

Administrative & Legislative Updates

Presented to the Cook County Health Board on 7/26/24



Legislative Updates - Local

- Cook County Health's work to address food insecurity began in 2015 with a two-question food insecurity screening, which was later adopted by all CCH primary care sites and incorporated into the CountyCare health risk screening tool. CCH patients who screened positive received a voucher to access fresh produce from the Greater Chicago Food Depository's Fresh Truck.
- Since its inception, CCH's Fresh Truck partnership with GCFD has resulted in more than 500 visits to CCH health centers providing fresh fruits and vegetables, as well as some shelf stable items during the COVID-19 pandemic, to over 50,000 households, representing more than 165,000 individuals.
- Over the next several months, CCH and GCFD will be pivoting to a different model to connect patients with fresh and nutritious food. This includes piloting an onsite food pantry at Belmont Cragin Health Center and a medically-tailored meals program based initially at Provident Hospital that will further align the health conditions identified by CCH providers with food-related resources following a provider visit. These efforts are funded by an ARPA award to CCH from Cook County; these funds will also support a full-time Food Security Manager, based in the Office of Diversity, Equity, and Inclusion. We are also exploring other models that work best for our patients and look forward to sharing more when details are available.
- The Cook County Board held a Special Board Meeting on September 18 to conduct a Memorial for the late Cook County Commissioner Dennis Deer.
- The week of July 22, CCH leadership appeared before the following Cook County Board committees to provide testimony and respond to questions from Commissioners.
 - **Asset Management Committee** Cook County Department of Asset Management leadership along with Craig Williams, CCH Chief Administrative Officer participated in the meeting to respond to questions pertaining to a contract with Gensler for renovation design services for the CORE Center.
 - o Audit Committee Pam Cassara, CCH CFO participated in the meeting to respond to questions pertaining to the Cook County Annual Audit.
 - **Finance Committee** Pam Cassara, CCH CFO addressed questions related to the County's Monthly Revenues and Expenses Report as well as CCH finances. CCH leadership was also available to respond to questions related to CCH's Monthly Report which is a compilation of the metrics and presentations made to the CCH Board of Directors from the previous month. CCH leaders were also available to respond to questions related to the Cook County Annual Performance Report.
 - Health & Hospitals Committee Dr. LaMar Hasbrouck, CCDPH Chief Operating Officer presented the CCDPH quarterly COVID-19 and other Infectious Disease Report.
 - **Technology** Cook County Department of Technology along with Angela O'Banion, CCH Chief Information Officer participated in the meeting to respond to questions pertaining to a county-wide contract with AT&T.

Legislative Updates - Local (cont.)

- The Cook County Board of Commissioners met on July 25. The following items were introduced and considered:
 - Commissioner Bill Lowry(3rd District) introduced a Resolution pertaining to annual Mammogram and Prostrate screenings. The Resolution was referred to the Health
 & Hospitals Committee for consideration in September.
 - CCH introduced a transfer of funds request. Pam Cassara, CCH CFO provided an overview of the transfer and responded to questions from Commissioners. This item
 was approved.
 - CCH introduced a grant acceptance for a clinical trial with Gilead. Pam Cassara, CCH CFO provided an overview of the transfer and responded to questions from Commissioners. This item was approved.
 - o CCH introduced the Semi-Annual Mental Health Report. This item was referred to the Health & Hospitals Committee for consideration in September.
 - CCH introduced a Resolution that provided an overview of 53 ARPA funded Stronger Together Behavioral Health Grant Awards. Jennifer Brothers, CCH Impact Fund
 Executive Director, provided an overview of the initiative and responded to questions from Commissioners. This item was for information and was Received and
 Filed.
 - CCH introduced a Resolution seeking approval of 10 of the 53 ARPA funded Stronger Together Behavioral Health Grant Awards in the amount of \$1M each. Jennifer Brothers, CCH Impact Fund Executive Director, provided an overview of the initiative and responded to questions from Commissioners. This item was approved.
 - CCDPH introduced a Resolution pertaining to the ARPA funded Good Food Purchasing Initiative. Gina Massuda-Barnett, CCDPH Deputy Director of Public Health Programming Prevention Services, provided an overview of the initiative and responded to questions from Commissioners. This item was approved.
 - CCDPH introduced a Resolution pertaining to the ARPA funded Worker Protection Initiative. Gina Massuda-Barnett, CCDPH Deputy Director of Public Health Programming Prevention Services, provided an overview of the initiative and responded to questions from Commissioners. This item was approved.
 - CCDPH introduced the Semi-Annual Disparities Report with a focus on Tobacco. This item was referred to the Health & Hospitals Committee for consideration in September.
 - o CCDPH introduced the CCDPH Quarterly Report for Q3. This item was referred to the Health & Hospitals Committee for consideration in September.
 - The Cook County Department of Real Estate introduced a lease with Family Guidance Center for CCH's Austin Health Center Methadone Pilot Program. Dr. Juleigh Nowinski-Konchak was available to respond to questions from Commissioners pertaining to the use of Methadone and the pilot program. This item was approved.

Legislative Updates -State

- The Fall 2024 Veto Session is scheduled for November 12-14 and November 19-21. The consecutive weeks of fall session follow the November 5 elections. Legislators may also return to Springfield for "lame duck" session days in early 2025, prior to the swearing in of the members of the 104th General Assembly.
- On July 2, Illinois received approval from the federal Centers for Medicare & Medicaid Services (CMS) for a <u>Medicaid 1115 waiver extension</u> that will allow coverage for health-related social needs, including housing and housing supports, medical respite, food and nutrition benefits, violence prevention/intervention, non-medical transportation, and pre-release/re-entry services for the justice involved. HFS is still finalizing terms and conditions with the federal government and has shared in public meetings that they intend to phase in coverage, with the intent of rolling out new services in early 2025.
- The <u>House Health Care Availability and Accessibility Committee scheduled a subject-matter only hearing on Pharmacy Benefits Managers (PBMs)</u> on July 23. This is the second of such hearings that have taken place this calendar year and follows discussions about prescription drug prices and pharmacy networks.

Legislative Updates -Federal

- Congress returns to Washington this week for a compressed legislative work period before recessing for the August recess from the 2nd to September 9th. Investigations into the security lapses around the failed assassination attempt of former President Trump and the turmoil around President Biden's withdrawal from the presidential race are likely to dominate all discussions on the Hill. The tight schedule is further complicated by the security arrangements required for the address to Congress by Israeli Prime Minister Netanyahu on Wednesday. Some are saying that the House could cancel votes the week of July 29 and start the August recess early.
- On July 28, the U.S. Supreme Court, overturned the long-standing principle of "Chevron deference," by a 6-3 decision. The ruling means that federal courts no longer must defer to reasonable agency interpretations of federal statutes under the Administrative Procedure Act. Members of Congress have already begun demanding that agencies, including HHS, identify their current rules that rely on Chevron. Health policy stakeholders should expect increasing litigation and calls for Congress to craft legislation with more precise implementation instructions for the agencies.

FY 2025 Budget and Appropriations Process

- Congress continues to work on FY 2025 appropriations, which begins October 1. As announced, the House Appropriations Committee Labor-HHS-Education Subcommittee marked up its FY 2025 spending bill, H.R. 9029, the Departments of Labor, Health and Human Services, and Education, and Related Agencies Appropriations Act, 2025 (LHHS bill), on June 27 and the full Appropriations Committee marked it up and reported it out on July 10. The House Rules Committee is processing the bill for floor consideration and Majority leadership have indicated they intend to take it up before the recess but given the level of controversy and scheduling challenges, consideration could be delayed.
 - The bill includes a total of \$109.5 billion for HHS, a decrease of \$7.5 billion, or 6.4 percent, below the FY 2024 level. The bill includes the following proposed allocations of interest to CCH:
 - o Centers for Medicare & Medicaid Services (CMS) Program Management: \$3.9 billion for CMS administrative expenses, \$215 million below the 2024 level.
 - Health Resources and Services Administration (HRSA): \$7.4 billion for HRSA, \$647 million below the 2024 level, including:
 - \$1.3 billion for Health Workforce training, a decrease of \$62 million below the 2024 level;
 - o \$1 billion for Maternal and Child Health programs, \$152 million below the 2024 level (including elimination of funding for the Healthy Start program); and
 - \$2.4 billion for the Ryan White HIV/AIDS program, \$190 million below the 2024 level (including elimination of funding for the Ending the HIV Epidemic initiative).
 - Centers for Disease Control and Prevention (CDC): \$7.4 billion for CDC, \$1.8 billion below the 2024 level, including eliminating funding for the Center on Injury Prevention, Firearm Injury and Mortality Prevention Research, Opioid Overdose Prevention and Surveillance, Tobacco Prevention and Control, and the Climate and Health program.
 - Substance Abuse and Mental Health Services Administration (SAMHSA): \$7.5 billion, an increase of \$167 million above the 2024 level.

New Hires and Promotions



Welcome

New Hires

Laurel Clark, Chair of the Division of Consultation Liaison, Psychiatry

Glennda Roberts, Director Of Clinical Research

Lashawnda Thornton, CountyCare Behavioral Health Program Manager

Ana Ortega, Manager Of Respiratory Services



Congratulations

Promotions

Cristina Turino, Chief Plan Officer, Medicaid Services, Health Plan Services

Victoria Alagiozian-Angelova, Chair of the Department of Pathology

Shweta Gupta, Associate Chair of the Division of Hematology and Oncology

Ayodeji Gbotosho, Medical Director, Utilization Management and Physician Advisory Services

Bijumon Kunjukunju, Cardiology Technical Manager



ExpressCare Milestone

CCH has launched ExpressCare, a virtual immediate care platform staffed by credentialed acute care Physician Assistants to provide diagnosis, treatment plans and prescriptions to patients with pressing (but non-emergent) medical need.

The service is available for both new and current patients. Hours are Monday – Friday, 11am – 7pm. ExpressCare has video and live interpreter service capabilities. Patients can connect via the ExpressCare app, the CCH patient portal, and CCH website.

More than 1,100 visits have already completed visits through ExpressCare and a social media campaign has been launched to promote the service.





U.S. News & World Report

Stroger Hospital

John H. Stroger, Jr. Hospital has been recognized by U.S. News & World Report as a high-performing organization for chronic obstructive pulmonary disease, heart failure, heart attack, kidney failure, and pneumonia.

U.S. News & World Report's annual procedures & conditions ratings are designed to assist patients and their doctors in making informed decisions about where to receive care. Ratings are based on several factors, including patient outcomes, patient safety, nurse staffing and more.





AHA Get With The Guidelines Awards

Cook County Health has received four American Heart Association and American Stroke Association Get With The Guidelines® achievement awards for demonstrating commitment to following up-to-date, research-based guidelines for the treatment of heart disease and stroke.

The health system was also included on the stroke elite honor roll and Type 2 diabetes honor roll. This is the highest level of recognition the health system has achieved through this program.











Lown Institute Hospitals Index

Stroger Hospital

Cook County Health's John H. Stroger, Jr. Hospital has been named the #1 most inclusive hospital in Illinois and #10 most inclusive hospital in the nation by the Lown Institute Hospitals Index. The hospital was also recognized as #1 in Illinois for avoiding overuse.

The Lown Institute evaluates hospitals on over 50 metrics across categories of health equity, value of care, and patient outcomes.



#1 Most Inclusive Hospital in Illinois

#10 Most Inclusive Hospital in U.S.







NACo Achievement Awards

Cook County Health earned thirteen 2024 Achievement Awards from the National Association of Counties for a variety of programs that improve the health and wellbeing of Cook County communities. Recognized programs include:





- Addressing Food Insecurity among Medicaid Members: FoodCare by CountyCare
- Heart Institute Excellence Program
- How Analytics and Operations Supported CCH's Mission to Care for New Arrivals
- Medicaid Member Demographics Improvement:
 A Strategy for Engagement
- Project REACCH-OUT's Bridge Clinic
- Provident Hospital Growth Program
- The Great Unwinding: Engaging Medicaid Members During Redetermination

- Promoting Engagement to Enhance Recovery Program
- Enhancing Healthcare Access through Express
 Care Initiative
- Improving Employee Wellness as a Precursor to Better Patient Outcomes
- Provident Scholarship Fund
- Sal the Sepsis Sea Otter
- The Development of the Population Health Epidemiology Surveillance Program



Regulatory Update

Stroger Hospital completed its triennial survey by The Joint Commission in July. Surveyors commended the entire hospital team for the successful survey and specifically applauded the teamwork they observed between staff at all levels, as well as several specific departments including: infection control, pharmacy, interventional radiology, and equity and inclusion.

The hospital also completed its National Healthcare Safety Network validation by the Illinois Department of Public Health. The surveyor noted that the system's infection control protocols and implementation are among the best they have encountered.







2024 Health & Medicine Award Winner

Juleigh Nowinski Konchak, MD

Congratulations to Dr. Juleigh Nowinski Konchak, Preventive Medicine Attending and MAT Physician Advisor, for being recognized by the Health & Medicine Policy Research Group as a 2024 Medicine Award Winner!

Awardees are recognized for their efforts to build power and momentum for social justice and health equity in Illinois.

The awards will be celebrated at the 2024 Health & Medicine Awards Gala on September 12.





Women We Admire 2024 List

Octavia Rolland

Congratulations to Octavia Rolland, Executive Director of Ambulatory, Specialty Care Operations at Cook County Health for being named in The Top 50 Women Leaders of Chicago for the 2024 list for Women We Admire.

She was recognized for her expertise in strategic planning, business processes, operational management, and budgeting.





America's Essential Hospitals Fellowship

Congratulations to **Ratna Kanumury**, Associate Chief Strategy Officer, for being selected to for the America's Essential Hospitals Fellowship program.

For more than 30 years, the AEH Fellows initiative has been a highly sought-after leadership program dedicated to educating participants on issues that impact essential hospitals.







Celebration Meals for New Parents

Stroger Hospital

Stroger Hospital is proud to now offer new parents with celebration meals during their hospital stay.

New parents can select a three-course meal from a specially prepared menu of premium main dishes, sides and desserts. A taste testing event was held for staff to preview the meals. This initiative was the result of a collaboration between the OBGYN, administration and Morrison dietary teams.







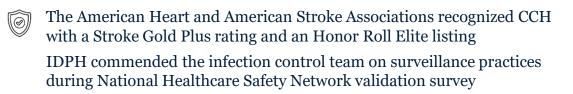




Strategic Initiatives - July



Accomplished



State of Illinois Care Plan audit successfully completed review of Health Plan

- Completed build out of Belmont Cragin food pantry

 Awarded 91 Scholarships to Medical (45) and Allied (46) Health

 Students totaling \$1.37M on June 27 at Provident Scholarship Ceremony

 CCDPH completed Naloxone training for 32 new and returning officers at

 Cook County Department of Corrections
 - Cermak and Cottage Grove Health Center unveiled a Community Murals The expansion of the Intermediate Care Unit went live July 1 and will include 14 Cardiology beds and 12 General Medicine beds on Stroger 4th floor

Global Imagining Specialist's feed is live for radiology exams to be read by

- external credentialed radiologists.

 Express Care and Express Care telehealth platform have gone live with Emergency Medicine Physician Assistants; Express Care received Most Effective Technology Team Award from Chicago Chapter's Association of IT Professionals
- June 20 Hiring Fair success resulting in 23 same day offers, 20 of which were accepted
- Finalized the FY2023 audit, with improved net position and no significant deficiencies or material weaknesses

Coming Soon



CountyCare transitioning to new non-emergency transportation vendor



The inventory management system training to begin for the Provident team to improve efficiency and delineate roles

The Clinical Documentation Improvement and HIS teams are creating a template to allow providers to address patients risk variables within the history and physical at time of admission



Media Dashboard

Presented to the Cook County Health Board on 7/26/24



Earned Media Dashboard: June 24 – July 21, 2024





232.9M



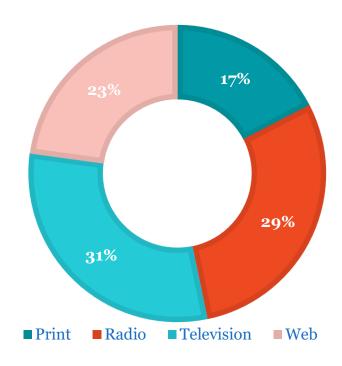
Top 5 Local Media Outlets

- 1. WBEZ
- 2. Chicago Tribune
- 3. Fox 32 Chicago
- 4. NBC 5 Chicago
- 5. *WGN*



Media Dashboard: June 24 – July 21, 2024

Media Outlet Type



Most Common Topics

- 1. DNC planning
- 2. Heat safety
- 3. COVID
- 4. Community outreach



Top Headlines



Chicago trauma unit says declaring gun violence a public health crisis is overdue



Unregulated Delta-8 weed poses health risk: 'It turned our lives upside down'



Se acercan temperaturas que se sienten como 105 grados con posibilidades diarias de tormentas para Chicago



COVID symptoms summer 2024: What to watch for as new variants rise, spread



From regular doctor visits to injured protesters, here's how Chicago's hospitals are preparing for the DNC



Dengue Fever Is Rising in the US. Should You Be Concerned About Your Mosquito Bites?



Cook County Health's Stroger Hospital Recognized by U.S. News & World Report

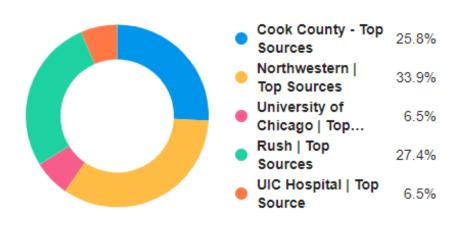


Low-income immigrants over 42 may need to renew their health insurance



Top Source Competitor Report

Share of Voice by Search (i)



Top Article by Reach (i)





Trauma unit doctors at Chicago hospital say declaration of gun violence as public health crisis is overdue

em>Cook County has the busiest trauma center in the United States," said Dr. Claudia Fegan, chief medical officer for Stroger Hospital of

Social Echo (7) 0 (8) 4 (5) 0











Editorial US Jul 11 - 10:25 AM

Chantel Tinfang, a family medicine physician with Sengstacke Health Center at Provident Hospital of Cook County, noted at the time that many

Social Echo (7) 0 (8) 127 (6) 1 4.21M Reach





Neutral O



Social Media Summary

June - July Activity

During June 24 – July 21, 2024, the communications team posted content on Facebook, Twitter, Instagram and LinkedIn for Cook County Health.

Facebook – 42 posts

https://www.facebook.com/Cookcountyhhs/

Twitter - 40

https://twitter.com/CookCtyHealth

Instagram – 42 posts (includes stories and IGTV)

https://www.instagram.com/cookcountyhealth/

LinkedIn – 41 posts

https://www.linkedin.com/company/cook-county-health/



Social Media Summary

As of July 22 (In comparison to last year during the same time period)

Twitter

- Impressions: **5.5K**
- Post Link Clicks: 16
- Engagements: 68
- Followers: **4,800** (up **23**)

LinkedIn

- Impressions: 35K
- Page Views: 1.8K
- Engagements: 2.7K
- Followers: **14.2K** (up **18**)

Facebook

- Total impressions: **313K** (up **8%**)
- Post engagement: 4.9K (up 20%)
- Post reach: **185K** (up **103%**)
- Page followers: 8,941 (up 113 from last month)

Instagram

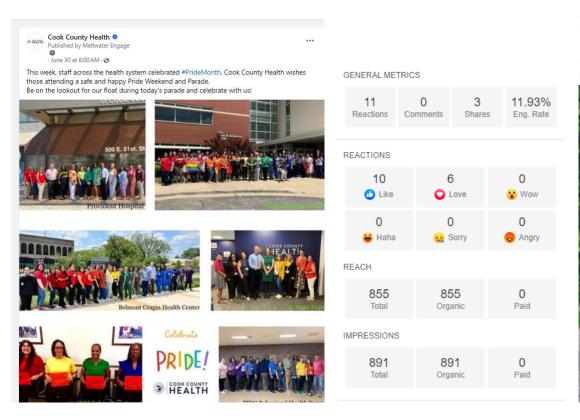
- Impressions: 14.8K
- Engagement: 392
- Profile visits: **461**
- Followers: **3,566**(up **92**)



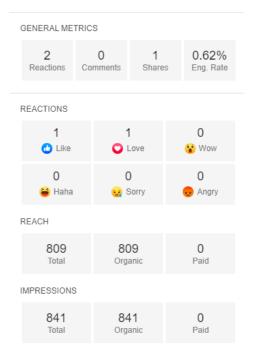
Facebook Insights

June 24 - July 21, 2024

Top Performing Posts (Organic)









Facebook Insights

June 24 - July 21, 2024

Top Performing Posts (Boosted)



tratar afecciones de salud básicas.

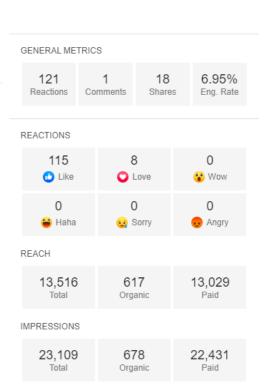
Este servicio está disponible para adultos y niños de todas las edades. Hay intérpretes disponibles para pacientes que hablan español, polaco, mandarín, ruso, árabe, hindi y otros idiomas. Visite

cookcountyhealth.org/es/expresscare para conectarse con un proveedor.

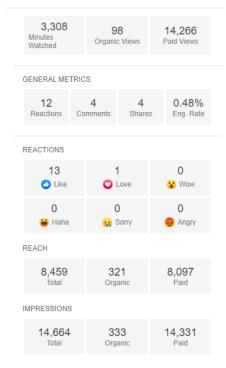




Hable con un proveedor de Cook County Health para tratar problemas básicos de salud sin salir de casa.



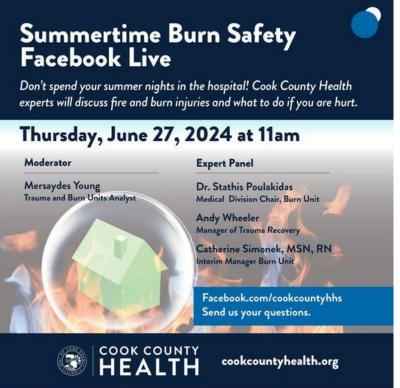


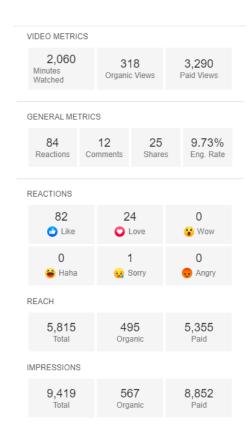




Summer Safety Facebook Live

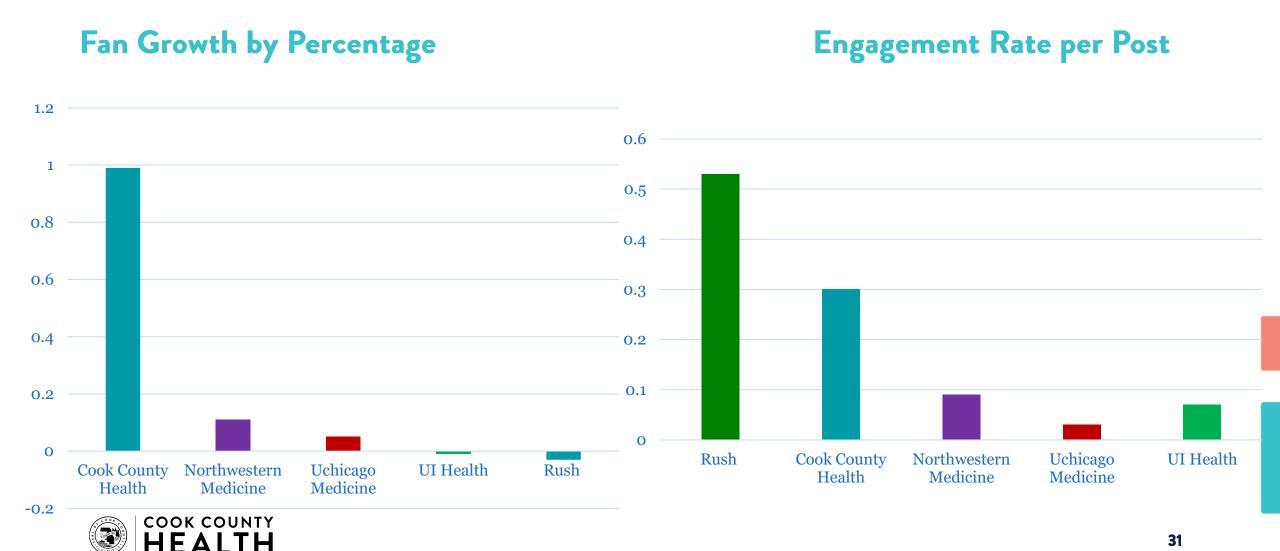








Facebook Benchmarking



Twitter Insights

June 24 - July 21, 2024

Top Performing Posts





GENERAL METRICS

1,039 Impressions

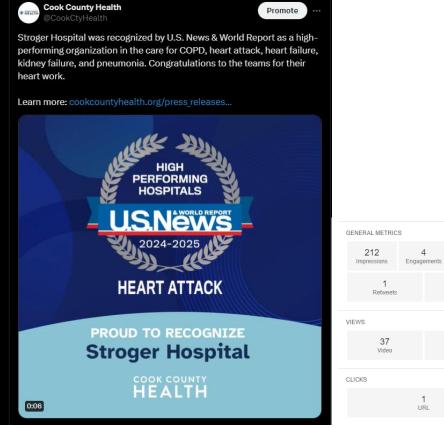
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Retweets

Engagements

0

Replies



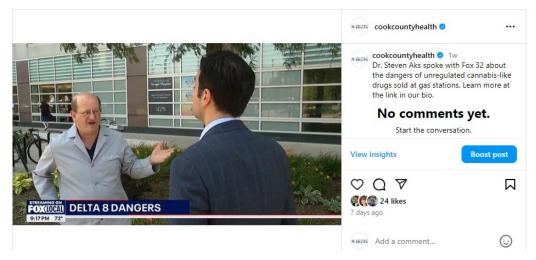


Instagram Insights June 24 - July 21, 2024

Top Performing Posts







GENERAL METRICS

24

Likes

REACH & IMPRESSIONS

861

0

2.71%

Eng. Rate



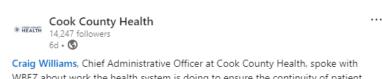


LinkedIn Insights June 24 - July 21, 2024

Top Performing Posts







WBEZ about work the health system is doing to ensure the continuity of patient care during the Democratic National Convention.



GENERAL METRICS				
	67 Likes	1 Comments	2 Shares	157 Clicks
	7.14% Engagement Rate		3,179 Impressions	



Finance Metrics

Presented to the Cook County Health Board on 7/26/24



Executive Summary: Statement of Financial Condition – May 31, 2024

- On an accrual basis, interim financials show that CCH ended May with a \$179.3M favorable variance to budget. On a cash basis, the County's preliminary cash report on revenues and expenses shows a \$120.5M favorable variance to budget. Differences in accrual versus cash basis are primarily due to the timing difference related to recording of revenues received and expenses paid.
 - Revenue Commentary:
 - Favorable NPSR variance to Budget due to higher than budgeted volumes/revenues
 - Favorable capitation variance to Budget due to higher than budgeted CountyCare membership
 - Expenditures:
 - CountyCare claims unfavorable variance to budget due to higher than budgeted membership
 - CountyCare:
 - CountyCare financials at budget
 - Membership just over 430,000, which is 21.5% greater than budgeted

Financial Results - May 31, 2024

Dollars in 000s	FY2024 Actual	FY2024 Budget	Variance	%	FY2023 Actual
Revenue		- i i = o = i = u u got			
Net Patient Service Revenue (1)	\$569,644	\$532,463	\$37,180	6.98%	\$587,471
Government Support (2)	\$190,627	\$185,711	\$4,916	2.65%	\$161,664
Adjusted NPSI	R \$760,271	\$718,174	\$42,096	5.86%	\$749,135
CountyCare Capitation Revenue	\$1,676,052	\$1,362,637	\$313,415	23.00%	\$1,532,147
Other	\$36,239	\$11,000	\$25,239	229.45%	\$3,706
Total Revenue	\$2,472,561	\$2,091,811	\$380,750	18.20%	\$2,284,988
Operating Expenses					
Salaries & Benefits	\$382,634	\$432,762	\$50,128	11.58%	\$350,533
Overtime	\$26,757	\$22,817	(\$3,939)	-17.27%	\$24,687
Supplies & Pharmaceuticals	\$106,877	\$91,156	(\$15,720)	-17.25%	\$86,451
Purchased Services & Other	\$323,333	\$384,598	\$61,265	15.93%	\$310,833
Medical Claims Expense (1)	\$1,524,230	\$1,230,744	(\$293,486)	-23.85%	\$1,435,780
Insurance	\$14,945	\$15,180	\$235	1.55%	\$31,698
Utilities	\$6,514	\$6,942	\$428	6.17%	\$6,722
Total Operating Expense	\$2,385,289	\$2,184,200	(\$201,089)	-9.21%	\$2,246,703
Operating Margin	\$87,272	(\$92,389)	\$179,661	-194.46%	\$38,285
Non-Operating Revenue	\$97,669	\$97,998	(\$329)	-0.34%	\$71,649
Net Income (Loss)	\$184,941	\$5,609	\$179,332	3197.31%	\$109,934

Notes:

for

⁽¹⁾ CountyCare Elimination represents the elimination of intercompany activity – Patient Service Revenue and Medical Claims Expense CountyCare patients receiving care at Cook County Health.

⁽²⁾ Government Support includes DSH, BIPA, & Graduate Medical Education payments.

Does not reflect Pension, OPEB, Depreciation/Amortization, or Investment Income.

Cook County Health Volumes: May, 2024

Key Revenue Indicators

Patient Activity Stroger	2024 YTD Actual	2024 YTD Budget	%	2023 YTD Actual	2022 YTD Actual	May 2024 Actual	May 2023 Actual
Average Daily Census *	323	287	12.7%	295	267	323	306
Emergency Room Visits	45,339	40,647	11.5%	41,068	38,115	7,750	7,383
Surgeries	5,807	5,975	-2.8%	5,664	5,577	1,066	1,051

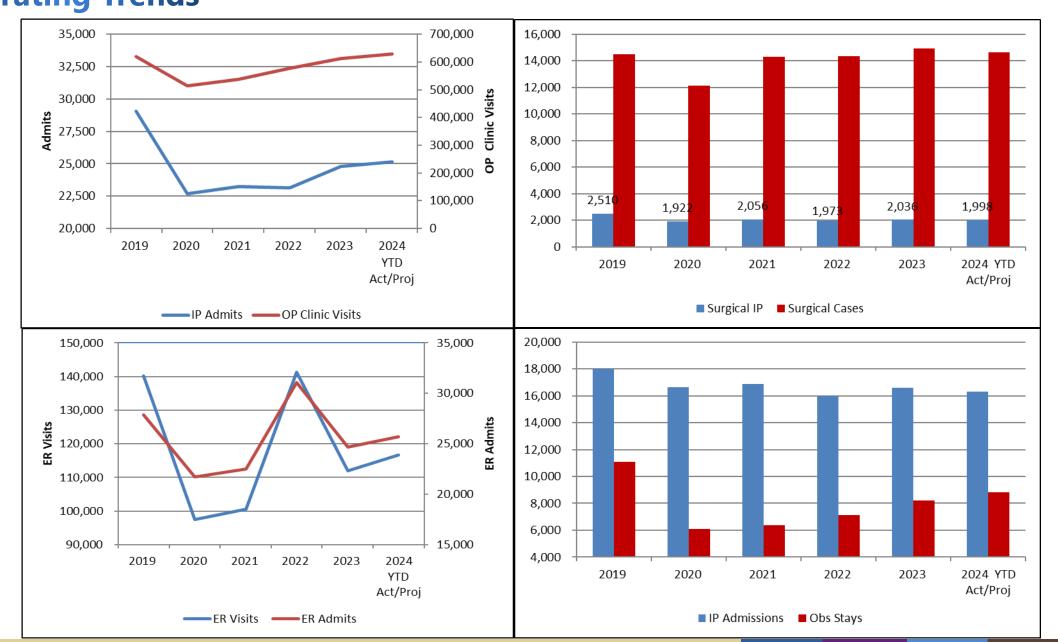
Patient Activity Provident	2024 YTD	2024 YTD	%	2023 YTD	2022 YTD	May 2024	May 2023 Actual
Provident	Actual	Budget		Actual	Actual	Actual	Actual
Average Daily Census *	21	21	0.0%	20	10	18	18
Emergency Room Visits	13,024	12,910	0.9%	13,073	10,324	2,250	2,312
Surgeries	1,522	1,629	-6.6%	1,809	1,323	283	328

Patient Activity ACHN	2024 YTD Actual	2024 YTD Budget	%	2023 YTD Actual	2022 YTD Actual	May 2024 Actual	May 2023 Actual
Primary Care Visits	121,202	117,822	2.9%	119,532	108,151	20,313	22,019
Specialty Care Visits	192,925	185,507	4.0%	188,960	179,187	33,177	34,437

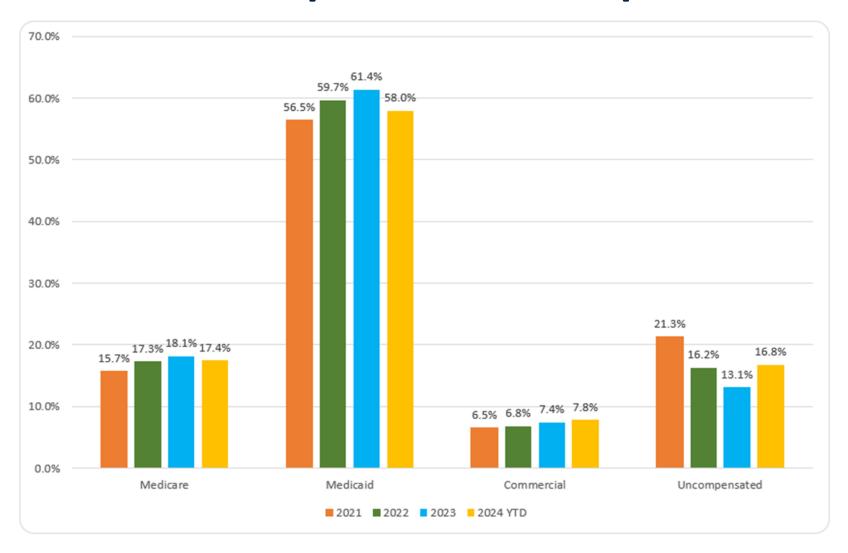
CountyCare	2024 YTD	2024 YTD	%	2023 YTD	2022 YTD	May 2024	May 2023
Membership	Actual	Budget		Actual	Actual	Actual	Actual
Membership Count	435,326	376,761	15.5%	451,476	427,945	434,605	455,106

^{*} Includes IP + Observations

Cook County Health Operating Trends



YTD Payer Mix - YoY Comparison



Commentary

Apr-May Change:

Medicare: -0.03%

Medicaid: -0.05%

Commercial: +0.02

Uncompensated: +0.06%

Mar-Apr Change:

Medicare: +0.01%

Commercial: +0.01

Uncompensated: -0.01%

• Feb-Mar Change:

Medicare: -0.03%

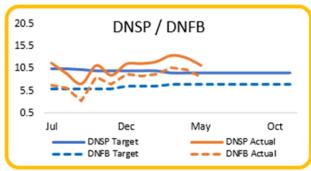
• Medicaid: -0.02%

Commercial: +0.02

Uncompensated: +0.02%

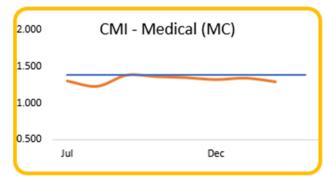
Revenue Cycle KPI Trending

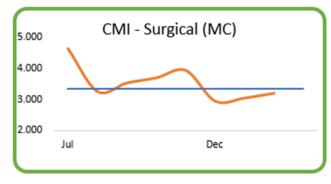












Commentary:

- AR and Cash metrics off target due to the Change Healthcare cyberattack that occurred on 2/21/24.
- Billing delayed approximately 8 weeks.
- Have now resumed billing and begun to receive payments but the posting solution CCH uses to apply payments to the AR has not been reactivated by Change Health, therefore implementing a Cerner solution, HDX.
- \$69.4M in unposted cash as of 5/31/24.
- Anticipate full resolution by 8/31/24.

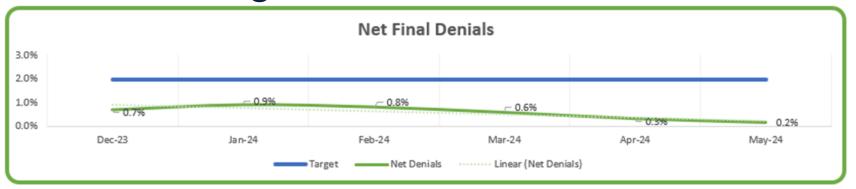
Definitions:

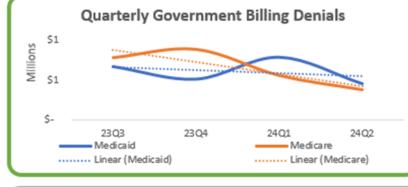
DNSP: Discharged Not Submitted to Payer - Gross dollars from initial 837 claims held by edits in claims processing tool that have not been sent to payer.

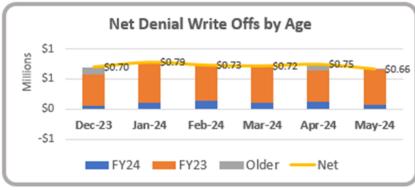
DNFB: Discharged Not Final Billed - Gross dollars in A/R for all patient accounts (inpatient and outpatient accounts) discharged but not yet final billed for the reporting month. Refers to accounts in suspense (within bill hold days) and pending final billed status in the patient accounting system.

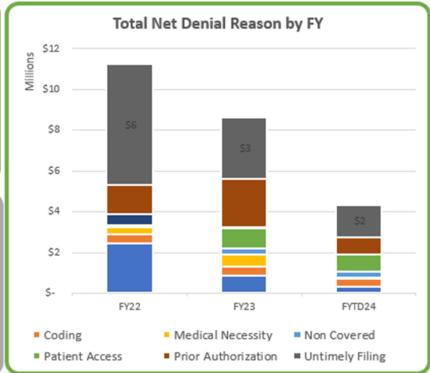
CMI: Case Mix Index - Represents the average diagnosis-related group (DRG) relative weight for that hospital. It is calculated by summing the DRG weights for all Medicare discharges and dividing by the number of discharges.

Denial Focus & Trending









Cook County Health 2024 Charitable & Public Program Expenditures Budget/Projection (\$000s)

	2022 Actual Net Benefit	2023 Actual Net Benefit	2024 Budget Net Benefit	2024 :/Proj Net Benefit
Charitable Benefits and Community Programs				
Traditional Charity Care	\$ 122,499	\$ 105,040	\$ 112,011	\$ 146,582
Other Uncompensated Care	108,284	135,655	91,800	82,054
Cermak & JTDC Health Services	90,293	100,779	116,848	118,033
Department of Public Health	12,965	12,712	22,267	22,234
Other Public Programs & Community Services	66,321	66,321	71,600	 71,600
Totals	\$ 400,362	\$ 420,506	\$ 414,526	\$ 443,531
% of Revenues *	36.9%	38.8%	30.3%	27.5%
% of Costs *	22.0%	23.1%	23.2%	25.7%

^{*} Excludes Health Plan Services

Cook County Health Savings Initiatives: May 31, 2024

	Budgeted	YTD	
Current Activities in Progress	FY24 Impact	Achieved	Status
Revenue Cycle:			
Chargemaster Review/Changes	2,750,000	1,375,000	
Revenue Recovery	3,930,000	225,000	
Point of Service Collections	300,000	105,000	O
County Care:			
Care Coordination Initiatives	3,000,000	1,500,000	
Health System:			
Vendor Contract Negotiations	2,020,000	1,010,000	
	<u>\$ 12,000,000</u>	\$ 4,215,000	35%
		Goal 6/12th	50%

Human Resources Metrics

Presented to the Cook County Health Board on 7/26/24



CCH HR Activity Report - Vacant Positions in HR







FY24 CCH HR Activity Report



Filled Positions

675

Total Filled Positions YTD

67% Offer Acceptance Ratio



External Filled Velocity

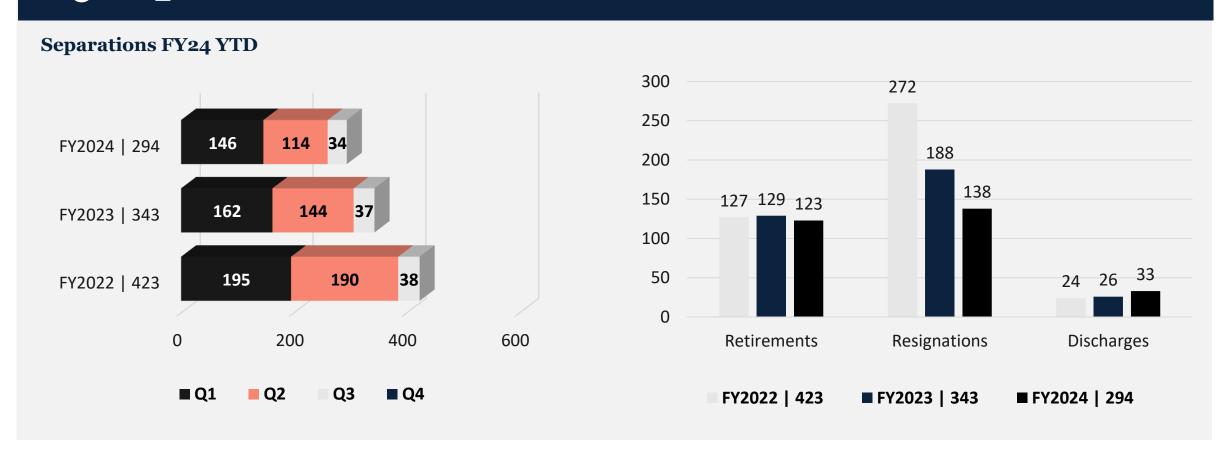
431

Total External Filled Positions

+137 Net Gain

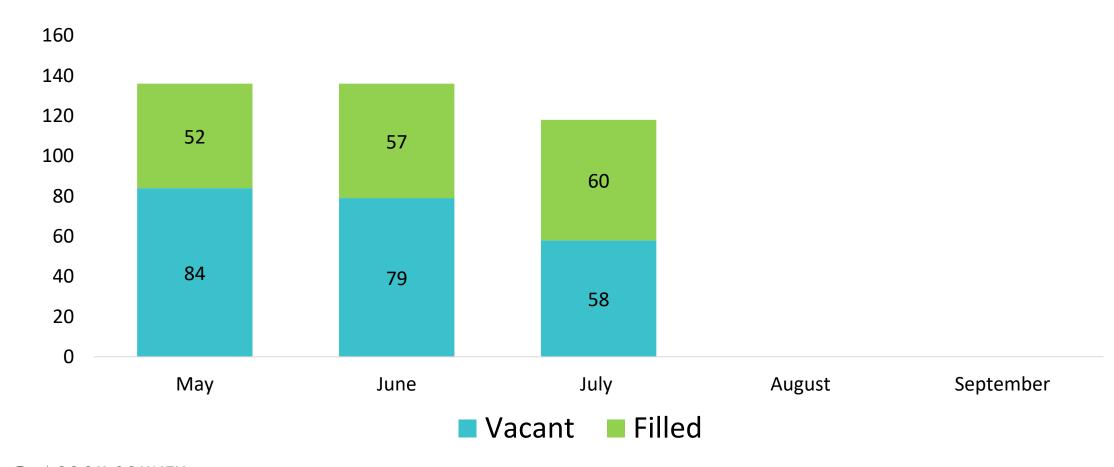
FY24 CCH HR Activity Report

Separations – Year to Date and Year Over Year



ARPA Positions

Monthly Update



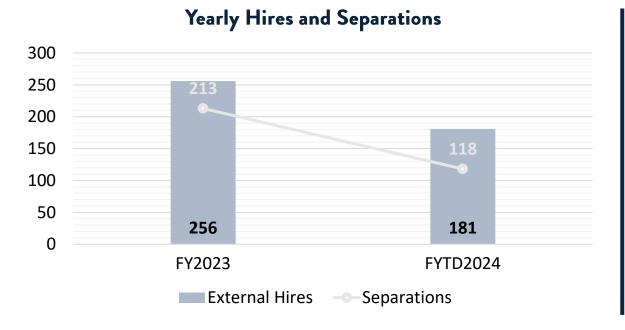


Nurse Hiring Velocity & Attrition

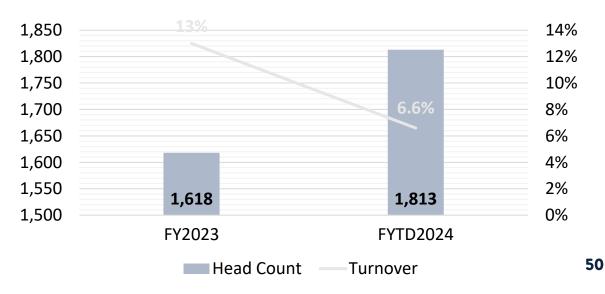
FY24 thru 06/30/24



Nurse Hiring Velocity: 2023 vs 2024



Head Count



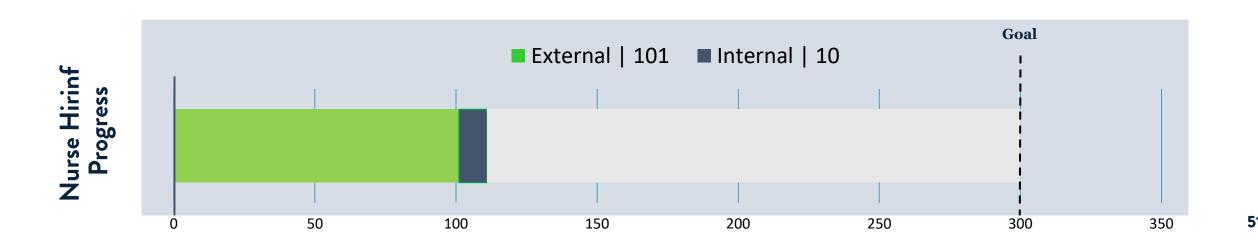
Accelerated Nursing Hiring

Timeframe: 8/7/2023 - 06/30/2024



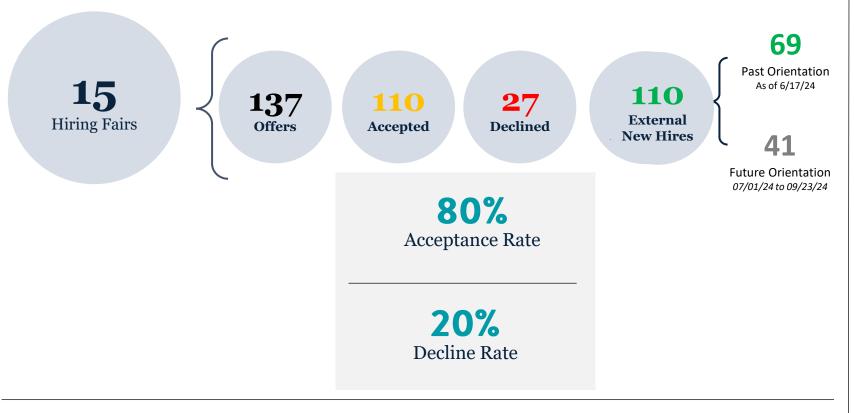


41%
Decline



Hiring Fair Success

FY 2024 Timeframe: 12/1/2023 - 06/30/2024







Process Improvement Work

Hiring Process

Methodology

Bring key team members together to identify improvement opportunities within the hiring process to reduce time-to-fill.

- Current state mapping session
- Voice of customer surveys conducted
- Multidisciplinary improvement sessions to validate the current state
- Identified root causes for delays in time-to-fill

Opportunities

Identified solutions to address root causes of time-to-fill delays.

- Enhance communication with new hires by creating FAQs
- Earlier communication between hiring manager and new hire
- Create process transparency for all team members
- Eliminate variance in recruitment processes

Next Steps

Develop and test potential solutions utilizing PDSA cycles

- Develop communication materials and structures for new hire engagement
- Develop and share standard work for recruiters and hiring managers
- Schedule training sessions to communicate process standards



Nurse Tuition Reimbursement

246
Tuition
Reimbursement
Submissions

62
Approved
(In Class)

28
Denied

Reimbursements in Process

137
Reimbursements

Notify HR

Employee submits request via HR ServiceLink

Request is
Approved or Rejected {12 days}

Employee is notified of Status

Employee pays for tuition upfront

2 Complete Program

> Employee submits Receipts and Grades

TR Request is
Approved or Rejected {12 days}

Employee is notified of Status

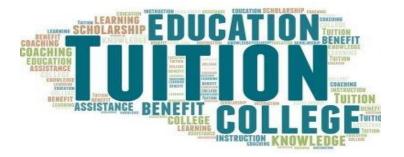
HR submits to Accounts Payable for Processing

3 Reimbursement

Accounts Payable submits to Comptroller for Processing

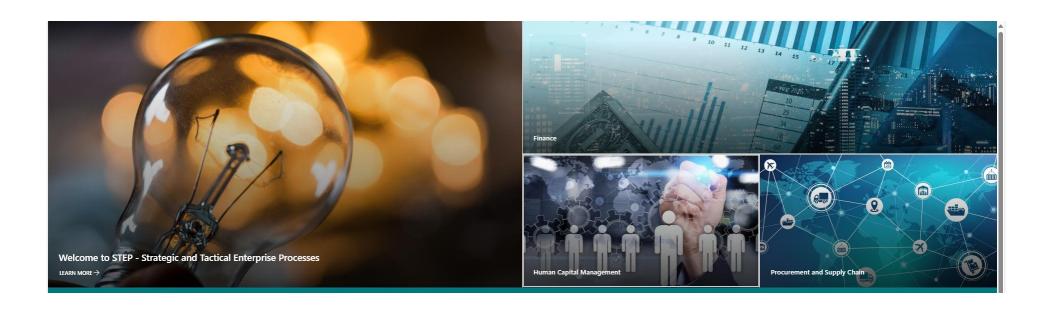
Comptroller issues
Reimbursement Check
{2-3 Pay Periods}

Description	FY 2023 Spend	FY 2024 Spend	% Variance
Year — Over — Year (Ending June 30th)	\$340,202.07	\$412,839.73	+37%
Fiscal Year	\$657,670.84	\$468,011.02	-29%

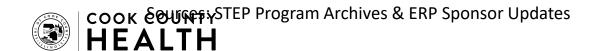


The Cook County Oracle Enterprise Resource Planning (ERP) Solution is Referred to as STEP

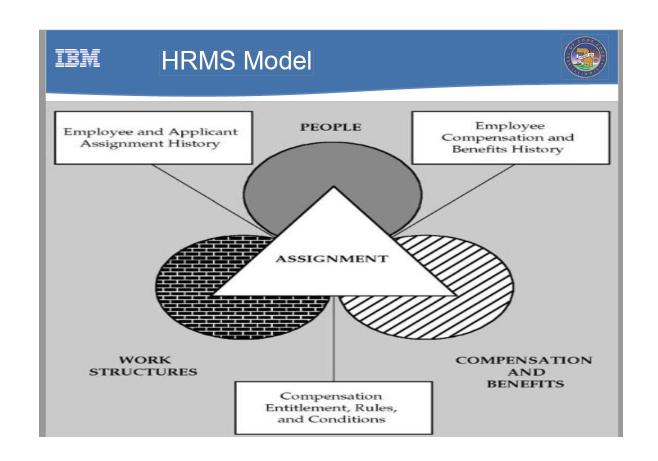
Strategic Tactical Enterprise Processes



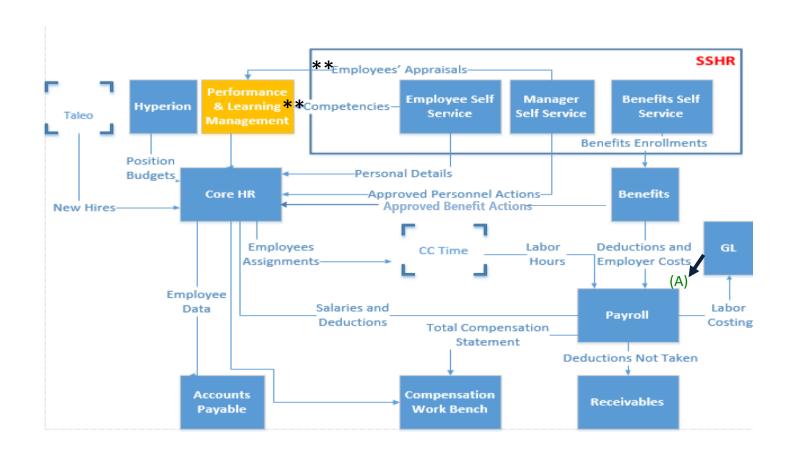
Multi-Year Effort Completed in 2018; Ongoing Enhancements; Used County-Wide including CCH



Human Capital Management



Human Capital Management

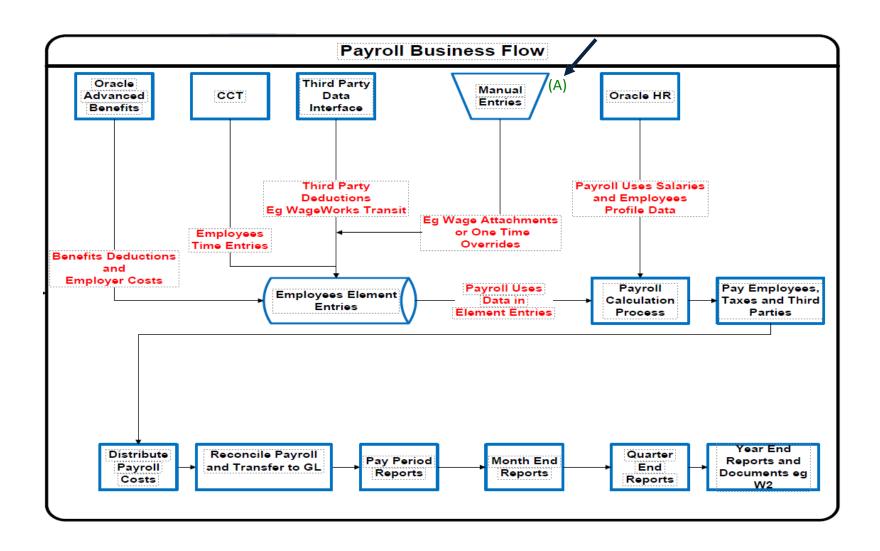


Key: ** Not yet implemented

COOK SOUTCES: STEP Program Archives & ERP Sponsor Updates



Human Resources & Payroll Intersection



Managed Care Metrics

Presented to the Cook County Health Board on 7/26/24



Current Membership Monthly membership as of July 5th, 2024

Category	Total Members		
FHP	244,529	12,496	5.1%
ACA	104,979	12,443	11.9%
ICP	31,068	4,705	15.1%
MLTSS	9,324	-	0%
SNC	7,405	332	4.5%
HBIA	22,216	2,250	10.1%
HBIS	6,718	702	10.4%
Total	426,239	32,928	7.7%

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

HBIA/HBIS: Health Benefit for Immigrant Adults/Seniors

Managed Medicaid Market

Illinois Department of Healthcare and Family Services April 2024 Data

Managed Care Organization	Cook County	Cook Market Share
*CountyCare	441,754	34.2%
Blue Cross Blue Shield	351,247	27.2%
Meridian (a WellCare Co.)	280,663	21.8%
IlliniCare (Aetna/CVS)	117,040	9.1%
Molina	90,203	7.0%
YouthCare	8,986	0.7%
Total	1,289,893	100.0%

^{*} Only Operating in Cook County

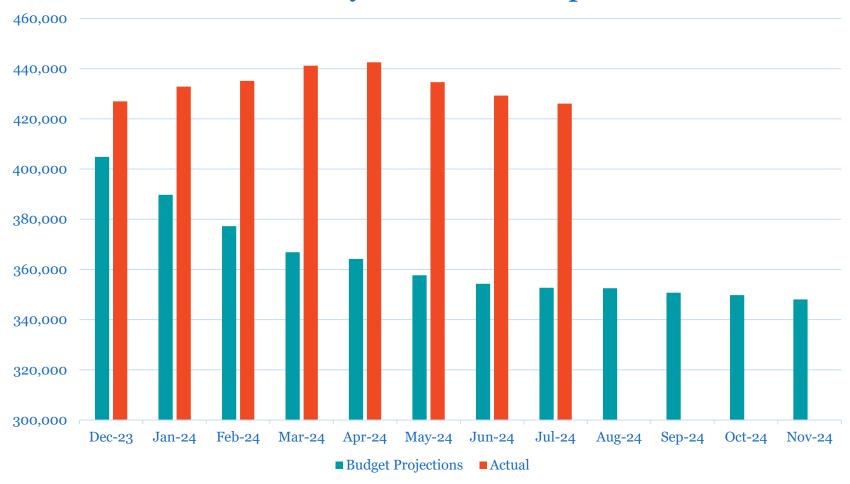
IL Medicaid Managed Care Trend in Cook County (charts not to scale)



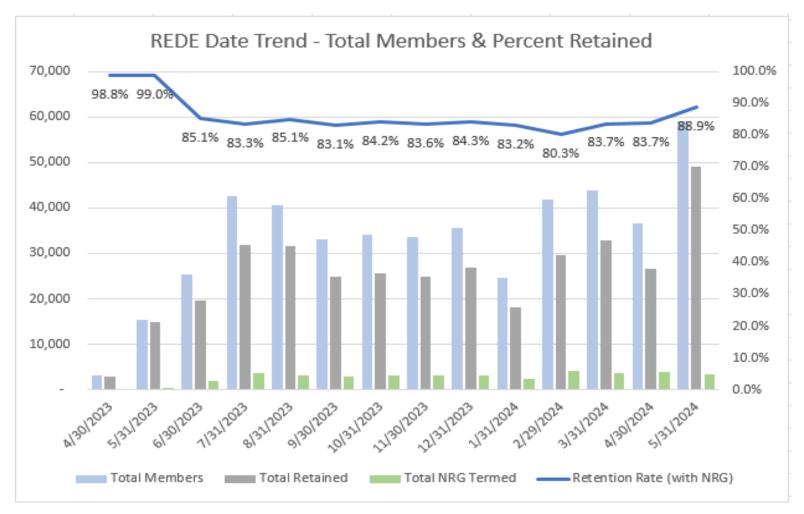
• CountyCare's enrollment **increased** 0.36% in April 2024 compared to the prior month, which can be attributed to HBI enrollment, and outperforms Cook County's **decrease** of 1.31%

FY 24 Budget | Membership

CountyCare Membership



REDE Retention

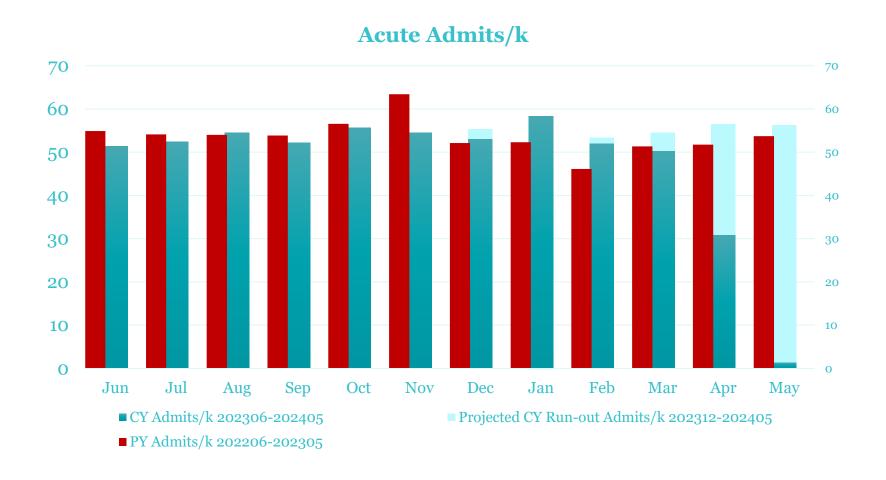


 Members with a 5/31/2024 redetermination date had an adjusted retention rate of 88.9%, which is an all-time high post REDE go-live

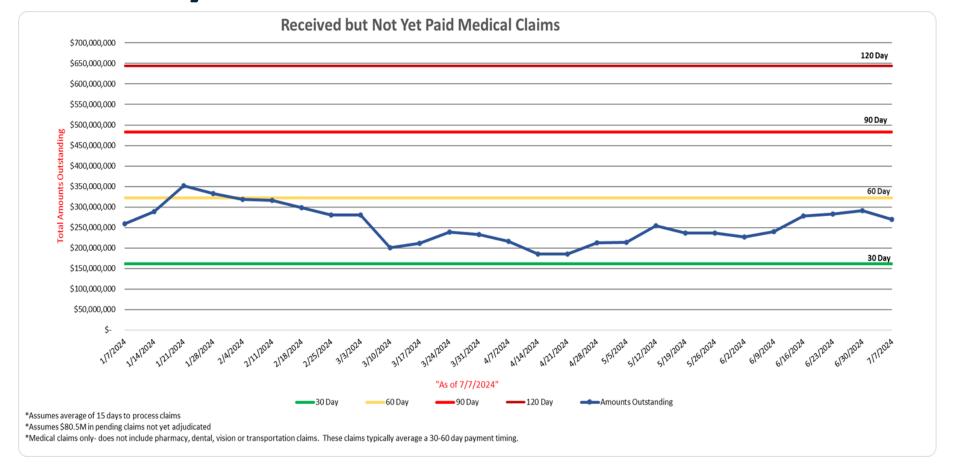
Operations Metrics: Call Center & Encounter Rate

		Performance					
Key Metrics	State Goal	Apr 2024	May 2024	Jun 2024			
Member & Provider Services Cal	l Center Met	rics					
Inbound Call Volume	N/A	57,461	53,595	48,358			
Abandonment Rate	< 5%	1.75%	2.13%	1.61%			
Average Speed to Answer (minutes)	1:00	0:22	0:29	0:26			
% Calls Answered < 30 seconds	> 80%	86.31%	82.56%	84.55%			
Quarterly							
Claims/Encounters Acceptance Rate 98% 98%							

Current v. Prior Year: IP Acute Admits/1000



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
Q4 2021	\$ 125,581,303	\$ 90,378,328	\$	112,699	\$ 1,114,644	\$	217,186,974
Q1 2022	\$ 144,241,915	\$ 12,166,101	\$	2,958,928	\$ 2,183,828	\$	161,550,772
Q2 2022	\$ 120,267,520	\$ 735,088	\$	2,476,393	\$ 4,676,897	\$	128,155,898
Q3 2022	\$ 105,262,634	\$ 16,617,110	\$	59,407	\$ 15,171	\$	121,954,322
Q4 2022	\$ 142,815,499	\$ 62,495,024	\$	2,403,391	\$ 2,056,097	\$	209,770,011
Q1 2023	\$ 110,831,299	\$ 7,841,360	\$	3,067,736	\$ 443,885	\$	122,184,280
Q2 2023	\$ 149,387,487	\$ 31,299,177	\$	1,319,945	\$ 346,575	\$	182,353,184
Q3 2023	\$ 191,389,015	\$ 38,673,162	\$	743,469	\$ 97,943	\$	230,903,588
Q4 2023	\$ 181,111,957	\$ 75,730,673	\$	1,511,954	\$ 20,819	\$	258,375,403
Q1 2024	\$ 194,081,254	\$ 5,307,661	\$	33,846,206	\$ 160,417	\$	233,395,538
Q2 2024	\$ 187,157,359	\$ 89,900,410	\$	14,514,430	\$ 124,785	\$	291,696,984
Week of 7/7/2024	\$ 164,882,559	\$ 92,548,033	\$	11,880,608	\$ 64,999	\$	269,376,199

^{*0-30} days is increased for an estimated \$80.5M of received but not adjudicated claims

 $^{{\}bf *Medical\, claims\, only-does\, not\, include\, pharmacy,\, dental,\, vision\, or\, transportation\, claims}$

^{*}The amounts in the table are clean claims

Quality & Patient Safety Metrics

Presented to the Cook County Health Board on 7/26/24

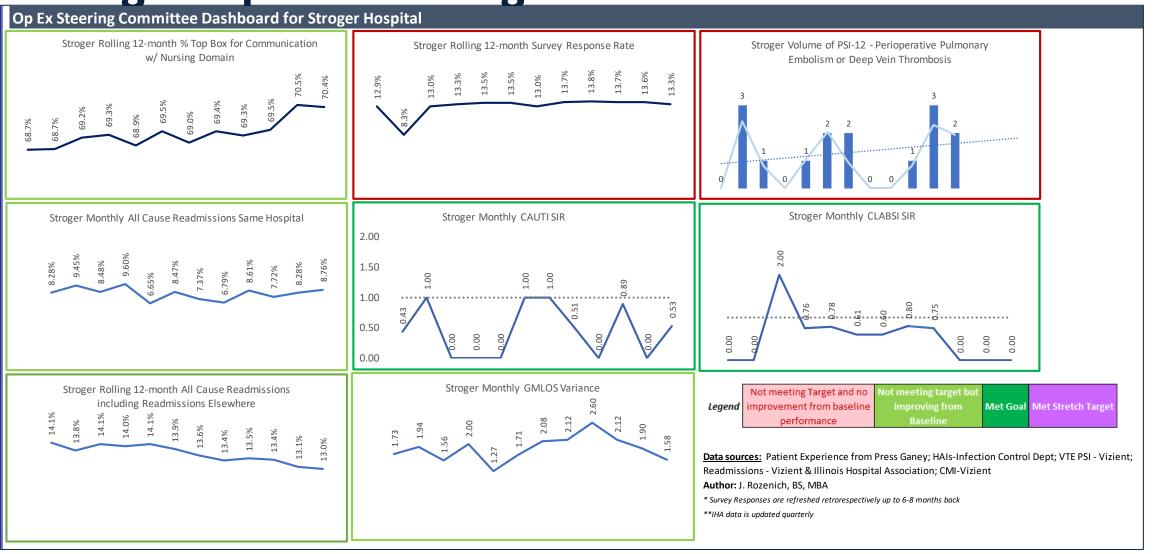


Stroger Op Ex Steering Committee Dashboard

Op Ex Steering Com	mittee Dashboard for Stroger Hospital															
DOMAIN WORKGROUPS	Metrics															
PATIENT EXPERIENCE			Stretch Target			Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	
	Rolling 12-month % Top Box for Comm. w/ Nursing Domain	73.00%		69.30%	68.69%	68.70%	69.17%	69.30%	68.86%	69.45%	68.97%	69.43%	69.27%	69.51%	70.53%	70.44%
	Monthly % Top Box for Comm. w/ Nursing Domain	73.00%	77.00%	69.30%	72.51%	66.51%	76.00%	73.45%	66.51%	69.28%	61.43%	70.34%	75.59%	72.48%	73.20%	66.11%
		Target	Stretch Target	Baseline	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24
	Rolling 12-month Survey Response Rate*	15.00%	16.00%	13.60%	12.90%	8.30%	13.00%	13.30%	13.50%	13.50%	13.00%	13.70%	13.80%	13.70%	13.60%	13.30%
	Monthly Survey Response Rate*	15.00%	16.00%	13.60%	14.60%	12.90%	13.50%	16.40%	14.30%	14.50%	11.00%	12.70%	12.70%	13.30%	13.00%	11.90%
CLINICAL OUTCOMES		Target	Stretch Target	2023	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24
	Monthly Volume of CLABSI	0.8	n/a	11 0.76	0.00	0.00	2.00	0.76	0.78	0.61	0.60	0.80	1	0.00	0	0
	SIR Rate CLABSI		Stretch Target	2023	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	0.75 Feb-24	0.00 Mar-24	0.00 Apr-24	0.00 May-24
	Monthly Volume of CAUTI	Target	Stretch ranget		1				0	2	2	1	0	2	0	1
	SIR Rate CAUTI	0.8	n/a	0.47	0.43	1.00	0.00	0.00	0.00	1.00	1.00	0.51	0.00	0.89	0.00	0.53
		Target	Stretch Target	Baseline	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24
	Monthly Volume of VTE PSI-12	<=7	0	14	0	3	1	0	1	2	2	0	0	1	3	2
	Observed over Expected Ratio PSI-12				0.00	2.41	0.80	0.00	1.06	2.04	0.90	0.00	0.00	0.82	2.29	1.94
READMISSIONS		Target	Stratch Target	Pacalina	lun 22	Iul 22	Λυσ 22	Son 22	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	April	May-24
NLADIVII33ION3	Rolling 12-month All Cause, All Payer, All Age - Readmissions Rate -				Juli-23	Jui-23	Aug-23	3ep-23				Jai1-24			·	
	CMS Definition Same Hospital	8.40%	8.00%	9.40%	9.22%	9.28%	9.19%	9.20%	8.89%	8.91%	8.76%	8.52%	8.55%	8.42%	8.37%	8.22%
	Monthly All Cause, All Payer, All Age - Readmissions Rate - CMS	8.40%	8.00%	0.400/	0.300/	0.459/	0 400/	0.60%	6.65%	8.47%	7.37%	6.79%	8.61%	7.72%	8.28%	8.76%
	Definition Same Hospital	8.40%	8.00%	get Baseline Jun-23 Jul-23 Aug-23 Sep-23 14 0 3 1 0 0.00 2.41 0.80 0.00 get Baseline Jun-23 Jul-23 Aug-23 Sep-23 9.40% 9.22% 9.28% 9.19% 9.20% 9.40% 8.28% 9.45% 8.48% 9.60%		9.00%	0.05%	0.47%	7.5/%	0.79%	8.01%	7.72%	0.20%	0.70%		
		Torget	Stratch Target	Dosalina	4/22-	5/22-	6/22-	7/22-	8/22-	9/22-	10/22 -	11/22-	12/22-	1/23-	2/23-	3/23-
		rarget	Stretch rarget	Daseille	3/23	4/23	5/23	6/23	7/23	8/23	9/23	10/23	11/23	12/23	1/24	2/24
	IHA Rolling 12-Month All Cause All Payer - Readmissions	13.00%	12.00%	14.00%	14.13%	13.80%	14.09%	14.00%	14.08%	13.86%	13.59%	13.38%	13.47%	13.41%	13.13%	13.03%
	including other hospitals **															
THROUGHPUT	Metrics	Target	Stretch Target	Pacalina	lun 22	Jul-23	Aug 22	Sep-23	Oct-23	Nov-23	Dec-23	lan 24	Feb-24	Mar 24	Apr-24	May 24
IIINOUGHFUI	Monthly GMLOS Avg Variance in days, excluding patients >30 days						Aug-23	·				Jan-24		Mar-24	<u> </u>	May-24
	LOS	1.23	0.73	1.73	1.73	1.94	1.56	2.00	1.27	1.71	2.08	2.12	2.60	2.12	1.90	1.58



Stroger Op Ex Steering Committee Dashboard





Provident Op Ex Steering Committee Dashboard

Op Ex Steering Committee Dashboard for Provident Hospital																
DOMAIN WORKGROUPS	Metrics															
PATIENT EXPERIENCE		Target	Stretch Target	Baseline	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24
	Rolling 12-month % Top Box for Comm. w/ Nursing Domain	79.80%	80.00%	74.63%	76.07%	77.78%	74.63%	78.55%	76.89%	76.08%	79.13%	78.86%	78.86%	78.60%	79.31%	76.00%
	Monthly % Top Box for Communication w/ Nursing Domain	79.80%	80.00%	74.63%	77.78%	96.30%	66.67%	80.00%	63.64%	55.56%	100.00%	63.89%	85.16%	71.48%	80.00%	60.00%
					May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24
	Rolling 12-month Survey Response Rate*	18.00%	20.00%	11.80%	11.30%	11.90%	12.00%	11.90%	12.30%	12.70%	12.40%	12.70%	12.10%	12.80%	13.80%	13.40%
	Monthly Survey Response Rate*	18.00%	20.00%	11.80%	6.60%	17.40%	14.30%	10.90%	15.40%	15.40%	12.70%	9.80%	10.90%	17.00%	23.50%	4.80%
CLINICAL OUTCOMES		Target	Stretch Target	Baseline	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24
	Rolling 12 month SEP-1 Bundle Compliance	60.00%	65.00%	50.00%	44.83%	48.48%	48.65%	50.00%	45.00%	46.15%	47.50%	46.15%	42.11%	42.11%	39.53%	43.24%
	Monthly SEP-1 Bundle Compliance	60.00%	65.00%	50.00%	33.33%	75.00%	50.00%	66.67%	25.00%	33.00%	100.00%	0.00%	33.00%	0.00%	33.33%	n/a
		Target	Stretch Target	Baseline	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24			
	Monthly Hand Hygiene Compliance	80.00%	90.00%	75.38%	72.78%	67.86%	65.07%	73.51%	75.12%	77.37%	84.73%	88.06%	83.80%			
THROUGHPUT		Target	Stretch Target	Baseline	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24
	Rolling 12-month LWBS	4.50%	4.00%	5.50%	4.30%	4.46%	5.18%	5.51%	5.93%	6.49%	7.17%	7.40%	6.97%	7.63%	7.63%	7.80%
	Monthly LWBS Rate	4.50%	4.00%	5.50%	5.85%	5.95%	13.00%	8.27%	11.45%	11.59%	11.67%	5.55%	5.94%	3.77%	4.58%	6.28%



Provident Op Ex Steering Committee Dashboard





ACHN Op Ex Steering Committee Dashboard

Op EX Steerir	ng Committee Dashboard for ACHN																
VORKGROUPS	Metrics																
ATIENT EXPERIENCE			Target	Stretch Target	Baseline	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24
	Rolling 12-month Concern of nurse/asst for problem		61.34%	63.56%	58.77%	57.85%	58.09%	58.36%	58.77%		58.89%	59.23%	59.14%	59.42%	59.48%	60.04%	60.17%
	Monthly Concern of nurse/asst for problem		61.34%	63.56%	58.77%	58.27%	59.52%	59.18%	60.57%	59.56%	61.37%	62.83%	57.25%	61.18%	59.77%	63.96%	60.00%
	Rolling 12-month Provider CP explanations of prob/condition		66.80%	69.84%	64.78%	64.36%	64.58%	64.76%	64.78%	64.83%	64.98%	65.14%	64.94%	64.96%	64.97%	65.30%	65.61%
	Monthly Provider CP explanations of prob/condition		66.80%	69.84%	64.78%	64.56%	65.03%	66.18%	64.88%	64.08%	67.58%	67.38%	62.36%	65.28%	64.04%	69.01%	68.04%
	Rolling 12-month Courtesy of registration staff †		60.00%	65.00%	60.00%				60.00%	59.59%	60.90%	61.70%	60.27%	59.66%	59.88%	60.33%	60.58%
	Monthly Courtesy of registration staff †		60.00%	65.00%	60.00%					59.59%			58.10%			62.40%	62.01%
			_	Stretcn													
EDIS	Rolling 12-month Hypertension Population Management BP <140-9	O (Engaged & Affiliated)	55.00%	60.00%	Baseline 50.53%	Jul-23 57.80%		Sep-23 57.00%		Nov-23 55.20%		Jan-24 54.00%	Feb-24 54.30%	Mar-24 53.90%		May-24 55.80%	
	Rolling 12-month Cervical Cancer Screening (Engaged & Affiliated)	,	47.00%	52.00%	42.83%	46.30%		46.40%							46.30%		47.00%
57.85%	28.09% 58.36% 58.36% 58.36% 59.23% 59.42% 60.04% 60.04%	64.36% 64.58% 64.76% exblau OCHN Wap Servi	ices Rolling 12-rations of prob/c 88 6: 74 86: 74 99	condition	65.30% 65.30% 65.61%		AC %0009	HN Amb S		olling 12-r ation staf %27:09	f†	wrtesy of	%85.09				
57.80%	es Rolling 12-mo Screening ngaged & Affilia % 000 % 9 6 7 7 8	ated)	46.30% 46.60% 47.00%		Lege	Not n impro	neeting Ta vement fr perform	om baseli	ne im	neeting tar nproving fo Baseline	rom N	Met Goal	Met Stretc	h Target			

<u>Data sources:</u> Patient Experience from Press Ganey; Sep-1 Bundle chart abstracted CMS measure; Hand Hygiene TST Infection Control observation software; LWBS - BI Tableau

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