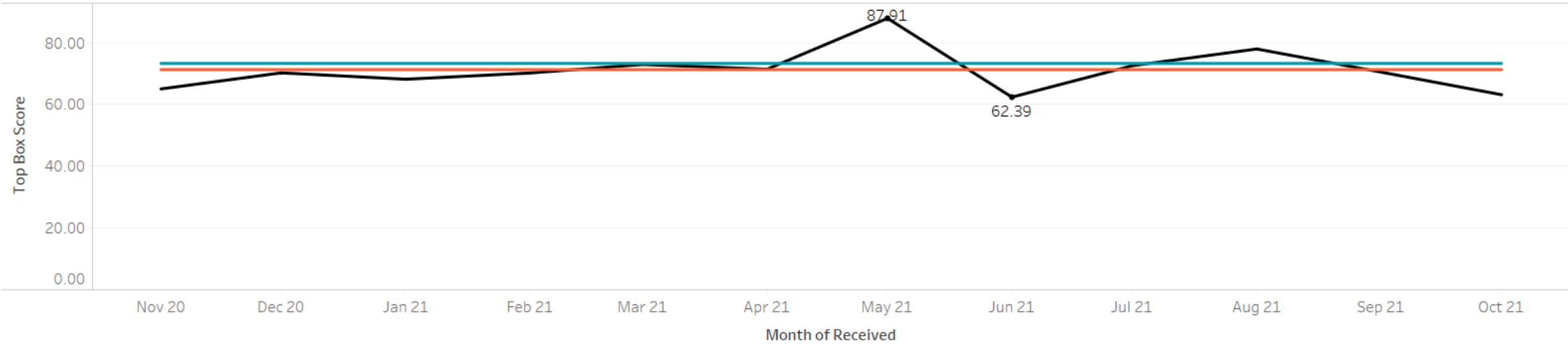
# Top Box Score, Recommend the Hospital (Stroger Hospital)

## HRO Domain: Patient Experience

Top Box Score (Recommend Hospital): 63.16  
October 2021

71.30  
Target

73.30  
Stretch



■ Top Box Score      ■ Target Goal      ■ Stretch Goal

**Total Patient Experience Surveys Received in Month**

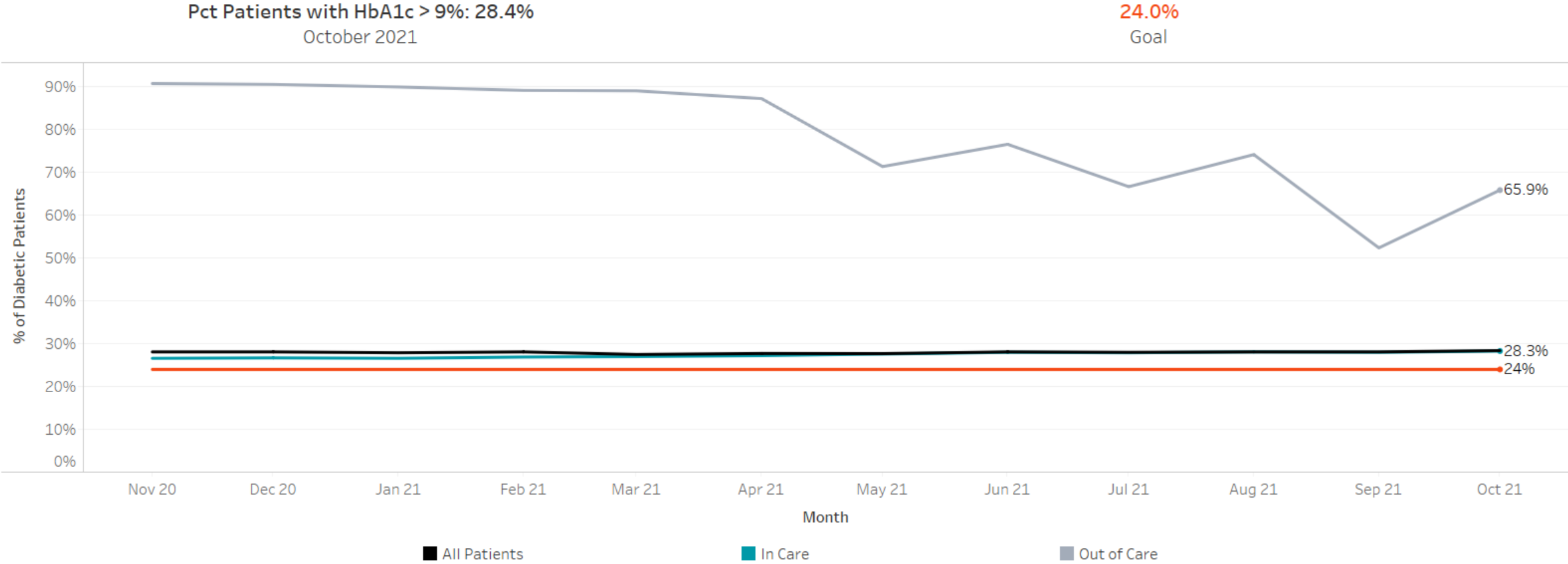
Nov 20	Dec 20	Jan 21	Feb 21	Mar 21	Apr 21	May 21	Jun 21	Jul 21	Aug 21	Sep 21	Oct 21
123	158	110	94	159	140	91	117	113	109	105	95

\*Higher top box score is favorable



# HbA1c >9%

## HRO Domain: HEDIS



\***Lower** percent of diabetics patients (>9%) is favorable

## Metric

## Definition

### 30-Day Readmission Rate

- *Patient unplanned admission to Stroger within 30 days after being discharged from an earlier hospital stay at Stroger*
- **Calculation:** Raw unplanned readmission rate (# of readmissions / total # of eligible discharges)
- **Population included:** all inpatient discharges from Stroger
- **Cohort inclusions:** any payer; any age; alive at discharge
- **Cohort exclusions:** Admitted for primary psychiatric dx; admitted for rehabilitation; admitted for medical treatment of cancer (chemotherapy, radiation therapy); admitted for dialysis; admitted for delivery/birth
- **Reporting timeframe:** reported monthly with a 1-month lag to allow for 30-day readmission window; reported by month of patient discharge
- **Data source:** Vizient Clinical Data Base

### Case Mix Index

- *Average relative DRG weight of a hospital's inpatient discharges, calculated by summing the Medicare Severity-Diagnosis Related Group (MS-DRG) weight for each discharge and dividing by the total number of discharges*
- **Population included:** all inpatient discharges from Stroger
- **Cohort inclusions:** any payer; any age; reported by Medical MS-DRG and Surgical MS-DRG (*Surgical: an OR procedure is performed*)
- **Cohort exclusions:** none
- **Reporting timeframe:** reported monthly by most current month available; reported by month of patient discharge
- **Data source:** Vizient Clinical Data Base

### Recommend the Hospital

- *Percent of patient responses with "Definitely Yes" (top box response) for Recommend the Hospital item in HCAHPS survey*
- **Calculation:** Percent of patient responses with "Definitely Yes" (*top box*) / total survey responses
- **Population included:** Stroger; 18 years or older at time of admission; non-psychiatric MS-DRG/principal diagnosis at discharge; alive at discharge; >1 overnight stay in hospital as inpatient
- **Cohort exclusions:** discharged to hospice care; discharged to nursing homes or SNFs; court/law enforcement patients; patients with a foreign home address; "no-publicity" patients"; patients who are excluded because of rules and regulates of state in which hospital is located
- **Reporting timeframe:** reported monthly by most current month available; reported by month of survey received date
- **Data source:** Press Ganey

### HbA1c >9%

- *Percent of adults (ages 18-75) with diabetes Type 1 or Type 2 where HbA1c is not in control (>9.0%)*
- **Calculation:** Percent of diabetic patients with HbA1c not in control / total diabetic patients
- **Population included:** (Age 18-75 years as of December 31 of current year AND two diabetic Outpatient/ED visits in the current year or previous year) OR (One diabetic Inpatient visit in the current year or previous year) OR (Prescribed insulin or hypoglycemic or anti-hyperglycemics in the current year or previous year)
- **Cohort exclusions:** none
- **Reporting timeframe:** reported monthly by most current month available; reported by month of patient visit
- **Data source:** NCQA, HEDIS

# Divisional Reports

Strategic Highlights & Opportunities of CCH Operating Divisions

December 17, 2021



COOK COUNTY  
**HEALTH**

A faint, light orange graphic of a stethoscope is positioned on the left side of the page, extending from the top to the bottom. The background is a solid, medium orange color.

# Ambulatory Care

# Strategic Highlights

- Added more than 150 new appointment slots in gastroenterology (32) and orthopedics (128) to ensure timely access for patients
- Offering one week or less appointment availability for referrals to pediatric subspecialties (Diabetes, Endocrinology, Neonatal High Risk, Hematology, Oncology, Neurology, Urology, Cardiology, Surgery, Renal, Adolescent Young Adult, Genetics, Adolescent and Child Psychiatry).
- The new clinical affiliation with UI Health for additional pediatric specialty services (specifically Immunology, Pulmonology, and Nephrology) and it includes one-two sessions a week for each specialty.
- Rolled out the Dolly Parton Imagination Library program for children in 10 zip codes. This program provides Chicago children with a monthly delivery of a new book, free of charge. The books arrive by mail starting from birth until the child turns five years.
- Increased our HEDIS compliance as it relates to immunizations for patients less than two-years-old. Our goal is 75% and in October we were at 86%, in November we are at 78%.
- The Patient Support Center answered more than 41,500 patient calls with an average speed of answer under 60 seconds.
- Finalized the pillars of the FY22 action plan which include Patient Access, Patient Experience, Quality/Patient Safety/Regulatory Compliance, Revenue Cycle and Growth.
- Our Cook County HIV Integrated Programs achieved an HIV Viral suppression rate of 82% (Chicagoland 50%), and a patient retention rate of 75% (Chicagoland 42%). In addition, 98% of our patients are prescribed HIV medications, which dramatically reduces transmission rates.
- Our peritoneal dialysis program now enables eligible patients to receive dialysis treatment in the comfort of their homes, thus giving them more independence.
- Provided more than 15,000 COVID vaccines at CCH community health centers, pop-up and mobile events to all eligible populations.

# Strategic Opportunities/Challenges

- Working on year-end pushes to increase mammograms, A1C, eye and colorectal screenings among managed care patients.
- YTD primary care volume is tracking with budget while specialty continues to lag.
- We met with several colleges and universities to initiate partnerships between CCH and graduate school of social work programs to develop internship opportunities.
- Adding increased scrutiny to the specialty schedules to understand which services are underutilized and consequently reappropriate those services to needed areas.
- Developing a framework for improving the different modalities our patients use to schedule their appointments, specifically exploring the use of self-scheduling applications for specialty services.
- Working with Human Resources to prioritize hiring needs across ambulatory.
- Monitoring the national supply chain challenges closely.

A stylized, light orange graphic of a stethoscope is positioned on the left side of the image. It features a circular chest piece at the top left, a curved tube, and a circular ear piece at the bottom right. The graphic is semi-transparent and blends with the background.

# Cermak Health Services

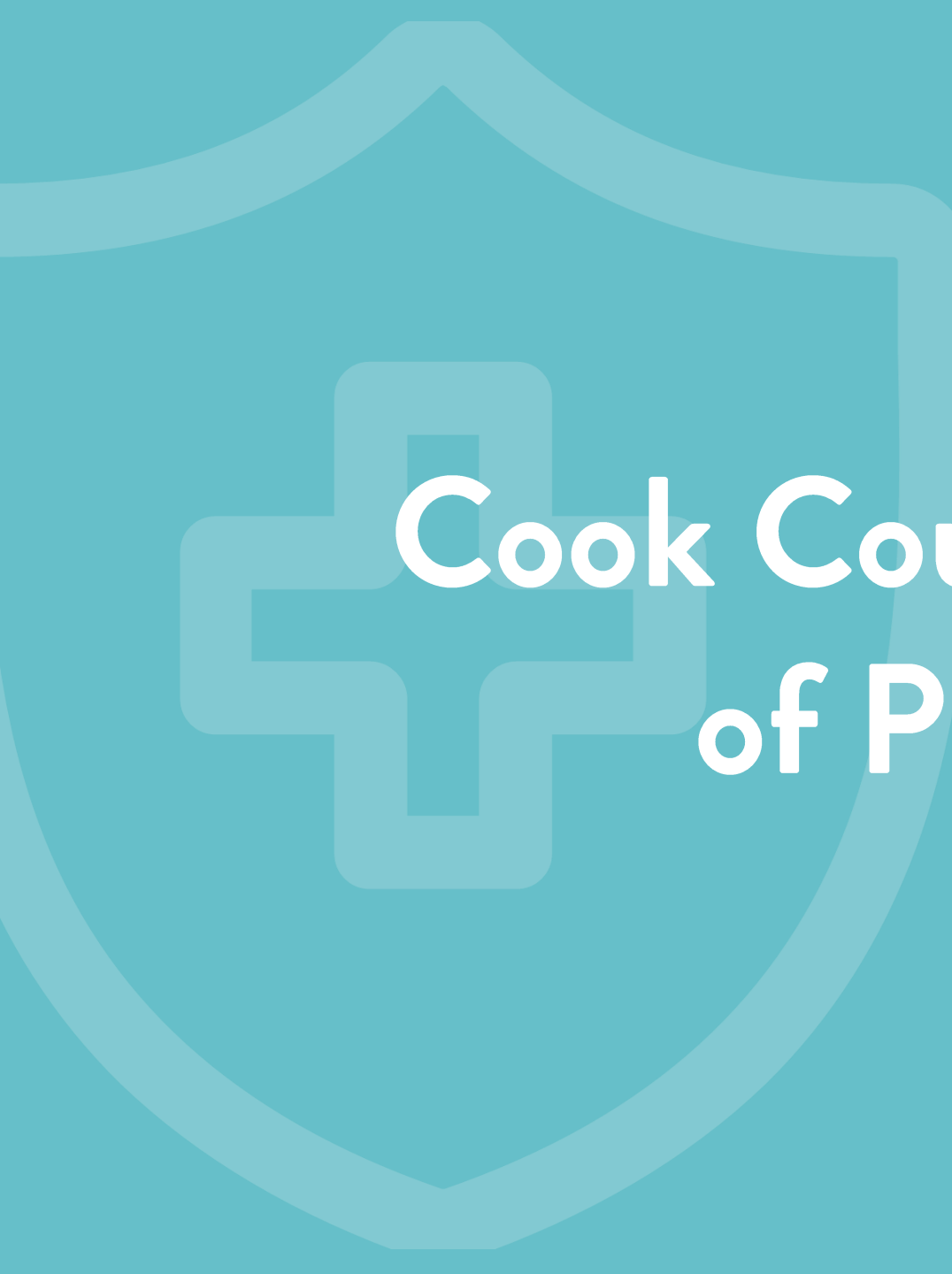
# Strategic Highlights

- Ongoing Patient Vaccination. Since February, 2021 more than 11,600 COVID doses of COVID vaccine have been administered to patients at Cermak including boosters for those eligible.
- Preparation for National Commission on Correctional Health Care (NCCHC) Accreditation continues. Survey is expected in 2022. JTDC reaccreditation survey also expected in 2022.
- Transfers to the Illinois Department of Corrections have improved slightly with approximately 500 detainees remanded to IDOC remaining at Cook County Jail.



# Strategic Opportunities/Challenges

- Expanded housing footprint has required pivoting of staff and services to areas formally shuttered
- COVID protocols, testing and vaccination remain critical strategies to mitigate and contain COVID at the jail

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# Cook County Department of Public Health

# Strategic Highlights

More than 44,000 doses given through the mobile vaccination program since January 2021.

16,759 actionable contact tracing cases were reported with reach attempts at 93.5% overall, and 74.4% in 48 hours. This is the highest number of actionable cases since January 2021.

Environmental Health staff completed 445 routine inspections, responded to 43 nuisance complaints, and conducted 32 investigations to respond to reports of COVID mitigation violations.

Intergovernmental Agreements were renewed with the 31 municipalities for which CCDPH provides restaurant inspections.

In collaboration with the Cook County Medical Examiner's office, the Epidemiology Unit drafted COVID death data report for 2020, created the Cook County Opioid Fatality Review process for internal use, drafted an opioid harm reduction report, and participated in the 2020 Opioid Fatality Review.

Nurses working in the Adverse Pregnancy Outcome Reporting System conducted telehealth visits for the high-risk infants enrolled in the program. In November, 82% of visits were conducted within 14 days of referral.

More than 3,000 total in-home vaccinations given since December 2021. Many of providers are giving influenza vaccination in combination with COVID-19 vaccination.

# Strategic Opportunities/Challenges

Due to COVID-19, a majority of Tobacco Prevention and Control activities have been put on hold.

Hyperlocal vaccination, including community engagement, mobile vaccination, in-home vaccination and vaccine redistribution are funded through the IDPH Mass Vaccination grant and transitioning to CDC funding as well. IDPH did not increase budget to the amount. CCDPH is expecting to need bridge funding until FEMA and/or ARPA until funds can be accessed.

Working with Human Resources to prioritize hiring needs.

CCDPH will focus on investigating the highest risk individuals and working with a smaller team of staff to work on congregate care settings, schools, and variants of concern, like Omicron, and other clusters and outbreaks.

A faint, light orange graphic of a stethoscope is positioned on the left side of the page, extending from the top left towards the center. The background is a solid, medium orange color.

# Health Plan Services

# Strategic Highlights

Continued membership growth now exceeding 420,000

Third party Administrator and Pharmacy Benefit Manager RFPs are being evaluated

New marketing campaign “CountyCare is There’ is in market

Claims aging continues to improve and is close to 30 days through the end of October

Development of justice-involved programs to improve health outcomes

Implementing medication therapy management program

# Strategic Opportunities/Challenges

Member retention and experience initiatives in development to reduce attrition

Call Center Service Level Agreement (SLA) have improved

Working with Human Resources to prioritize hiring needs

A stylized, light orange graphic on the left side of the page. It features a stethoscope with two earpieces at the top, a chest piece, and a coiled tube. To the right of the chest piece is a heart shape, and below it are three concentric circles, suggesting a pulse or a medical scan. The entire graphic is rendered in a light orange color against a darker orange background.

# Provident Hospital



# Strategic Highlights

- Completed ICU monitor installation. ICU beds received and nursing station construction is completed.
- Installation of the MRI scanner has begun in the new Enhanced Diagnostic Imaging Center.
- Phase 1 Ambulance Bay renovation work to begin in December.
- Began repair of the pneumatic tube system with expected completion in December.
- Funding identified for new phlebotomy chairs, lab chairs, and updated refrigerators.

# Strategic Opportunities/Challenges

- HVAC system being assessed and addressed to ensure optimal OR and procedure needs.
- General facilities upgrades continue including painting, lighting and furniture are in progress.
- Developing a plan to increase dialysis volumes.
- Working with Human Resources to prioritize hiring needs.



# John. H. Stroger, Jr. Hospital

# Strategic Highlights

CCH expects to be able to open its new Mail Order pharmacy in the first part of CY2022. The pharmacy has been relocated from Oak Forest to Stroger.

Opened new pediatric nursing unit to support UIC+CCH partnership for pediatrics

COVID vaccine call center and other operations will benefit from additional FEMA money through April 2022.

# Strategic Opportunities/Challenges

The demand for lab services, particularly related to COVID testing, has increased significantly and is being monitored closely.

Agency rates remain higher than pre-COVID levels.

The organization has made handwashing a high priority quality and patient safety initiative and is expanding leadership participation in this effort.

Working with Human Resources to prioritize hiring needs.

# 2022 Board/Committee Reports



COOK COUNTY  
**HEALTH**

## 2022 CCH Board/Committee Upcoming Reports

Date	Board / Committee	Frequency	Report Type	Department
<b>January 2022</b>	Finance	Quarterly	Update on MLR Trend	Managed Care
<b>February 2022</b>				
<b>March 2022</b>				
<b>April 2022</b>	Finance	Quarterly	Update on MLR Trend	Managed Care
<b>May 2022</b>	Finance	Biannual	Vizient (nurse mgmt) contract - status update and information on how it is meeting M/WBE thresholds.	SCM / Nursing
	Finance	One-Time	Update on the progress made with respect to question of bringing clinical engineering/biomedical services in-house	Administration
<b>June 2022</b>				
<b>July 2022</b>	Finance	Quarterly	Update on MLR Trend	Managed Care
<b>August 2022</b>				
<b>September 2022</b>				
<b>October 2022</b>	Finance	Biannual	Vizient (nurse mgmt) contract - status update and information on how it is meeting M/WBE thresholds.	SCM / Nursing
	Finance	Quarterly	Update on MLR Trend	Managed Care
<b>November 2022</b>				
<b>December</b>				

## 2022 CCH Board/Committee Upcoming Reports (cont'd)

Date	Board / Committee	Frequency	Report Type	Department
TBD	TBD	Quarterly	Update - float pool and relationship with agency	Nursing
TBD	TBD	Quarterly	Update on wait times for specialty services	Administration
TBD	TBD	One-Time	Follow-up discussion on System capacity for geriatrics	Administration
TBD	Board	One-Time	Follow-up: educational session on Managed Care	Managed Care
TBD	HR	TBD	Update on staff onboarded as a result of HR job fairs	HR





Thank you.



COOK COUNTY  
HEALTH